"Chronically Distorted: Report Examines Media Portrayal of Chronic Illness and Health Care Access"

Content analyses of media reporting on access to health care and chronic illness

**SUMMARY**

From 1999 to 2001, researchers from the Center for Bioethics and the Annenberg School for Communication, both part of the University of Pennsylvania, examined the content and quality of major news coverage of two key issues: chronic illness and access to health care, particularly for the uninsured.

**Key Findings**

Findings from a report entitled *Chronically Distorted: A Study of How Chronic Illness and Access to Health Care Are Portrayed by the Media* include:

**Access to Health Care**

- Media coverage of health care access focused on problems encountered by insured Americans in managed care plans, largely ignoring the plight of the uninsured and other disadvantaged populations.

- Barriers encountered by middle class Americans in managed care plans included difficulties obtaining specialty care, emergency services or coverage for specific treatments, such as transplants.

- Less than one percent of articles mentioned fairness issues.

**Chronic Illness**

- Media coverage of chronic illness relied heavily on narratives depicting the daily challenges faced by patients and their caregivers, rarely linking individual case studies to the larger health care delivery system or to moral and fairness issues.

- Coverage of chronic illness was negative, with patients portrayed as hopeless victims who burdened their families.
When articles made moral judgments, they usually blamed patients for causing their illness by engaging in socially unacceptable behaviors like smoking.

**Funding**

The Robert Wood Johnson Foundation (RWJF) supported this project through a grant of $442,315.

**THE PROBLEM**

At the time this grant began, a major communication goal for RWJF was to inform and influence opinion of influential citizens about these issues. The lack of a reliable analysis of the content and quality of news coverage hampered development of an effective strategy.

The project director, Arthur Caplan, director of the Center for Bioethics, had successfully completed a content analysis of media reporting on Dr. Jack Kevorkian and assisted suicide, which RWJF supported (ID# 036350). RWJF saw this project as a way to spark a similar debate about chronic illness and health care access among influential citizens and the press.

**THE PROJECT**

A key objective of the two-part study was to integrate a traditional analysis of the content and quality of news reporting with an exploration of the values and ethical concerns that animate health journalism.

Using LexisNexis and Dow Jones Interactive (now Factiva) news information databases, the research team selected printed publications and broadcast transcripts on chronic illness and health care access. Their sample consisted of 1,236 articles on health care access from the period 1993 to 2000 and 935 articles on chronic illness from the period 1997 to 2000.

A team of 10 graduate students in bioethics analyzed or "coded" the articles, using a pre-tested template of key words that included value and ethical terms. Following data analysis (with subcontracted assistance from the Gallup Organization), the researchers sought to disseminate findings broadly in academic journals and the popular press.
FINDINGS

In a report entitled *Chronically Distorted: A Study of How Chronic Illness and Access to Health Care Are Portrayed by the Media*, the project director presented the following findings:

Access to Health Care

- Media coverage of health care access focused on problems encountered by insured Americans in managed care plans, largely ignoring the plight of the uninsured and other disadvantaged populations.
- Barriers encountered by middle class Americans in managed care plans included difficulties obtaining specialty care, emergency services or coverage for specific treatments, such as transplants.
- Less than 1 percent of articles mentioned fairness issues.
- Media largely ignored barriers encountered by racial and ethnic minorities, despite evidence of disproportionate rates of heart disease, cancer and HIV/AIDS among these populations.
- Language barriers received little attention in the media, despite the rising numbers of immigrants with limited English-language skills.
- The press overlooked the emerging barriers to accessing emergency treatment, a life-threatening problem particularly for the uninsured.

Chronic Illness

- Media coverage of chronic illness relied heavily on narratives depicting the daily challenges faced by patients and their caregivers, rarely linking individual case studies to the larger health care delivery system or to moral and fairness issues.
- Coverage of chronic illness was negative, with patients portrayed as hopeless victims who burdened their families.
- When articles made moral judgments, they usually blamed patients for causing their illness by engaging in socially unacceptable behaviors like smoking.
- Stories about diabetes, asthma, heart disease and arthritis underrepresented the elderly, despite their being the most likely to suffer from these conditions.
- Compared to that of other chronic conditions, media coverage of cancer was optimistic, emphasizing improvement in survival rates through early diagnosis and treatment.
• Media relied on anecdotal information from patients, families and physicians rather than accurate statistics about the incidence and prevalence of chronic illnesses as sources for their stories.

• Coverage of HIV/AIDS was more impersonal than other chronic illnesses, possibly reflecting the desire to avoid the social stigma attached to the disease.

Communications

Op-ed articles on the project findings appeared in The Atlanta Journal-Constitution and the Bergen Record. The project director helped develop the content and served as a panelist for "Who Cares: Chronic Illness in America," a Public Broadcasting Service Fred Friendly Seminar that RWJF supported (see Program Results Report on ID# 039268). The research team has presented findings at the World Economic Forum and other conferences. See the Bibliography for details.

LESSONS LEARNED

The project generated the following lessons:

1. Researchers who want to communicate their findings to the public should be aware that politicians, rather than health care journalists, determine which health care issues receive media attention. The researchers could not interest the press in health care access or chronic care because the 2000 presidential campaign concentrated on prescription drug coverage. (Project Director)

2. Grantees working on small projects requiring standard content analysis should consider subcontracting with relatively small organizations for data analysis, rather than large companies. This project was "small potatoes" for the subcontractor, which may have accounted for problems in maintaining deadlines. (Project Director)

AFTERWARD

Caplan and colleagues continue to disseminate their project findings through presentations at conferences and published articles.

RWJF has revised its communications strategy, and now emphasizes informing the general public about priority health care issues through projects such as Covering the Uninsured Week. Cover the Uninsured Week is a diverse partnership led by RWJF and some of America's most influential organizations. Together they seek to focus the nation's attention on the millions of Americans who lack health insurance.
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Articles

Caplan AL. Op-ed piece in the Bergen Record.

Reports