



The State of Health Journalism in California

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About the Foundation

The California Health Care Foundation is dedicated to advancing meaningful, measurable improvements in the way the health care delivery system provides care to the people of California, particularly those with low incomes and those whose needs are not well served by the status quo. We work to ensure that people have access to the care they need, when they need it, at a price they can afford.

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Introduction

Comprehensive news coverage of health policy and public health issues in California is essential for a range of audiences — health officials and decisionmakers at the community, county, and state levels, as well as residents seeking critical information on matters that impact their lives. Given that California has played a trend-setting role in health-related issues, as it has in so many other domains, its experience is also relevant to stakeholders elsewhere. “If California does it, it will probably happen elsewhere,” said Victoria Colliver, a former *San Francisco Chronicle* health reporter who now covers state health policy for Politico.

Such comprehensive coverage, whether produced for local, statewide, or national audiences, depends on a robust health care journalism ecosystem with the ability and capacity to follow daily news as well as to pursue in-depth stories and investigations. The dramatic changes in the media ecosystem over the last decade have created challenges for news organizations in fulfilling these obligations. The California Health Care Foundation (CHCF) has commissioned this report to assess the state’s current health reporting landscape.

Employment in Journalism Continues to Erode

According to a [recent analysis of national employment data](#) from the Pew Research Center,¹ total newsroom jobs — in newspapers, radio, broadcast television, cable television, and digital-native media — fell 25% between 2008 and 2018, from 114,000 to 86,000. That decline was mostly driven by the loss in newspaper jobs, with a 47% drop, from 71,000 to 38,000. (This category includes jobs with newspapers’ affiliated websites.) Newsroom employment in both broadcast and cable television remained relatively stable during the same period, although broadcast radio experienced a 26% drop.

Only digital-native media organizations saw an increase in newsroom employment — an 82% rise, from 7,400 to 13,500. Without the costs of printing and delivering paper products, this emerging ecosystem boasts a variety of funding models and revenue streams. Some, like *Politico* and *BuzzFeed*, are for-profit entities. Others, like ProPublica and the Center for Investigative Reporting, have nonprofit status. Some accept advertising and produce “sponsored content,” or seek subscribers willing to pay for access to some or all content. Many rely on gifts and grants. Some new media outlets focus on a relatively well-defined domain — health policy and public health in the case of Kaiser Health News (KHN), for example — rather than being broad-based newsgathering operations.

Some of these digital-native outlets have become prominent media players in recent years. Yet this sector remains far too small to replace the positions that have disappeared. Moreover, some leading digital-native entities, such as *BuzzFeed* and *HuffPost*, have themselves pursued recent workforce reductions. As with other media, the future of many of these organizations is unclear.

The Last 10 Years in Health Journalism

The decline in health reporting capacity was already evident in March 2009, when KFF (the Kaiser Family Foundation) released a major report called [The State of Health Journalism in the U.S.](#)² According to the findings, based on an extensive set of interviews and a national survey of health journalists, this decline and other factors, including increased corporate influence on the news, were exerting a negative impact on the breadth and quality of the health content being produced and disseminated.

That report appeared at a pivotal moment — during the economic crisis and the early stages of the fight over what became the Affordable Care Act of 2010 (ACA), the largest overhaul of the health insurance

marketplace in decades. In the years since, much health-related news coverage has focused on the ACA — the political and legislative battles, the glitch-ridden introduction of the federal insurance website, the multiple court challenges, the repeal efforts. The current administration’s attempts to dismantle the law led to a surge of interest in health care issues during the 2018 election season, triggering another wave of news coverage. Given the prominence of the health care debate in the Democratic presidential primary race, that public interest is likely to continue through the 2020 campaign and, presumably, into the future.

Integral to the health reporting landscape over the last decade has been substantial philanthropic support for journalism efforts among philanthropies concerned about the changing media environment. Foundations have pursued various funding mechanisms and approaches. The Kaiser Family Foundation created Kaiser Health News, a brand-new national news organization. In California, some major foundations — besides CHCF, these include the California Wellness Foundation, The California Endowment, and the Blue Shield of California Foundation — have invested in boosting the state’s health care reporting infrastructure through fellowships, grants, training programs, and investment in news production.

The Association of Health Care Journalists (AHCJ), which has local chapters in California and across the country, has also played an instrumental role in efforts to foster robust health reporting. The organization hosts a popular annual conference and high-profile journalism awards. It also offers a range of training and fellowship opportunities, with a website providing extensive reporting tools and guidance. Not surprisingly, AHCJ has always relied strongly on philanthropic support, not least to ensure that journalists can attend its yearly gathering. CHCF has long provided funding to cover the costs for attendees from the state.

This report is based on more than two dozen interviews conducted in May and June of this year with a diverse group, including health reporters, editors, news managers, and others. Among the topics

covered: the status and diversity of the state’s health reporting workforce, the impact of the current environment on health content produced, and the role that foundation support has played in the field. (The interviews were conducted by telephone except for the one conducted by email. Respondents’ answers and statements were not fact-checked. Some respondents requested anonymity for some or all of their comments.)

The report includes the following sections:

- ▶ The Declining Capacity of the California Health Reporting Workforce
- ▶ The Impact of Media Changes on Health News Content
- ▶ Diversity in Health Reporting and the Role of Ethnic Media
- ▶ The Role of Foundation Support for Health Reporting
- ▶ Recommendations
- ▶ Conclusion

The Declining Capacity of the California Health Reporting Workforce

In recent years, health reporting capacity in California newsrooms has declined through layoffs, buyouts, and attrition, according to respondents. This downshift has led to the loss of many decades of accumulated knowledge about public health and health policy among experienced journalists. The loss has understandably compromised the ability of local and state news organizations to keep up with the onslaught of complex health-related news and information. Moreover, as newsroom staffs shrink, reporters, editors, and producers must make increasingly difficult choices about how to divide their time between two vital functions: covering daily news and pursuing more in-depth projects, such as enterprise and investigative stories.

Nationally, the newspaper industry has been hit with particularly sharp declines, a trend reflected in California's own experience. In earlier years, the state's largest metropolitan area newspapers would each have supported multiple health reporting positions — someone covering health policy, someone covering the business of health, perhaps a general assignment health reporter or someone covering consumer health. But these organizations — such as the *San Francisco Chronicle*, *Los Angeles Times*, and *San Jose Mercury News* — have slashed their health desks, said Ken Doctor, an industry analyst based in Santa Cruz. "All the major newspapers once would have had strong health beats," said Doctor.

But unlike local business or sports coverage, Doctor added, health news was often viewed as expendable because it generated less interest from advertisers — a core source of revenue. "Health coverage was seen as supplementary, as not important for advertising, so when cutting began, these beats were cut fairly quickly," he said.

When Erin Allday joined the *San Francisco Chronicle* in 2006, for example, she recalled being one of at least four reporters assigned to cover health, whether from the policy, business, consumer, or other angle. Today, she said, she is the newspaper's sole remaining health reporter. "We had a fairly big pool of people," said Allday. "With the loss in numbers, it's like a free-for-all — if it even touches 'health,' the editors give it to me and say, 'Can you do this?' So I don't have as much time to tackle all the things I'd like to do."

