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FROM THE EDITOR

Precarious Health

In the wake of the 2016 presidential election, covering national health policy has been a confusing and often thankless task, marked by false starts, a cacophony of voices and herky-jerky turns of events.

No one knows what will happen as an array of possibilities loom. The only constant is that the Trump administration continues to express its intention to change the status quo.

The new government will be affecting the beat in myriad other ways as well. One of those would be journalists’ access to information through the Freedom of Information Act — rarely a simple or satisfying process over the measure’s 50-year history.

As our FOIA story in this issue reports, a recent study conducted by David Cuillier of the University of Arizona for the John S. and James L. Knight Foundation polled 336 Freedom of Information experts and found that 90% of respondents believe access to government information will become even more cumbersome under the Trump administration.

This issue also features on-the-scene coverage of the happenings at Health Journalism 2017 in Orlando, Florida, and further explores such vital conference topics as the art of pitching as a freelance writer and a guide to the finer points of multimedia reporting.

In addition, there are a number of guest contributions in this issue:

- Former AHCJ board member Gary Schwitzer details how his watchdog website, HealthNewsReview.org, continues to filter the “flow of flawed news” to journalists.
- National Association of Science Writers President Laura Helmuth shares a preview of October’s World Conference of Science Journalists.
- Science writer and radio producer Kathleen O’Neil explores the importance of visuals in engaging readers with scientific material on social media platforms.
- NBC News medical correspondent Dr. John Torres explains how talking to his grandmother helped him understand the need for simplicity when reporting medical news in the Sign-Off column.

While the confounding politics of health care policy may be dominating more than their fair share of TV news lately, that medium otherwise continues to generate a good deal of informative health-related programming, which we also spotlight in these pages.

And that is indeed a healthy alternative.

— Tom Gilbert, Editor
Health care insurance prognostication quickly became the favorite pastime at the Association of Health Care Journalists conference in Orlando, Florida, last month, dominating the program — and the hallway buzz.

The current situation in Washington is so fluid and unpredictable that adequately planning long-range coverage of health insurance is proving nearly impossible for news organizations.

Marlene Harris-Taylor, reporter-producer at Ideastream, which owns and operates the PBS and NPR affiliates in Cleveland, Ohio, says they had to set aside their usual three-month planning window for deep-dive stories.

“In the end we decided to have a wait-and-see attitude because there was so much uncertainty,” Harris-Taylor says. “What we’ve decided we have to do is just be flexible. Right now we are focusing on opioids and the heroin crisis — knowing that whatever we plan we’ll have to throw out at some point and do a deep dive on health care whenever we do have more of an answer about what’s going to happen next.”

Ideastream is still covering local angles, however. “In Cleveland, we are known for our health care institutions. The Cleveland Clinic is there, so we always naturally think about, ‘What is the impact on the Cleveland Clinic or one of the other large health care providers in town,’” she says.

Other journalists are taking the local approach, too. Tracy Townsend, health reporter for WBNS-TV, the CBS affiliate in Columbus, Ohio, says, “We rely on the CBS network. If they are
doing something, we try to find a way we can make it relatable to the viewers in our area. And then, because we are multiplatform, give them the resources so they can go to our website so they can learn more for themselves.”

Both Townsend and Harris-Taylor say viewer feedback, plus high turnouts when local politicians hold town hall meetings, tell them that people want stories on health care insurance, even though they can’t give them solid predictions.

David Wahlberg, health reporter at the Wisconsin State Journal in Madison, says he thinks his readers are paying attention. “I think they are probably more interested and maybe relying on us more to try to tell them what may or may not happen,” he says. However, with proposals rising and failing at a dizzying pace, he is not trying to chase every prediction.

Down south, health reporter Michaela Gibson Morris at the Northeast Mississippi Daily Journal in Tupelo, senses some fatigue. “I think there’s a little bit of tuning out. The people who tend to respond are the people who are hyper-partisan,” she says.

Near the center of the action, Congressional Quarterly health policy reporter Erin Mershon tries to keep her political readership up on each twist and turn in the halls of Congress, but she thinks other stories may be accorded less attention, such as an evaluation of the effects of the Affordable Care Act over the past five years.

“In the past, there would have been a lot of appetite to understand where things are working well, in which state, which policy is having the greatest impact,” she says. “And now you sense among our readership — among the public even — they are a little bit less interested in what have been the impacts of these broad changes to the health system, because they don’t know if it’s still going to be there.”

Yet Mershon is seeing a keener interest outside health policy circles where there was none before.

“I’ve been really surprised,” she says. “I’ll go to a bar with friends and someone who doesn’t work in health policy at all and they say, ‘Let’s talk about this provision of the ACA.' And I’m like, ‘Really?’ I couldn’t get anyone to talk to me about Obamacare for the longest time, and now people really do want to talk about it.”

Once upon a time, health beat journalists could report consumer service stories about health care insurance. Now every story gets scrutinized for a partisan tilt.

“We talk about it a lot in our editorial meetings,” says WBNS-TV’s Townsend. “We talk about the fine line we have to walk. You get people calling and trying to pitch you stories, and you can tell they may be one way or the other. There are times we might not do something because we are not trying to be political, we are really trying to inform.”

Even as she faces accusations of taking sides from some readers, the Northeast Mississippi Daily Journal’s Morris says she has to watch out for ideological slants among sources. “It’s very frustrating, especially to try to find sources on both sides of the political thought spectrum that really step away from the talking points,” she says.

continued on page 32
The Struggle for Freedom

Government FOIA Access, Never an Easy Process, Could Get Even Harder

By Hillary Atkin

Health journalist Joseph Burns, AHCJ’s insurance topic leader, was writing a story based upon citations issued against the Wexner Medical Center Clinical Lab in Columbus, Ohio, for proficiency violations.

Burns filed a Freedom of Information Act request with the Centers for Medicare & Medicaid Services (CMS), part of the Department of Health and Human Services (HHS), to find out more details about the violations it found, which forced the lab to stop testing and to fire its medical director.

After repeated inquiries, Burns received the report — a full year later, well after his stories ran in The Dark Report, a trade publication for the clinical laboratory industry of which he is the managing editor.

Burns’ experience is unfortunately typical for journalists filing FOIA requests with government agencies, according to a recent report based on a study conducted by David Cuillier of the University of Arizona for the John S. and James L. Knight Foundation.

The recent survey, which polled 336 Freedom of Information experts including journalists, advocates, record custodians, technology companies and scholars, was released March 13 during Sunshine Week, a national initiative spearheaded by the American Society of News Editors to educate the public about the importance of open government.

It found that 90% of the experts surveyed believe access to government information under the 50-year old Freedom of Information Act will become even more cumbersome under the administration of President Trump, who has infamously branded the media as enemies of the American people.

Yet FOIA, which went into effect July 4, 1967, is not solely for journalists. It provides that any person has the right to request records or information from federal agencies, with certain exemptions.

Under the Obama administration, the number of unfulfilled Freedom of Information requests set a record. Yet last year, President Obama signed a bill into law that codified a presumption of openness for government agencies holding public records.

There are a number of contributing factors to the volume of unfulfilled requests, the study found, including delays caused by the amount of red tape and outdated technology in how the records are stored and distributed.

More troublesome is the lack of will by agency employees and a culture of hostility toward requesters, along with cutbacks at news organizations that limit the amount they can pay to successfully sue the agencies. Information denials are particularly acute at the local level, where the slashing of news personnel has been severe since the Great Recession.

“FOIA has always been a miserable process,” press freedom litigation attorney Lynn Oberlander said in the Knight study. “It’s a very awkward, expensive process where the ‘noes’ are much more frequent than the ‘yeses.’”

The report notes growing evidence that all levels of government in the United States are becoming more secretive and controlling of information, even as the amount of public information grows faster than the government’s willingness or ability to release it, and that agencies are using exemptions more than they have in the past to hold back information.

The survey identified eight issues that hinder access to information, including excessive redaction, ignored requests, excessive search and copy fees, a general lack of enforcement, overuse of exemptions and data/technology problems.

“The biggest issue, as Burns experienced, was lengthy delays. ‘We couldn’t get to the bottom of the story without seeing what the CMS found, so we were basing our story on people’s speculation,
but that was the only way at the time,” he said. “You could check on the status of your request anytime with a request number and it would say ‘not available.’ Why couldn’t they get it to us in a week or a month — not a year?”

