

30/30 A (+)

Question 1. A Newspapers and Television critique.

Newspaper and Television coverage (major channels) tend to follow the right path for the most part. Occasionally they make major mistakes about diagnoses, numbers of deaths, etc., or minor “mistakes” or misrepresentations in the form of telling just part of the story. I am willing to give these two forms of mass media the benefit of the doubt by concluding that they try to be informative about important news, and even educational at times if need be during the days following a major news story related to a public health issue.


However, I also believe that this is not always the case, and as a consequence, I am quite willing to investigate when and why specific kinds of information are being put out at particular times and/or in just the right way. This is not so much a corporate conspiracy response as it is a reaction to my feelings that media only cover **what they are being told** by professionals, just enough to disclose important points or, **at times, side step the main reason** an event became news in the first place. After all, it took **news and television several** years to look seriously at AIDS as an issue important to all who **are watching and reading, not** just an issue related to the homosexual population. How did **this happen?** It took the announcement (July 1985) and death (November 1985) of a popular actor (Rock Hudson) to grab the public’s attention about this growing health-related problem, and a second story about a young boy (Ryan White) who was infected through a blood transfusion process and subsequently be barred from attending school in August 1985.

Newspapers, like magazines, have writers who have their political and economic agendas. At times, these agendas influence what is written. When a newspaper or television station produces something about medicine, the result may be because a lot of support is coming its way by way of industry. The benefits of this form of investigative reporting not only caters to some needs of the health care service affiliates (like increased public education about the institution, its staff, and their programs), it also attracts new consumers to this health care setting. In the minds of health care agencies, this news not only brings citizens up to date, it may even make the readers marvel at the technological progress underway and want to come back for more.

In a review of the media response to the AIDS epidemic between 1981 and 1990, researchers/journalists Rogers, Dearing and Ghang [1] analyzed 7000 items of AIDS-related news coverage, including television and newspaper stories and professional journal articles (1). They then used this research to define four stages of media response to a health care issue—initial era, science era, human era, policy era--using sudden changes in media coverage to define the turning point for each of these stages.

The initial era was defined as the time when little to no media coverage exists about the issue or topic being researched. This was followed by a period when scientific information was made available to the public about AIDS, after which minimal public response ensued, in spite of this sudden increase in articles being published and stories being told on television. The third era in the AIDS crisis began when public reaction to the epidemic and its medical implications suddenly became the issue, as the articles became more focused on the humanistic aspects like the lives of the disease victims, letters to the editor about the implications of this issue, social and political commentaries, and interpretations/summaries produced by medical news writers about the long term implications of this issue. The fourth era began when the focus on human issues converted over into issues about policy and various political agendas.

As journalists and/or supporters of journalists, Rogers, Dearing and Ghang's interpretation of this behavior is succinct and lacks the commonness of criticism that Klaidman included in his "Roles and Responsibilities of Journalists." Each of these periods of course have their particular areas of focus, which the media does at times become newsy and income-driven about. There is an interesting dichotomy to note here in the newspaper (or television) profession when it comes to important health issues: some newspapers like New York Times (NYT) are slow to produce serious interpretive writings about a serious issue (they did just one Tryptophan article for example, which was primarily investigative and informative), whereas others seem heavily focused on the now and its sensationalism (i.e. NYT's chief competitor, Newsday of Long Island, New York). These non- or minimally-humanistic writers are countered by the local news sources (both Television and newspaper) which take the more narrative approach and focus on the local victims.



The Sarah Harth Case. The response of the Oregon newspapers and their readers to a recent meningococcal “epidemic” (if it was truly a meningococcal infection that took place), demonstrates the type of local response which ensues due to an “epidemic.”

Unlike AIDS, which is a chronic epidemic disease which slowly developed from 1981/1983 to 1991 (the year of Rogers, Dearing and Ghang’s study), the local meningococcus issue underwent some of the same changes in meaning and media focus, only much more rapidly. On Friday, February 16th, 2001 (page D4), a coincidental article entitled “Meningococcal disease claims Seaside infant” was published by *The Oregonian*. Several meningococcal deaths had taken place in Oregon by this time, but few if any writers were speculating that an epidemic existed. The same day, another article appeared in *The Oregonian*--Julie Sullivan’s “Number of children deaths falls in '99” (Metro D1, D5).

Later that day, unknown to Oregonians, 16 year old Sarah Harth died at Doernbecker’s Children Hospital from an infection that appeared very much like a meningococcal infection. This news was not released to the *Oregonian* for several days; in fact, the first mention of Sarah Harth’s death in *The Oregonian* appeared as an Associated Press release article on Monday, February 19th (Metro section, page C5).

The weekend before Harth’s death, *The Oregonian* spent a small amount of time and space of Saturday covering just two medical issues: 1) dyslexia (Main section, A10), and 2) a very brief item on the use of anti-depressants by a bus-driver in the Middle East. Also released that day was the *Sunday Oregonian*, which included a lengthy article on meningococcal disease (Wendy Y. Lawton. “Disease steals life and limb, but not spirit. Meningococcal infections strike quickly, mostly at young, but survivors exhibit pluck and drive,” Metro section, B1, B5). This was a highly informative, investigative report about a local epidemiological event not yet disclosed to the public. This article therefore most likely served as a human interest story relevant due to past local disease patterns, not a response to the Harth case.

