Is Good Health Reporting an Oxymoron?

FINAL REPORT

Health Journalism workshop

Departments of Exercise Science and Journalism, Concordia University
20 April, 2009

Final Report: ‘Is Good Health Reporting an Oxymoron’

Dear Reader,

The following pages encompass a brief report summarizing the Health Journalism Workshop ‘Is Good Health Reporting an Oxymoron’. The report attempts to remain true to what was said during four invited presentations and a subsequent world café so as to reflect the group deliberations that occurring during the workshop. While composing the report, we tried to use the words of participants as much as possible, partly to make sure we stayed true to their words, meanings and values, as well as to allow some reflection of each individual attending the world café in the afternoon session.

An electronic version of this report is available at: http://www.csjp.ca/publications/

We welcome your feedback on this document. Please feel free to send comments via email or letter mail to the following address:

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Thank you to all those that attended and those helpers that made the event a success. We really enjoyed meeting and working with each of you.

Best Wishes,

David Secko, Brian Gabrial and Simon Bacon
Executive Summary

On Friday 28th November 2008 approximately 65 people attended the health journalism workshop entitled ‘Is Good Health Reporting an Oxymoron’ at Concordia University. The workshop’s primary goal was to generate discussion from the viewpoint of journalists, scientists, health professionals, students and other members of the audience about what constitutes good health reporting.

This primary goal was also augmented with a wider set of objectives on the part of the organizers, who saw the workshop as preliminary steps to (i) improve communication strategies between scientists and the media; (ii) increase media competency within the research community; (iii) increase a journalist’s understanding of the nature of research findings and increase the recognition of scientific research that warrants news coverage; (iv) improve the connections among news media, researchers, and public relations personnel.

The organizers realize that these objectives cannot be accomplished in one sitting, but they did find the workshop raised six important themes for future consideration and discussion:

1. Health reporters are not yet winning the battle to narrow the divide between journalistic and scientific cultures;
2. The goal of good health journalism is well-recognized—to “share good stories that matter”—but that we have yet to significantly debate and come to an understanding of the wide variations in the expectations of how best to accomplish this goal;
3. There is a need to develop independent sources of scientific information for health journalists that deconstruct jargon;
4. There is a need to find ways to encourage critical thought about science that will help journalists, scientists, health professionals, students, and the wider public discern good versus bad health journalism;
5. There is a need to enable public discussion on the limitations of health journalism and to support greater public activity in the production of health journalism;
6. The underlying issue of the workshop was how best to build trustworthy relationships between journalists, scientists and the public.

These six themes and the others discussed in this report arose from the presentations of four invited speakers and the input from a world café involving 49 of the participants of the workshop. Their conversations were diverse and are not all captured in this report. But it is hoped that this brief report stimulates another round of “conversations” in the near future.

The organizers would like to thank Concordia University, the Réseau en Santé Respiratoire du FRSQ, and the Departments of Exercise Science and Journalism at Concordia for their generous support of this workshop.

Final Workshop Report: Is Good Health Reporting an Oxymoron
Workshop: ‘Is Good Health Reporting an Oxymoron’

Participants: Approximately 65 people attended the morning and 43 finished the day

Hosts: Simon Bacon, Brian Gabrial, David Secko

Speakers: Alan Cassels, André Picard, Joe Schwarcz, Sylvain-Jacques Desjardins

Table Hosts: Jane-Diane Fraser, Eileen McCarthy, Mike Gasher, Mike Sapieha

Note takers: Chantal Daigneault, Wendy Smith, Terrine Friday, Guillaume Lacoste, Nicole Rutamucero, Emilie Chan-Thim, Amanda Rizk, Alicia Wright

This report summarises the Health Journalism Workshop ‘Is Good Health Reporting an Oxymoron’ that took place on Friday 28th November 2008 at Concordia University. It notes the workshop’s general organization, major discussion points and participant report backs from the world café on health journalism. It concludes with some brief points from the organizers for future consideration.

