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Title:

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Date:

2021-08-01

Citation:

Kis-Rigo, A., Collins, A., Panozzo, S. & Philip, J. (2021). Negative media portrayal of palliative care: a content analysis of print media prior to the passage of Voluntary Assisted Dying legislation in Victoria. *Internal Medicine Journal*, 51 (8), pp.1336-1339. <https://doi.org/10.1111/imj.15458>.

Persistent Link:

<https://hdl.handle.net/11343/298801>

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Negative media portrayal of palliative care: A content analysis of print media prior to the passage of Voluntary Assisted Dying legislation in Victoria.

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Brief communication: 1391 words

ACKNOWLEDGEMENTS AND DISCLOSURES

The authors have no completing interests to disclose. No direct research funding was obtained for the conduct of this study. Dr Anna Collins is an Emerging Leadership Fellow supported by the National Health and Medical Research Council (NHMRC; GNT1173054). The contents of the published material are solely the responsibility of the individual authors and do not reflect the views of the NHMRC, who had no role in the study conduct or interpretation of the results.

This is the author manuscript accepted for publication and has undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the Version of Record. Please cite this article as doi: [10.1111/imj.15458](https://doi.org/10.1111/imj.15458)

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Abstract

Key misunderstandings of palliative care exist in the community, with media being reported as a key source underpinning knowledge. This retrospective media analysis of consecutive articles sought to examine the portrayal of palliative care in the Australian print media, focusing on the two years (2016-18) coverage preceding the Voluntary Assisted Dying legislation in Victoria, Australia. Summative content analyses revealed coverage of palliative care was frequently (74%) in the context of a discussion of euthanasia. Only small numbers of articles described the activities of palliative care, and even fewer its potential beneficial impact, while a quarter (26%) described palliative care was inadequate to relieve suffering. These findings suggest that current coverage of palliative care in the media may contribute to negative public views and misconceptions. An opportunity exists to enhance media coverage, and in turn, improve the public understanding of care in serious illness.

INTRODUCTION

The past ten years have seen an expansion of the evidence base highlighting the benefits of early palliative care integration for people with advanced illness.(1, 2) Despite this increasing evidence, palliative care is often either underutilised or accessed very late in the illness.(3, 4) One of the identified barriers to more systematic timely palliative care integration is a lack of knowledge of its role and activities, including by patients and families, general public, and some health care professionals.(5-8) In Australia just 12% of participants in a community-based study reported accurate knowledge of palliative care, with understandings broadly limited to end of life nursing care provided to people dying in hospital.(8)

The mass-media plays a key role in the communication of health information, both informing and generating public opinion. Community members cite the media as a key source of information about palliative care.(6, 8) As such, representation of palliative care in the media is an important factor in understanding the social image of palliative care,(9) with implications for the receipt of quality care in the event of serious illness.

To date, a paucity of research has focused on print media portrayal of palliative care.(9) In Victoria, Australia in November 2017 the Voluntary Assisted Dying (VAD) Act was passed into legislation following often heated community debate, including in the print media, over the previous 2 years. This study sought to examine the nature of portrayal of palliative care in Australian print media, with a specific focus on the two years leading up to the VAD legislation. This was conducted with a view to informing future strategies intended to optimise reporting on palliative care.

METHODS

Study design: This study applied a retrospective media analysis methodology, focusing on a consecutive sample of palliative care related news items from two major Australian daily print newspapers (The Age and The Australian). These sources were purposively selected as media outlets covering the state of Victoria and nationally, owned by different companies, and generally considered to lean to the left and right of the political spectrum respectively. The study received approval from the institutional Human Research Ethics Committee (QA 010/19).

Sampling and search strategy: All articles containing the terms "palliative care" or "palliative medicine" or "end of life care" or "end-of-life care" or "hospice care" or "terminal care" published in The Age or The Australian newspapers from 1 January 2016 and 1 January 2018 were identified using the FACTIVE database. FACTIVE is an internationally available, subscription-based collection of global media content from 200 countries, in 26 languages – including newspapers, continuously updated newswires from Dow Jones and Reuters, journals and magazines, websites, blogs, and multimedia. Articles were excluded if they were repeats of the same article; if palliative care or synonym was mentioned in a metaphorical sense only, such as when referring to the final stages of something; or if palliative care was mentioned to describe a person's position or place of work, with no other relevant information contained in the article.

Analysis: Summative content analyses(10) and descriptive statistics were used to describe the nature of reporting and quantify the frequency of key qualitative concepts and themes described. Articles were coded for key variables relevant to the study aims as described in Table 1. One researcher preliminarily coded the item content (medical student; AR), discussing each article with a second researcher (palliative care clinician researcher; JP) for consistency and validation.

The coding framework of descriptive elements was pre-defined, developed by the research team based upon a review of relevant literature(9) and chosen to determine how accurately and completely the practices included in palliative care were portrayed, and to elucidate the links made between palliative care and euthanasia or physician assisted suicide.

RESULTS

There were 367 articles published from Jan 2016 to 2018 containing the term "palliative care" or synonym, including 189 in The Australian and 178 in The Age. Of this total, 71 duplicate publications were excluded, leaving a total of 296 articles for detailed review (Table 2).

Palliative care- related print media coverage was predominantly presented within news reports (43%), with a further 22% each as opinion pieces and letters. The most frequently represented perspectives were those of politicians, doctors or healthcare workers, and advocates or lobbyists, appearing in 28%,

31.4% and 24% of articles respectively. The views of patients (10.8%) and their families (12.5%) were the least frequently presented.

