Tips for covering COVID-19 in Fall 2023

As misinformation — and misunderstanding — continues to circulate about COVID-19, journalists remain essential in providing crucial information to communities about the prevalence of the disease, the risks of infection, and how to prevent and treat COVID-19 illness.

Bara Vaida, a health journalist before joining the NPCJI as its director of training, wrote this tip sheet to help reporters find accurate data, vetted subject matter experts, and story ideas for covering COVID-19 this fall and winter.

Where to find national and local data

Finding national, state, and local data has become more challenging since the end of the public health emergency in May 2023, but here are some places to look. (Here’s why the Centers for Disease Control and Prevention stopped collecting data.)

- **CDC COVID-19 Trends Dashboard**: national, state, and county weekly data on hospital admissions, emergency room visits, deaths, and test positivity rates. It also has maps for visualization.

- **The CDC National Wastewater Surveillance Network dashboard**: SARS-CoV-2, the virus that causes COVID-19, can be shed through human waste and is an early indicator of COVID-19’s rising presence in a community. BioBot Analytics, which provides data to the CDC, has its own dashboard enabling journalists to drill into county data and includes some data from private customers.

- **COVID-19 Data Dispatch**: This site is written by health, science and data journalist Betsy Ladyzhets and has a wealth of information and resources about the latest on COVID-19 data.

- **COVID Variant Tracking**: The CDC publishes this summary of virus variants, highlighting when one has emerged that may bear watching.

- **Remember to report numbers in the context of historical trends**: The dashboards showed a steady rise in new hospitalizations throughout August, but they were significantly lower than a year ago. For the week ending Sept. 2, there were 18,871 hospital admissions and 286 deaths, compared to 34,546 hospitalizations and 262 deaths in the same period in 2022. The numbers suggest COVID-19 isn’t causing as severe illness as it was a year ago, but it is still deadly for hundreds of people.
Remind people, especially high-risk individuals, of COVID-19 risks.

Because the virus mutates and immunity wanes over time, the disease remains a threat.

- **Who is most at risk?** [This CDC slide deck has](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/who.html) the most up-to-date information showing a breakdown on which groups of people are most at risk of being hospitalized with COVID-19 as of mid-2023. The list of high-risk includes people 65 and older, children six months and younger, and those 18 and older with underlying conditions like cardiovascular disease, diabetes, obesity, and chronic lung diseases.

- **Story idea:** [Only 43.3 percent of those older than 65 have received an updated vaccine dose](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/who.html), even though they are the most likely to benefit. Why? What are your local nursing homes doing to protect residents this year?

- **Long COVID:** [This CDC slide shows](https://www.cdc.gov/coronavirus/2019-ncov/covid-updates/new-cases.html) that in the range of 0.2 percent to 9 percent of people have reported lingering symptoms four weeks after COVID-19 infection. The percentage of those reporting long-COVID has fallen significantly in 2023, especially among those who have been vaccinated. [Another recent study of U.S. veterans](https://www.cdc.gov/coronavirus/2019-ncov/covid-updates/new-cases.html) showed that some people were at higher risk of developing other health conditions after COVID-19 infection and reinfection.

- **Story idea:** The medical community is still grappling with their understanding of long COVID, but millions of people are still suffering. Tell their story to keep the spotlight on this topic, and [read health journalist Tara Haelle’s ‘Long Covid Connection’ in Medium](https://www.cdc.gov/coronavirus/2019-ncov/covid-updates/new-cases.html).

**Prevention and treatment information**

There is no magic bullet for preventing COVID-19. Vaccines, anti-virals, and, especially when cases are surging, masks can help prevent severe infection. Here are some resources.

