



KAISER MEDIA FELLOWSHIPS PROGRAM  
COLUMBIA JOURNALISM SCHOOL

Global Health Dinner Discussion



Kaiser Family Foundation  
Barbara Jordan Conference Center  
Washington, D.C.  
Wednesday, February 9, 2011

PREPARED BY

Jennifer Evans, Jaclyn Schiff,  
Jill Braden Balderas, and Penny Duckham  
Kaiser Family Foundation



TABLE OF CONTENTS

---

1	GLOBAL HEALTH DINNER DISCUSSION
5	APPENDIX: Participant List



For more than five years, much of the mainstream media in the United States has been foundering economically. Newsroom downsizing has forced reporters and editors to do more with less and impacted both the depth and breadth of journalism at many outlets. In a report—*Taking the Temperature: The Future of Global Health Journalism*<sup>1</sup>—the Kaiser Family Foundation set out to describe how U.S. news coverage of global health issues has been affected by the overall problems facing journalism today; and more specifically, whether this beat faces unique challenges of its own in a world of “hyperlocal” news and the closing of many foreign bureaus. In 2010, Kaiser contracted with journalists Nellie Bristol and John Donnelly to interview a variety of stakeholders in global health journalism. Those in-depth interviews provided the basis for the report published in February 2011, and focused on five main themes:

- 1) The constraints faced by journalism in the U.S. have impacted mainstream media’s coverage of global health. Some reporters have left the business; those remaining see fewer opportunities to cover global health stories, especially when travel is necessary.
- 2) Interest is still alive at some mainstream publications, especially outside the U.S. Some of this coverage is supported by outside funding.
- 3) Coverage tends to focus on infectious disease, particularly potential pandemics such as H1N1 or disaster-related health issues. Many interviewees said it was difficult to find a fresh angle on developing country health problems, especially HIV/AIDS. Most reporters found U.S. global health policy difficult to cover or include in their stories.
- 4) Specialized publications, such as online-only news sites or health- and science-related journals, are increasingly a source for global health journalism.
- 5) Web-based outlets produce a growing genre of advocacy stories and research that tap into the power of social media.

To discuss the challenges and opportunities outlined in the report, Kaiser convened a group of senior editors and reporters as well as other stakeholders at a forum in the Foundation’s Barbara Jordan Conference Center. Many of them had been interviewed for the report on global health coverage and have considerable experience reporting on global health issues. For many of the journalists, it was the first time they had the opportunity to meet face-to-face as there is little opportunity for journalists to convene to discuss coverage of global health issues.

Penny Duckham, executive director of the Kaiser Media Fellowships program, explained the meeting’s purpose before turning to Jen Kates, Kaiser Vice President of Global Health and HIV Policy, to highlight some of the major issues in U.S. policy on global health.

John Donnelly then provided an overview of the report findings, noting that global health news coverage has experienced detectable decline since its “golden age” between 2006 and 2007. He discussed some of the issues journalists face when reporting on global health—like story fatigue and funding constraints—and how they influence coverage. He also highlighted ways global health is being sustained through outside funding, media partnerships and advocacy journalism. Nellie Bristol outlined some discussion

questions for the journalists to consider throughout the evening. The questions raised included the sustainability and ethics of funding and how emerging global health issues could be covered in fresh ways.

Arlene Morgan, associate dean of prizes & programs at Columbia Journalism School, discussed the eagerness among many of Columbia’s students to follow and cover global health news, while describing the challenges they face for funding and finding outlets for this type of coverage. She also explained how Columbia is increasingly serving as a resource for journalists around the world looking for advice and expertise from their U.S. counterparts.

While many issues and questions were raised by this gathering of journalists, a number of key discussion points about global health journalism stood out and are summarized below.

### **Soup-to-nuts global health journalism**

Early on in the conversation, one participant laid out the different challenges facing global health coverage as the following: Who are the reporters covering global health stories? How do they fund their travel as well as get paid for their reporting? Which media organizations are interested in running global health stories?

Especially given their tight budget environments, several editors expressed willingness to devote airtime or space to journalists who have acquired their own funding for reporting. As with any funding agreement with an outside source, there was agreement such funding should be disclosed to the audience. Those who have run stories from journalists supported with outside funding said, as with any story, they have undergone rigorous editing.

Participants at organizations which had received outside funding, notably from the Bill & Melinda Gates Foundation, described their interaction with most funders as being “hands-off,” and several participants mentioned the firewalls they had in place to keep their news coverage and outside funding separate.

Throughout the night, journalists talked about how they and their organizations increasingly welcome collaboration with other media organizations and highlighted current ways in which this is already happening. Some journalists suggested there should be a non-profit journalism entity for global health (citing Kaiser Health News as a model) and expressed interest in working with that type of operation.