Burns speculated about the reason. “FOIA requests are not a priority,” he said. “It’s not in their best interests to show the inner workings of the agency and open it up to criticism, whether justified or not. It could show they messed up in some way.”

In reporting on the shutdown of the heart surgery program at the Oklahoma City Veterans Administration Center, Jaclyn Cosgrove needed reports from the facility, but was stymied in her attempts to get more information. Their Freedom of Information officer initially gave her an encrypted file that was unreadable.

“It was just silly,” said Cosgrove, who is an investigative journalist specializing in criminal justice and mental health for The Oklahoman. “They wouldn’t even unencrypt it for another of their own employees.”

But Cosgrove was persistent and went to a hospital spokesperson who was more understanding. She noted that such positions are often filled by former journalists who are more likely to “get it.”

“I used some pretty stern language with the spokesperson, but spent half a day of effort for something that should have been simple,” she said. “When we did open it, entire pages were blacked out, but we continued on page 30

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Beyond the Basic Health Beat

AHCJ Conference Broadens the Horizon of Health Journalists

By Michele Cohen Marill

Crystal Hayes was just one year out of journalism school and new to the breaking news beat at the Orlando Sentinel when she got a late-night tweet from a reader, alerting her to rumors of a gunman and hostages at the Pulse nightclub near downtown. She rushed out of her apartment at about 3 a.m. on June 12, 2016, and became the first reporter from the newspaper on the scene of a mass shooting that killed 49 clubgoers and injured 53.

“That morning was just a complete blur, it was so chaotic,” says Hayes, who transmitted a stream of updates on Twitter and the live video-streaming site Periscope, working about 24 hours without sleep.

Almost a year later, Hayes shared her experiences and advice about covering a mass shooting to a roomful of seasoned reporters at the Association of Health Care Journalists, which held its annual conference in Orlando from April 20-23. The session reflected AHCJ’s goals of enabling health journalists to network with colleagues, sources, and newsmakers while exposing them to new ways of thinking about their work.

Many of the conference sessions brought context to ongoing news stories, including health care reform, the spread of Zika virus, health care for transgender patients and undocumented immigrants, opioid addiction and rising drug prices. But the connection between health care and violence added a different dimension.

Health journalists are in a unique position to assist in coverage of mass casualty events through their contacts within local hospitals, said Gideon Gil, who was health and science editor of the Boston Globe during the 2013 Boston Marathon bombing.

OUTSIDE THE PULSE NIGHTCLUB, WHICH REMAINS CLOSED, VICTIMS ARE MEMORIALIZED WITH BANNERS, CANDLES, MEMORANDUMS AND STONES BEARING NAMES AND WISHES. A PREVAILING SENTIMENT: #HUGSNOTHATE
“The emotional impact on the caregivers of treating hundreds of victims was incredible,” said Gil, now a managing editor of STAT, an online publication covering health and medicine. “Don’t forget that the people affected by this are not just the actual victims of the terror attack.”

In a kickoff roundtable session, a trio of public health experts also gave an impassioned plea to health journalists to recast violence as a public health epidemic.

Violence spreads like an infectious disease and can be halted by trained “interrupters” who go into communities to calm tensions and avert retribution, said Gary Slutkin, M.D., chief executive officer of Cure Violence in Chicago. Exposure to violence leads to more violence, but prevention is possible, he said.

That perspective may seem hopelessly idealistic in a law-and-order age. But Slutkin noted that HIV/AIDS once seemed hopeless, too. “It really was the press that led our coming towards not only more compassionate approaches but more effective approaches [to HIV],” he said.

Heather Mongilio, a crime and courts reporter with the Carroll County Times in Westminster, Maryland, who is switching to health journalism, called the public health message “an idea worth exploring.” But she noted that writing about acts of violence, including domestic assaults, builds awareness that can spur action. “Without that reporting, people didn’t realize what was happening in the community,” she said.

The Orlando conference attracted 675 journalists, or slightly less than half of AHCJ’s membership of 1,430. The program featured a special science track with a deep dive into the implications of gene editing and the underlying science of stress, vaccines, and dementia. Panels also highlighted regenerative medicine, immunotherapy, telemedicine and other emerging technologies.

But overall, AHCJ kept a focus on the information and tools that journalists need to be successful in their daily work. “Basically, this organization exists to make
Strutting Your Stuff
Successful Freelancing Requires Pitch-Perfect Moves

By Dinah Eng

If you want to be a science or medical freelance writer, be prepared to pitch, be persistent, and pick the right angle for your story before approaching an editor.

Successful freelancers have used different strategies to make a career as an independent health care journalist work, ranging from developing niche beats to exploring different forms of writing.

Jeanne Erdmann, an AHCJ board member and chair of the AHCJ Freelance Committee, is a former research associate at Barnes-Jewish Hospital of St. Louis who found science writing more satisfying than working in a lab.

“There are fewer glossy magazines, and those that still exist have tight budgets,” Erdmann said. “But there are a lot of online sources, which may pay less, that take health care freelance writing.”

Erdmann said the number of freelancers in science and medical writing is growing, and that of AHCJ’s nearly 1,500 members, 23 percent are now independent journalists.

“It’s not easy, but it’s also not impossible to make a good living as a freelancer,” she noted. “The hardest thing may be paying for your own health insurance.”

Maryn McKenna, who has been freelancing for 10 years, was formerly a staff writer at the Atlanta Journal-Constitution, where she was the only U.S. journalist assigned to cover the Centers for Disease Control and Prevention. Today, she writes about public health, global health and food policy for publications like The New York Times Magazine, Wired and Scientific American.

She says editors are overworked, so get to the point quickly when making a pitch. Persistence is important, but don’t make a pest of yourself, she adds. Looking at an editor’s social media posts may be one way to glean the kind of story ideas that might interest that person.

“With every pitch, you have to answer three questions — why tell this story, why now, and why are you the one to tell it?” said McKenna, who is also an author, guest radio commentator and public speaker on health issues.

McKenna, whose third book — “Big Chicken” (published by National Geographic Books and distributed by Penguin Random House) — comes out in September, said the market for health-related stories has changed in the past decade. When publications cut staff in the early 2000s, many health care reporters became freelancers. Now, a growing number of online marketplaces have created staff jobs, resulting in smaller freelance budgets.

Cheryl Platzman Weinstock, who has freelanced for 30 years, said her key to success is diversifying coverage areas. She has covered science and health issues, breaking news, crisis reporting and crime stories.

“You have to have the chops to talk to all kinds of people,” Weinstock said. “I’m always learning. I scour events and meetings that are not being covered a lot, especially esoteric meetings meant for scientists. You’ve got to be quirky and bring new angles to things.”

In addition to reporting, she has created speaking engagements for herself in retail markets.

“It started at Saks Fifth Avenue, when the store was in Stamford, Conn.,” explains Weinstock, who has also done talks at Barnes & Noble, pegged to stories she has written. “Saks would have a fashion show, and I would give a talk on women’s health issues afterwards. The store got shoppers, my editor donated magazines and got new readers, and I got to talk to women I wanted to reach.”
Erik Vance, who became a freelancer after working in biology and as an environmental consultant, specializes in both health care and environmental reporting for publications like National Geographic and Harper's.

If you keep a pipeline of stories at various stages of completion, Vance said, payments are constantly being generated, which creates the time and leeway to also develop passion projects.

“It's a good idea to team up with a good photographer because a lot of outlets want a package deal,” Vance said. “A lot of health pieces are missing the work of a photographer who has a good eye for showing the emotional part of the story.”

He noted that while the writer and photographer can pitch together, each usually negotiates separate deals. Vance said that for many years, a number of traditional media outlets tried to get by with paying freelancers less than $1 a word, but that's no longer the case.

“There are new online markets paying decent prices, and those paying bottom prices are feeling the pressure to pay more in order to compete,” Vance said. “Health care stories are well received at online publications like Nautilus and Mosaic, which pay at least $1 a word and work off endowments.”


“I don't see books as a moneymaker per se, though it's selling fine, as much as a part of my platform,” Vance said. “It allows me to build my presence with talks and university visits and such. Being a writer these days is tough, and our income looks like a patchwork quilt. A book sort of ups the quality of thread we can use.”

