

The Production of Medical News

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Abstract

Health knowledge and development have both direct and indirect consequences on people's lives. Mass media, which functions as an intermediary between the medical community, government and the lay people, plays a central role in the transfer of information about health. However, the main medical criticism of the media is that it is alarmist and sensationalizing, provoking controversy. This situation will increase the inaccuracy of health and medical information. This study examines reporters' newsgathering and source reliance by conducting in-depth interviews with seven journalists and conducting a content analysis of three local newspapers in Hualien County, Taiwan. The findings suggest that medical journalists are dependent on experts from the medical community for information and that journalists are not used to cross-checking information because this might have consequences for one's relationship with informants or experts. Finally, all journalists are aware of the fact that news about medicine might create false perceptions. They all claim to be very careful when rewriting medical press releases based on a single medical source.

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News is information transmitted from sources to audiences through journalists who are both employees of bureaucratic press organizations and members of the profession. Usually, the work of a journalist is to summarize, refine, and alter what becomes available to them from sources in order to make the information suitable for their audience (Gans, 1999). Since health knowledge and development have major consequences both directly and indirectly on people's lives, journalists who cover health news play a central role in transferring information about health; they function as intermediaries between the medical community, the government, and the lay public.

Yet, the main medical criticism of the media is that it is alarmist and sensationalist. The media might frame controversy by focusing on the exceptional, glamorous and life threatening disease rather than more common diseases (Karpf, 1988; Wallack et. al, 1993; Trigt, 1995; Lawrence et. al, 2002; Swallen, 2003). A study of sources of health news may help to examine the relations between journalists and medical related individuals and organizations that attempt to define and manage the relationship between journalists and information.

The selection and production of news is well researched in media studies with work ranging across the political economy of media through organizational studies, and going into broader cultural concerns with the form and content of news (Schlesinger & Tumber, 1994). For instance, White (1950) believed that news is shaped by the professional news judgment of journalists. In other words, journalists are gatekeepers, an important role in the complex

process of communication. Based on the empirical study by White, journalists can be highly subjective. Shoemaker (1991), on the other hand, indicated that, although the individual reporter or editor has his or her own preferences about the event, decision-making strategies and values would determine the selection of an item. The news organization has its own bureaucratic routines that constrain the performance of journalists.

In spite of the organizational routines, professionalism has a significant impact on the structure of newsgathering and the shape of news content. Sigal (1973) indicated that efficiency dictates newsgathering through routine channels. Reporters cannot witness many events directly because they are few in number and must locate themselves in places where information is most likely to flow. Also, their access to information is usually barred and the control over disclosures is centralized. As a result, reporters rely on sources who sustain them with information, ideas, and stories.

Hall and colleagues (1978) also provided a structural analysis of the social production of news by looking at crime coverage. Their study found that certain social groups within society benefit from a special status because of their institutional power, representative standing, or claims to expert knowledge. These groups are labeled as the primary definers of particular topics because of the structured preference given to the opinions of these powerful people by the media. This enables them to have the primary interpretation of the story in question. Hall's study implied that in order to reveal the source relationship with the reporter of health and medical news, it is important to understand health and medical news content and reporters' perspective on news gathering of medical matter.

Studies related to health news had similar results. For instance, Trigt (1995) screened articles on medicine within four national and two regional daily newspapers in Netherlands and found that physicians and medical researchers are treated differently by journalists than other sources of information because journalists tended to consider the medical people more objective.

A similar conclusion was reached by Nisbet & Lewenstein (2002) who studied the policy process of biotechnology and the American media. They found that scientists, industry, and government agencies have dominated the coverage of biotechnology. Nisbet et al. stated that:

In the American context, government agencies and scientists are widely considered credible and necessary authorities in matters of scientific and environmental uncertainty. In a world of increasing technological complexity that brings new and unknown risks, the public is heavily dependent on these experts and their institutions for reassurances and reliable information.

Finally, studying press reporting on bio-terrorism in the aftermath of 9/11, Lawrence and colleagues (2002) asserted that officials and expert sources had preferred access to the media arena to meet the uncertainty.