The report is meant capture major discussion topics for future consideration and to stimulate reader feedback and reflection. No sessions during the workshop were tape recorded, so the report was constructed from notes taken during the day.

The organizers welcome any additional reader comments.

Workshop Agenda

9-9:30 a.m. Registration/Coffee

9:30-10 a.m. Panel Introductions

10-noon Panelist Presentations

Alan Cassels (University of Victoria)
André Picard (The Globe and Mail)
Joe Schwarcz (The Gazette, McGill)
Sylvain-Jacques Desjardins (University of Montreal)

Noon-1:30 p.m. Lunch

1:30-4 p.m. World Café on Health Journalism

4-4:15 p.m. Coffee Break

4:15-5 p.m. Report Back and Concluding Remarks
The workshop began with a panel session where four invited speakers were asked to broadly discuss the current state of health journalism in Canada. The speakers were given the freedom to address points they felt were particularly relevant to this topic and were asked to address the audience for approximately 30 minutes. The speakers had expertise in media criticism and health policy (Alan Cassels), health journalism (André Picard), science education/media production (Joe Schwartz) and public relations (Sylvain-Jacques Desjardins).

Alan Cassels spoke on the current state of health journalism as related to health policy, diseases and drug manufacturing. He discussed the need to closely assess the quality of health journalism relating to a number of criteria that included (a) clinical benefits versus harms – do media reports on new drugs note the meaningful impacts of these drugs, while also discussing their potential harmful side effects and (b) conflicts-of-interest – do health journalists seek out independent assessments of scientific research, noting sources of funding? Cassels noted that it does “no good” to ask “scientists to assess their own findings”. Instead, he noted, these questions should be put to independent researchers, as well as journalists working to gain an improved ability to self-assess scientific results. He added that progress has been made in this regards over the last 10 years but suggested health journalism can be further improved to provide clear, useful information on health risks and medications. His main point emphasized the need to develop arms-length sources of interpretable scientific information for health journalists. He also suggested a responsibility of scientists to talk to journalists, even if it was “while they were putting on their shoes before leaving the house” – two minutes from an independent scientist can add a lot to the quality of a story.

André Picard spoke about his personal experience as a health reporter at The Globe and Mail and the good and bad of health journalism. Picard observed that the job of health journalist is to (i) select and summarize, (ii) simplify, and (iii) put real people into health stories. The ‘good’ side of health journalism was therefore when a human face was given to a health story. Such stories provided a “snap shot of information”, one where it was obvious that the reader should not make a health decision based on one story. The ‘bad’ side of health journalism was when the ‘good’ side went too far, simplifying information beyond recognition, making broad generalizations and not showing enough discrimination. He spoke of a responsibility of health journalists to select quality research, to sometimes provide entertainment and to be educational. Picard also discussed the interplay of good and bad of health journalism in terms of the differing cultures between journalists and scientists. Journalists like black and white situations, can rush to judgements, need to make snap decisions, and want stories that can be “summarized in 21 words”. Scientists like precision, longer time frames, caution on absolutes and often feel more
Joe Schwarcz spoke about his introduction to health reporting at Montreal’s CJAD and later at the Office for Science and Society at McGill University, which is dedicated to demystifying science. Schwarcz spoke from his personal experience about how scientific messages can be misinterpreted as they get communicated from person to person, as well as how some individuals work to actively prey on the misinterpretation of science in their efforts to sell products. Schwarcz provided specific examples including the spraying Alar on apples and the fear it sparked, how a B.C. company is selling a curved pipe that they suggest can bring “dead water” back to life, and efforts to ban the infomercials of Kevin Trudeau in the United States. The examples were used to raise the point that more scientific education is needed, specifically to support scientific literacy and the ability of people to think critically about what science to believe. His main point was that an ability to think critically about science helps individuals to discern good versus bad health journalism, and that effort should be doubled to allow this. He suggested that some of the responsibility to accomplish this also rests with the public.