### Top-level news executives generally not interested in global health

The challenge of selling executives and some high-level editors on global health coverage resonated among participants. A perceived lack of consciousness among their news organization’s leadership about global health issues and a focus on other types of news within the U.S. media has led to some of the following issues: global health not fitting in with the niche coverage many news organizations are trying to attain; inability to travel; global health stories not lending themselves to the increasingly politicized environment in the U.S.; or what some saw as a pressure to write shorter stories and file them faster.

Several participants noted how global health can be pitched as a politics story, and that editors expressed greater interest in global health stories when they involve following where funding is going and what it is achieving. A freelance journalist spoke of the ability to couch a global health story within an assigned foreign affairs story. For instance, while on assignment in Afghanistan, this journalist was able to interest editors on a story of H1N1 (swine flu) in the region; while covering the earthquake

in Haiti, the same reporter was able to sell editors on a story about HIV-positive quake victims receiving treatment despite the chaos.

Others described how high-profile people (like Bill Gates discussing polio and George Clooney contracting malaria in Sudan) can garner interest among editors and executives for coverage. One of the discussion participants cited a potential model for engagement based on an environmental journalism panel featuring three executive editors who addressed an audience of journalists and responded to the question, “Why should I care?” Rick Rodriguez, former executive editor and senior vice president of *The Sacramento Bee*, was one of the panel participants and apparently made a powerful impact by telling his story of growing up poor and explaining how the environment can affect lower-income people and impact health.

### Making stories relevant for the audience

Participants expressed a level of uncertainty about audiences’ interest in global health stories. While they noted the increasing number of enrollees in public health schools and growing interest among journalism students in reporting on global health, others spoke of a perceived disinterest in the topic among a U.S. audience. There was discussion of strategies to engage audiences through the Web, some of which have met with success. But generally, participants felt they needed new ways to make global health stories relatable to their audiences.

One journalist who teaches a global health journalism class at a university mentioned an assignment he had given the students, which was to report on global health stories with a local angle. One student ended up writing a story about an area leprosy clinic—one of only a handful around the country. The idea of finding local angles on global health stories as a potential way to increase coverage resonated with some in the group.

Health care in the U.S. for immigrants was identified as another area for further exploration. One journalist commented that some readers, viewers or listeners in the U.S. are interested in stories from their home countries. This led to a discussion about the changing U.S. demographics and the growth of ethnic media as factors that could help connect stories to different audiences. There was general consensus that there is quite a bit of opportunity here.

Another journalist focused on the power of writing stories that focus on individuals, citing evidence that readers are more interested in a single person's story than statistics about many people.

### **It is difficult to tell a story about U.S. Global Health Policy when the U.S. mission remains unclear**

Some of the journalists noted the challenge associated with what they described as a redefining of PEPFAR toward greater emphasis on health system strengthening, integration of services and nation building, which many agreed were amorphous terms, incomprehensible to most people. A lack of fresh angles on problem and solution stories relating to U.S. Global Health Policy was expressed as well as a belief that the messaging coming out of the White House lacked clarity and concreteness. Beyond messaging from the White House, the participants spoke about the challenge of "wonky" global health language, and the difficulties of engaging an audience with terms such as "maternal health" and "child mortality."

### **Reporters are using social media to find leads, engage audiences they might otherwise have missed in traditional media**

There was consensus at different points during the evening that social media could be a very effective way to get people to discover stories as well as serve as a tool for journalists in their reporting. Social media had been utilized by some attendees to drive traffic to their websites. There was general acceptance that the global health community is actively engaged with social media.

Journalists discussed their use of Twitter and Facebook as a surveillance tool when conditions on the ground make travel and communication difficult. Several participants described instances where their news organization ran first-person accounts from people abroad that were first published through social networks. For instance, one participant had utilized a U.S. university's program to identify a local student in Cairo, offering first-person accounts of the unfolding situation in Egypt that eventually were published in the newspaper. Another described how text messages helped reporters to find injured people in Haiti following the earthquake. Not only did the participants point out that such content is typically free, but social networking can reach audiences in a different way.

For all their value, participants acknowledged the need to validate the source of Tweets, with some even suggesting they should really only be used as leads. Additionally, use of social networking can create a fuzzy line between journalism and advocacy, with a steady stream of content being produced by NGOs. Participants noted there is much still unknown about when social media becomes journalism and how to best make use of it.

On a similar point, participants expressed uncertainty about how to take advantage of the content produced/written by NGOs. At least one media outlet present had made use of such content on its website.

A related discussion was raised about how news blogs fit into the overall structure of the mainstream media. Some news blogs seek to have more of a "voice" from the author, which is in keeping with the non-news blogosphere, but traditionally not for the mainstream media. Still, news blogs sometimes produce the only coverage on a particular global health issue, so they are increasingly of value to global health news consumers.

