



Mary Harris, courtesy WYNC Studios, New York Public Radio.

Teaching LJ. . .

Empathetic Addiction Narratives: A Case Study of *This American Life*'s "The Call"

By Jacqueline Marino

In December 2022, journalist Mary Harris was attending a Zoom training session about how to use Narcan, a medication that can save someone from an opioid overdose, when she first heard of the Never Use Alone hotline. If a person who is about to use drugs in the United States calls the line, an operator will stay on the call with them and alert Emergency Medical Services if they overdose. Harris, who hosts *Slate*'s daily podcast, "What's Next," thought: *It would be cool to hear those calls.*¹

She had previously covered public health as a reporter at WNYC, where she said she liked reporting stories about people on the margins of addiction and challenging assumptions about drug use. So, she started talking to people at Never Use Alone. When she spoke with Jessie, a nurse who was an operator on the line, she knew she had found the right person to help her audience understand this controversial but effective harm reduction method.

Jessie was like, "When you first get on the line with me, I want you to be talking in clear, large block letters—like print, like you're a first grader writing on the chalkboard," Harris recalls. "And then maybe you're going to do a little drug, so you're maybe talking cursive. That's fine. What I don't want is you to be talking in hieroglyphics. . . ." It was a very crisp, clear analogy and metaphor. She has a beautiful voice, she's a great storyteller, and she can speak in these metaphors that are accessible.²

Harris began working on the Never Use Alone story as a side project. Almost a year later, in September 2023, "The Call" aired on the public radio program and podcast *This American Life*.³ It chronicled what happened when a woman named Kimber called the line, injected heroin likely laced with fentanyl while speaking with Jessie, and was revived from an overdose by Stephen, the emergency services worker who responded to Jessie's 911 call. Listening to the story is like reading a novel—the way many have described

the experience of reading works of literary journalism. “The Call” is full of plot twists, character revelations, and emotional insights. It can be studied as an example of how to report on addiction in a way that’s both compelling and responsible. At a time when journalists are more aware of the harm caused by doing the most basic reporting on addiction, “The Call” offers lessons on how literary journalism on addiction can be effectively and ethically reported, written, and produced.

Shift from Stigma to Science

In 2023, 16.7 percent of Americans twelve and older met criteria for a substance abuse disorder in the previous year.⁴ As Harris points out in “The Call,” for a while it was more likely for an American to die of an accidental opioid overdose than in a car accident.⁵ In November 2024, the Centers for Disease Control and Prevention reported a twenty-four percent decline in opioid deaths in the prior twelve-month period, the fewest overdose deaths recorded in a year since June 2020. Still, about 87,000 people died from drug overdoses in that year,⁶ and the strain substance abuse disorders places on families and communities is intense and lasting. News organizations have even created addiction beats,⁷ and stories on addiction issues are published and aired in a steady stream.

Pressure to improve addiction reporting began during the opioid epidemic in the 2010s. Back then, the Appalachian region was one of the hardest-hit areas of the country. Addiction researcher Jonathan J. K. Stoltman likened some of the addiction reporting from that time to the “voyeuristic ruin porn”⁸ coverage of Rust Belt areas like Detroit in 2005–06, much of it from outside reporters parachuting in and not really spending time to understand the place or the people there. In 2017, the Associated Press updated some of its *Stylebook* language to reflect the current understanding of addiction as a treatable chronic brain disease, but experts say it didn’t go far enough.⁹ Even now, “current reporting on addiction has been shown to negatively affect individuals, create barriers to treatment and during recovery, and lead to harmful policies for people who use drugs, are seeking treatment, or are in recovery.”¹⁰ Surface-level journalism that isn’t reported from a medical or public health perspective can perpetuate addiction stigma,¹¹ which is “persistent, pervasive, and rooted in the belief that addiction is a personal choice reflecting a lack of willpower and a moral failing.”¹² Stigma can result in people with drug use disorders not seeking the help they need and lead to discrimination against them.¹³ Stigma can also make community members distrust harm reduction programs, despite their documented effectiveness, and provoke backlash against them.¹⁴