Sylvain-Jacques Desjardins spoke about his experience as a press attaché for the Université de Montréal. He spoke about the role of public relations in the production of health journalism, drawing on his professional experience during a time when the Université de Montréal increasingly promotes the research of its scientists. He discussed how there's a fierce drive among Canadians universities to promote research to remain competitive on an international scale and how this can lead to pressure on public relations departments to promote science. Desjardins noted the potential for public relations to overhype results, which can lead to much discussed problems of misleading interpretations of scientific findings. Despite these pressures, he talked about his personal desire to help researchers explain their findings, noting that in this regard a lack of scientific training can be an asset in public relations work since it forces people to ask simple questions which in turn helps researcher to (over time) clearly explain their science. His main point was that reporters and public relations experts have similar goals — “to share good stories that matter” – but, he added, that there is variation in the fine points of these goals, which can lead to differing expectations (e.g. reporters have a mandate to tell a story from multiple perspectives and can capitalize on several sources, while publicists are hired to advocate for a particular cause or point of view).

Afternoon Session

In the afternoon, a world café on health journalism was held. Based on the work of Juanita Brown (See: www.theworldcafe.com), world cafés are participatory processes that aim to enable diverse
conversations while sitting at “café-style” tables. This method is both a fun and practical way to enhance the group’s ability to collaboratively work through problems. The world café sessions were meant to be conversational and open, with the intention of sharing knowledge and generating potential solutions.

In total, 49 people began the world café and 43 stayed until the sessions ended. There were a total of eight café tables (five Anglophone and three Francophone) in which groups of between 5-8 individuals took part in four rounds of conversation. Each round of conversation lasted 30 minutes; afterward participants were asked to join a new table. In the final round, participants were asked to rejoin their original table.

The world café was directed towards building on the points raised during the morning session. Table hosts were asked to maintain the discussion at the tables as needed, but to otherwise allow participants to lead. The tables did not need to reach consensus as respectful disagreements were seen as equally valuable. General table etiquette at the world café included:

- Everyone can speak, but there is no requirement;
- Be respectful and listen to others;
- Be open, honest and frank with your views and ideas;
- Challenge one another but be open to change your views.

Below are brief summaries of the final report back from each table. These summaries are used as they reflect the final discussions of the day and attempts by each table to cooperatively decide what to report back to the large group.

Table 1
Host: Alan Cassels
Note taker: Emilie Chan-Thim
Table 1 discussed the need for better, independent sources of information for health journalists. In general, the table felt there was, in particular, a need for free online access to quality sources of scientific information (e.g. clinical trial registrations and The Cochrane Library of systematic reviews) and for better relationships between scientists, researchers and journalists. They noted that there is noticeable progress in terms of federal granting agencies in Canada which require knowledge translation for approved grants. This means that the researchers must think about how their research will be translated for the general public while they are planning their research.

In terms of hopeful trends, the table noted that newer and more frequent opportunities for mixing between scientists and journalists, (such as this conference) were very important. Further table participants added that there is a recognized need to teach better science-based media literacy earlier on in schools. The table also noted that much progress had been made in health journalism in terms of reporting conflicts-of-interest and the new requirement for clinical journals to require study registration, which will ensure that unfavourable results cannot be hidden. Overall, the table wished to see better guides produced for health journalists (e.g. www.policyalternatives.ca) that showcased independent sources of scientific information.

Table 2
Host: Joe Schwarcz
Note taker: Terrine Friday

Table 2 discussed the need for comprehension and understanding. The table discussed two main issues: (1) the existence of a “boys club” where jargon was left as hard to understand and young researchers with novel ideas had trouble breaking through; (2) A general lack of scientific comprehension and understanding on the part of students, which was seen as related to skills being overlooked during high school education. The table also felt that “activists” where often better at communicating complex ideas than were scientists, thus, leaving scientific messages as venerable to manipulation. The table discussed two solutions to the above issues: (1) mandatory scientific training in high school, noting that this was standard in Europe, and (2) communication training for students and researchers alike. The table noted that there was more than one key solution to these issues, but their overall message was that a subject must be known inside and out before you are able to communicate it accurately.