### **Future content collaborations and networking**

Several attendees raised the possibility of creating an association for global health journalists as a way to foster collaboration and encourage coverage. Though health journalism associations and organizations exist, people did not feel that what is currently available could provide the type of forum they are seeking. For example, if a journalist was going to Tanzania on a reporting trip, he/she might post a query for expert contacts, local stringers, or other such input. Equally, this could provide an online site to post reporting on global health issues. One journalist pointed out that this does not even have to cost much money and indicated that a forum could be facilitated with free collaborative online tools, which are already available.

Some attendees expressed interest in this forum or association not only including U.S. journalists but also reporters around the world covering health. There was agreement that networking with other journalists worldwide could improve coverage of health issues all around. A program being developed at the Columbia Journalism School, where U.S. reporters and editors serve as faculty at schools overseas, was discussed as one way to work with reporters in other countries. Beyond that, specifics of how to carry out further collaboration among journalists were not addressed.

## Summary

In summary, many of the findings of Kaiser's report<sup>2</sup> were echoed by the journalists attending the dinner discussion. There was openness among many in the group for collaboration between media organizations—be it through an association of journalists or through actual reporting partnerships—as ways to foster coverage of global health issues.

As outside funding for coverage is an ever increasing reality, maintaining a firewall between funders and journalists was a key concern. Most attendees felt their coverage had not been influenced by funders, but they still wanted to keep this issue on the radar.

Engaging two key constituencies—their bosses and their readers, viewers or listeners—were also areas of concern. Several ideas on these fronts were discussed including tapping into the interest in global health that is evident among younger generations. Additionally, there seemed to be interest in training sessions or forums for reporters whose beat includes global health on such topics as utilizing social media.

---

<sup>1</sup> Bristol, N; Donnelly, J; "Taking the Temperature: The Future of Global Health Journalism," Kaiser Family Foundation, February 10, 2011, [www.kff.org/globalhealth/8135.cfm](http://www.kff.org/globalhealth/8135.cfm).

<sup>2</sup> Ibid.



## APPENDIX

## GLOBAL HEALTH DINNER DISCUSSION: Participant List

Gitika Ahuja, coordinating producer, health/medical coverage, ABC News

Nathalie Applewhite, managing editor, Pulitzer Center on Crisis Reporting

Sarah Arnquist, editor, Globalhealthhub.org

David Baron, health and science editor, PRI/The World

Nellie Bristol, freelance health journalist

David Brown, health reporter, *The Washington Post*

Jonathan Cohn, senior editor, *The New Republic*

John Donnelly, freelance health journalist

Stefanie Friedhoff, Nieman Global Health Journalism Fellowship Program

Carmen Gentile, freelance foreign reporter

Linda Harrar, former NOVA producer, consultant on global health to Nieman Foundation

Barbara Kantrowitz, associate director, continuing education, Columbia Journalism School

Dick Knox, health reporter, NPR

Betsy McKay, Atlanta Bureau Chief, *Wall Street Journal*

Arlene Morgan, associate dean, prizes and programs, Columbia Journalism School

Joe Neel, deputy senior supervising editor, health and science, NPR

Tom Paulson, former *Seattle Post-Intelligencer* reporter, global health blogger, KPLU/Seattle

Andrew Quinn, State Department correspondent, *Reuters*

Jim Simon, assistant managing editor, *The Seattle Times*

Frances Stead Sellers, deputy national editor, health science & environment, *The Washington Post*

Steve Sternberg, health reporter, *USA Today*

Teri Whitcraft, coordinating producer, global health series, ABC News

**Kaiser Foundation Staff:**

Penny Duckham, executive director, Kaiser Media Fellowships Program

Jill Braden Balderas, managing editor, Kaiser Daily Global Health Policy Report

Jennifer Evans, web reporter, Kaiser Daily Global Health Policy Report

Jen Kates, vice president; director, Global Health & HIV Policy

Craig Palosky, director of communications, DC office

Diane Rowland, executive vice president; executive director, KCMU

Jaclyn Schiff, web reporter, Kaiser Daily Global Health Policy Report



**THE HENRY J. KAISER FAMILY FOUNDATION**

**Headquarters**

2400 Sand Hill Road  
Menlo Park, CA 94025  
phone: 650.854.9400  
fax: 650.854.4800

**Washington Offices and  
Barbara Jordan Conference Center**

1330 G Street, NW  
Washington, DC 20005  
phone: 202.347.5270  
fax: 202.347.5274

**[www.kff.org](http://www.kff.org)**

This publication (#8158) is available on the Kaiser Family Foundation's website at [www.kff.org](http://www.kff.org).

**The Kaiser Family Foundation** is a non-profit private operating foundation, based in Menlo Park, California, dedicated to producing and communicating the best possible analysis and information on health issues.