Stigmatizing terms when referencing addiction and those with substance abuse disorders have been pervasive.¹⁵ Authors of one study published in the journal *Preventative Medicine* found forty-nine percent of news stories published about the opioid epidemic over a ten-year period mentioned a stigmatizing term, while only two percent mentioned a less-stigmatizing one. The proportion of those with stigmatizing terms increased from thirty-seven percent in during the period June 2008–June 2009 to forty-five percent during July 2017–June 2018. “The language included in U.S. news media coverage of the opioid epidemic may contribute to and reinforce widespread public stigma toward people with opioid use disorders,” the study authors concluded. “This stigma may be a barrier to implementation of evidence-based interventions to prevent opioid overdose deaths. Establishing journalistic standards to de-stigmatize the language of addiction is a public health priority.”¹⁶

In addition to stigmatizing language, the reporting on addiction often includes misrepresentations and inaccuracies. Stoltman was a doctoral student at West Virginia University when he contacted the local public radio station about some inaccurate addiction reporting. After that, WVU faculty member Ashton Marra asked him to speak to students in her advanced visual storytelling course, which was working on a reporting project with Morgan State University about both the impact and coverage of the opioid epidemic. In 2021, Marra and Stoltman started the nonprofit Reporting on Addiction, “an addiction science, policy and media partnership.”¹⁷ It was a collaboration between their two organizations—the nonprofit newsroom 100 Days in Appalachia, where Marra, now a WVU teaching assistant professor, was executive editor from 2018–24, and the Opioid Policy Institute that Stoltman directs. The organization helps reporters learn more about the brain disease that is addiction, and in turn, reduce the harm and stigma that comes from erroneous and unethical reporting methods.¹⁸

“Our goal is to make media representations more accurate, empathetic, and humane,” Stoltman, Marra, and their co-authors wrote in an article about creating Reporting on Addiction. “To do so, we have developed a multi-pronged intervention including technical assistance for professional journalists, student journalists, experts through training, and experts through experience (i.e., people with lived experience).”¹⁹ For journalists (including student journalists), in addition to their recommendations, they provide newsroom and journalism educator trainings, as well as one-on-one support.²⁰ They also created a vetted database of experts, so journalists can always find someone with addiction expertise to call.²¹ The guidelines promote “trauma-informed” and “empathy-based” standards modeled after guidelines for reporting on suicide developed by mental health organizations and journalism groups.

Researchers have found these standards can be effective at reducing “suicide contagion,” the documented trend of suicide reports causing more people to attempt taking their own life.²²

The Reporting on Addiction (ROA) standards recognize that people who have had substance abuse disorders have been traumatized by those experiences. Students reporting on addiction should be advised to approach these potential sources with empathy—ask open-ended questions and provide context to their audiences by gaining an understanding of their lived experiences.²³

Empathy as the Guiding Principle

As a professor who studies and teaches literary journalism, the Reporting on Addiction guidelines feel very familiar. Literary journalists often approach their subjects with empathy. The goal of the work is both experiential and interpretive—and only achievable with a great deal of time spent with the subjects and, usually, immersed in their worlds. As Mark Kramer wrote, literary journalism has been a “you-know-it-when-you-see-it form.”²⁴ Among those who have attempted to define it are Thomas Connery (“nonfiction printed prose whose verifiable content is shaped and transformed into a story or sketch by use of narrative and rhetorical techniques generally associated with fiction”),²⁵ Kevin Kerrane and Ben Yagoda (journalism that is “thoughtfully, artfully and valuably innovative”)²⁶ and, more recently, Johnathan D. Fitzgerald (“fact-based, narrative news reporting that engenders empathy in readers for authors and their subjects”).²⁷ Robert Boynton writes, “acts of literary journalism occur when one explores the factual world in an imaginative manner, the goal being to redescribe and comment on it in story form.”²⁸ Boynton has also compared literary journalism to jazz, “another improvisational, outsider pursuit.”²⁹ If the literary journalist is working for a media organization with an ethics policy, they will have to meet those expectations. But, perhaps because of the diffuse nature of the reporting and writing styles of its practitioners, literary journalism has never had an accepted code of ethics. Instead, literary journalists often create their own personal standards based in the ethics codes of other organizations, both in journalism and in related disciplines, such as ethnography.