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Scientists and professionals at research institutions eager to inform the public about their work need to go where the readers, or increasingly, the viewers are: a range of social media platforms.

Instead of driving traffic to their websites, a panel of public information officers, editors and journalists recommend creating science content specifically for use on Snapchat, Facebook Live, Twitter, Tumblr and other social media outlets, emphasizing the use of images and multimedia.

The content needs to be authentic and transparent, to counter the growing distrust of scientists and institutions, one expert said.

“What drives our coverage?” said Nancy Shute, co-editor of National Public Radio’s Shots health news blog. “Visuals, visuals, visuals. Social is a visual medium.” When her team compared posts that included original art with those that relied on stock art or lacked images altogether, they found those with original art had 160% more page views. That convinced the science and health team to increase their budget for original art, videos and GIFs — popular short videos and animations — for use on social media and the blogs, Shute said.

The panel discussion was part of a science communication seminar entitled “Communicating Science in the Clickbait Era,” organized by EurekAlert!, AAAS’s science news service last December. The seminar was also webcast live and drew more than 250 participants.

A preference for visuals may also be why 4-year-old Snapchat overtook Twitter last year with more than 150 million daily active users. Snapchat also has the largest share of 18- to 24-year-olds on social media, said Brian Lin, director of editorial content strategy for EurekAlert!. Science institutions are particularly interested in reaching those younger audiences, since “their engagement with science could have an enormous impact on our future,” said Lin, who moderated the panel discussion.

Increasingly, data and science information is being conveyed in graphics alone, without an accompanying textual story. Shute said they sometimes create data-rich “charticles,” to convey health disparities, for example, while Laz Gamio, a graphics editor for The Washington Post, said he is a fan of making “infoGIFs” for Twitter. Jason Townsend, NASA deputy social media manager, said his team takes advantage of trending topics, anniversaries and other connections in the news to draw in new audiences. For instance, it allowed British boy band One Direction to shoot a music video about a space mission to Mars at NASA facilities. NASA’s social media team filmed their own short videos of the band participating in astronaut training, which attracted a lot of new, young followers, particularly girls, he said.

“A lot of folks groan, ‘Why are you talking about One Direction? ... You should talk about space,’” Townsend said. “But you know ... we’re trying to inspire the next generation of explorers here.”

David Cameron, director of media relations at Harvard University, said his team has begun giving “behind the scenes” tours of laboratories and other campus locations on Facebook Live. While the quality is “unspectacular,” he said, the new format offers a sense...
A conversational tone is what makes Buzzfeed News so popular with young viewers, said Jess Naudziunas, senior video editor for the site. And while the site may top science posts with a “click-bait-y” headline such as “15 Things People With Arthritis Want You To Know,” what follows is an accurate and well-researched news story, she said.

Beyond informing audiences, scientists and institutions need to engage with the public to increase trust in science, Cameron said. Trust is generated when scientists seem authentic and when their audience feels they might share some of the same values, he said. However, he cited a recent survey of AAAS members that found that the No. 1 reason scientists participate in public outreach was to “defend science.” Their second-most-popular reason was “to inform,” followed by “to excite” and “build trust.”

“If science is under attack, you should focus on building trust, not going on the defensive,” Cameron said. “I think we need to communicate authenticity.”

Shute added that while some scientists and communicators may rightfully resist exaggerated headlines, “ethical clickbait” that are “appropriately whimsical” can go a long way to attracting a wider audience not typically engaged with science.

Kathleen O’Neil is a freelance journalist and audio producer. This article originally appeared on AAAS.org: aaas.org/news/experts-outline-three-ways-boost-science-communication.

Which Treatment Options Work Best for Whom?

PCORI has awarded more than $1.6 billion to support comparative clinical effectiveness research (CER). CER findings help people compare the benefits and side effects of their healthcare options and make better choices. PCORI-funded studies focus on topics such as:

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<th>Mindfulness meditation vs. cognitive behavioral therapy for patients using opioids to treat chronic back pain</th>
<th>Immediate treatment vs. surveillance for ductal carcinoma in situ (DCIS) breast cancer</th>
<th>Antibiotics vs. surgery for uncomplicated appendicitis</th>
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<td>Warfarin vs. new oral anticoagulants (NOACs) to prevent the recurrence of blood clots</td>
<td>New proton beam therapy vs. conventional photon radiation for breast cancer</td>
<td>Oral vs. IV antibiotics for serious infections in children</td>
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PCORI-funded studies involve patients and other healthcare stakeholders as active research partners, not just passive participants, and focus on outcomes that matter most to these stakeholders.
When Kaiser Health News multimedia reporter/producer Heidi de Marco gets ready to go on an assignment, she fits her Nikon digital SLR camera, a small lighting fixture and lavalier mics in a single bag. Packing light is a trick she learned while working as a photojournalist/videographer in India.

“Because I travel, it’s better to have it all be so compact,” she said. “I also keep it simple because it doesn’t intimidate people.”

Augmenting their written reporting with their own visuals has become standard operating procedure for many journalists, and the most seasoned have found that keeping it simple is best.

That’s something Dr. Patricia Salber, chief executive of The Doctor Weighs In, can relate to. “When we first started making our videos, we were lugging around lights, two cameras, sound equipment and computers,” she said. “It meant we were not very flexible because we had to carry everything around.” Salber and her team did all their video interviews at CES 2017 with an iPad Pro, an iRigHD directional mic, and a tripod, and used iMovie to edit.

“All of the videos were ‘live’ on YouTube before the conference ended,” she said. Going forward, she revealed, she will probably just use a smartphone, the iRigHD mic and some kind of tripod or stabilizer. “With these technologies, all but the most Luddite among us can learn to produce multimedia stories.”

Keeping it simple is also often a rule of thumb for the print journalists of IBT Media publications, which includes Medical Daily. There, Executive Producer Barclay Palmer noted that, though much of the multimedia produced uses professional cameras, the...
print reporters also double as multimedia journalists when traveling, at events or in a situation where IBT can’t send a professional video team. Reporters often shoot video with their smartphones.

“All the reporters have been asked to think in terms of video and photos and multimedia as part of their jobs,” said Palmer. “It takes awhile for it to filter in culturally, but more and more reporters are doing it, and getting better at it.”

Training for print journalists to take on this role is ongoing and usually on a one-to-one basis.

“We talk about making sure your camera is stationary, how to get good audio, how to follow action and frame,” Palmer said. He noted that some print journalists become good shooters, and other discover they have a compelling on-camera presence.

The distribution outlets for multimedia coverage have also expanded.

In 2000, Dr. Eliene Augenbraun produced several videos on the human genome project for Nature Research Group (which publishes Nature and Scientific American, among other publications).

Since then, she’s become the multimedia managing editor of the publisher’s dedicated multimedia production company. Now, she said, her professional focus is to “figure out where people are getting their news and making sure science is part of the mix,” which includes paying attention to popular social media platforms, from Facebook and YouTube to Twitter and Snapchat.

For Palmer, although most videos mainly end up online with print

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Again on the ‘Rise’

Fusion’s California Fellowships Back for a Second Round

By Tom Gilbert

They rose up and they were heard. And now they’re back for more.

In February 2016, Fusion, the multiplatform media company, teamed with the California Endowment, a private health foundation that provides grants to community-based organizations throughout that state, to launch “Rise Up: Be Heard,” a fellowship program targeted to youth in areas of California that have historically been under-resourced.

Both sponsors were pleased with the results of their first endeavor to develop young journalists and community advocates, and they’re bringing the program back for another round — with a few tweaks.

One of the fruits of last year’s program was the hour-long Fusion documentary “Shadow Town,” for which Fusion investigative reporters teamed up with a group of young “Rise Up: Be Heard” journalists to probe crucial issues — ranging from police relations to water quality and the undocumented immigrant community’s inability to get quality health care — in the underserved communities of Kern County, Calif.

Again this year, “Rise Up: Be Heard” will be doing a project with Fusion’s investigative unit, according to Jacob Simas, manager and editor of the fellowship.

“They’re really honing in on the intersection of health and immigration,” he said. “There’s a lot happening politically on both of those fronts. Hopefully, we’ll be putting a human face on these issues.”

