



A Content Analysis of Media Coverage of Health Care
and the Uninsured 2002

A FrameWorks Research Report

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Introduction

As part of a broader research effort for the Endowment for Health, the FrameWorks Institute conducted a content analysis of recent media coverage on the issues related to health care and health insurance, in an effort to understand the dominant frames in use by media, and the conventions of journalism typically applied to this subject. This study reports on these findings across a range of print news media, assessing and categorizing the ways health care issues are typically covered with respect to organizing principles or frames, and such frame elements as the choice of sources or messengers, tone of the coverage, contextualization, etc. that have been shown to have a direct effect on public perceptions of social problems.

Given FrameWorks' interest in health care issues as they play out in public opinion specifically in New Hampshire and California, this analysis compares coverage in those geographic areas to the rest of the country on some key indicators.

It should be noted that a broader, richer and more detailed analysis of media frames was not possible within the resources of this project and therefore, this review should be viewed as a snapshot, not a comprehensive catalogue.

Methodology

Print media coverage addressing health care and the uninsured from August 2002 through December 2002 was compiled. The study comprised a total of 124 news stories, opinion articles, and letters to the editor, which were gleaned from 3 national newspapers, 18 local newspapers, 4 newswire services, and 1 search engine as follows:

<i>Arizona Republic</i>	<i>The Oregonian</i>
<i>Atlanta Journal-Constitution</i>	<i>New York Times</i>
<i>Billings-Gazette (Montana)</i>	<i>The State (South Carolina)</i>
<i>Boston Globe</i>	<i>Waco Tribune</i>
<i>Burlington Free Press</i>	<i>Washington Post</i>
<i>Chicago Tribune</i>	<i>USA Today</i>
<i>Concord Monitor</i>	<i>US Newswire</i>
<i>Dallas News</i>	<i>Reuters</i>
<i>Des Moines Register</i>	<i>AP Newswire</i>
<i>Houston Chronicle</i>	<i>San Jose Mercury News</i>
<i>Los Angeles Times</i>	<i>Ascribe Newswire</i>
<i>Portland Press Herald (Maine)</i>	<i>Yahoo Search Engine</i>
<i>Miami Herald</i>	
<i>Beacon Journal (Ohio)</i>	

This sample was developed to accommodate geographic diversity as well as diversity in the size of media market and circulation size. National newswires were included to enhance the national coverage. To identify the news most likely to inform public discourse in New Hampshire, we selected the *Concord Monitor*, the *Portland Press Herald*, and the *Boston Globe*. In California, we followed the *Los Angeles Times*. Table 1 indicates the number of stories on health from the newspapers in each of these regions during the period of the study.

Table 1: Newspapers from Regions of Interest

Name of Newspaper	Number of Stories	% of Total
New Hampshire region	13	10%
California	9	7%

Using electronic search engines, the following search language was used to capture all the stories where health care terms were in the headline or in the body of the article: health care, health insurance, Medicaid, uninsured, children's health insurance, children's health, and health. No other criteria were used to determine a story's inclusion in the sample. News articles, opinion pieces and letters to the editor were included. As is indicated in Table 2, almost 2/3 (63%) of the print media obtained as a result of this selection process were news articles; 26% were opinion pieces. The majority of the media coverage addressed health care as a national or state/regional issue (44% and 35%, respectively); only 19% of the coverage focused primarily on local health care issues. There was one article that addressed international health care – Canada's universal health care system.

Table 2: Article Type

Type	Number of Stories	% of Total
News	79	64%
Opinion	32	26%
Letter to the Editor	13	10%
TOTAL	124	

There was only a slight discernable pattern to the month-by-month distribution of the stories on health and the uninsured (see Table 3). Only a few news hooks were noticeable that might have encouraged the news media to cover the issue, including Congress taking a recess before addressing certain health care legislation and the November release of a Census Bureau report on the number of uninsured in the United States.

Table 3: Breakdown of Stories By Month

Month	Number of Articles	% of Total
August 2002	1	1%
September 2002	13	10%
October 2002	20	16%
November 2002	59	48%
December 2002	31	25%
TOTAL	124	

Once compiled, the coverage was then coded to reflect how often certain frames appeared in the story. For purposes of this study, ten broad frames were pre-selected using the meta-analysis of public opinion developed for this project and a review of earlier news coverage on health care during the planning phase for this project. The frames included: fairness, protection/vulnerability, responsibility, prevention, future, quality of life, generosity, ingenuity/can do, effectiveness/solutions, and investment. If a frame fell

outside the parameters of the pre-selected frames and dominated a story, it was coded as “other” and noted for the analysis.