The ROA best practices and recommendations are another valuable resource for literary journalists. Given the evidence-based research on what harm can come from the patchwork quilt of ethics considerations of the past, those of us who teach literary journalism have the responsibility to share these guidelines with our students for debate and discussion, the same as we’ve always done with older codes, such as the Society of Professional Journalists Code of Ethics.³⁰

I wish I had had some guidance in addiction coverage when I began working as a reporter in the 1990s. Back then, I rarely thought of the harm my actions could bring to my sources. Inspired by Hunter S. Thompson and Gonzo stunts of my editors' generation (the 1970s), I was always thinking about the story first, how it could stand out and what I could do to find the most compelling characters and the most evocative scenes. At one alternative newsweekly where I worked, I jumped at the opportunity to watch someone shoot heroin because that seemed like the edgy thing to do—it was only after I got there that I felt I had made a big mistake. What social value could come from describing what I saw? What if someone with an addiction was triggered by reading it? Unfortunately, there were no ethics guidelines at the paper where I worked. I don't even recall talking to my editor about what harm might come to my readers, my sources, or even myself from witnessing that scene.

Before I told Mary Harris about Reporting on Addiction, she had never heard of the organization or read their recommendations. Years of experience covering addiction has helped her approach her sources with sensitivity and honesty. "I do think it is important for journos to ask themselves if they are punching up or down," she wrote in a text. "We don't do a lot of good punching down at marginalized groups." She said journalists can't promise "no harm" to any subject but they can "avoid flattening their humanity."³¹

Yet "Do No Harm" is the goal Reporting on Addiction wants journalists to achieve.³²

The very act of interviewing someone who uses drugs or is in recovery could be harmful. They face "severe threats to their autonomy and well-being when talking to the media."³³ Relapses happen. According to the Reporting on Addiction Journalist Toolkit for Trauma-informed and Empathy-based Reporting, "*These risks are not hypothetical or hyperbolic*," the authors wrote. "There are many examples in case law."³⁴

For this reason, among others, those with addiction and their families should be afforded the same care and consideration we typically offer to other vulnerable groups, including survivors of sexual abuse. Traditionally, journalists have withheld their real names when writing about them, but current trauma-informed guidelines go much farther. The Dart Center for Trauma and Journalism has developed guidelines for best practices in covering gender-based violence (GBV). They include the necessity of researching the circumstances of the violence your sources have experienced, recognizing the risks the sources are taking in the act of participating in the interview, and respecting their right to not answer questions.³⁵

Some of these guidelines seem necessary for journalists to earn the trust

of both their sources and their audience, but for journalists steeped in the “social responsibility” theory of the press, some may seem like outsider overreach. As the American press evolved from partisan fealty to a commitment to the public interest at the end of the nineteenth century, journalists resisted actions that suggested personal bias, such as loyalty to a source over the audience.³⁶ The “overriding ethic of social responsibility is respect for the audience.”³⁷

Regardless of which stakeholder a journalist privileges, the guidelines hold that the story is not the most important thing. According to the Journalist Toolkit, “The person in front of you is more important than the story in front of you.”³⁸ Sometimes, however, the fear a line of questioning could cause harm conflicts with the journalistic obligation to check the facts. For instance, Harris knew she had to factcheck what Jessie told her about her daughter, Kaylen, someone with a substance abuse disorder who had called the Never Use Alone hotline herself (but with other operators, not her mother). Could being asked questions about what her mother had told Harris about the lowest points of her life have caused harm? Harris couldn’t know, but she had a journalistic obligation to factcheck those stories with her.³⁹