Table 3
Host: André Picard
Note taker: Wendy Smith
Table 3 discussed the problem of miscommunication between scientists and journalists. The table talked about a variety of pressing issues, including (1) the need for more time so that journalists can read scientific studies, (2) the effect of scoops on this need for time, (3) the training of journalists and whether they should get scientific training or rely on “method” experts and (4) the effect of different mediums (e.g. TV versus print) on health journalism, among other topics. The table saw a lack of available tools to help deal with these pressing issues. Some tools that are needed include media training for scientists with a focus on knowledge translation and the building of awareness related to the social contract scientists have to publicly discuss their results, the need to enable public discussion on the limitations of health journalism and to support greater activity of the public in the production of health journalism, and the need for investment in the basic science training of journalists so as to expand their horizons on what makes a good health journalism story. Overall, the table felt that the underlying issue was the need to build trustworthy relationships between journalists, scientists and the public.

Table 4
Host: Sylvain-Jacques Desjardins
Note taker: Guillaume Lacoste

Table 4 approached the topic by organizing their conversation into a diagram of three interacting spheres (science, media and the public) where each sphere plays an important part in the production of health journalism. The table saw the sphere of science as having an obligation or duty to communicate their chosen vocation, but sometimes a fear of doing it. The table saw this obligation overlapping with the sphere of the media whose mandate was discussed as education. This resulted in a dialogue between these two spheres with the intention of popularizing science. The table went on to note that both of these spheres (i.e. science and media) also interacted with the public sphere, which for science fulfilled its obligation to communicate and could result in gratitude, while for the media this resulted in an exchange of information but also a pressure to sensationalize. Overall, the table felt these three spheres should be interacting to improve the scientific comprehension of the public and that this is what should be valued in good health journalism.

Table 5
Host: Mike Sapieha
Note taker: Chantal Daigneault

Table 5 discussed a number of topics concerning the interaction of scientists and journalists. Firstly, the table talked about the need for good explanations to be given to society to account for the money that is spent on research. The table felt that the “ethical journalist” had a role to play
in assessing these explanations. Secondly, the table talked about how scientific articles were selected by journalists and how they were used by the public. Thirdly, it was seen as important that the political elements of health reporting also be consider since important health decisions are also made at the political level (e.g. working hour and education). Overall the table felt that the influence of the media on the public was often over interpreted. Nevertheless, the table saw a need to popularize scientific terminology so that people can understand science more deeply. Lastly, and most importantly, the table noted that more collaboration was needed between scientists and journalists. The table felt that support should be sought from funding bodies to enable such collaborations.

Table 6
Host: Mike Gasher
Note taker: Nicole Rutamucero

Table 6 discussed a number of topics during the afternoon, but decided to bring six back to the large group. Firstly, the table felt the scientists should receive training in communication. The table saw communication as important and that scientists should be able to discuss their work in lay language. Secondly, journalists should also be trained in matters of health research to some extent, although journalists can't be knowledgeable about everything. Thirdly, the table saw scientists and journalists as having the same objectives (to inform) and, as such, they should work together. Indeed, the table felt collaboration should be encouraged to ensure accuracy and context. Fourth, the table felt that communication should be seen as a responsibility, even an obligation, and that scientists and journalists should take on more of this responsibility to inform the public. Fifth, owning to the fourth point, scientists should be choosing to be interviewed by journalists who are the most responsible. Scientists need not talk to everyone and can exercise judgement by working with journalists they know and trust. Lastly, researchers must help journalists with their work, which would be enabled by the first point the table brought up.