It is also important to note that in some instances throughout this report, totals are reported that add to more than 100 percent. This is because stories were coded for all the categories that applied.

Numerous researchers have documented that the most common narrative style used by the media is an episodic approach, consisting of case studies that focus on specific people, places or instances of policy issues or problems. Indeed, previous news content analyses for the FrameWorks Institute have found episodic reporting to comprise as much as 93% of the coverage of youth issues.ⁱ Surprisingly, in this analysis, 88% of the media coverage was thematic in nature, taking a broader and more contextual approach to the story of healthcare. In New Hampshire, virtually all the stories were thematic; in California, 78% of the stories were thematic and 22% were thematic with minor episodic discussion.

All media coverage included in this analysis was subjected to an examination of frame type as follows: episodic, episodic with some thematic discussions, thematic with some episodic discussions, or thematic. A story was deemed episodic if it was based on a single event, the activities of a single company or some other clearly circumscribed experience. A story was coded as episodic with some thematic discussions if its overall style was episodic, but the stories begin by discussing broader trends or patterns. A story was thematic with some episodic discussions if its overall style was thematic, but it begins with an episodic case. And a story was coded as thematic if it spent more time discussing broader or more contextual and thematic information than it spent on case studies or specific examples.ⁱⁱ This is consistent with coding developed by FrameWorks in collaboration with the Center for Media and Public Affairs and applied to our joint projects in previous content analyses.

Typical of the thematic stories was the news article, “Fewer Have Coverage for Health Care” from the *Los Angeles Times*. The article was in response to the release of a Census Bureau report on Americans without health insurance.

“The report found a large drop in job-based health insurance, which analysts said was caused by a combination of rapidly rising health-care costs and a weak economy. Many employers who just a year or two ago needed to offer good health benefits to attract workers now are passing on higher insurance costs to their employees – or dropping coverage altogether.”ⁱⁱⁱ

Among episodic treatments, we saw articles structured like this story from the *Beacon Journal*.

“When Wanda and Delbert Bloom decided to retire early based on her pension and health care benefits, they thought their future was secure. Little did they know that the rising cost of health insurance would put them in a crapshoot. Their retirement budget was built on expenses that included a \$30 monthly premium for

health insurance. The \$30, the Blooms were warned, might go up, but in the summer of 2001 it seemed a safe bet that they'd be able to cover any increases.^{iv}

The distinction between episodic and thematic coverage is important because research has shown that these two types of media frames can direct the attribution of responsibility for the identified problem toward individual or systemic solutions. Because episodic coverage tends to be heavily reliant on discrete events and the plight of individual people, the solutions that readers or viewers are drawn to are more individualistic. With thematic coverage, however, problems are explained in terms of causes and effects, and individuals are placed within long-term or national trends. Presented with this kind of information, the audience is more likely to prioritize collective action and policy solutions.^v

Major Themes and Findings

- The most common frames presented in all of the media coverage analyzed for this study were cost, the government and the economy. Very rarely were broad values, such as fairness and responsibility, explicitly stated.
- Solutions are prominent in the media coverage on health and the uninsured; more so than with other social issues media coverage examined by FrameWorks. This is an important finding, because FrameWorks research on other social problems, such as international issues, has demonstrated that solutions are often a missing ingredient in news stories, leaving individuals with the impression that few solutions exist.^{vi} Since the American public is accustomed to seeing solutions as a part of the equation in a story about health, this may afford health advocates a unique opportunity to place responsibility on government to enact public policies.
- With the frames of economy and cost so prevalent, it is not surprising that print reporters emphasize government as responsible for solving the problems of our health care system. In fact, government entities were identified as the group that should solve the problem in 65% of the media coverage analyzed.
- Rather than blaming the uninsured, the media coverage appears to be largely sympathetic, particularly toward the working poor or middle-class that are typically portrayed as working hard but not receiving health care coverage through their employer. While one might reasonably expect that this would result in some criticism of employers for not covering their employees, the majority of media coverage is considerate of employers who cannot afford the high costs of health insurance.
- In the news articles analyzed, the media is most critical of the government in its reporting of the problems associated with health and the uninsured. The media is less consistent in its criticism of the insurance industry, the drug industry, employers, physicians and the health care system in general.