Anyone worried about potential threats to journalists’ independence should take solace in knowing the Reporting on Addiction guidelines, like other ethics recommendations discussed in this article, are collaborations between journalists who don’t want to harm vulnerable groups and experts through training or lived experience who understand the trauma reporting can cause to sources.⁴⁰ Yet, “Do no harm” feels impossible. There is no crystal ball that can tell a journalist which question might unmoor a source or make them want to use drugs again, for instance.

But Stoltman maintains that if you aim to do no harm, rather than lessen harm, it’s more likely you’ll succeed in doing no harm. “If [the goal] is do less harm the idea there is I told the story, I was accurate with the story,” he said. “Did I check all the boxes of good journalism? Maybe. But if the result is that person got kicked out of their house, then you probably could have told the story in a way that was still impactful, that didn’t result in that.”⁴¹

In a chapter in the book, *Insights on Literary Journalism*, Julie Wheelwright illuminates the problem of literary journalism practice “in seeking to balance the principle of ‘do no harm’ to vulnerable subjects in GBV coverage alongside the commercial impulse towards sensational coverage.”⁴² Referencing the guidelines “Reporting on Sexual Violence in Conflict,” she argues that literary journalists must reject “a neutral position in considering victim-survivors, understand its broader context, and avoid sensationalistic language.”⁴³

Reporting on Addiction guidelines, in contrast, do not suggest that jour-

nalists should be advocates for people with substance abuse disorders, only that they be accurate (evidence-based), informed about the potential harms reporting on this population can cause, and sensitive about how they report on them.⁴⁴ However, journalists themselves may choose to report on these subjects in a way that advocates would champion. “Journalists have an obligation to exercise their personal conscience,” write Bill Kovach and Tom Rosenstiel in *The Elements of Journalism*.⁴⁵ Objectivity is often held as the key journalistic value, but I argue another value—minimizing (or alleviating) harm—is greater when reporting on vulnerable subjects. There is no other side when it comes to reporting on addiction. No one wants to become addicted to a drug. ROA reminds us that addiction is a chronic health disorder, and recovery is possible. Like many other chronic conditions, including diabetes, addiction is treatable. A journalist would not report on other chronic health conditions in a way that would stigmatize people with those conditions, so why would that journalist treat someone with addiction any differently?

Reporting on Addiction has several resources for journalists. The following guidelines are from their Best Practices and Recommendations for Ethical Reporting on Addiction:⁴⁶

- Report on addiction as a public health issue and a chronically relapsing brain disease;
- Use person-first language (not “addict,” but “person with a substance abuse disorder”);
- Include treatment resources;
- Emphasize hope;
- Ask experts;
- Provide context to help audiences understand what’s opinion and what’s fact.

And here are additional guidelines—and one repeated—from their Journalist Toolkit on trauma-informed, empathy-based reporting:⁴⁷

- Get informed consent (before interviewing begins);
- Recognize the power imbalance;
- Remember person first;
- Keep in touch as the story progresses;
- Recognize your source may change their mind—and that’s OK.

Most of these guidelines intersect with literary journalism practices in either straightforward or complicated ways. To explain how journalists can work through them, examples from “The Call” will be used. How Harris and

This American Life mostly avoided using stigmatizing language, which ROA explains in its language style guide, will also be addressed.

Story Angle

An angle is the approach the journalist takes on a story.⁴⁸ It offers the frame through which the story can be understood and is grounded in news values, such as human interest or impact on a potential audience. Literary journalists put much stake in the angles they choose. Few stories are true originals, so that angle becomes an important vehicle through which a journalist's perspective and voice can be delivered.