Table 7
Host: Jane-Diane Fraser
Note taker: Amanda Rizk

Table 7 discussed whether health journalism matters, asking two questions: Is what’s reported in the health media valid/credible? And, is what’s reported in the health media correct? In discussing these questions the table identified four challenges: (a) the pressure on researchers to publish and receive funding; (b) the pressure on journalists to get the BIG story in a timely fashion; (c) the challenge of translating scientific information into lay language (noting that it is not often clear what is in it for the researcher); (d) the public challenge to sift through
information overload. Despite these challenges, the table felt there were responsibilities to be upheld. These included a responsibility of the communications representatives of the researchers’ institutes and funders to ensure that researchers get media training and help in determining the key messages for the public, a responsibility of journalists to be critical, and a responsibility of the public to think critically. The overall message of the table was a desire for more quality health journalism over quantity.

Table 8
Host: Eileen McCarthy
Note taker: Alicia Wright

Table 8 discussed the need for critical thinking processes as related to health journalism. The table felt these issues revolved around three components: (1) the need to introduce critical thinking into the educational processes related to the training of health journalists, paying particular attention to the challenges of how best to choose sources of information for health stories and how to best develop contextual elements; (2) the need to think critically about how to engage research participants throughout the process of creating health journalism, paying particular attention to transferring knowledge specifically to those individuals involved in research projects and advising them of outcomes; (3) the need to think critically on how to engage researchers in health journalism, paying particular attention to media training for researchers and discussions of the benefits of talking to journalists. The overall message of the table was to contemplate how we can best enable critical thinking at all levels of health journalism creation.

Conclusion

In conclusion, the workshop ‘Is Good Health Reporting an Oxymoron’ elicited discussion about the need for additional workshops focusing on how to bridge the gap between the scientific communities and the news media. It is hoped that this workshop will prompt further conversation at Concordia University, other Montréal universities and the community at large. Among the diverse topics touched on during the workshop, six themes standout:

1. Health reporters are not yet winning the battle to narrow the divide between journalistic and scientific cultures;
2. The goal of good health journalism is well-recognized—to “share good stories that matter”—but that we have yet to significantly debate and come to an understanding of the wide variations in the expectations of how best to accomplish this goal;
3. There is a need to develop independent sources of scientific information for health journalists that deconstructs jargon;
4. There is a need to find ways to encourage critical thought about science that will help journalists, scientists, health professionals, students, and the wider public discern good versus bad health journalism;
5. There is a need to enable public discussion on the limitations of health journalism and to support greater public activity in the production of health journalism;
6. The underlying issue of the workshop was how best to build trustworthy relationships between journalists, scientists and the public.

These six themes raise several topics that could serve as the focus for future events, from which we highlight four suggestions:

- How can we best develop independent sources of interpretable scientific information for health journalists?
- What effect does the online environment have on the quality of health journalism?
- What is considered essential for the building of trustworthy relationships between health journalists, scientists and the public?
- How can we best support greater public activity in the production of health journalism?

We are proud of the conversations generated by the 65 participants. The four invited speakers set a stage of critical reflection that carried on into the afternoon session to help produce a dynamic and thoughtful world café. The discussions of the participants fed off of one another and explored areas that the organizers did not expect. Many of us agreed that health journalism produces a great deal of valuable and digestible information, but together we also noted several long-standing debates and new tensions in the field. There is much still to discuss and we look forward to continuing these endeavors.
Appendix I

Participant Evaluations of the Event (Aggregate Comments Only)

Maximum attendance = approx. 65
Starting the world café = 49
Finishing the world café = 43
Total evaluations received = 28 (26 for world café)

**Questions 1: Global Satisfaction (How would you rate the overall success of this event?)**

4.6 out of 5  (scale: 1 = poor, 5 = excellent)

**Questions 2: Speaker Satisfaction (How would you rate the morning panel session?)**

4.5 out of 5  (scale: 1 = poor, 5 = excellent)

**Questions 3: World Café Satisfaction (How would you rate the world café?)**

4.3 out of 5  (scale: 1 = poor, 5 = excellent)

**Question 4: Descriptors (What words best describe your feelings about this event?)**

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