- Advocates and public officials are the most likely spokespeople in stories about health care and the uninsured. Uninsured individuals were spokespeople in only 7% of the coverage. Because the media seek out advocates as spokespeople on these issues, this tendency may provide health advocates with an opportunity to redirect attention to those solutions they wish to inform the story.

Discussion of Findings

Common Frames: Cost, Government and Economy

Frames are a small set of internalized concepts that allow us to instantly assign meaning to unfolding events. These frames can be triggered by various elements, such as language choices and different messengers or images. This analysis began with an examination of the frames associated with health and the uninsured in all the media coverage. For the purposes of this study, three levels of analysis were undertaken in order to ascertain the specific issue frames, the categories of frames, and the values that inform the coverage in each article.

First, a search was conducted to identify which specific policy issues dominated the discussion in each news story, opinion piece and letter to the editor. Categories of policy issues were pre-selected based on a review of web sites on health care and health policy during the planning phase for this project. Issues such as the uninsured, layoffs and job losses, children's health and insurance, and prescription drugs were included in the analysis. Specific policy issues that fell outside the purview of those in the search were coded as "other." Articles were coded for all issues addressed (so total will not add to 100%). Among the total number of news articles, opinion pieces, and letters to the editor reviewed, the following specific policy issues were most frequently noted:

Uninsured	73%
Insurance	56%
Restructuring Cost Structure	38%
Medicaid	35%
Other issues of note were:	
Budget cuts	24%
Children's health and insurance	25%
Taxes	23%

For example, a news article in the *New York Times* focused entirely on the uninsured, following the release of a Census Bureau report on health insurance:

"The largest group of the newly uninsured – some 80,000 families – are those with incomes in excess of \$75,000. They either lost their jobs, or were priced out of the health care market by rapidly rising insurance premiums."^{viii}

In many cases, these issues were identified in the context of solutions being presented to solve the problems of the health care system. For instance, also in the *New York Times*,

“For two years, Mr. Bush has asked Congress to authorize tax credits for the cost of health insurance bought by people who are not covered by an employer’s plan and not eligible for public programs.”^{xix}

A secondary analysis of these news stories was conducted to ascertain how they categorized healthcare issues -- as issues of health/well-being, aspects of the economy, or consequences of poverty, for example.

Cost	79%
Government	58%
Economy/Recession	47%

An opinion piece in *The Oregonian* is an example of how cost was emphasized as a health care category in print media:

“Opponents of Measure 23 love to scare you with claims that this plan has no cost controls and will be run by bureaucrats...The main cost control that insurance companies use is denying care to sick people.”^{xx}

Notably, health and well-being were dominant concerns in only 15% of the news coverage. Of equal interest, health care was viewed as a poverty-related issue in only 19% of the coverage. When the coverage was re-analyzed for only those news articles, opinion pieces and letters to the editor that focused on the uninsured specifically, the analysis found that reporters appeared more interested in emphasizing the working poor or middle class individuals who recently found themselves without health insurance, than they did in those individuals and families in poverty or on public assistance. Although, as is noted below, there were still a significant number of articles that mentioned Medicaid – in particular those stories covering the release of the Census Bureau report on the uninsured in the U.S.

In New Hampshire and California, this same pattern of coverage held true. Cost was the most common frame category in the California media coverage (present in virtually all of the California coverage); with government and the economy not far behind in 56% and 67% of the California coverage, respectively. In New Hampshire, cost was a dominant frame category in 69% of the coverage, government was identified in 62% of the stories, and economy was named in 54% of the New Hampshire coverage.

A third level of analysis was undertaken to determine to what extent values informed the coverage. The Berkeley Media Studies Group notes, “values systems are crucial to any political culture, and a main root of public opinion in any society...The public participates in this ongoing values discourse in various ways – as voters, as respondents to opinion polls, as advocates and activists, but also as news consumers.”^{xxi} And as FrameWorks research has demonstrated, one effective approach to communicating about social issues is to frame an issue in terms of values and the extent to which those values inform the coverage of that issue.^{xxii} In this analysis, values such as responsibility, choice, and fairness were sought. These frames could often be inferred from an article, without being explicitly stated.