Drawing most of the public’s attention during this time was the use of alcohol by teens. Alongside the meningococcus articles was columnist Steve Duin’s review of this issue involving a local drunk-driving case (“Frozen at the edge of the eternal silence”), a major

good research

news items for several weeks. The same day (Feb. 18, 2001), the main section of *The Oregonian* produced a three-article set on alcoholism and teens, focusing on the recent case involving the distribution of alcohol to teens by a two adults and a sibling (Inora Verzemnieks “A deadly mix. Young teen-agers are trying alcohol . . . ; Patrick O’Neill “epidemic of underage drinking alarms experts”; Matt Sabo “Woman denies supplying alcohol to teen who died”, pages A1, A8).

On Monday February 19, 2001, *The Oregonian* simply announced Sarah Harth’s death in the Metro section, and there was no more coverage on the DUII or teen-alcohol issue. The feature article for this section dealt with individuals suffering from cold and flu symptoms (“Snifflers ache to skip weekend trip to clinics” Wendy Lawton).

On Wednesday February 23rd, Sarah Harth’s funeral services were announced as a one-fifth column article (“Happy, Selfless is how Cleveland remembers Sarah”, D2). Two days later, the medical articles (Metro section) discussed medical robotics surgery, and “Boy behind the Mask,” (the continuation of Tom Hallman, Jr., story, the young boy who suffered a facial deformity in the form of vascular malformation and underwent facial surgery on the east coast, followed by his post-surgical coma and recovery). The Main section of this paper had only some brief epidemic news about the growing Foot-and-Mouth disease problem in Great Britain. The Home and Real Estate section had a biographic piece on the home of a wheel-chair bound automobile collector. In the least, this would made readers think the newspaper is up on interesting community events and “foreign happenings”; these same readers were not made not aware of the meningococcal problem.

Commentary. The most recent news on the possible meningococcal case was inconclusive about the identity of Harth’s disease, but informative enough to cause concern among women with young infants about their child’s risk for this ailment. According to one writer, about 1500 to 2000 calls were made to epidemiologists about this disease, about 20 calls per day, most due to concerns about skin rashes noted on their children.

In sum, this expression of worry by parents represents a fairly typical response to such issues, brought about by public interest and concern. Such basic levels of concern and worry are barely preventable through mass communication. Higher levels of concern

induced through miscommunication are preventable—would anything different happen if Harth's case were published as a feature article instead?

Still, there are several communication problems this series of articles presents us with. The main focus was for much of the time on the alcohol-related issues, a very popular issue made even more popular by the recent teen death. This issue (although a worthy one) drew both the public and journalists' attention away from a possible local epidemic issue—meningococcus. In addition, the delayed announcement of Harth's death may perhaps be due to 1) concern health officials had about the accuracy of such a diagnosis and 2) concern for the effects of publicizing her possible meningococcus infection, since she was a teenager.

Was the follow-up on her February 16th death with an article on meningococcal disease on Sunday (Feb. 18) coincidental? Since these articles take days to weeks to develop and then write, even if they have been on the back burner of some medical writer, it seems as though coincidence is the case. Alternatively, a conspiracy theorist would most likely claim this was done 'to diminish public concern about Harth's death once they released the news of this next week,' i.e. by giving the public a more uplifting story to read about (a small child's recovery from loss of both legs and rehabilitation) before the bad news gets leaked out.

Were the peoples' calls to the epidemiologists due mostly or in part to the previous articles they read in the news? Did the general good news about "Numbers of child deaths" falling on Feb. 16th on the same day as the Seaside article on another case of infant meningococcus draw the attention of those who subsequently called for information about the disease during the days after Harth's death?

Getting the facts straight is just one goal which television and newspaper journalists try to achieve. Preventing public outcry, rage or panic is an accomplishment made secondary to getting the facts straight. What seems to be the issue when it comes to public interpretation of journalism and news is what kinds of truths are expressed and which are not expressed and why.

1. Rogers EM, Dearing JW, Chang S. (1991). AIDS in the 1980s. The Agenda-Setting Process for a Public Issue. Journalism Monographs No. 126. April 1991. Association for Education in Journalism and Mass Communication.

OK - you -
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me
Excellent
Discussion
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Question 2. Media Program for teaching school children about AIDS

I would begin this project by asking around to learn what the underlying reasons are for this request. I would wonder: who initiated this round of questions and comments—was it some students? parents? teachers? the school principal? Also--is this simply a reaction to a popular show or news event on TV? A reaction to a student or student's friend who contracted AIDS? a friend or relative of a teacher who contracted AIDS? Reaction to another school that recently developed a similar program? Finally, who is/are the gatekeeper(s) I need to approach?

fix up me!

Understanding the answers to these questions and the issues underlying this request for an AIDS education program may help to clarify for me where the interest and support is for this request, preparing me as well for any problems that may erupt, like an unexpected backlash from parents and certain religious groups once the program begins. The answers to these questions might also influence how I choose to prepare for this project, i.e. I would like to reduce the likelihood for any prolonged confrontation ensuing.

With these immediate issues dealt with, let's say I just look around and find there are very few educational materials out there, aside from the standard county health department pamphlets and info sheets. I would have to begin developing a list of individuals who may support this project, by covering some of its costs and helping out with the initial goal setting, early planning and early developmental processes. Chances are many of the people most interested in this program will be certain students, students' parents, teachers, some school staff members (esp. the school's nurse or health officer), and perhaps a member or two of the school board and/or a local district head (at least for input). If there is an individual assigned the duties of program planning for extracurricular activities (special day-long celebrations) and the like, I'd like to get his/her input and assistance into finding and networking strategies.

Next I'd wonder: What processes are out there for me to use during this media-focus? Are there any local newspapers, local magazines (as part of the Sunday newspaper,