Simas said that tweaks to the 2017 fellowship — the application deadline for which was April 23 — include concentrating the program into the summer months (last year’s program ran for six months, from spring to fall), and putting more of an emphasis on video stories.

“[We’ve seen] uprising by young people, especially after the election, with issues that they’re concerned about in their communities — whether it’s immigration or how their health care changes for them or their family.”

— Maricela Rodriguez

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FUSION REPORTER JORGE RIVAS GIVES DIRECTION TO MEMBERS OF LAST YEAR’S “RISE UP: BE HEARD” PROGRAM DURING A GROUP INVESTIGATIVE REPORTING PROJECT.
“About 38 of the 40 stories the young reporters did last year were written stories, and there were just a couple of videos,” Simas said, adding that while the written stories, which were published on Fusion.net, got the same promotional push Fusion gives all of its content, it was the video pieces that performed best.

“We got a lot of eyes on those [written] stories, but one of the lessons learned was just how many more views we could get on videos that went out on our social platforms,” he explained. “That really informed us in terms of how we wanted to design the program this year.”

The aim this time, he said, is to have each fellow produce two stories per month, one of them a video.

Fusion parent Univision last year acquired bankrupt blog network Gawker Media Group — home to the websites Jezebel, Gizmodo and Deadspin, among others — renaming it Gizmodo Media Group. Simas sees new opportunities for the fellowship in the acquisition.

“It creates a potential for us to also share stories across some of these other platforms as well,” he said. “We put out a call for volunteers to mentor across the GMG group and we got a really robust response from editors, reporters and video journalists.”

For her part Maricela Rodriguez, program manager who spearheaded the initiative at the California Endowment, was similarly enthusiastic about the program’s first-time performance.

“The results included young people getting a comprehensive experience that included training and mentorship, and opportunities to tell stories from the communities they grew up in and in some cases still live in,” she said, adding that more time will be dedicated to training at the beginning of the 2017 fellowships.

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Feeding the Watchdog

HealthNewsReview Has a Voracious Appetite for Analyses

By Gary Schwitzer

HealthNewsReview.org is the world’s most active health journalism watchdog. That’s no idle claim. You won’t find another project anywhere that has systematically analyzed and graded health care news coverage for 11 years as we have.

In that time, we at HealthNewsReview have published 5,200 reviews or commentaries on health care journalism, PR, marketing and advertising.

But journalists and other writers are not our only audience. Our project aims to improve the public dialogue about health care and is the only such project that tries to help patients and consumers improve their own critical thinking about health care claims.

We un-spin. We de-bunk. We hunt down hype. We deflate fluff.

A typical day for us is to peruse and find stories that amaze us because of the analysis, context and depth of exploration. Examples include ProPublica’s data dives, STAT’s energetic and voluminous coverage, Kaiser Health News’ policy questions and clarifications, and the creative voices at Vox.com — among others on a list that could be much longer. But, typically, we are also amazed at the repetition of flawed, fawning health care stories that we see every single day.

On this particular day, because I’m writing this piece, I stop for a moment and reflect on these items being reported by leading news organizations:

“Your Guide to Protein Powder: Lose Weight, Build Muscle, Age Better”

“The Sound of ‘Pink Noise’ Improves Sleep and Memory”

“Cheese is so addictive, one doctor calls it ‘dairy crack’”

“Yoga: A Surprising Solution to Your Political Stress”

“A pneumonia-diagnosing jacket can help save lives in a matter of minutes”

“Pokémon Go Makes People Walk 2,000 More Steps”

“Blood Test Might Someday Distinguish Early Depression, Schizophrenia”

“Does eating alone help you diet?”

Truly a random sample from a random day, but representative of what we see most days. Preliminary research. Poor quality-of-evidence. Small study samples. Single-source stories quoting people with a vested interest in making findings look important. Sensational. Hype. But, hey, it fills the daily quota, right?

But how does this serve reader’s needs?

On page 19 is a chart of our criteria — the things we believe readers/patients need answers on regarding health care interventions. The chart shows grades for the first 2,330+ news stories we’ve reviewed — using those criteria — and grades for the first 330 PR news releases we’ve reviewed. (Note that two of the criteria differ in the news story reviews from what’s used for the news release reviews.)

If you’re not familiar with our reviews and process, you can read more at: healthnewsreview.org/about-us/review-criteria/

continued on page 28
<table>
<thead>
<tr>
<th>REVIEW CRITERIA — DOES THE ARTICLE...?</th>
<th>% UNSATISFACTORY 330 PR NEWS RELEASES</th>
<th>% UNSATISFACTORY 2,330 NEWS STORIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adequately explain costs?</td>
<td>93%</td>
<td>69%</td>
</tr>
<tr>
<td>Provide adequate data on the scope of potential benefits?</td>
<td>69%</td>
<td>66%</td>
</tr>
<tr>
<td>Provide adequate data on the scope of potential harms?</td>
<td>76%</td>
<td>63%</td>
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<tr>
<td>Describe the quality of the evidence?</td>
<td>69%</td>
<td>61%</td>
</tr>
<tr>
<td>Compare the new approach with existing alternatives?</td>
<td>58%</td>
<td>54%</td>
</tr>
<tr>
<td>Does the release identify funding sources &amp; disclose conflicts of interest?</td>
<td>53%</td>
<td>Does the story use independent sources &amp; identify conflicts of interest? 46%</td>
</tr>
<tr>
<td>Establish the true availability of the intervention?</td>
<td>33%</td>
<td>26%</td>
</tr>
<tr>
<td>Establish the true novelty of the intervention?</td>
<td>37%</td>
<td>23%</td>
</tr>
<tr>
<td>Avoid disease-mongering?</td>
<td>13%</td>
<td>20%</td>
</tr>
<tr>
<td>Does the news release include unjustifiable, sensational language, including in the quotes of researchers?</td>
<td>33%</td>
<td>Does the story appear to rely solely/largely on news release? 8%*</td>
</tr>
</tbody>
</table>

* ~20% of stories were graded N/A because reviewers have insufficient evidence to judge.

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On the Health Watch

Upcoming TV Projects of Note on Discovery, TLC, HLN, PBS and CBS

By Marc Berman

TV programming with a health-related theme comes in many different forms — from “Grey’s Anatomy” to “Dr. Oz” to CNN’s recent presentation of “Unseen Enemy,” about the looming crisis presented by disease pandemics.

And there is no shortage of new entries ahead that tap into the public’s ongoing fascination with medical issues.

“First in Human” on Discovery, narrated by Jim Parsons, promises to give viewers unprecedented access inside the National Institutes of Health’s Building 10, the largest hospital in the world devoted solely to research, where some of medicine’s riskiest and most critical research is done. Previous trials in the building led to the development of modern chemotherapy treatments, the first treatments for HIV/AIDS, and the first successful gene therapy.

“I know that everyone who watches ‘First in Human’ will feel the same sense of pride I did when I discovered this incredible institution that our country created,” said Parsons. “I hope viewers will share the sense of gratitude and awe that I felt when learning about the human beings who bravely put their lives in the hands of some of our most innovative scientists and doctors as they search together for the medicines and cures that give all of us fuller, longer lives. This is truly the story of how we, as human beings, function: both at an elemental level and at our most profound.”

The three-part documentary series will debut on May 18 at 9 p.m. ET on Discovery.

Sister cable network TLC, a haven at present for “My 600-Lb. Life,” will introduce docuseries “The Healer,” focused on a man named Charlie Goldsmith from Melbourne, Australia, who at age 18 discovered he had the power to heal people using his mind and the power of touch. Described as an energy healer, this docuseries will follow his life and work as he is pursued by celebrities, athletes and ordinary people hoping to be cured of their ailments.

On July 21, HLN will launch a six-part medical mystery series called “Something’s Killing Me,” which investigates puzzling diseases and symptoms that result in a life or death struggle. Each episode will chronicle the race of time to discover what — or who — is killing the patients. Cases will include a fatal form of insomnia and anthrax poisoning.

And, in spring 2018, PBS will premiere six-part “NOVA Wonders,” from the producers of perennial “NOVA” franchise that will go in search to the answers for some big science-themed questions. Hosted by Dr. Talithia Williams, professor of mathematics at Harvey Mudd College, and Dr. Andre Fenton, professor of neuroscience at New York University, one episode in particular will explore what is living inside of us and how it impacts our health.