A review of literature indicates that news source does shape the content of news. However, most of the studies are issue oriented. In a normal time period, considering the function of news source, journalists can diversify their interviewees into different categories in order to achieve the objectivity of news. Furthermore, if journalism is seen as professionalism, what kind of challenge and obstruction do journalist meets with medical news?

This study is designed to obtain insight into the process of making news about health and medicine. The main questions addressed in this study are: (1) what sources are used by

journalists to write about health and why do they use these sources? (2) What kinds of health issues are discussed in the lay mass media? The mass communication channels included in this study are *The Keng Sheng Daily News*, *The China Times* and *The United Daily*, three daily newspapers (eastern edition) in Hualien County, Taiwan.

The decision to focus this analysis on the three local newspapers presents its own limitations. But the focus proves useful in several respects. Although Hualien is a small county (population: 240,000) located on the eastern side of Taiwan, there is one medical center, several general hospitals, a medical school and a well-established public health authority. Assessing newsgathering of local journalists about health and medical news therefore tells us much about the relationship between journalists and various sources such as the public health authority, hospital press releases, physicians, nurses, academic professionals, patients and interest groups.

Method

Two approaches which gave complementary information were used in order to answer the research questions. First, a content analysis was undertaken for newspaper stories in which health was mentioned. Secondly, in-depth interviews were conducted with journalists who write about health issues.

The content analysis gave information about the number and kind of experts cited in newspaper stories. All stories about health were selected from the three newspapers over a period of six months (2004/10/01 -2005/04/01). The expert was considered to be a relevant expert if the information they gave related to the subject involved. For this reason, the researcher regarded patients (experts by experience), spokespersons from interest groups, professional groups, hospitals, health authorities and academic journals (written by professionals) as relevant experts. Those individuals or organizations were classified into one of six categories. (1) local public health authority; (2) hospital; (3) local university; (4) local medical association; (5) local nonprofit organization; (6) patient since he or she got medical knowledge from his experiences. (Even when a source was only vaguely identified, it was still placed in one of the broad categories.)

Interviews were conducted to collect information about the way journalists find relevant experts, the criteria they use in selecting an expert, the reasons for using an expert, the kind of expert consulted, and the policy of the journalists regarding corrections by experts prior to publication of the news story. Five journalists, interviewed in this study, were responsible for news about health at the three newspapers. One publisher (*The Keng Sheng Daily News*) and one editor (*The Keng Sheng Daily News*) were interviewed to express their own thinking about medical news. The newspapers these journalists work for were all content analyzed. In the interviews, the researcher used open-ended questions regarding the kind of experts consulted, the reasons for consulting an expert, and how to find relevant experts. Furthermore, the researcher asked the journalists about their requirement for defining experts.

Results

For all stories at the three newspapers combined, single-source cited stories outnumber multi-sources cited stories (see table 1) which showed that all three newspapers rely on the single source to cover local medical news. Single-source stories, based entirely on information received from one channel, account for 53 of the stories sampled. The difference between the three newspapers seems largely to be a function of the number of staff each has

in charge of medical news. Generally speaking, the coverage of *Keng Sheng Daily News* heavily concentrates in the region of eastern Taiwan, while the other two newspapers' coverage is more island-wide.

Table 1: Number of source cited in stories in the *Keng Sheng Daily News*, the *United News*, and the *China Times*, 10/01/04 -04/01/05

	<i>Keng Sheng Daily News</i> (n / %)	<i>United News</i> (n / %)	<i>China Times</i> (n / %)	
Single source news stories	44 (80)	5 (9)	3 (5.5)	52 (94.5)
Multiple sources news stories	1 (1.8)	1 (1.8)	1 (1.8)	3 (5.5)
Total	45 (81.8)	6 (10.8)	4 (7.3)	55 (100)

*Total does not equal 100 due to rounding.

