



# COVID-19 REPORTING GUIDELINES

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## CREDITS

These guidelines are based on recommendations from the [Ethical Journalism Network](#) and [First Draft](#) as well as IMS' own ethical guidelines.

- **FIRST DRAFT:** [Tips for reporting on Covid-19 & slowing the spread of misinformation](#)
- **EJN:** [Media ethics, safety and mental health: reporting in the time of Covid-19](#)

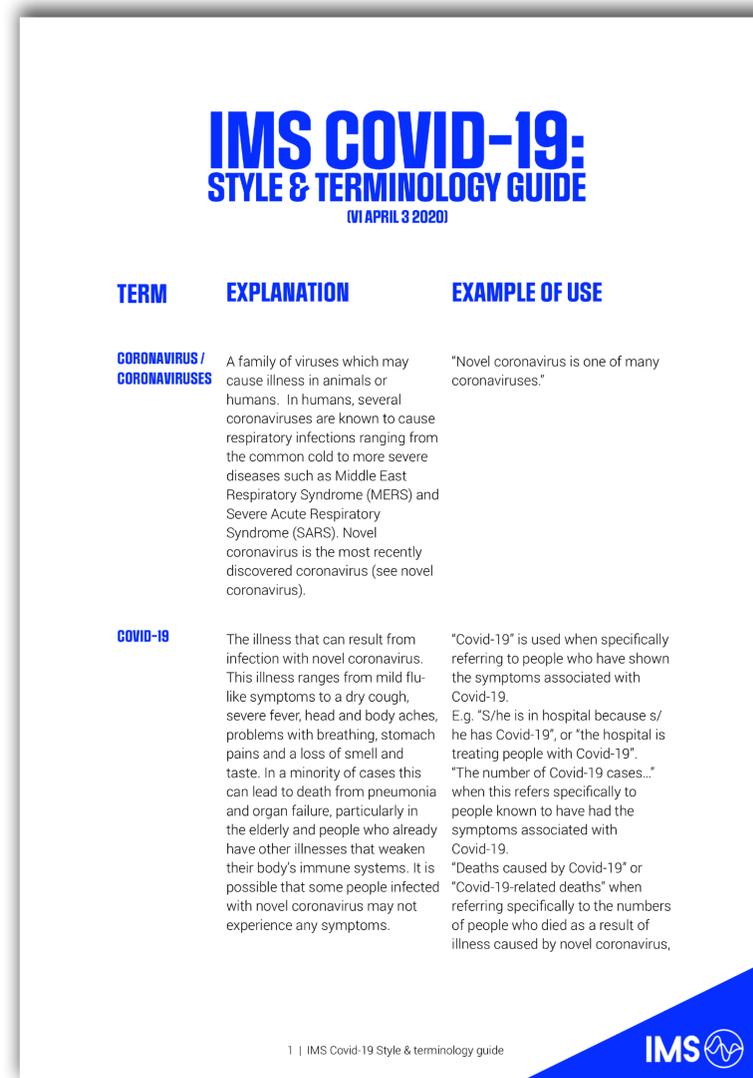
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International Media Support (IMS) is a not-for-profit supporting local media in countries affected by armed conflict, insecurity and political transition.



# STYLE & TERMINOLOGY GUIDE

Clarity about coronavirus terms could save lives. David Lush, Head of Organisational Learning & Development, at IMS, [explains how](#).



Click the image to download the guide

# SOURCES

- Seek the view of experts with relevant credentials, but do not rely only on experts and official sources.
- Always try to talk to more than one expert, as people with different expertise will see the disease from different angles.
- Remember that scientific advice is frequently changing, so correct and update the coverage if necessary.
- Where possible, balance expert opinions by also reporting on the experiences of people infected and directly affected by the disease while respecting the following point (Protect affected people) and without compromising their and media workers' safety. The experiences of people infected and affected by the disease help audiences relate to the disease and its consequences.

# PROTECT AFFECTED PEOPLE

- Do not identify names, images or identifying material without the permission of the relevant people.
- High-profile individuals who reveal publicly they have been personally affected by Covid-19 can be deemed to have given their permission.
- Consent should be sought from people who are not usually in the public eye, even if they have spoken about their personal experience of the disease on social media, to other media outlets or with other people.