The angle with which a journalist approaches harm reduction efforts, such as medically assisted treatments like methadone, safe injection sites, and Never Use Alone, is significant since the public often doesn't know much about them, and these methods can be controversial because they do not try to stop people from using drugs. Like the disease of drug addiction, harm reduction techniques are often stigmatized.⁴⁹ According to the Substance Abuse and Mental Health Services Administration, harm reduction is "an evidence-based approach that is critical to engaging with people who use drugs and equipping them with life-saving tools and information to create positive change in their lives and potentially save their lives."⁵⁰

Harris's angle in her story about the Never Use Alone hotline emerged from her interest in how the people associated with the hotline were helping others like themselves. "We don't really believe people who struggle with addiction have agency," she said. "We have this picture of people with addiction as totally overpowered by their need for a drug, right? And so, like the idea that they could help each other out of whatever situation is, like, it really fights that."⁵¹

The story angle met several of the Reporting on Addiction guidelines: It reported on addiction as a public health issue and a chronically relapsing brain disease, it emphasized hope, and it relied on the assistance of experts. Responses to the story in the addiction treatment community were positive, with several organizations recommending it to their members.⁵² The angle of the story was one reason advocates liked it.

"So Never Use Alone is a unique solution driven by that impacted community that otherwise . . . I don't think [the hotline] would have gotten the recognition it did without *This American Life*," Stoltman said. "It's still a very controversial topic, but I think talking about it in those spaces is really important, both from just elevating it, but also doing it in a way that's sensitive . . . at the end of the day Never Use Alone saves lives. So, I think we could just talk about that."⁵³

Informed Consent

According to Mark Kramer's "Breakable Rules for Literary Journalists," literary journalists "work out implicit covenants about accuracy and candor with readers and with sources." Ethical problems can arise with sources because "to write authentically at the level of 'felt life,' literary journalists will seek from sources the sustained candor usually accorded only spouses, business partners, and dearest friends."⁵⁴ Literary journalists must always make sure the sources realize their intentions and not drift into the friend zone. Before obtaining consent from a source, Kramer said he has shown potential sources past articles, explained that the work will be published and that they will not be able to review the work ahead of time. "In a few cases, I have doubted that subjects understood my intention or their consequences well enough to consent, or I've felt consent hadn't been freely given but was influenced by boss's orders (for example, the nurses in an operation room where my subject worked)," he wrote. "Then, I've made it my business to do no harm."⁵⁵

The Reporting on Addiction recommendations for obtaining informed consent fill an entire page. Journalists should obtain consent before on-the-record interviewing begins, and the consent process should include ground rules, such as the option to be anonymous, and a discussion of possible risks, including ones the sources may not have considered. "Be open to them changing their mind," the Toolkit advises. "Protecting sources outweighs other considerations."⁵⁶ The Dart Center Style Guide for Trauma-Informed guidelines warn that sources are sometimes pressured to tell their stories by community leaders or others. Journalists should always make sure they have obtained "meaningful consent."⁵⁷

Over the years, Harris has learned journalism is "an extractive business. We're essentially like emotional frackers, and you're not doing your job if you're not doing that," she said. "But that doesn't mean you can't be transparent with people and talk to them about the implications and think ethically about the implications of what you're doing, and that gives you more credence to them."⁵⁸ During her pre-interview, Harris learned about more than what Jessie did on the line. She learned about Jessie's past drug use and what it's been like for her to be the mother of a daughter who has had a substance abuse disorder for many years. Jessie told Harris she couldn't believe the New York journalist wanted to interview her at her home in rural Georgia. "I knew I was asking so much of her," Harris explained. "I was asking her to tell me her personal story. I was asking her to give me calls, to let me listen in on calls. I'm never getting that trust over the phone or over Zoom."⁵⁹

Even with all the work she did to obtain their cooperation, Harris said Jessie, Kimber, and Stephen opening up to her for the story was "a trust

fall.”⁶⁰ Details help make journalism literary, but they can carry risks for the sources, according to the ROA guidelines.