Other respondents expressed similar concerns about the loss of health reporting bandwidth. Reuters reporter Chad Terhune noted that the *Los Angeles Times* did not fill his position as a health care business reporter after he left to join KHN and California Healthline several years ago. Health reporters, like others, have generally been "spread thin," he said, and often have less opportunity to focus on topics of particular interest. "Instead of having to cover one or two things, reporters now have to cover four or more," said Terhune. When resources are stretched to the

maximum, the quality and quantity of health-related stories are likely to drop, he suggested.

Negative Impacts on Rural Health Reporting

While the situation is problematic in the state's metropolitan centers, respondents generally agreed that many areas, such as the Central Valley, Inland Empire, and northern counties, have experienced an even more pronounced loss of health reporting bandwidth, given the changes in local news markets. Outlets in these areas would never have been able to match the reporting capacity of their urban counterparts, yet in earlier years many would have had at least one person assigned to the health beat.

One respondent, citing this loss of reporting capacity, called such geographic regions "health policy news deserts." As a former California health care journalist noted: "A small newspaper in the Central Valley does not have the resources that it once did," referring in particular to the inability to assign a reporter to cover health full-time. Julie Makinen, executive editor of the *Desert Sun* in Palm Springs, made a similar point. "I could think of four beats for health care reporters if I had funding for them," she said. She noted, for example, that the region has a large senior population, a large LGBTQ population, a large population with HIV/AIDS, and a major medical center, each of which could sustain a full-time reporter. Instead, Makinen's staff includes only one reporter who focuses mostly on health.

Public Radio Fares Better

Amid the gloom, there are a few bright spots. Some large public radio stations, like KQED in San Francisco, have managed to retain some capacity to report on health, thanks in large part to successful fundraising from members, sponsors, and foundations, including CHCF. "We are luckily a newsroom that has resources," said Ethan Lindsey, executive editor at KQED, which has long been committed to extensive health coverage.

KQED's news strategy is to "go deep in a handful of areas where we have expertise, interest, and experience," Lindsey said. KQED reporters cover beats, including health, in small teams of three to four people called "hubs." Health-related pieces often rely on human sources telling intimate stories, and the hub structure provides journalists with enough flexibility and time to seek out such material by releasing them from some of the demands of daily news reporting. "The health hub allows reporters to find the humanity behind the story," Lindsey said.

Another CHCF grantee, KPCC, a public radio station serving greater Los Angeles, has two health reporters yet still needs to make tough choices about what to cover. "A reporter has any number of things at their plate — you are always doing triage," said Paul Glickman, senior editor of health and investigations at KPCC. The station is currently seeking to allow its health reporters to spend a portion of their time on specific areas within their larger responsibilities on the beat. "We are trying to create specialization, so that frees you up to concentrate on a particular area," Glickman said. The specializations are based in large part on the reporters' interests while also taking into account editorial needs.

Like newspapers in rural regions, smaller public radio stations outside the major metropolitan areas find themselves — not surprisingly — operating with far more constraints. Valley Public Radio in Fresno, another CHCF grantee, has a staff of three reporters, one of whom covers health. But station general manager Joe Moore said that most of the reporter's time is spent following the breaking news. "More reporting in the field and getting more human stories is something we always want to do more of, but we can't do more reporting like that in addition to following the news," he said. To provide some balance, the reporter has an opportunity to pursue one in-depth health project a year. The list of possible topics is long, said Moore, given the many complicated health issues the station should be covering but isn't, such as the spread of valley fever and the dangers of drinking water contaminated with arsenic and nitrates.

Changes at California Healthline

California Healthline (CHL), launched by CHCF in 1998 as an aggregator of health policy news, has developed into a full-fledged reporting operation with a dozen staff members and original stories from around the state. The website has long served as a key source of information for government officials and decisionmakers, policy insiders, and others in the orbit of Sacramento politics. In 2016, KHN took over responsibility for CHL, with a mandate to expand its reach and distribution network.

Even before 2016, KHN's staff expansion in California was fueled by foundation support. Funding from the Blue Shield of California Foundation and The California Endowment allowed KHN to add reporters and to increase coverage of the ACA and the state's implementation efforts. In addition to the CHL staff, KHN has several other newsroom employees in California, although all the organization's California-related content is now published under the CHL umbrella.

"When we originally started, we had no one in California," said KHN publisher David Rousseau, about the organization's 2009 founding. "Over time we started adding staff and we saw immediately that there was great national interest in what was coming out of California." The support of the other foundations, he said, "was really part of a collective recognition that fewer and fewer health reporters were talking about California issues for California and the nation, so there just weren't the number of health policy stories we were used to seeing about the country's largest state."

Respondents affirmed that CHL/KHN provides a valuable service, and they expressed appreciation for its thorough reporting, especially since the 2016 change. "Before the switchover, California Healthline could be very bureaucratic, written for a very targeted, specialized group, not accessible to lay readers," said a longtime health editor. "Afterwards, the coverage was broadened and deepened, there were more voices included, and it was more informed by the national health care debate."

Yet some cautioned that its presence could possibly have the unintended consequence of reducing the incentive of other news organizations to invest in their own health reporting staff. “It’s obviously helpful to have an organization of KHN’s stature keeping an eye on health policy in the state,” said a former health reporter. “But does it mean that other news organizations feel less compelled to look into those issues, so they then divert their scarce resources away from health coverage? That wouldn’t be surprising.”

Rousseau suggested such concerns indicated a lack of appreciation of the current economic realities. “The newsroom business model is broken, and organizations have nowhere near the revenues they used to have to support the volume and quality of journalism in all the topics they’d like to cover,” he said. “Not having to worry about creating health journalism is a net benefit. Those we work with feel that we’re collaborators, not competitors.”

The New Digital-Native Workforce

In terms of employment for the health reporting workforce, CHL/KHN has provided full-time positions for both young and more experienced California-based health journalists, some of whom formerly worked at traditional news outlets in the state. Other national organizations, like *Politico*, ProPublica, and the Center for Investigative Reporting have also brought on a few California-based journalists with health expertise. These organizations, however, do not focus solely on health-related issues, and their investigations might or might not have something to do with the state. CalMatters, a site that covers California public policy issues, has a dedicated health reporter as well as others focused on the environment, income inequality, and other areas likely to touch on health issues.

However, hiring at digital-native publications cannot replace the many reporting positions that have disappeared in the last decade. Nor can their coverage replace what people used to get in their local newspapers. Nonetheless, respondents welcomed these new entrants as evidence that California retained something of its national role as a center of media

interest, innovation, and job prospects. Chad Terhune of Reuters noted the “very encouraging explosion” of online journalism platforms. “California is better off than a lot of other states,” he said. “We still have some pretty vibrant news organizations.”