“NOVA Wonders” will take viewers to the frontiers of science to tackle some of the biggest questions about life and the cosmos,” noted Suzanne Zellner, VP, Sponsorship Group, for Public Television, the national sales organization for PBS programming. “It is going to talk about how far we’ve come, how we got here, and how scientists continue to push our understanding of the universe.”
CBS, meanwhile, has greenlit “Ambulance,” a new one-hour docuseries that takes a revealing look into the intense world of emergency medical workers and the 911 dispatchers who make split-second decisions during life-threatening emergencies. Focusing on select call center personnel and field crews, the series will provide a snapshot of the daily pressures emergency medical service workers face as they respond to a wide variety of emergencies (including cardiac arrests, overdoses, car crashes and child births in progress). No premiere date has been announced.

“Health-related programs can certainly be informational and educational in nature, answering our questions and tapping into a timeless subject matter,” noted media consultant Bill Carroll. “Of course, they can serve as pure escape and entertainment. With the various subcategories of health, and the appeal to viewers of all ages, this genre will always remain an important and topical presence on television.”

FACT: Tooth decay is the most common chronic disease affecting U.S. children (5X more common than asthma).
FACT: Over 48 million people go without dental care every year.
FACT: 1 in 4 low-income children suffers from untreated tooth decay.

A proven solution is dental therapy. Employed in over 50 countries and a growing number of U.S. states, dental therapy uses trained dental providers, similar to physician assistants, to bring dental care to those who need it most.

To find out more, please contact Kelly Hoffman, khoffman@pewtrusts.org.

Learn more at:
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San Francisco Study Hall

World Science Journalists to Convene in October

By Laura Helmuth

We at the National Association of Science Writers, along with the Council for the Advancement of Science Writing and the Association for Health Care Journalists, are delighted to be hosting the World Conference of Science Journalists this year. The conference will run Oct. 25–30 in San Francisco. Please join us! Registration opened May 1 at wcsj2017.org.

We have a lot to talk about with journalists from around the world. Some of the main themes of the conference sessions include: ethical issues, new techniques for storytelling, climate and sustainability reporting, reporting under authoritarian political systems, skills for the 21st century, global health journalism, new horizons in science and more. We’ll have 49 breakout sessions and 10 plenaries.

Speakers include Mary Roach, author of “Stiff” and “Packing for Mars;” Thierry Zoamoun, CEO of the African Institute for Mathematical Sciences; Jennifer Doudna, a CRISPR pioneer; and visual journalist Alberto Cairo.

We’ll offer a range of workshops before the formal program, including training for student journalists, workshops on emerging infectious diseases and food security, and a symposium on ethical debates and global policy around new genetic technologies.

The Northern California Science Writers Association is organizing field trips for after the conference to the Monterey Bay Aquarium, the Monterey Bay Aquarium Research Institute, the University of California at Davis enology field station in Napa Valley (wine!), a U.S. Geological Survey field trip to coastal landslide hazard areas, a seismology hike along the Hayward fault and more.

This is the 10th World Conference of Science Journalists and the first one to be held in the United States. For those who haven’t attended a WCSJ before, these meetings are a treat — a great opportunity to learn new skills, build collaborations, find story ideas and improve your craft.

We’re already seeing a lot of enthusiasm for the conference. The program committee received more than 300 proposals for sessions, compared to about 65 for a typical NASW meeting. And we received more than 580 applications for general travel fellowships and 170 applications for student travel fellowships, from writers in 103 countries and every continent but Antarctica.

We expect to fund 70 or more general travel fellowships and 20 or more for students. Thanks very much to the many people and institutions who donated to the David Perlman Travel Fellowships to bring writers from around the world — including people in the U.S. — to the conference. There is still time to donate. You can find links to do so from the NASW website, the Council for the Advancement of Science Writing website or the WCSJ2017.org site. Thanks to the generosity of an anonymous donor’s matching gift, almost $40,000 has been raised to provide travel fellowships.

Putting on a big conference in San Francisco and inviting the world to join us is expensive, and our fundraising committee has been hard at work for a year. To date, more than $1.3 million in commitments have been secured toward the $2 million in sponsor and partner funding needed to support travel, program delivery, networking and infrastructure for the conference. The Hastings Center, Research Councils UK, Canada’s International Development Research Center, The Alfred P. Sloan Foundation, Bayes, The Brinon Foundation, Johns Hopkins Medicine, Argentina’s Grupo Insud, Taylor & Francis, AAAS/EurekAlert! and Nature are among sponsors and partners who have recently joined to support WCSJ2017. Johnson & Johnson Innovation is the conference’s Diamond Sponsor and lead underwriter.

The WCSJ organizers are closely monitoring developments in US immigration policy and the consequences of the president’s executive order banning people from seven (now six) countries. We’re working with the National Academy of Sciences and the State Department to list this meeting as an official conference on a list State maintains, which should help facilitate visa approvals. We’re sharing updates, encouraging speakers and participants to make visa arrangements as soon as possible, and providing whatever guidance we can.

A Feb. 8 statement issued by the organizers of the conference reads: "The World Science Journalists (WCSJ) Conference is an official public meeting and a designated event that is not subject to the travel restrictions placed on people from seven countries (six now) as a result of the recent immigration executive order.

By an understanding reached with the organizers of the conference, this event will be listed on a list maintained by the Department of State that identifies designated events where visa restrictions do not apply. The organizers are committed to ensuring the conference will continue to be an inclusive event where journalists from around the world can come together to share stories and learn from one another.

The organizers have also worked closely with the U.S. Department of Homeland Security to ensure that the visa process for all conference attendees is streamlined and expeditious, and that there is no delay in obtaining visas. The organizers encourage attendees to make their visa arrangements as soon as possible in order to ensure a smooth experience.

The conference is a valuable opportunity for journalists to learn from one another and to cover stories that are important to the global community. The organizers are committed to providing a safe and inclusive environment for all attendees, and believe that the conference should continue as planned."
in part: “We are resolute in our determination that the conference will continue its tradition of welcoming colleagues from across the globe, and we oppose any restrictions that would prevent participants from attending WCSJ2017. As October approaches, we will do everything we can to make the meeting accessible to all.”

Science and health writing has never been more important, and neither has forging alliances with colleagues from around the world. Many of us in NASW and AHCJ are trying to increase the signal-to-noise ratio in the media and social media; fight conspiracy theories and fake news; cover subjects of global importance in an age of nationalism; and help legitimate, evidence-based, carefully reported, important knowledge and ideas go as viral as their opposites.

We hope to make the World Conference of Science Journalists 2017 a place where we can build enthusiasm and expertise to help all of us improve our craft. We hope to see you there. ■

Laura Helmuth is president of the National Association of Science Writers and the Health Science & Environment editor of The Washington Post. She can be reached at helmuth@nasw.org or on Twitter @laurahelmuth.
early 400 entries were received for the 2016 AHCJ awards, the Association of Health Care Journalists’ 13th such contest, which recognizes the best health reporting in 11 categories, including public health, business and health policy.

“At a time when many journalism outlets are being stretched, it’s encouraging to see so many reporters continue digging deeply into complicated and vital issues,” contest co-chairman and AHCJ board member Tony Leys, who is a staff writer for the Des Moines Register, said in a statement. Others on the contest committee included AHCJ members Julie Appleby, Blythe Bernhard, Charles Ornstein and Cate Vojdik.

Entries were screened and judged by more than 50 working journalists or journalism professors. AHCJ board members and contest committee members were not eligible to enter the contest.

The awards were presented at a luncheon on April 22 at Health Journalism 2017 conference in Orlando. First-place winners received $500 plus registration and hotel accommodations at the conference.

Here’s a rundown of the first-place winners in each category:

**BEAT REPORTING**

KQED San Francisco reporter April Dembosky grabbed the first-place prize for her 2016 body of work, which included reports on drug companies more than doubling the price of the drug commonly used in assisted suicide, insurance companies sidestepping mental health laws (and regulators failing to hold them to account) and how Obamacare was giving rise to immigration concerns in California’s farming industry. AHCJ judges praised Dembosky for her “creativity and breadth of her ideas, and the quality of her execution,” adding that her stories were “compelling and well-crafted, providing, context, emotion, and character, often in just a few minutes.”