Whatever the focus region, the medical stories surveyed predominately emerge through routine sources (see Table 2). These sources thus determine when most stories get released. In two out of three stories, newsgathering goes no further than the formal and established organization, frequently involving the official press releases. In the other one-third, the reporter subsequently follows up his or her initial information through other sources. The findings imply that medical reporters made extensive use of press releases instead of following up a formal interview with other sources.

Table 2: Variation in channel by story

Variation of channel	Number	%
Routine (press release)	41	74.5
Anonymity	0	0
Individual interview	14	25.5
Total	55	100

Numerically, the most important sources of information are public relations departments of hospitals which accounted for 65% of all the sources cited in the sample (see Table 3). Although the category 'Hospital' subsumes all types of hospitals, general hospitals and medical centers predominate as the news sources; local clinics contributed only 3 stories. The second dominant source is the local public health authority with 13 stories. Of the six remaining stories, four were contributed by nonprofit organizations, one by local medical association, and one by medical school.

Table 3: Categories of news source mentioned in the Keng Sheng Daily News, the United Daily News, and the China Times, 10/1/04 – 04/01/05

Type of source	Number	%
Category 1: Public health authority	13	23.6
Category 2: Hospital	36	65.4
Category 3: University	1	1.8
Category 4: Local medical association	1	1.8
Category 5: Nonprofit organization	4	7.2
Category 6: Patient	0	0
Total	55	99.8

*Total does not equal 100 due to rounding

Using the stories sampled, the researcher went to the reporters and conducted in-depth interviews. The major findings include: although the press release has its own limitation in lacking enough information to be used, press releases from hospitals and public health authorities are important sources because they get the attention of a journalist about a topic. First, the results show that the journalists interviewed are dependent on experts from the medical community for information. Second, journalists are not used to cross-checking information they obtain since this might have consequences for one's relationships with informants or experts. Thirdly, all journalists are following the editorial policy that news about medicine should avoid creating false perceptions.

For instance, when dealing with a medical issue, the reporters' major concern was the 'climate' of the newsroom. They recognized themselves as employees of a news-gathering bureaucracy in which rewards came from their editors and the organization. When the press holds a basic tenet that it must remain conservative and avoid medical conflict and complexity, journalists find this a great challenge to present the news correctly and moderately. A reporter said:

The relationship between health news and news policy is positive coverage, conservative and conflict avoiding. The editor and publisher routinely examined the content of a story. They don't want exaggerated, thrilling, and unhappy feelings while reading. Also, our policy is conservative because our publisher does not want conflict with the public health authorities and hospitals.

The reporters' concerns also involved the source relationship. A reporter interviewed explained why she did not constantly cross-check the material she got from the public office of hospitals and public health authorities. She said: "The medical community is highly

professional. Journalists are not trained to be sophisticated about medical matters, and it is difficult to cross-check information.”

Most journalists are also victimized by lack of time and deadlines. If they had to check out the reliability of each source or any piece of information, articles would never get written, especially on understaffed local papers. Thus, an official source saves time and addresses this difficulty. However, the major complaint from the reporters interviewed was the lack of opportunity to get on job training. In comparison with medical community which constantly holds seminars or working panels to disseminate current information, journalists do not have enough of the education they need. The uncomfortable fact is that although many reporters were aware of their knowledge gap compared with their sources, they had little opportunity to increase their knowledge about medical matters. They mentioned that their employers did not allow them sufficient time for training because they were often preoccupied with a frantic gathering of trivia, failing to understand the sophistication of medical matters. The reporters could, then, only discuss these issues among themselves and, in a few instances, learn from the Internet.

Thus, the reporters, by giving up any real independence of surveillance and allowing themselves the comfort of in-group community loyalties, have moved into an area of collaboration with their sources. This study followed Sigal’s perspective that

news medium is a connotation that aptly defines the function of the press: It mediates between the officialdom and the citizenry of the United States. Like pipeline carrying water from a reservoir to a city, it has some effect on what arrives at the end of the line. Not all droplets that enter the pipeline end up in the same destination; some are routed elsewhere, other evaporate en route. Yet the effects of the pipeline are minor compared to the source of the water—the reservoir. Similar, newsmen, by adhering to routine channels of newsgathering, leave much of the task of selection of news to its sources (Sigal, 1973).