The Impact of Media Changes on Health News Content

As traditional news organizations have cut back on the resources devoted to health news, key issues have often received much less coverage than warranted, or no coverage at all. Moreover, less reporting bandwidth has also forced newsrooms and reporters themselves to choose between maintaining day-to-day news coverage or focusing on time-intensive examinations of important topics. Both of these factors have impacted the kind of health content that media outlets generate.

When making tough decisions about how staff should spend their time, many news decisionmakers prioritize issues to which their reporters can bring a sharp local focus. “When we write about a [case of West Nile virus in Modesto](#), or if we are [mapping the vaccination rates of schools in Sacramento](#) in the wake of the measles outbreak, there is an element of ‘what it means to me’ in those stories,” said Lauren Gustus, regional editor for the *Sacramento Bee* and five other McClatchy newspapers. “With respect to West Nile, it’s right here in town. With vaccines, I want to know if my kids are safe in the school they’re in.”

In California as elsewhere, a big overall shift in health news content occurred after Congress adopted the ACA, even as news organizations were downsizing. Because the new legislation represented such a huge change, noted a former California health journalist, it occupied a great deal of news space, along with related issues about access to care. “There was more focus on policy and less on consumer health or the business of local health care providers or other issues we used to focus on,” the journalist said. The simultaneous loss of health reporting positions meant that

other important health stories often received little or no coverage. In the last three years, including during the 2018 election cycle, the efforts of the Trump administration and Republicans in Congress to chip away at health insurance protections have dominated health news, often crowding out other topics, noted respondents.

The time constraints faced by health reporters have clearly impacted coverage of major issues other than the ACA. For example, the *San Francisco Chronicle* has not run much original reporting on the opioid epidemic, noted health reporter Erin Allday. “It’s one of those topics that’s gotten such massive coverage elsewhere,” she said. “If you’re going to cover it, you want to dig deep and tell a story that hasn’t been told. It’s hugely important, but what’s our San Francisco story? What do we say that hasn’t been said over and over? It takes time to figure that out.”

The Frayed Landscape for In-Depth, Community-Based Reporting

When news organizations lose reporting resources, their links to the community often shrink as well. This reduced contact undermines the possibility that reporters will identify important local stories that would otherwise not be told. “I’m an old-fashioned beat reporter,” said one respondent. “It’s useful to have someone out there listening to readers, getting tips.”

Julie Makinen, executive editor at the *Desert Sun* in Palm Springs, agreed that it takes time to cultivate local contacts and understand local concerns — and time is a rare commodity in newsrooms these days. As a result, Makinen said, many news organizations are less inclined or able than before to pursue “accountability reporting” focused on local institutions. “You can’t just parachute in and report or find a scandal story,” she said. “Usually, you find those from building up sources and smelling something fishy. If you’re not covering something regularly, you’re not going to have the opportunity to pick that up.”

Because news organizations and journalists themselves place significant value in exploring issues beyond the immediate news, some outlets manage to free reporters for deep-dive coverage of important issues by juggling responsibilities among reporters. At KQED, for example, the health team has produced longer pieces on topics like [postpartum psychosis](#) and the link between methamphetamine use and syphilis. At Capital Public Radio, a reporter spent a year exploring the [high suicide rate in Amador County](#). Such opportunities often depend on outside funding from a fellowship or grant; the Capital Public Radio project was supported through the Center for Health Journalism, a CHCF grantee, at the University of Southern California (USC).

In the absence of such support, investment in a major project often means that coverage of other topics is sharply curtailed. At the *San Francisco Chronicle*, Erin Allday spent most of a year on a project about [long-term survivors of the AIDS epidemic](#). She spent another year investigating the [promise and perils of stem cells](#). Both projects were well-received and widely read. The downside, Allday said, was that she did not write many news or in-depth stories about anything else during that period, and the *Chronicle* had no one to replace her on a regular basis. “We basically just missed a lot of stuff,” said Allday.

Respondents uniformly agreed that California news organizations could do a better job of addressing the health disparities confronting members of the state’s ethnically diverse population. They agreed as well that public health and health policy issues in the Central Valley, the Inland Empire, and the northern counties were seriously undercovered, if covered at all.

Respondents expressed mixed views on how effectively news organizations were giving voice to such persistent health-related issues as mental illness and homelessness. A few respondents suggested that coverage of such issues had reached saturation, at least in California’s larger metropolitan areas. But the *San Francisco Chronicle*’s Allday summed up the more common opinion. “There’s no way to do enough on

some of these issues, because they're so huge," she said. "They're not totally ignored, but we could always do better."

Since issues like mental illness and homelessness do not respond to simple solutions, they can be easy to overlook unless they feature in news events or research reports, said respondents. For example, homelessness routinely emerges as a campaign issue in many cities during mayoral elections. Episodes of gun violence always lead to a spate of stories related to mental illness, which otherwise does not receive significant amounts of coverage. "Reporters think mental illness is so complicated and so intractable and that there's nothing they can do about it," said one respondent. "It's not a clear issue where you can hold somebody at fault. They don't know where to start. So they start whenever there's a mass shooting."

Respondents were somewhat more positive about coverage of immigrant health. The constant political crisis over immigration and the situation on the Mexico-US border has led news organizations to explore aspects related to health, including whether undocumented immigrants should be eligible for government health insurance, they said. "That's been a big topic in California," they said. "Certainly in the last two years the debate over immigration has brought attention to the nexus of immigration and health care."

Respondents cited other topics as vital but poorly or insufficiently covered, including environmental health and climate change, occupational health, and the health care business. Last year's fires, some noted, demonstrated the importance of covering the links between climate change and public health. Exposure to pesticides is of particular concern to those working in agricultural communities throughout the state. And Chad Terhune of Reuters pointed out that, despite all the attention paid to the ACA, most people still receive health insurance through work. "There should be more coverage of the employer insurance markets, the hospitals, the drug companies, the business of medicine, and whether these organizations are serving the needs of patients and consumers," said Terhune.

A former health editor at both traditional and digital news organizations concurred with Terhune. "I think most reporters covering health are more geared toward government and health policy, and meanwhile Sutter Health is taking over the world," the editor noted. "Reporters are not generally covering the private side of health care — what private hospitals and health systems and other interests are doing to affect access to care, the cost and quality of care, with all the mergers and the corruption and the playing of the system."

Digital-Native Outlets Focus on State Health Policy

When it comes to health news content related to California, digital-native organizations like CHL/KHN, *Politico*, CalMatters, and others have stepped in to fill some of the gaps. Respondents generally considered the health coverage produced by the leading digital-native organizations — whether nonprofit or for-profit — to be trustworthy and professional. But their approach produces different kinds of stories than the locally grounded reporting from far-flung areas of the state that was more common when small news organizations in local markets had health reporters, said respondents.

Much of this digital-native health content tends to focus on policy. CalMatters, based in Sacramento, describes its mission as "explaining how California's state Capitol works and why it matters." It is read widely by policymakers and also disseminates its articles to a broader public through partnerships and collaborations with media outlets around the state. Recent health stories have focused on efforts to address the state's physician shortage, the legislature's role in curbing teen vaping, and the ins and outs of the state's expanded family leave law.