**BUSINESS**

“Life and Death: The Cost of the EpiPen” by the staff of NBC News and reported by Ben Popken was the first-place winner. The story focused on the hardship that escalating EpiPen costs placed on millions of American parents with children who suffer from severe allergy attacks and rely on the life-saving drug to keep them from going into anaphylactic shock. The judges said, “NBC broke this important watchdog story in August and its persistent follow-up reporting helped make the EpiPen controversy one of 2016’s highest-impact consumer stories in both health care and business news.” Additionally, they singled out Popken for his “enterprising digging in social media (Reddit) in search of a fresh idea for back-to-school season.”

**INVESTIGATIVE (LARGE)**

“Dangerous Doses” by Sam Roe, Karisa King and Ray Long of the Chicago Tribune nabbed top honors. An investigation of dangerous prescription drug interactions, it yielded groundbreaking science and sparked safety reforms at pharmacies nationwide. The Tribune collaborated with data scientists, pharmacologists and cellular researchers at Columbia University Medical Center to identify and confirm previously unknown drug interactions. Then reporters tested 255 pharmacies in the Chicago area to see how often they would dispense deadly drug combinations without warning patients. (Fifty-two percent of the pharmacies sold the medications without mentioning the potential interactions.) The AHCJ judges rhapsodized, “This is public service journalism at its finest,” commending the series for “a terrific, fresh premise,” “fantastic and thorough reporting and data analysis” and “clear, strong and engaging writing,” adding that “results that have the potential to save thousands of lives across the country.”

**INVESTIGATIVE (SMALL)**

Top honors went to “Painkiller Profiteers” by Eric Eyre of the Charleston (W. Va.) Gazette-Mail, which tracked the deluge of prescription opioids into West Virginia, following them to individual counties, pharmacies and families. The newspaper’s investigation found that drug distributors shipped 780 million hydrocodone and oxycodone pills to West Virginia in just six years, a period when 1,728 people fatally overdosed on those two painkillers. The wholesalers supplied ever-higher doses of the pills — a telltale sign of growing addictions — even as the death toll climbed. The largest shipments often went to mom-and-pop drugstores in poor, rural counties in...
Science journalism has never been more essential
to our complex and changing world

In October, more than 1,200 science writers from 70 countries will come together during WCSJ2017

You will want to be among them

Registration opens May 1 at wcsj2017.org
southern West Virginia. The judges cited the investigation for its “new and exceptionally dark perspective” with findings that were “so clear and compelling that various agencies, including the Board of Pharmacy, had to take action. The Charleston Gazette-Mail deserves great credit for investing the time and resources needed for this type of reporting, which is a pillar of our democracy.”

**CONSUMER/FEATURE (LARGE)**

Boston Globe reporter Billy Baker’s five-part series “The Power of Will” took top accolades. It told the story of the parents of an infant boy stricken with a savage cancer who succeed at finding a treatment to save him. In their fight to bring the drug to as many children as possible, they came up against obstacles, including the FDA and a pharmaceutical company that took an interest in the drug and tried to thwart them, ultimately cutting off their supply. They ended up secretly starting their own drug company to manufacture their own supply. The judges called it “a heartbreaking story that was beautifully told,” adding, “This story was a compassionate and respectful portrayal of a family enduring an unimaginably difficult situation. The writing demonstrated an excellent blend of narration and facts, telling the decade-long story of just how far a father will go to save his child.”

**CONSUMER/FEATURE (SMALL)**

“How Shock Therapy Is Saving Some Children with Autism” by Apoorva Mandavilli, founding editor and editor-in-chief of Spectrum, was the big winner. It explored the use of once-maligned electroconvulsive therapy to successfully treat children with autism who harm themselves repeatedly, sometimes to the point of blindness or death. The judges noted that it “helped dispel some common misconceptions about the controversial therapy” and “revealed how beneficial this option can be for those who suffer some of the most disruptive symptoms of the illness.” They praised the article for being “fully reported and written with poignant detail, giving the reader an intimate understanding of the illness and its treatment.”

**HEALTH POLICY (LARGE)**

“Politics of Pain” by the staff of The Center for Public Integrity and The Associated Press came in first. The investigation examined the politics behind the nation’s opioid addiction epidemic, finding that drug companies and allied advocates spent more than $880 million on lobbying and political contributions over the past decade, and that such drugs are expected to cost government-funded health programs hundreds of millions of dollars in higher medication expenses while racking up billions in sales for the drugmakers. Characterizing the report as a “tour de force about the politics, lobbying, and influence peddling that have helped caused the American opioid epidemic,” the judges gushed, “Every health care journalist should aspire to do this kind of work.” They further called it “a golden example of exhaustive reporting that was not exhausting to read because the stories are well told, edited, and organized — and tragically important.”

**HEALTH POLICY (SMALL)**

The top prize went to “The Looming Threat of Factory-farm Superbugs” by Melinda Wenner Moyer, contributor to Scientific American. It examined how antibiotic-resistant bacteria from livestock pose a deadly risk to people — and that the farm lobby won’t let scientists track the danger, unearthing documents showing the breadth of agriculture industry influence in Congress and over farmers. The AHCJ judges called it “a thorough, balanced and well-researched look at an issue of broad importance,” adding that “the reporting is strong and the writing is clear.”

**PUBLIC HEALTH (LARGE)**

“The End of AIDS?” by Jason Kane and William Brangham of “PBS NewsHour” and Jon Cohen of Science magazine, with support from the Pulitzer Center on Crisis Reporting, scored top honors. The six-part “PBS NewsHour” series explained the complicated science behind the push to end AIDS, as well as explore the personal, sometimes harrowing stories of the people grappling with the virus. The judges said the series was “in a class by itself for the richness of its storytelling and the depth of its reporting,” adding, “The documentary produced new and compelling insights about the global battle to conquer AIDS. The monumental effort launched by PBS on this project is especially impressive given the dwindling amount of resources in journalism-land.”

**PUBLIC HEALTH (SMALL)**

First place went to “Heroin: Killer of a Generation” by the staff of The Palm Beach Post. It was a multimedia package that told the stories of 216 teenagers, men and women who had died of a heroin-related overdose in Palm Beach County in 2015, explained why so many were dying, explored the science behind the disease of addiction and documented the government inaction that enabled the epidemic to continue unabated. AHCJ judges considered the package “a mixture of excellent reporting and human interest” that was “compellingly presented” and “a tremendous public service.” They concluded, “The story’s results mirrored its ambition and show what great journalism can achieve.”

**TRADE PUBLICATIONS/NEWSLETTERS**

“Wounded Care” by Bob Herman and Fan Fei of Modern Healthcare emerged at the top of this category. It examined how the hospital that serves the Native American Winnebago tribe in Nebraska — operated by the federal Indian Health Service — lost its Medicare and Medicaid funding because of widespread violations that put the health of patients in jeopardy. Modern Healthcare learned that many Native Americans tribes have actively taken over their local health care systems from the IHS in response to the poor care they believe they are receiving. Judges termed the report “an eye-opener for most of us about yet another indignity foisted on our Native peoples” and praised its web display for maps, charts and video that “bring the story to life and help the reader stick with the topic.” (Editor’s note: NewsPro is affiliated with Modern Healthcare and both are owned by Crain Communications.)
### BEAT REPORTING

First: April Dembosky, KQED-San Francisco  
Second: Jordan Rau, Kaiser Health News  
Third: Kay Lazar, The Boston Globe

### INVESTIGATIVE (LARGE)

First: Dangerous Doses; Sam Roe, Karisa King and Ray Long, Chicago Tribune  
Second: Suffering in Secret; Patricia Callahan and Michael J. Berens, Chicago Tribune  
Third: Investigating OxyContin; Harriet Ryan, Scott Glover and Lisa Girion, Los Angeles Times

### INVESTIGATIVE (SMALL)

First: Painkiller Profiteers; Eric Eyre, Charleston (W. Va.) Gazette-Mail  
Second: Instrumental Risk; Karen Bouffard and Joel Kurth, The Detroit News  
Third: At California Psychiatric Hospitals, Epidemic of Patients’ Assaults on Staff Goes Untreated; Liza Gross, Independent Journalist