Discussion and Conclusion

In general, press releases from the medical community are most effective in influencing news because their positive content fulfills the news policy. Journalists also come to rely on public health policy makers and the public relations departments of hospitals for “routine source” information, or news that meets organizational deadlines or demands. Often this type of news is based on press conferences, press releases, or official proceedings.

Two possible ways to interpret these findings are: (1) from a perspective that privileges modern medicine above other kinds of human knowledge, and (2) from a perspective that acknowledges the superior status of doctors and public health authorities in Taiwanese society.

As Berkowitz (1997) indicated, the source sets the tone and frame of discourse in media coverage particularly in the areas of science and risk coverage. In dealing with these matters, news sources, many of whom are scientists and government representatives, tend to be those who hold positions of authority. Furthermore, Karpf’s study (1988) indicated that medicine is uniquely privileged compared with all other kinds of human knowledge. Most medical issues are seen as bypassing the social, political, economic, and emotional conduits through which other human thought and ideas flow. Science has a hotline to nature, uncontaminated by the individual’s point of view or self-interest. The objects of scientific

study, the material world, are supposed to have stability independent of the person perceiving them. Science is thought with the thinkers removed, discoveries just waiting to be discovered.

However, this is the positivist or realist view of science. Positivists believe that science is objective knowledge arrived at through the scientific method. The scientific method enables scientists to generate repeatable results and predict phenomena by trying to falsify theories through rigorous experimental testing. Scientific and technical knowledge, in the form of universal statements or laws, is thus incontrovertible and uncontested. But increasingly over the past twenty-five years, this view of science has been questioned. Anthropologists, sociologists, historians, feminists, philosophers, and others have argued that even the most technical aspects of science, technology, and medicine are forged by social practices shaped by human beliefs, values, politics, and economic interests. In spite of this, however, doctors and public health authorities continue to influence the fate of the local medical news story because journalists attribute a superior status to doctors and the medical establishment in Taiwan.

Taiwan had been a colony of the Japanese imperialism of the late nineteenth and earlier twentieth centuries. Doctors earned their superior and unique status of society by devoting themselves to medicine and anti-colonial political activities during this time (Li, 1997; Chuang, 2002). According to Chuang, young Taiwanese were especially eager to study medical science because the medical school was one of very few channels authorized and encouraged by the colonial government for those who wanted to pursue higher education. The fact that the medical community in Taiwan absorbed all the best young people was a special phenomenon that helped doctors earn high status in Taiwanese society.

In this study, the journalists interviewed envisioned themselves as bridging the divide between the public and the medical professional. Despite their claims to journalistic independence, their reporting tends to reflect the concerns of the medical community rather than the “public” they often claim to serve. However, since journalists themselves cannot confer legitimacy, they try to protect themselves by using only institutionally certified experts and medical authorities.

If medical news coverage is heavily source dependent, and a few sources are advantaged in the competition to shape media’s agenda and frames, then the character of news coverage is likely to be limited in scope and focus to the selective framing provided by the sources on which journalists depend. For most sources, their final goal is to make their perspectives appear to be “official policy” in news coverage. By successfully triggering such processes as a spiral of silence, voices of dissent are increasingly driven out of news coverage. This state of hegemony is characterized by media coverage that constructs only one viewpoint as legitimate or media coverage that heavily rejects dissenting perspectives.

The Rhode Island Workshop may be suggested as one way to reduce the gap between medical professionals and journalists. In November 2003, the University of Rhode Island organized and managed a three-day workshop for journalists and scientists to identify obstacles to more effective science communication. The emphasis was to identify “common enemies” of responsible and accurate science reporting.

In light of this study, two suggestions may be made: (1) Taiwanese journalists must expand their own network of sources for medical news coverage; and (2) in order to increase the quality of medical news coverage, universities and medical schools can become a “bridge” of dialogue between the press and the medical community.

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