Despite the policy focus, CalMatters seeks to illustrate how decisions in Sacramento impact people's lives. That approach raises the level of the journalism, said editor David Leshner, but such stories require more time and effort. "Reporters have to connect what is happening in a story at the policy level with the

experience and voice of community sources, and that takes capacity,” Leshner said.

Politico, which places some of its state and national health coverage behind a paywall, often addresses California issues with a view toward what a national audience would find of interest. “My role is to look at what California is doing as if I were outside the state, and I’m asking, ‘Why would I care?’” said Victoria Colliver, one of the site’s two California-based health reporters, whose work often appears in *Politico*’s paywalled subscription news product. “I’m looking for stories that resonate nationally. I try to identify issues where California is doing something different. The state did a pretty good job of expanding coverage under the ACA, for example, and that’s a different story from what’s going on in other parts of the country.”

CHL/KHN produces some local stories that gain national audiences. A recent article from San Francisco included a [harrowing account of a fentanyl overdose](#) that occurred in the reporter’s presence and became one of the most viewed items on Apple News that day. But David Rousseau noted that CHL/KHN cannot, and was not established to, meet the state’s enormous need for local health news. “There are geographic areas that we cover occasionally with freelancers but where we don’t have staff,” he said. In terms of topics beyond CHL/KHN’s immediate purview, he noted that its [stories on the state’s 2018 wildfires](#) included discussions of climate change and environmental health. Yet these issues, among others, “deserve more reporting in a place like California than we’ve been able to do,” he said.

Partnerships and Collaborations Are Proliferating

In recent years, partnerships and collaborations have emerged as an increasingly common feature of the news media landscape, including in coverage of health and related issues. Respondents generally appreciated how these cross-platform, multiorganization initiatives have enabled news organizations to expand their reach by exchanging and pooling resources. The trend ranges from the decision by mainstream and

ethnic news outlets to run CHL/KHN stories to the development of group reporting projects involving content sharing between sometime-competitors, usually with one or more philanthropic funders.

Many respondents noted the new willingness of news outlets to work cooperatively in a way that benefits the audiences of all those involved. “The partnerships are great,” said Chad Terhune of Reuters. “It used to be a pride thing — we didn’t want to run other people’s stories. I think that wall has crumbled and we see that this can serve readers.” McClatchy’s *Gustus* has found that collaborative efforts can work well for the right topic. “I am encouraged by the increased collaboration, nationally and more specifically in California,” she said. “It doesn’t make as much sense today to compete as it does to collaborate.”

Gustus cited “[Destined to Burn](#),” a recent joint project by the *Sacramento Bee*, several other regional newspapers, and the Associated Press. Published in April, it focused on California’s most fire-prone areas and analyzed safety and evacuation plans. In an [editor’s note](#) accompanying the series, *Gustus* explained that the organizations worked together because of the magnitude of the problem and the need for prompt action following the Paradise fire last year. “Our goal with this collaboration is to put a spotlight on policy issues that can and should be raised in the halls of the state Capitol and by local communities that set defensible space standards and evacuation routes,” she wrote.

A current collaboration called “[The California Divide](#)” is exploring the gap between rich and poor — a theme that *Gustus* expects to yield a number of health-related stories. News organizations involved have assigned reporters to the project, with some provided through the Report for America program. (Report for America, fashioned somewhat after Teach for America, bases young journalists in newsrooms around the country.) “There is a realm of health-related storytelling to do with this topic, and it’s going to be relevant to the local audience,” said *Gustus*. As an example, the *Fresno Bee* is planning to cover dental health “and how that impacts your life,” she noted — an important issue given that many of the area’s low-income residents do

not have sufficient information about or access to dental care.

For Capital Public Radio, “collaborations are huge,” said Linnea Edmeier, managing editor for news and information. The station is currently involved in “[Uncovered California](#),” a collaboration sponsored by USC’s Center for Health Journalism to explore health policy around uninsured state residents. Capital Public Radio was alerted to the possibility by contacts at what would generally be considered a rival news organization, recalled Edmeier. (CHCF is a funder of Uncovered California.) “When an opportunity came around, they called us to let us know about last-minute funding for this joint project,” she said. “At that moment, we began collaborating with a news agency at the reporting level, something we had not figured out how to do on the management level.”

Partnerships and collaborations present the participating organizations with opportunities to leverage their strengths and expand their distribution networks, said Edmeier. In these efforts, the project’s collective digital site becomes the springboard from which people can access radio, television, podcasts, and text-based coverage, offering the collaborators a chance to attract new audiences from other media, she said.

“Everyone’s looking around,” she said. “At Capital Public Radio we’ve got audio, broadcast, and podcasts. So TV looks at us and says, ‘Hey, you want to come over here and work together?’ There’s interest because you can reach a broader audience for your work. And the digital or online aspects can connect all of us. One reason collaborations have taken off is because we recognize that the digital site or platform provides us with a common ground.”

KHN collaborates constantly with other news organizations, who are free to use its content. But KHN, which is an editorially independent program of KFF, an endowed nonprofit, has also collaborated with other donors as a way to expand its own content. “Over time, as we set up this model, we began working with other foundations that wanted to extend our model or use the newsroom that we’ve set up to create news

for a particular reason,” said publisher Rousseau. Examples include KHN’s collaborations with The California Endowment to cover ACA implementation, with the Blue Shield of California Foundation to provide national coverage of California health issues, and with CHCF to produce California Healthline.

Community Engagement Efforts on the Rise

In recent years, news organizations across the board have expanded their efforts at community engagement — a phrase that covers a broad spectrum of activities, according to news analyst Ken Doctor. “It can be as simple as obtaining feedback from readers, or you can do public service journalism where you hold public forums and talk about important issues, hopefully backed up by your own reporting,” he said. Community engagement can also include discussing ideas for stories with consumers of news and/or involving them in projects through crowdsourcing and other strategies, he said.

Doctor attributed the trend to two factors: the possibility of receiving instantaneous feedback on reporting, and the need to increase revenue from news consumers to replace the loss of advertising income. In the current environment, he said, effective community engagement strategies are key to encouraging audience members to pay for subscriptions, extra content, and other special offerings from news organizations, he said. “Reader revenue has supplanted advertising revenue as the main way to pay for journalism,” said Doctor.

Not only do news organizations track their audiences closely, many have added community engagement managers to perform a range of activities before, during, and after a story or broadcast has been disseminated. At Capital Public Radio, said Linnea Edmeier, the community engagement manager becomes involved in major projects from the earliest stages. In the case of the Amador suicide project, community engagement involved reaching out to local officials, describing the project in local media, and meeting with public health officials. This initial

outreach helped generate trust in the community and encouraged more sources to come forward, said Edmeier. Afterward, the station held a forum to present its findings to community members. “It was more than just a social media thing on Facebook,” she said.

Yet community engagement itself requires resources and, specifically, an investment of time — even just to monitor and respond to feedback. “One of the easiest ways to reach the community is through social media,” said a former editor at a health publication. “But if most of our money is dedicated to producing stories, as has been the norm in our experiences with funders, we don’t have many resources left over to also pay someone to be on top of social media, especially to the extent it would take to actually pry out some usable story ideas or information from an audience of nonjournalists.”