- **Vaccines:** On Sept. 12, the Food and Drug Administration and the Centers for Disease Control and Prevention approved two new COVID-19 vaccines. The vaccine protects against currently circulating variants of the COVID-19 virus and will be available at pharmacies, some doctor’s offices, and clinics. See Mayo Clinic infectious disease physician [Dr. Priya Sampathkumar answer questions about recently approved vaccines](https://www.cdc.gov/coronavirus/2019-ncov/covid-updates/new-cases.html). (Media can use content freely as long as credit is given to the Mayo Clinic). A third vaccine is likely to be available in the coming weeks. [The Washington Post has a good Q&A on all the vaccines](https://www.cdc.gov/coronavirus/2019-ncov/covid-updates/new-cases.html).
• **Treatments**: Write about the current treatments for COVID-19 infections. Many people aren’t aware of them even though they may cut short the duration of infection and prevent hospitalization. Read 13 Things to Know about Paxlovid, the latest COVID-19 pill.

• **Masking**: No one thinks a federal and state mandate requiring broad mask-wearing will return. But a comprehensive August 2023 study shows they can reduce transmission and prevent infection. If you are going to write about face masks, talk to Virginia Tech professor and environmental engineer Linsey Marr. She is one of the top U.S. experts on air ventilation and which face masks work and which don’t.

• **Testing**: At-home testing is still important. It prevents spread and ensures people get treatment as soon as possible. For when and how to test for COVID-19: See NBC News’s recent Q&A. Beginning on Sept. 25, the government will begin mailing out four free COVID tests: Go to COVID.gov to sign up. For a media-savvy testing expert: Mara Aspinall, professor of practice in biomedical diagnostics at Arizona State University.

**Write about vaccine access and health equity.**

This year’s rollout of vaccines is the first since the end of the public health emergency ended, and that means the government is no longer guaranteeing access to the vaccine or to cover the costs. (Doses are expected to cost around $120 to $130). Americans, especially those without access to a regular physician or health insurance, will need help finding vaccines and getting them covered.

• **Where to get vaccines**: Watch or read the transcript of a Sept. 12 National Press Foundation webinar on covering COVID-19 vaccines. Read: “How are COVID-19 vaccines covered by insurance.” Also, vaccine availability can be found at Vaccines.gov.

• **Alternate payors**: The CDC has launched a $1.1 billion “Bridge Access Program” to pay for vaccines for an estimated 25 million to 35 million uninsured or underinsured. People may not know they have access to this program. Read: “Vaccinating the uninsured again will be tougher, experts say.”

• **Reach out to local public health departments** on their plans for rolling out vaccines. Here’s an example of how one local Wisconsin public health department is reacting. See the National Association of County and City Health Officials directory to find your local public health department.

**Finding vetted and diverse experts**
Be careful about picking expert sources. Make sure their expertise aligns with the topic you are writing about. Just because someone is a physician or a scientist doesn’t mean they are an expert in infectious diseases. Here are a few places to find vetted experts:

- **50 COVID-19 Experts**: The list from Medium is from 2020, but it’s still relevant.
- **COVID Misinformation Playbook**: A list of COVID-19 experts, resources, and fact-checking guides published by the Online Media Association.
- **Open Notebook’s diverse source guide**: Tips for finding diverse sources for science stories.
- **SciLine**: This resource for journalists will help you quickly find vetted experts for your stories. Contact them at sciline@aaas.org.
- **The Infectious Disease Society of America** holds regular briefings on infectious disease issues for the media and will quickly find an on-the-record expert for your reporting. Contact Sara Matthews: smatthews@messengerpartners.org.
- **Your Local Epidemiologist**: This Substack newsletter written by epidemiologist Katelyn Jetelina is worth subscribing to. Her explanations of what consumers need to know about COVID-19 and other infectious diseases is accurate, clear, and helpful.
- **Association for Health Care Journalists COVID-19 resources**: List of expert names is behind a paywall, but if you are new to health journalism, consider becoming a member, it’s worth the $60 ($30 for students) for the wealth of support and information you will find here.

*Contact: Bara Vaida, Director of Training, bvaida@press.org. Did we miss a resource? Let us know, we’d love to hear from you.*

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