“Because there is that power imbalance, and it can become really tricky with literary journalists in particular,” Stoltman said, “because they are so embedded, and so folks sometimes feel more comfortable sharing those details.” Later, however, when they see those details in print, they might be surprised.⁶¹

Recommendations include letting sources see quotes the journalist plans to publish.⁶² Harris said she did not do that. She did follow the guideline to “respect boundaries,” however. When Kimber told her she was done answering questions, Harris said she ended the interview.⁶³

Foregrounding the Person

“**T**he Call” begins with Harris announcing, “The call in this story took place a few years ago.” We hear what the caller, Kimber, heard: an automated voice, “Thank you for calling” followed by music while she waited for the operator, Jessie, to pick up. While Harris interrupts occasionally to provide background, Act I mostly takes the listener through the conversation between Kimber and Jessie—friendly and informational at first, then harrowing as it slowly becomes clear Kimber has overdosed.⁶⁴ The listener is worried. Will Kimber survive? How will Jessie go on if she doesn’t?

Harris provides context on the risk of addiction overdoses, the effectiveness of the line, and the background of the characters. Harris smartly juxtaposes the actual call with Jessie’s explanations about what she was thinking at the time and why she said the things she said. Like many narratives, there are heroes, Jessie and Stephen. In addition to knowing what it’s like to work with people who may or have overdosed, they are experts with lived addiction experiences themselves. “A lot of media is used to tugging towards ‘and you can’t trust these people who’ve been addicted,’ and it’s not fair,” she said. “It’s not true to the experience of addiction, which is, like, some people really do get trapped in it. Some people come out, and the difference is, honestly, people loving them around them, people accepting them.”⁶⁵

The story emphasizes the hope inherent in keeping people alive. Every save presents a new chance for someone to enter recovery. Of course, the nature of addiction being a chronic brain disease means that the people who are revived from overdoses often keep using and may overdose again. This is the in-between space where Jessie lives as the mother of a twenty-three-year-old daughter who has overdosed about a dozen times. Act III is all about Jessie. It is full of scenes, both spoken and described by Harris, including the first one set in her home in Southwest Georgia: “From the second I walked in she was taking calls, still in her housedress and mismatched socks. The vibe was

organized chaos,” Harris begins. “She takes in strays. Seven cats. One missing an eye. A chihuahua and more chickens than she can count.”⁶⁶

At one point, Jessie tells Harris: “My child has called this line before.”⁶⁷ From there, Jessie’s journey from mom to hotline operator unfurls, one revelation at a time, including a turning point after a violent confrontation between Kaylen and Jessie in a Krispy Kreme parking lot. In that moment, Jessie says what she wanted changed. Since then, the only goal she has for Kaylen “is the same goal she has for her callers: Don’t die.” Because of that goal, Jessie has even let her daughter inject heroin at her kitchen table, where Jessie could revive her if she overdosed.⁶⁸

Harris reflects on Jessie’s approach, not just as a journalist, but as a mother herself. “I’m a parent. I know how hard it is to stop wanting things for your kids, stop protecting them, stop pushing them toward some imagined, better future. The implications of abandoning that wanting were so radical to me.”

She asked Jessie, “What if Kaylen never stops using drugs?”