Diversity in Health Reporting and the Role of Ethnic Media

Respondents unanimously agreed on the state of reporting on underserved communities and the health disparities they confront: It is woefully inadequate. The reasons for this inadequate coverage, they report, are twofold. First, there are too few journalists of color, especially relative to their proportion of the population. Second, there are too few resources to adequately report on the health issues confronting the millions of Californians who live in low-income communities and communities where most residents are people of color. This resource shortage extends to ethnic media as well as to mainstream news organizations.

Too Few Journalists of Color

Historically, journalism has not been a diverse field. In 1968, the Kerner Commission report, a seminal study on race relations in the United States, noted that journalists were “basking in a white world, looking out of it, if at all, through a white man’s eyes.”³ The field has changed some, but not that much. According to a

Pew Research Center report released last year, “More than three-quarters (77%) of newsroom employees — those who work as reporters, editors, photographers and videographers in the newspaper, broadcasting, and internet publishing industries — are non-Hispanic whites.”⁴ The report did not break down the numbers by state, but the national trend did not differ from the general situation in California, as described by respondents.

According to the most recent US Census data, about 39% of the California population is Latinx, 15% is Asian, and 6.5% African American. Native Americans make up 1.6% of the population, while 0.5% are Pacific Islander and nearly 4% are of mixed race.⁵ Yet respondents reported that they did not see these numbers reflected in people reporting on the state. “I don’t see much diversity in the news media in general,” noted Maria Eraña, broadcasting director at Radio Bilingue. “Not to the level of the percentage of the population of people of color and Latinos, in newsrooms generally, or in health reporting.”

As the now-retired executive director of New America Media (formerly Pacific News Service), Sandy Close spent decades nurturing the voices of journalists of color and promoting ethnic media. Close noted in an email interview that, although mainstream newsrooms still do not reflect the population, news organizations currently “prioritize covering health issues impacting low income / communities of color more than was the case in the past.”

Yet many people in these communities are unlikely to access this coverage because they are not consumers of mainstream news products, Close added. “These media have very limited reach when it comes to low income and/or communities of color, especially those that aren’t fluent in English,” she said. In any event, the continuing lack of diversity at news organizations can undermine the accuracy of any reporting on disadvantaged communities, Close added. “Reporting stories from the inside out, and/or having cultural and linguistic competency on your reporting team, is indispensable to ensuring your perception and approach is accurate and inclusive,” she said.

As an example, Close noted that a former editor at New America Media — Ngoc Nguyen, now ethnic media editor at KHN — received a one-year fellowship in 2016 to cover the impact of Agent Orange on veterans of the Vietnamese army now living in the US. “She knew about it because of her dad, who was one of those veterans,” said Close. “Ngoc’s dogged pursuit of that story took her into hospitals and community centers where access to aging Vietnamese men was possible only because they saw her as one of them. She delivered a **first-rate story** on a totally uncovered aspect of Agent Orange.”

As a whole, respondents agreed that newsrooms urgently needed greater diversity, especially to improve coverage of communities of color. But this widespread agreement hasn’t yet resulted in newsroom staff that reflect the populations they cover. “It’s obvious that the diversity of newsrooms should be better,” said David Leshner of CalMatters. Despite extensive outreach to minority journalism organizations, he said, applicant pools remain disappointingly low in diversity. “A big help would be for philanthropy to set up programs to help bring more diversity into the field,” said Leshner. “There is a long way to go, and it’s not easy to do, but it’s enormously important.”

Foundation support for ethnic media outlets would allow experienced journalists to continue to report health news crucial to the communities they serve and also provide early career opportunities for younger journalists of color, said Nguyen, the former New America Media editor who is now KHN’s ethnic media editor. “One of the things that makes the ethnic media so valuable is that they are doing journalism for public service,” she said, noting the harsh economics of the industry. “There is no other reason.”

At the same time, Nguyen noted, support for ethnic media outlets generates long-term benefits in helping to develop a more robust reporting workforce. Smaller publications and news outlets geared to specialized audiences have always served as a training ground for those seeking to work at larger organizations, and ethnic media are no different. “Mainstream programs

need to seek diversity, and to get some of the talent from ethnic media,” said Nguyen.

Despite the currently gloomy state of diversity in the newsroom and in news coverage, the Pew Research Center report strikes a modestly hopeful note about the future. Younger journalists are a **more diverse group** than journalists older than 29, and assuming that cohort represents the future of the profession suggests that newsrooms could soon resemble the average American workplace. Yet the uncertainty that currently characterizes jobs in journalism raises the question of who can afford to enter into and remain in the profession.

Sandy Close noted that salaries for journalists reporting for ethnic media outlets in particular are strikingly low. “This is the most alarming aspect in many ways of what’s happening in the sector,” Close said. “\$35,000 to \$40,000 would be considered average with or without benefits, and often working with story quotas.” In her email, Close shared a comment from a veteran journalist for *Sing Tao Daily*, a paper for the Chinese American community. “There’s no career path for younger journalists,” the journalist told Close. “They can’t see that they’re going to be able to support families based on the meager salaries they receive.”

Too Few Resources for Reporting on Diverse Populations

Increased reporting on coverage of low-income communities, communities of color, and rural communities is crucial, given the serious health issues they confront. “Because of a variety of socioeconomic disadvantages, these populations often face significant obstacles in obtaining not only health care but basic information about health,” noted a review of ethnic media outlets commissioned in 2015 by Kaiser Health News.⁶ “Reaching them with accurate information is also crucial for the overall health of the state’s population.” [Disclosure: the authors of this report also wrote that 2015 review.]

As with diversity in the newsroom, respondents were acutely aware of these shortcomings in health

coverage. Journalists at mainstream media outlets, with their dwindling numbers of dedicated health reporters, are frustrated by a lack of time and resources to cover disadvantaged communities. Noted Erin Allday of the *San Francisco Chronicle*, “Disparities in health care among disadvantaged groups is always on my radar, and something I focus on when I can, but I can’t do as much of that as I want.”

Asked to assess how effectively mainstream news organizations report on health and health access issues for underserved communities, KQED’s Ethan Lindsey responded with a straightforward answer: “I’m always going to say not well enough.” Paul Glickman of KPCC agreed. “There could be much more, especially here, where we have such a huge population of people struggling to get by,” he said. “We are talking about millions of people.” Coverage of such communities is a priority for KPCC, but not all major news outlets share that sense of urgency, Glickman said.

The frustrations are similar at ethnic media outlets, which also have limited reporting bandwidth for health coverage. “I would say ethnic media are frustrated by not being able to cover, let alone investigate, health issues for their audiences,” said Sandy Close.