### CONSUMER/FEATURE (LARGE)

First: The Power of Will; Billy Baker, The Boston Globe  
Third: Child’s Scraped Knee a Life or Death Matter in Venezuela; Hannah Dreier, The Associated Press

### CONSUMER/FEATURE (SMALL)

First: How Shock Therapy Is Saving Some Children with Autism; Apoorva Mandavilli, Spectrum  
Second: The Puzzle Solver: A Researcher Changes Course to Help His Son; Tracie White, Stanford Medicine magazine  
Third: On the Cusp of a Cure; Sam Kennedy, The (Allentown, Pa.) Morning Call

### BUSINESS

First: Life and Death: The Cost of the EpiPen; Staff, NBC News  
Second: Drinks, Dinners, Junkets and Jobs: How the Insurance Industry Courts State Commissioners; Michael J. Mishak and Ben Wieder, The Center for Public Integrity  
Third: Illness Inflation; John Fauber, Kristina Fiore and Matt Wynn, Milwaukee Journal Sentinel and MedPage Today

### PUBLIC HEALTH (LARGE)

First: The End of AIDS?: Jason Kane, William Brangham, Jon Cohen, PBS NewsHour, Science magazine, Pulitzer Center on Crisis Reporting  
Second: The Uncounted; Staff, Reuters  
Third: Shoot to Kill; Justin George, The Baltimore Sun

### PUBLIC HEALTH (SMALL)

First: Heroin: Killer of a Generation; Staff, The Palm Beach Post  
Second: For All They Know; Steve Friess, Undark  
Third: None

### HEALTH POLICY (LARGE)

First: Politics of Pain; Staff, The Center for Public Integrity and The Associated Press  
Second: Obamacare's Sinking Safety Net; Paul Demko, Politico  
Third: The Crisis Within; Nancy Cambria and Laurie Skrivan, St. Louis Post-Dispatch

### HEALTH POLICY (SMALL)

First: The Looming Threat of Factory-farm Superbugs; Melinda Wenner Moyer, Scientific American  
Second: Managed Care: An Iowa Family’s Journey; Chelsea Keenan, The Cedar Rapids (Iowa) Gazette  
Third: The Rumble & The Reversal; Kristen Schorsch and Claire Bushey, Crain’s Chicago Business

### TRADE PUBLICATIONS/NEWSLETTERS

First: Wounded Care; Bob Herman and Fan Fei, Modern Healthcare  
Second: The Treasures of Monkey Island; Brendan Borrell, Spectrum  
Third: Tomorrow’s Children; Erika Check Hayden, Nature
This is — or should be — a humbling report card for the 2,700 articles involved. More than half of all these articles get unsatisfactory grades on the top five criteria — rising to failing grades of 60%, 70% even 93% by criterion and article type.

Because the faucet of this flow of flawed news often gets turned on by PR news releases, we have recently announced an unprecedented new service. Rather than only offer constructive criticism of news releases after they are published, we are now willing to review and comment on news releases if they are submitted to us before publication. It’s a no-cost, no-obligation-to-follow-our-advice offer. We are doing it because we think the need to improve the flow of information to the public is that great.

Patients are harmed by imbalanced, incomplete news. To help editorial decision-makers understand why improvement is needed, we’ve begun interviewing patients in audio podcasts about how they’ve been harmed by misleading media messages. Or, in the case of a recent podcast with veteran health care journalist Howard Wolinsky about his prostate cancer diagnosis and treatment decision, the discussion focused on issues that are under-reported.

Other patient podcasts featured two women with breast cancer, the sister-in-law of a man who died of glioblastoma, a woman who runs a migraine patient support group and the director of a rare disease patient advocacy group. Each tells a story of harm caused by some form of misleading media message. These are stories that journalists and PR news release writers may rarely, if ever, hear as they write stories that tend to feature glowing success stories.

The feedback we have received from journalists and PR professionals about our reviews has been overwhelmingly positive. A sampling of what we’ve heard:

• Journalist at Top 3 newspaper: “It’s good to have critical eyes looking over these stories. Overall I think your evaluation was fair enough.”
• Journalist at Top 10 newspaper: “I agree with all the good things (and the few negative ones). Points well made, and taken.”

In summary, HealthNewsReview.org continues to try new ways of reaching and helping more journalists and PR professionals. It is gratifying to know that we are influencing more writers to think about ways to improve their work, and to improve the public dialogue about health care.

Gary Schwitzer is the founder and publisher of HealthNewsReview.org and an adjunct associate professor in the University of Minnesota School of Public Health. In 2014, the American Medical Writers Association honored him “for preeminent contributions to medical communication.”

Fusion continued from page 17

Rodriguez is particularly encouraged by the strong response being exhibited by young people from disenfranchised backgrounds to current political issues.

“[We’ve seen] uprising by young people, especially after the election, with issues that they’re concerned about in their communities — whether it’s immigration or how their health care changes for them or their family,” she said, adding that giving young journalists an opportunity to be civically engaged and build on their skills will afford them “a chance to be embedded in their community and lift up the stories of the people who are going to be directly impacted by changes in policy,” both at the federal and state levels.

“And I think it’s more important than ever that those stories get told,” she added.

Simas concurred, saying, “We are excited to have this opportunity to hopefully amplify some voices in communities that need to be heard from, that in my opinion are really on the front lines of when you talk about immigration reform and health care reform.”

FUSION MENTORS CRISTINA COSTANTINI (CENTER) AND JORGE RIVAS INSTRUCT BETTY MARQUEZ.
THE NATIONAL ACADEMY OF TELEVISION ARTS & SCIENCES FOUNDATION

NATAS Scholarships are competitive and those who have received this support are making a difference, upholding the highest standards in the industry. You can make a difference by encouraging and supporting these gifted high school and college students by making a donation to our Foundation that funds our five major scholarships.

THE NATIONAL ACADEMY OF TELEVISION ARTS AND SCIENCES FOUNDATION

The National Academy of Television Arts and Sciences is a professional association dedicated to the advancement of television and related electronic media and best known for its Emmy Awards that recognize excellence in a number of categories. The Academy has 19 local chapters that award Emmys for regional excellence and sponsor programs, seminars and award high school and college scholarships. In addition, the National Organization, through its non-profit Foundation, awards scholarships to outstanding high school seniors who intend to pursue a baccalaureate degree in communications with emphasis on any aspect of the television industry.

SCHOLARSHIPS

RANDY FALCO SCHOLARSHIP ($10,000)
Awarded to a Hispanic or Latino student pursuing a career in any aspect of the television industry.

JIM MCKAY MEMORIAL SCHOLARSHIP ($10,000)
Awarded to a student pursuing a career in sports television.

DOUGLAS W. MUMMERT SCHOLARSHIP ($10,000)
Awarded to a student pursuing a career in any aspect of the television industry, who has made a positive impact through community service.

MIKE WALLACE MEMORIAL SCHOLARSHIP ($10,000)
Awarded to a student pursuing a career in television journalism.

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stories, he can’t ignore social media, posting to Facebook, Twitter and occasionally Instagram, with Snapchat possibly in the mix for the future.

Salber noted that part of the challenge in today’s world is that, “we know our audiences on each of these platforms have different preferences for how they consume information.”

“We try to shape our outreach to maximize our reach,” she explained.

Learning how to do so is a constantly evolving process; Salber reported that, since photos embedded in tweets “increases the likelihood that the tweet will be clicked on,” now that her company makes “very short videos,” those will be included in tweets as well. “We are continuously experimenting with what type of stories do best on which platform and in what format,” she said.

De Marco pointed out that sometimes it’s a challenge to humanize complex health policy stories. “The solution for her, she said, is to “find the person to tell the story of the bigger issue.” Then the challenge becomes getting that person to open up and share difficult stories about their health-related problems. Augenbraun noted that, “all of publishing is facing the revenue challenge.” “It’s never really divorced from an economic model,” she said.

Palmer agreed, adding that “very good video equipment is expensive and you have to work closely with the business side to make sure your return on investment is there.” For him, it often boils down to a collaborative relationship with text journalists, beginning with conceptualizing the video.

“It’s better to conceive the video at the time you conceive the story, or you can end up with not enough time to produce an interesting video,” he said. “It would be helpful for health journalists to think about what the best way to bring their stories to life visually would be. Multimedia could play a bigger role in health care coverage.”

used that as a graphic in this story to illustrate the situation.”