# PROVIDE CONTEXT

- Point people to authoritative and credible information sources and resources

# REFLECT DIVERSITY

- The disease affects men and women in different ways.
- Different sections of society may experience a disease in various ways, depending on factors such as their age, health, economic status, religious and cultural beliefs, where they live and how they self-identify.
- Always look for and try to explain these differences and find sources who can identify with and speak about these varied experiences with credibility.

# BE ACCURATE

- Apply usual journalistic techniques for checking facts and verifying sources, including those provided by official sources.

# BE MINDFUL OF IMAGERY & DESIGN

- Think carefully about photos or images and put them into context. Try to steer clear of stock images that feed stereotypes.
- Before using a photo of an Asian person wearing a face mask, for example, ask how this image is relevant to your story. Are the subjects of your story Asian? Is your story about the efficacy of face masks in preventing the spread of the virus?
- The Asian American Journalists Association has issued [helpful guidance](#) on avoiding fuelling xenophobia and racism in Covid-19 reporting. Visualisations should be accurate and avoid stoking fear.
- (See Kenneth Field's ArcGSI blog post about [mapping coronavirus responsibly](#) and First Draft's recent article on [misleading maps](#)).

# GIVE AUDIENCES SPECIFIC ACTIONS

- Uncertainty can make audience members uncomfortable, which in turn makes them more vulnerable to confident-sounding misinformation.
- Highlight expert-approved actions to prevent the spread of the virus, as well as constructive action taken by individuals, groups and communities to address challenges posed by the disease.

# BE CAUTIOUS ABOUT THE RESEARCH

- There has been a proliferation of “pre-prints” on Covid-19 since the outbreak began – scientific papers that have not yet been peer reviewed. While some pre-prints can provide useful information on the latest research, some promote spurious claims that should not be amplified. If using pre-prints to inform your reporting, ask an independent expert for their opinion of the findings.

# THINK ABOUT THE TIPPING POINT

When deciding which rumours to address, avoid drawing attention to rumours if they are circulating only in niche communities or have received little engagement. Here are five questions for determining whether a rumour has reached the “[tipping point](#)”:

- How much engagement has the rumour received, and how do these numbers compare to similar content on the platform?
- Is the discussion around the rumour limited to one community online?
- Has the rumour jumped platforms?
- Did an influencer or verified account share the rumour?
- Have large media outlets covered the rumour?

If you do decide to debunk a rumour, focus on the facts, particularly in headlines and tweets

# DIRECT AUDIENCES TO OFFICIAL SOURCES

- Expert sources like the [World Health Organisation](#) will have the best information for audiences.
- Build up reader confidence in [verified](#) and trustworthy health organisations and health professionals, so your audience knows who to turn to for future recommendations.

**AVOID**

# SENSATIONALISM & SCAREMONGERING

Avoid language and images that could heighten anxiety, for instance pictures of empty supermarket shelves, stockpiling which can inflame tensions and create more panic. Emotional phrases such as “no end in sight”, “turmoil”, “killer” and “catastrophe” might draw clicks, but they can also contribute to a sense of growing panic, which [health officials](#), [epidemiologists](#) and [virologists](#) warn is exactly the opposite of the calm that is needed.

## STEREOTYPING

Avoid using images, sources and story angles that re-enforce stereotypes. E.g. be mindful not to always chose exhausted or desperate female nurses and authoritative male experts and doctors. Be conscious not to portray female health care workers in a way that detracts from their professionalism, as in the case of the “[beautiful warriors](#)” in China:

# RIDICULE OR DEROGATORY LANGUAGE

- People's fears about the virus are genuine, even if some of the theories are misguided. A false cure may seem irrational but calling it "bizarre" or "outlandish" might alienate readers or cause them to double down on their beliefs.
- Anxiety is a very normal reaction in uncertain situations, which journalists can better address with empathy rather than judgment.

# SPECULATING

- Don't ask experts to speculate about worst-case scenarios. Similarly, encouraging experts or sources to give speculative or sensational quotes does not always help readers. Focus on what is known about the disease.



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