The 2015 KHN report found that ethnic media organizations were frequently unable to cover issues related to the health concerns of their audiences because of lack of reporting bandwidth and other needed resources — even though the list of issues they’d like to cover is long. According to the report, for example, topics of interest to *La Opinión* included the continuing challenges of obtaining health insurance despite the ACA because of such factors as language barriers and costly premiums even after subsidies. *La Opinión* was also interested in stories about preventive health, pregnancy, and health issues confronting women and children.

Ethnic media outlets are well placed to deliver needed health information to their communities, given the diversity of their staffs and the strong bond of trust they often enjoy with their audiences. “Many of our listeners haven’t completed high school nor are high

school graduates,” said Eraña. “They value the information they get on Radio Bilingüe, and that is maybe the only place they are getting that information, especially from someone they trust.” The health concerns of Radio Bilingüe’s listeners, many of whom are agricultural workers, are very particular to their circumstances, she added, and obtaining correct information is essential for their well-being. “When it comes to occupational health, it is very important, a matter of life and death,” she said.

Tanu Henry, managing editor of California Black Media, a network of African American newspapers, noted that there is a similarly urgent need for health reporting in African American communities across the state. “There is a severe lack of information about available health resources, healthy living, illnesses, nutrition, intervention, general wellness, parenting, pediatric care, and disease prevention,” he wrote in an email. “The alarming health disparities between the general population and the Black community — and other people of color — remain undercovered.” Like others, Henry cited shortage of personnel as a major constraint. “We, sadly, do not have the resources right now to investigate health problems across the state, or do reports that assess health care in counties or cities, or even do a deep dive into the health data and reports that are released by different departments,” he said. “It would be ideal if we were able to crunch the data, make sense of it, and relay it to our audiences in ways they can easily digest.”

Despite the dire need for health information, and their longstanding service to the community, ethnic news organizations are confronting dwindling audiences, said Nguyen. Younger people continue to abandon traditional media organizations, according to a [recent Pew report](#),⁷ with only 2% of 18- to 29-year-olds reporting that they often get their news from a newspaper. Instead, younger adults often get their news from social media (36%) or from a news website (27%). With a few exceptions, ethnic media outlets in California are not especially tech savvy or able to adapt easily to the shift from print to online media, Close said. And Nguyen noted that younger adults are abandoning the ethnic papers to which their parents

have been devoted. “Ethnic media is serving an older generation,” she said. “How do they keep serving a new generation? How do they survive?”

Current Support for Diversity Initiatives

There are some ongoing programs that seek to increase diversity in the newsroom. The Maynard Institute for Journalism Education, a national organization based in Emeryville, California, has long sought to increase the number of journalists of color, recently through training for journalists of color across the country. Its current project is a fellowship program that aims to produce a talent pipeline of 200 journalists of color in five years. The institute also trains newsrooms to report on race with more thoughtfulness and accuracy.

And some foundation projects have focused on reaching out to ethnic media and producing bilingual content. For example, the Center for Health Journalism’s ongoing “California Uncovered” effort, funded in part by CHCF, focuses on obstacles to health insurance access. The effort includes *La Opinión* and Univision among its partners, with some of the stories reported and published in Spanish. But such projects, while important, are by nature limited in scope. They aren’t intended to fill the enormous news and information gap confronting these populations.

The Role of Foundation Support for Health Reporting

Foundations are aware of the need for robust debates about public policy, and have made significant efforts to support journalism endeavors, including in the health reporting domain. Nationally and in California, this involvement has taken place through a wide range of mechanisms, from the funding of new journalism organizations to support for health reporting positions to grants and fellowships for specific projects and/or training programs.

Overall, respondents welcomed the influx of financial support from foundations concerned about news organizations’ ability to sustain robust debate about public health and health policy. “They’ve opened up the possibilities of more in-depth health reporting — all the funding for fellowships, the funding for attending conferences, the funding for training,” said one respondent. “They’ve increased opportunities for health journalists and enabled them to get buy-in from editors for bigger and more ambitious projects.”

Disparities in Distribution of Funds

According to [data](#) from the Foundation Center, foundations granted \$1.9 billion to about 2,200 media organizations nationwide between 2006 and 2015.⁸ Nearly \$274 million of those funds were distributed in California, with about 3,400 grants made to 316 recipients. The funding of nonprofit media has been generous, but much of the grant money has gone to a handful of media outlets. As a [recent report](#) from the Shorenstein Center noted, the total amount of grant monies funneled into nonprofit news organizations after the 2016 election might give the impression that the industry is thriving.⁹ But, noted the report, “those we interviewed also raised concerns about a sector that historically has depended on a dozen or so funders and the strong concentration of resources in a few news nonprofits.”

In California, large media outlets such as the Center for Investigative Reporting in Emeryville and producers of documentary films received much of the grant funding distributed between 2006 and 2015. More than 10% of the 3,400 grants to California media in the nine-year period the data cover went to the muckraking magazine *Mother Jones*. Some of the top California recipients of journalism funding have not been news organizations themselves but rather organizations focused on journalism training, such as USC.

Given these data, it appears that much of the available foundation money for journalism was effectively taken off the table by grants to larger and wealthier media outlets and organizations. The \$43 million granted to the Center for Investigative Reporting, for

instance, dwarfs the \$1.6 million given to *La Opinión* and the \$1.3 million awarded to Radio Bilingue over the same period. And yet these two long-established and well-respected outlets serve Latino communities with well-regarded journalism, providing them with essential coverage of issues overlooked by others.

The need for more coverage of these and other disadvantaged minority communities was clear to every respondent interviewed, yet resources to support media outlets that specialize in such reporting remain out of step with the need. “We always have to be looking,” Eraña said. “There is so little support for news in general, especially for public media, and even less for ethnic media.” Ngoc Nguyen, the ethnic media editor for Kaiser Health News and California Healthline, agreed. “Ethnic media outlets are serving a leadership role for their community,” she said. “I would love to see more resources to go to them, support for important stories and additional training.”

Short Grant Cycles, High Expectations

Respondents also noted that grants to journalism organizations are often not structured in ways that are fully conducive to the needs at hand, particularly in terms of the length of grant cycles, the specificity of grant requirements, and the methods of evaluating grant outcomes. Very few funders provide unrestricted core support. Some respondents thought that short-term grants sometimes ended up being a waste of time, given that it takes an investment of reporting resources to get up to speed on an issue.

“The runway to build organizational knowledge and sources for reporting is long,” one respondent said. “Two years seems like a long time. But it’s nothing.” Radio Bilingue’s Eraña pointed out that longer grants make planning — both in terms of financial and news budgets — easier as well. “Generally speaking, multiyear grants are better,” she said. “They give you stability.”

A major issue of shorter-term funding is that it can present significant challenges in demonstrating the impact

of the stories produced, which foundations routinely request at the end of the grant cycle. As Joe Moore of Central Valley Public Radio noted, “Impact is sometimes very delayed.” One common metric — whether a story has changed a law, sparked an audit, or otherwise created a response in Sacramento — might not be fully apparent until some time after the grant that generated the work has ended. In any event, lack of such an official government response does not automatically mean that a story has not been impactful in other important ways, such as changing public opinion or generating community-based actions.