Yet Freedom of Information requests can also have successful results. ProPublica senior reporter Charles Ornstein makes about a dozen a year, and recalled a case in 2011 when ProPublica asked for data from CMS about the drugs that doctors prescribed in Medicare’s prescription drug program, called Part D.

“Over a year of negotiation and discussion, including an in-person meeting in Baltimore, both ProPublica and CMS worked out a way in which the data could be shared, so that patients could find out whether their doctors’ prescribing habits were similar or different than peers’. We took this data, analyzed it and used it as the basis for our 2013 series called ‘The Prescribers,’ which concluded that Medicare was not doing enough to look out for unusual and dangerous prescribing by doctors,” Ornstein said. “The agency was actually willing to engage in a dialogue with us about the data we were seeking. While it was at times adversarial, it was mostly focused on coming up with a solution that worked for everyone.”

Ornstein noted that the positive experience at the time, which also included some flexibility on ProPublica’s side regarding redactions of individual Medicare beneficiaries, is something of an anomaly.

“Many agencies look for reasons to say no or to stall you,” he said. “On the negative side, we have fought the VA for nearly two years now to get internal correspondence related to Agent Orange, a chemical used to kill foliage during the Vietnam War. We sent multiple FOIA requests to the VA and followed up repeatedly — to no avail. We filed two lawsuits against the VA and have pursued this aggressively in court.”

There are no simple solutions to streamlining the process, although the Knight report points to several remedies, including increased training for government officials and requiring the government to pay the fees of news organizations who successfully sue for public documents.

“The long and short of it, to me, is that each FOIA takes a unique approach — sometimes collaborative, sometimes confrontational,” Ornstein said. “FOIA requests require care and nurturing. You have to regularly follow up on their status and you have to have a good sense of what you are looking for.”
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Congressional Quarterly’s Mershon says the hyperpolitical environment makes solid beat experience and research more valuable than ever.

“Actually read the bill text, actually read the policy, call up experts you trust on both sides of an issue, see what they say about it,” she says. “That is what I rely on to make sure I’m not dancing in partisanland.”

Despite the uncertainty, partisan spin and other challenges, journalists on the health beat have no doubt that covering health care insurance is important. “It’s more imperative on us than ever to try to help explain this to people and help them understand,” says Ideastream’s Harris-Taylor.

And after years of lonely slogs through the health policy wilderness, the heightened attention is turning health beat reporters into celebrities, followed by general assignment newbies.

“They get to know our faces and they are like, ’Oh, Erin is chasing this person, I’m going to go that way, too,’ or ’So-and-so is chasing that person, I’m going to make sure I’m in that area as well,’” says Mershon. “It’s an interesting experience to be the one people are trailing.”

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us better journalists,” said Karl Stark, assistant managing editor at the Philadelphia Inquirer and president of the AHCJ board of directors.

In workshop sessions, journalists demonstrated how to use a smartphone to create short videos or podcasts with attachments such as a RODE directional microphone and a tripod.

Cybersecurity experts recommended using the Signal app (https://whispersystems.org/) to encrypt phone calls and texts when communicating with sources. Secure Drop, a project of the Freedom of the Press Foundation (https://securedrop.org/), provides encrypted space so journalists can receive documents while ensuring that whistleblowers will be protected.

Geoffrey King, a San Francisco-based lawyer who specializes in privacy and press freedom, also advised journalists to protect their computers from tracking, malware, and intrusion by downloading browser plug-ins (uBlock https://www.ublock.org/, HTTPS Everywhere https://www.eff.org/https-everywhere and Privacy Badger https://www.eff.org/privacybadger) and using a password manager to generate stronger passwords. “By making yourself a harder target, you’re much less likely to be attacked,” he said.

Journalists also heard directly from some of the people they cover, who brought a simple but powerful message: Don’t forget our humanity.

Orlando Torres, 53, a promoter at Pulse who became stuck in the bathroom as he hid from the shooter, managed to make it to the first vigil for the victims after being released from the hospital. But he was taken aback when television network producers tried to pressure him to appear on an early morning national news show the following day.

“I felt they were not concerned about my well-being, my stress, my tiredness,” he said.

“I know this is their career. It’s part of your job,” he said. “You just have to do it respectfully.”
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‘Talking to My Grandma’

Keep it Simple When Communicating with Audiences

By Dr. John Torres

I’m fluent in three languages: Spanish, English and Medicalese. Well, technically, Medicalese isn’t an “official” language. It’s a specific dialect used by doctors to communicate, and unless you’re in the medical field, it’s likely as foreign to you as Greek is to me.

This new lingo became my primary language as a med school student and emergency medicine resident. But it wasn’t until I learned a different way of talking — something I now call “talking to my grandma” — that I understood the best way to get my message across. Not only did this change the way I practice medicine, it continues to shape my career as a TV correspondent.

Allow me to explain.

Growing up, my dad was in the Air Force, so my family moved around a lot. In high school I was fascinated by science; my biology teacher pulled me aside after class one day to ask if I’d ever considered becoming a doctor. But I wanted to follow in my father’s footsteps, so when I was accepted into the Air Force Academy I became a pilot in the Air Force. It was an incredible experience, but something was missing. I finally put in an application to the one medical school I dreamed of attending. When I was accepted into the University of New Mexico Medical School, I finally felt like I was going home.

My residency in emergency medicine is where I had the opportunity to put the pages of information I’d learned into practice — in a real environment on real people. My attending physician, the more experienced doctor in charge of a small group of us, led us around the hospital on rounds — each resident taking a turn to describe a patient’s condition and how to administer care. These conversations were a perfect exchange of Medicalese. The doctors would openly discuss the patient in this doctor-dialect — the patient passive, unable to participate. But a couple of days into my internal medicine rotation, I learned a new approach, and although I didn’t know it yet, it would alter my future.

It was my turn in the rotation. I must say, I was feeling confident. I knew this case, and I knew its symptoms. I began, “The patient is a 64-year-old woman with pyelonephritis. She came in with a temp of 103.7, and I am treating her with a third-generation cephalosporin, which is showing good results.” I looked to the doctor, expecting approval. Instead, I was met with confusion. The patient looked equally as bewildered. I began the evaluation a second time.

“She has pyelonephritis … being treated with cephalosporin …” I was stopped there.

“Huh? What does she have?” the attending asked.

“Pyelonephritis,” I replied. “What’s that?” the attending physician questioned. I felt the blood drain from my body. Was I making a terrible mistake? Was this a joke? I tried again. “Pyelonephritis … she has a kidney infection.” The attending nodded his head in agreement.

And I could feel my legs again.

“That’s right. I want you to speak to me the way you would speak to an 80-year-old,” he said. “Talk to me like you’re talking to your grandma.”

I closed my eyes and pictured my own grandma. I thought about how we often had conversations about her health and how frequently she asked me to translate her own doctors’ Medicalese. She felt more at ease when she knew what the doctors were saying above her head. I turned to the patient next to me.

“Mrs. Warner, you have a kidney infection. You’re being treated with antibiotics and you’re already doing much better.” The room relaxed. I finally got it. It was simple, but it was a light bulb moment. By “talking to my grandma” I was connecting in a way that everyone could understand, including the person it affected the most — the patient.

Years later as a practicing ER doctor, I was asked to give an on-camera report to our local news reporter about a group of teenage boys I was treating in the emergency room for the effects of a hallucinogen they had taken. I was nervous. I’d never been on TV before. The lights went on and suddenly I was live. I launched into a medical monologue about how the datura stramonium produces organic phosphates that impacts the central nervous system. When the spot ended, I knew it didn’t go well. I had a lightning-bolt realization — I was speaking Medicalese. By this point, I’d had a lot of practice “talking to my grandma” — it was a lesson I used in the hospital on a daily basis. Now I had another area of my life it was going to be key.

Today, I’m the medical correspondent for NBC News, and the sage advice I was given as a resident is more important than ever. As I address viewers nationwide, I talk to them the same way I talk to patients — the same way I talk to my own loving grandma, whose 104th birthday, by the way, we will celebrate in New Mexico this year.

Dr. John Torres is medical correspondent for NBC News.
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