“I don’t really care what Kaylen does,” Jessie replies. “As long as she don’t die, that’d be great. That’s it.”⁶⁹

Avoiding Stigmatizing Language

Reporting on Addiction’s two-page “Best Practices and Recommendations for Ethical Reporting on Addiction” are “based on a combination of the current *AP Stylebook* guidelines and our research, including national focus groups with medical experts, people with lived experience, activists and media members.” It is designed to help journalists cover addiction without perpetuating stigma. Use the terms “drug or substance use” instead of “abuse” or “problem” and “person with a substance abuse disorder” instead of “addict.” Characterizations of people in recovery that suggest addiction can be cured, such as “kicked their addiction,” are inaccurate. Addiction is a lifelong condition. Right now, there is no cure.⁷⁰ “The Call” does include the word “addict” where Stephen used it to describe who he was in the past. The story’s editor, David Kestenbaum, said it was intuitive to not use the word “addicts” in the reporter’s narration, but he would not edit out a term a member of a community used to describe themselves.⁷¹

This American Life has rigorous editing and “*New Yorker*–level” factchecking processes. Kestenbaum said he worked with Harris on the script for “The Call.” Once they felt good about it, Harris did a “table read” for him and two staffers. In these read-throughs, everyone listens and provides notes about what’s working and not working, issues with the reporting or anything they don’t understand. A single story may take as many as ten or eleven read-throughs. Three to five table reads are the norm. “The Call” needed only

two.⁷² The second was with Ira Glass, the creator, host, and executive producer of *This American Life*.⁷³

Harris said the editing process revealed things she hadn't thought about. For instance, she expected to include a scene of discarded drug paraphernalia from Jessie's yard. But she said Kestenbaum recommended keeping it out because it might have cast Jessie in a "cartoonish" light.⁷⁴ While Kestenbaum said he didn't recall that specific scene, stories should never make someone into a caricature. One reason "The Call" worked so well, in his opinion, is because so much of it is told through the voices of Jessie, Stephen, and Kimber.⁷⁵ "At some point, we realized that both her [Jessie] and the paramedic and everyone had had some history with addiction," he said, "and they all connected in a way that would allow everyone to come across as full people."⁷⁶

Kestenbaum said *This American Life*'s full-time factchecker calls the people in the story and footnotes factual evidence of the things they say. (For instance, he confirmed Jessie was indeed licensed as a nurse.) Sources are not able to listen to the story ahead of time.⁷⁷ Although the ROA guidelines don't say journalists should run their stories by their sources, it does recommend letting them review their quotes.⁷⁸ In her book chapter about ethical approaches to reporting on GBV, Wheelwright suggests the benefit of collaborating with subjects, so the story is told from their vantage point and not that of the journalist. Integrating original "assets," like the actual call to the Never Use Alone hotline, into a narrative could be one of the "new forms of storytelling" she describes as being needed to avoid the traps of sensationalism and exploitation. Wheelwright is optimistic about literary journalists being able to figure out the right balance between providing necessary information and not exploiting sources. "Perhaps literary journalism as a genre form can offer a vehicle for experimentation with forms that combine advocacy for victim-survivors and adhere to evidence, while they move the reader toward empathy, compassion, and understanding."⁷⁹

Again, Harris said she did not run her story by Jessie, Kimber, or Stephen before it aired. They did not even know it would be the whole show. They all listened together when it first aired, and they immediately called Harris when it was over. She was nervous to hear what they'd say. "They were really happy, and they had felt like they were really seen by it, and that was really powerful," she said.⁸⁰ Harris still keeps in touch with Jessie and Stephen.

When Harris's story won the 2024 Writers Guild Award for Radio/Audio Documentary, the first people she thanked as she accepted her award were Jessie, Kimber, and Stephen, "the people who agreed to tell their story to me." What she said next made it clear why her sources trusted her to do so. "Their work is so fucking important, so thank you so much for honoring all of us."⁸¹