In other instances, respondents noted that foundations’ expectations are often outsized, and particularly burdensome to smaller news outlets, suggesting that core support is one significant way in which foundations can assist underresourced journalism outfits. “Our organization had a grant for a year recently and we were thrilled to have it,” one respondent said. “But we had to promise to produce a certain number of stories for that grant. For a story to have a broad impact, we also need resources to promote the stories, and the site itself. The foundation didn’t give us enough resources to do that and produce the expected number of stories, but at the end of a year we were still expected to show impact.”

Foundations, in other words, don’t always calibrate their expectations to the size of the grant. “The foundations can have a small fund but then also have the expectation that you are going to change the system,” Eraña said. “The expectations need to correspond to the level of support.”

The Push to Demonstrate Impact

The push to demonstrate a particular kind of impact at the end of a grant can also have the unintended consequence of shaping agendas in the newsroom, one respondent said. “There’s a drive among funders to show impact on legislators, like to prove legislators are reading and reacting to your content,” the respondent said. “But we’re more interested in stories that have impact not just because they were aimed at legislators but because they were good stories.”

The respondents' preference was for stories chosen in line with journalism's traditional priorities, such as generating public awareness, promoting a change in attitudes, serving as a watchdog for public funds, and engaging readers.

Linnea Edmeier of Capital Public Radio said that she had recently been able to persuade a foundation to take a more nuanced approach to evaluating the results of a health reporting project. While previous assessments had been based largely on the number of stories produced, she said, the station had started to focus on producing complicated longform stories that did not lend themselves to that particular metric. "We were able to have conversations about it," she said. "And they went from a quantity-based review to a more quality-based review."

Foundations may have their own perspectives on what kind of journalism they would like to see. Many respondents thought that funders could be heavy-handed at times in seeking to influence the content produced with their support. One respondent illustrated the issue by noting that "there's a difference between being given a grant for health reporting from the Central Valley to the northern border, and being given the same grant and being told, 'And we want 10 of those stories to be about the impact of traffic pollution on lung cancer.' You can stumble across a story that's really valuable, but you have to turn away from it because you're mandated by your funder to do something else."

In a typical statement, one person involved in a collaboration said the rate of story production appeared to lag because of what seemed to be a desire to promote particular policy objectives through centralized control. "It felt like there was a very specific agenda behind the funding," the respondent said. "And part of the bottleneck in story production seemed to be the need to very tightly vet every story to align with what seemed to be the imperative of the funders. Frankly that did not feel good to me."

Another respondent echoed that concern about the content produced by some of these foundation-funded projects. "There's a disconnect when we get a story that funders think is relevant and we look at it and think, 'Well, not for us,'" the respondent said. "That's a hurdle that we face regularly. A foundation might be interested in effecting changes in some areas, and that could be great. And yet a newsroom wants to provide information that is wanted by its audience. And those two goals might or might not be in alignment."

Experience of the Center for Health Reporting

Outlets lucky enough to have had large, multiyear grants with few strings attached tell a very different story about their experience with foundation funding. Launched in 2009, the Center for Health Reporting, another program originally created with funding by CHCF and based at USC's Annenberg School for Communication and Journalism, received close to \$3 million over the course of six years. The foundation maintained a hands-off policy on editorial issues, said Richard Kipling, the project's executive director. The center was able to pursue the stories it wanted to pursue, he said, and he did not feel pressured to take any particular line or angle on an issue.

"They never told us what stories to do, they never told us what projects to do, or said, 'I think you ought to be working on this.' We had a great six-year run with no interference." The main challenge, said Kipling, was persuading news organizations to run the center's work. "We had to overcome the initial resistance from editors that we were agenda-ridden," he said. "They thought that if a health foundation is funding the work and has something it wants to see things happen, that we were there to make it happen."

In short, foundations' requirements of grantees can have a significant impact, for better or worse, on the quality of the journalism produced. One clear rule of thumb that emerged in the course of the interviews for this report was summed up by Eraña: "The more simple the support, the better."

The Center for Health Journalism and the Role of Grants and Fellowships

Foundation support has also included grants and fellowships to attend training programs and/or to pursue specific health reporting projects. More than 900 journalists, for example, have participated in one of the many intensive, in-person fellowship programs sponsored by the Center for Health Journalism at USC's Annenberg School since it launched in 2004, said founding director Michele Levander. In addition, tens of thousands of others have participated in the center's webinars or become readers of its educational content site, CenterforHealthJournalism.org, she added.

The fellowship programs, which provide training, funding for in-depth projects, and guidance from experienced mentors, have encouraged journalists to focus on a range of public health issues. These include such core concerns as the social determinants of health, health care quality, access to care, and health outcomes for children and families, as well as technical skills like data analysis. In particular, the center emphasizes "impact reporting" — that is, reporting that can trigger public debate and lead to substantive changes in health policy.

The center has always sought to include not only journalists already assigned to a health beat but anyone with an interest in the issues, said Levander. That approach has become increasingly important in recent years as the ranks of health beat reporters have thinned, she said. It has also been essential in order to engage with rural newspapers, smaller public radio stations, ethnic media, and other news organizations that are less likely than larger outlets to have anyone assigned specifically to the health beat.

"Health is something that infuses every area of our lives, and if we can get people thinking about the health and health policy implications of issues in education, in criminal justice, in business, in government, then we're serving the greater ends of why foundations are funding health journalism," said Levander. "In a perfect world we'd have many health reporters

covering all this stuff, but we're not in that world. Right now it doesn't look like we're going to see some new profit model for newsrooms. So at this moment, given the revenue issues that newsrooms are confronting, investing in building capacity whatever a person's job title seems like a worthwhile endeavor."

Levander said some journalists who have participated in the Center for Health Journalism's programs have subsequently been able to spend more of their time on health reporting. One impact of the grants and fellowships, she said, is to provide external validation that the issues being covered in fact warrant such attention. "If your newsroom is not doing as many huge projects as it used to, and then you do one on a health topic, it can send a message to the newsroom that this is worthwhile," she said. "And if it gets a big community response, that helps."

Recommendations

These recommendations summarize and synthesize the answers from respondents in light of issues and concerns that have emerged over the last decade of significant philanthropic support for health journalism. The recommendations are not mutually exclusive and do not represent alternative choices. Rather, they are a set of often-complementary suggestions that could help guide foundations in maximizing the effectiveness and impact of their programs for health journalists and health journalism.

Focus on specific geographic regions that are undercovered, such as the Central Valley, the Inland Empire, and the northern counties. Respondents uniformly agreed that some of the more rural and economically distressed areas of the state have suffered the most from the changes in the media landscape, with a significant loss of local health news coverage. Moreover, when articles involving such geographic areas appear in national or state media, they are often one-offs. What residents of these areas need is sustained, in-depth coverage that digs deep and examines the local context and realities.