Most articles did not characterise palliative care in any way, while 38% described it as an approach to pain or symptom management (Table 2), 28% of articles mentioned family/carer or home involvement, and only 12% made mention of improved quality of life.

Almost three quarters of articles (74%) including a palliative-care related term also mentioned a form of euthanasia (or associated terms), with arguments for euthanasia appearing more frequently (51%) than those against (38%). Euthanasia was commonly linked to themes around 'dying with dignity' (24%), while the same articles commonly described palliative care in association with prolonging suffering until an inevitable death. In 26% of articles, palliative care was reported as inadequate for symptom control, or more broadly to meet the needs of patients.

Narratives of terminally ill patients - usually brief accounts of 'sufferers' written in the third person - were also common (42%), and frequently presented as support for the legalisation of euthanasia.

DISCUSSION

This study reports on the frequency of discussion of palliative care over time and the nature of this portrayal in a sample of Australian print media occurring in the context of debate surrounding the Victorian Voluntary Assisted Dying legislation. We found palliative care was frequently discussed in the two years prior to the legislation passage. During this time, the opinions of doctors, politicians and vested interests appeared prominently, as did narratives of suffering patients, while the views of patients and caregivers were less often reported. In this context there was very limited discussion of the potential benefits of palliative care. This was particularly troubling since the public discourse was conducted in an environment where studies have demonstrated widespread misunderstandings of palliative care.(6-8)

Our findings add to the few studies of media reporting from other international settings, which also suggest that media portrayal of palliative care is unsatisfactory.(9, 11, 12) Studies from Spain(9) and Belgium(12) have similarly found the voice of patients is frequently unreported, perhaps owing to the socially acceptable nature of palliative care, which renders this topic less 'mediagenic', interesting, and sensational.(12, 13) In our study, where news stories focused upon social debate around euthanasia, palliative care had limited visibility.(9, 12) When feature articles were presented, these tended to be more educational, reliable, and more likely to discuss the comprehensive and multidimensional nature of palliative care.(7, 14)

There is precedent from media analysis focused on other aspects of medicine to demonstrate the potential of working with media to change community discourse related to important health topics.⁽¹⁵⁾ In the area of suicide reporting, the development of key resources and language specific for media use, and access to available experts who can comment may, over time, shift the types and ways stories are presented. A future study examining the longitudinal discourse from this baseline description forward would enable the potential impact of such work to be captured overtime.

A key limitation of this research was that we focused upon news from two print media sources, albeit both with significant readership and considerable coverage for Victoria and nationally. The representation of print news covered by our sample is arguably significant given News Corp and Nine Entertainment (formerly Fairfax) not only own The Australian and The Age respectively but also 18 of Australia's top 25 newspapers by circulation (NewsMediaWorks, 2019). Nonetheless to capture the media portrayal of palliative care more completely, future research should also examine other news media, including social media platforms which may present a different social discourse.^(16, 17) Additionally the future media portrayal of palliative care in different socio-political contexts would be important to determine the extent to which it differs from the discussion in the time of parliamentary debate about euthanasia and physician assisted suicide.

The patterns of reporting and portrayal of palliative care in a sample of Australian print media reflects the socio-political interest in the area of advanced illness, which can interfere with messages related to palliative care. During this time, accurate and comprehensive presentation of palliative care, including coverage of positive aspects, was not common. This has revealed important ongoing opportunities to work with the media to more fully represent palliative care, and, in turn, improve public understanding of choices around care in the setting of advanced illness.

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Table 1. Key Variables Coded from Articles

Variable Coded	Descriptor of categories
The type of story	News report Opinion Letter Other, e.g. human interest stories or book/movie reviews.
The origin of statements	Doctor/clinician Politician Palliative care patient or family member Advocate/lobbyist e.g. community groups such as dying with Dignity. Other e.g. researchers, journalists or historical figures.
The inclusion of narrative	Narrative of a terminally ill patient
The components of palliative care mentioned	Quality of life Pain and other symptom management Family or home involvement.
Mention of euthanasia or related terms	Voluntary assisted dying Physician assisted suicide Other descriptions of deliberate medically hastened death

Table 2. Summary of the coded content of newspaper articles 2016-2017.

	<i>The Australian</i> n = 139		<i>The Age</i> n = 157		Total n = 296	
	n	%	n	%	n	%
Type of article						
News report	69	50	59	38	128	43
Opinion piece	30	22	34	22	64	22
Letter	27	19	37	24	64	22
Other	13	9	27	17	40	14
Origin of statements						
Doctor/healthcare worker	48	35	45	29	93	31
Politician	47	34	36	23	83	28
Palliative care patient	15	11	17	11	32	11
Family of palliative care patient	22	16	15	10	37	13
Advocate/lobbyist	40	29	31	20	71	24
Other	31	22	39	25	70	24
Aspects of palliative care mentioned						
Improved patient quality of life	24	17	12	8	36	12
Pain and other symptom management	48	35	63	40	111	38
Family or home involvement	39	28	43	27	82	28
Terminally ill patient narrative presented	59	42	64	41	123	42
Palliative care in relation to euthanasia						
A form of euthanasia mentioned	104	75	116	74	220	74
Euthanasia is argued for	67	48	85	54	152	51
Euthanasia is argued against	59	42	50	32	109	37
Euthanasia is linked to 'dignified death'	36	26	37	24	73	25
Palliative care presented as inadequate for symptom relief	38	27	39	25	77	26

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