Notes

- ¹ Harris, interview, June 13, 2025.
- ² Harris interview.
- ³ Harris, “The Call,” September 8, 2023.
- ⁴ Alcohol and Drug Abuse Statistics, American Addiction Centers.
- ⁵ Ohio Academy of Family Physicians.
- ⁶ Centers for Disease Control.
- ⁷ Willis and Painter, “Conceptualization of the Public Health Model of Reporting through Application: The Case of the *Cincinnati Enquirer’s* Heroin Beat.”
- ⁸ Stoltman, interview, May 19, 2025.
- ⁹ Stoltman, Marra, Uppercue, and Terplan, “Reporting on Addiction: An Innovative, Collaborative Approach to Reduce Stigma by Improving Media Coverage and Public Messaging about Addiction Treatment and Recovery.”
- ¹⁰ Best Practices and Recommendations for Reporting on Addiction.
- ¹¹ Best Practices and Recommendations for Reporting on Addiction.
- ¹² McGinty and Barry, “Stigma Reduction to Combat the Addiction Crisis—Developing an Evidence Base,” 1291–1292.
- ¹³ Corrigan and Nieweglowski, “Stigma and the Public Health Agenda for the Opioid Crisis in America,” 44–49.
- ¹⁴ Hoffman, et al., “ ‘We Flew under the Radar’: Examining the Influence of Stigma on Community Engagement Strategies among Harm Reduction Practitioners in Central Appalachia.”
- ¹⁵ McGinty et al., “Stigmatizing Language in News Media Coverage of the Opioid Epidemic: Implications for Public Health.”
- ¹⁶ McGinty et al., “Stigmatizing Language in News Media Coverage of the Opioid Epidemic: Implications for Public Health.”
- ¹⁷ Stoltman, Marra, Uppercue, and Terplan, “Reporting on Addiction: An Innovative, Collaborative Approach to Reduce Stigma by Improving Media Coverage and Public Messaging about Addiction Treatment and Recovery.”
- ¹⁸ Stoltman, interview, May 19, 2025.
- ¹⁹ Stoltman, Marra, Uppercue, and Terplan, “Reporting on Addiction: An Innovative, Collaborative Approach to Reduce Stigma by Improving Media Coverage and Public Messaging about Addiction Treatment and Recovery.”
- ²⁰ Stoltman, Marra, Uppercue, and Terplan.
- ²¹ Reporting on Addiction database.
- ²² Stoltman, interview, and Domaradzki, “The Werther Effect, the Papageno Effect or No Effect? A Literature Review.”
- ²³ Journalist Toolkit.
- ²⁴ Kramer, “Breakable Rules for Literary Journalists,” 22.
- ²⁵ Connery, *A Sourcebook of American Literary Journalism: Representative Writers in an Emerging Genre*, xiv.
- ²⁶ Kerrane and Yagoda, 14.
- ²⁷ Fitzgerald, *How the News Feels*, 142.
- ²⁸ Boynton, in *The Routledge Companion to American Literary Journalism*, xx.

- 29 Boynton.
- 30 "Society of Professional Journalists Code of Ethics."
- 31 Harris, text message, June 13, 2025.
- 32 Journalist Toolkit.
- 33 Journalist Toolkit.
- 34 Journalist Toolkit.
- 35 Reporting on Sexual Violence, A Dart Centre Europe Tip Sheet.
- 36 Kovach and Rosenstiel, *The Elements of Journalism*, 76, 165.
- 37 Bugeja, *Living Ethics*, 83.
- 38 Journalist Toolkit.
- 39 Harris, interview, June 13, 2025.
- 40 Journalist Toolkit, Best Practices and Recommendations for Reporting on Suicide; Thompson, The Dart Center Style Guide for Trauma-Informed Journalism.
- 41 Stoltman, interview, May 19, 2025.
- 42 Wheelwright, "Advocacy, Ethics and Objectivity: How Literary Journalism Addresses Moral Discomfort in the Reportage of Gender-Based Violence," in *Insights on Literary Journalism*, 104.
- 43 Wheelwright, 107.
- 44 Journalist Toolkit.
- 45 Kovach and Rosenstiel, *The Elements of Journalism*, 312.
- 46 Best Practices and Recommendations for Reporting on Addiction. Two additional guidelines focus on being thoughtful about image selection and headline writing, both of which are usually the responsibility of the publisher.
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