Focus on topics that are undercovered or inadequately covered, such as health disparities of those in disadvantaged communities, mental illness, homelessness, environmental and occupational health, the public health impacts of climate change, and the business of health care. Respondents thought that many issues were covered well from the broad policy perspective, especially the ins and outs of the ACA and related issues. But they also noted that the health insurance overhaul has received so much coverage that it has squeezed out other important issues. Health disparities are persistently undercovered. Some complex, endemic issues, like homelessness and mental illness, tend to receive coverage only when triggered by news events or research reports. The major health issues confronting low-wage agricultural and industrial workers in the state are often overlooked, as is the impact of the private sector on health care access and quality. Last year's wildfires naturally generated some reporting on environmental health and the role of climate change, but it would be helpful if journalists had the opportunity to cover such issues before disasters occur and not only afterward.

Focus on building capacity in ethnic media. Ethnic media outlets have expertise in reporting on issues affecting people of color, and they have earned the trust of their communities. Foundations should consider developing programs that support health reporting specifically at these news organizations. Existing outlets are perpetually underfunded, and some are struggling to survive. Foundation support could stabilize these community institutions. Accurate information about health can be lifesaving, whether or not articles result in policy changes. Creating grants and other opportunities specifically for ethnic media outlets could be one of the most impactful steps foundations can take to improve health in California. Possibilities include support for student internships, reporting positions, investigative projects, and other initiatives focused on providing health coverage for these underserved populations.

Promote diversity in the health journalism workforce. The documented lack of diversity in the journalism workforce is a major factor behind the paucity of coverage of health disparities among disadvantaged populations. Respondents suggested that foundations develop programs aimed specifically at addressing this problem. Such opportunities could focus on young journalists and journalism students of color and include fellowships and scholarships, professional training, internships at ethnic or mainstream media outlets, and networking opportunities.

Explore collaborative efforts. Collaborative efforts were popular with respondents, and foundations appear to be favorably disposed toward them as well. These collaborations have involved various combinations of news organizations, who have become more open to working together than in past years, and one or multiple funders. When well-organized, agreed respondents, such collaborations can help news organizations reach broader audiences for their work.

Bolster community engagement. Community engagement is of critical importance in the current journalism age. Given the increasingly sophisticated tools available for such activities, news organizations are experimenting with a variety of ways to gather community-based information and data, disseminate findings through meetings with stakeholders, measure the impact of stories, and attract larger audiences. Helping them develop creative approaches to such outreach and assessment efforts will enable both news organizations and the foundations supporting them to better understand how to attract the audiences they seek.

Create clear expectations and consider unrestricted or core funding. Tensions have arisen when journalists believe that foundations are too directive in terms of content or have otherwise been viewed as trying to impose their perspectives. This tension is inevitable, given the differing priorities governing news organizations and foundations, but it would serve the interests of all involved to seek ways to minimize it from the start. To reduce the possibility of such complications,

it would be wise to hold frank discussions about required outcomes and the metrics used to assess them. Foundations should be careful to square their expectations with the amount of funding offered. To avoid such issues, foundations could consider providing unrestricted or core funding to trusted news organizations, which would allow them the freedom to focus on producing the best possible journalism.

Balance funding for large and small journalism outlets. The Shorenstein Center report cited earlier, the data from the Foundation Center, and respondents for this report all indicated that significant grant funding is poured into large and already wealthy news outlets. Foundations should consider distributing funds in a more equitable manner by actively tracking how much wealthier news outlets receive and ensuring that smaller but worthy journalism organizations obtain their fair share.

Conclusion

In this report on the current health reporting landscape in California, we have found that trends identified 10 years ago have intensified and reflect overall changes in the news industry. The size of the health reporting workforce has declined, with the greatest impact on newspaper employment. An increase in digital-native media has not come close to offsetting the loss of other newsroom jobs, in health reporting as in other fields.

The impact of these changes has been profound, according to respondents. With news organizations constantly understaffed, many are currently unable to provide more than some daily health coverage, with little or no reporting resources to dig deeper into important local issues. Many media outlets try to create opportunities to pursue occasional enterprise or investigative stories, but reporting resources are often stretched to the maximum. Smaller outlets in rural regions have experienced the greatest loss of health news coverage. The consensus of respondents

was that collaborative efforts and effective community engagement and outreach were needed to attain a robust health reporting environment.

Reporting on underserved populations has improved somewhat, in that mainstream journalists seem more aware of the need to cover issues such as disparities in health. Yet because of the sorts of financial pressures described in this report, this awareness has not necessarily translated into sufficient coverage of health in underresourced communities. Ethnic media outlets are also struggling financially and unable to cover health adequately for their readers, many of whom rely on these news organizations for such information.

Overall, respondents welcomed foundation interest in and support for health reporting in California. Yet they believed foundations could do more to maximize their impact. Key recommendations focused on improving coverage in underserved areas of the state, improving coverage of underserved populations and undercovered health topics, supporting ethnic media outlets and journalists of color, encouraging collaborative efforts and community engagement, and crafting philanthropic programs with care for the specific concerns of news organizations and journalists.

Appendix. Interviewees

The following individuals graciously agreed to be interviewed for this report.

Erin Allday, Reporter, *The San Francisco Chronicle*

Sandy Close, Executive Director (retired), New America Media

Victoria Colliver, Reporter, *Politico*

Ken Doctor, Media Industry Analyst

Linnea Edmeier, Managing Editor, Capital Public Radio

María Eraña, Director of Broadcast, Radio Bilingüe

Paul Glickman, Senior Editor, KPCC

Lauren Gustus, Regional Editor, McClatchy

Tanu Henry, Managing Editor, California Black Media

Richard Kipling, Executive Director, Center for Health Reporting

Dave Lescher, Editor-in-Chief, Calmatters

Michelle Levander, Founding Director, Center for Health Journalism

Ethan Lindsay, Executive Editor, News, KQED

Julie Makinen, Executive Editor, *The Desert Sun*

Joe Moore, General Manager, Valley Public Radio

Ngoc Nguyen, Ethnic Media Editor, Kaiser Health News

David Rousseau, Publisher, Kaiser Health News

Chad Terhune, Reporter, *Reuters*

Endnotes

1. Elizabeth Grieco, "U.S. Newsroom Employment Has Dropped by a Quarter Since 2008, with Greatest Decline at Newspapers," Pew Research Center, July 9, 2019.
2. Gary Schwitzer, "The State of Health Journalism in the U.S.: A Report to the Kaiser Family Foundation," KFF, March 2009.
3. *Report of the National Advisory Commission on Civil Disorders*, US Government Publishing Office, 1968.
4. Elizabeth Grieco, "Newsroom Employees Are Less Diverse Than U.S. Workers Overall," Pew Research Center, November 2, 2018.
5. "QuickFacts California," US Census Bureau.
6. Heather Gilligan and David Tuller, "Report for Kaiser Health News: Ethnic Media in California" (unpublished), October 2015.
7. Elisa Shearer, "Social Media Outpaces Print Newspapers in the U.S. as a News Source," Pew Research Center, December 10, 2018.
8. "Foundation Maps," Foundation Center, n.d.
9. Matthew Nisbet et al., "Funding the News: Foundations and Nonprofit Media," Shorenstein Center on Media, Politics and Public Policy, June 18, 2018.