Effectiveness/solutions	31%
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Fairness	27%
Responsibility	27%
Other	43%

“Other” frames included: progress, wastefulness, failure, choice, leadership, and hope.

For example, we coded an article from the *Miami Herald* as being about effectiveness/solutions based on this passage:

“Backed by a \$4 million grant from the Kellogg Foundation and four years of study, Community Voices Miami unveiled an ambitious plan Friday to deal with the problems of people without health insurance by drawing on the resources of employers, governments and health care providers.”^{xiii}

An editorial from the *Des Moines Register*, entitled, “First, A Fair Shake,” concretely identified fairness as the value upon which it was based:

“This country shouldn’t pour more bucks into a broken system without first ensuring the current system is fair.”^{xiv}

Prominence of Solutions

When examining news coverage about social issues, FrameWorks research has found that the stories often identify a problem but few or no solutions. For example, in a content analysis of media coverage of global issues, the Center for Media and Public Affairs noted, “on local and national news alike, there was little discussion of either the character or the source of solutions to global problems.”^{xv} In the case of this analysis, however, a different problem presented itself. Much of the news coverage did not identify a problem at all. The stories examined often identified a cause of the problem, without naming the problem itself. Cost (62%) was the factor most identified as causing problems within the health care system; almost a third of the media coverage indicated the economy was the cause.

An example of the type of coverage coded as “cost causing the problem” is an article on the financing of health care:

“Never mind the operating room. The most critical procedures at hospitals these days are taking place in the billing department. . . . As the American population ages, more people will be sicker longer and therefore will cost more to treat.”^{xvi}

Although solutions are often absent from media coverage on social issues, in this media content analysis, solutions were fairly prominent. This is an important finding, because if solutions are missing from news coverage, individuals are left with little sense of what can be done to alleviate a particular social ill. In this analysis, the media coverage about health care consistently included solutions – indeed, virtually every story included this critical component. One can speculate that, since the American public is used to seeing solutions as a part of the health care story, this could afford health advocates an advantage in explaining the differences between available solutions and helping the public weigh available policy options. However, the disjointed nature of the causal story

also suggests to students of framing theory that media coverage of solutions will not make sense to the public until they are connected to a coherent story about the dysfunctions within the system.

Typical of the solutions coverage was this story, “Book ‘More than a Market’ Explores Health Care Solutions for Uninsured, Underserved Americans” from *AScribe Newswire*:

“We haven’t found any magic potion, but we have made impressive headway. And in a slowing economy, with more people unemployed and uninsured, the solutions outlined in ‘More than a Market’ are of immediate value to businesses, public institutions, government policy makers, and grantmakers.”^{xvii}

This content analysis investigated the extent to which *particular solutions* appeared in the media coverage. A list of solutions was pre-selected based on a review of web sites on health care and health policy during the planning phase for this project. Issues such as taxes/tax incentives, improved access, flexibility for states to extend coverage to uninsured, insurance reform, increased funding, and preventive care were included in the analysis. Specific solutions that fell outside the purview of those in the search were coded as “other.” About a fourth (27%) of the coverage identified taxes/tax incentives as a solution and 22% discussed increased funding. An example of how taxes were identified as a solution appears in a story from *Reuters Health*:

“Voters in Arizona approved an initiative to raise the tobacco tax to \$1.18 per pack, making it the nation’s highest. Funds raised would help underwrite the state’s trauma system.”^{xviii}

In over half (57%) of the coverage, other solutions were identified that fell outside the purview of the solutions our analysis was tracking. These other solutions covered the gamut – from employers paying their employees more so they can buy their own insurance to consumer-directed health plans. This may suggest to policy advocates that readers are being presented with a smorgasbord of solutions, rather than a more reliable and definitive list.

Who is Responsible?

With the frames of government, cost and economy so prevalent, it is not surprising that print reporters emphasize government as the responsible agent for solving the problems of our health care system. In fact, government entities were identified as the group that should solve the problem in almost 2/3 (65%) of the media coverage analyzed. Individuals and the health care system were named as responsible parties in 16% and 15% of the coverage, respectively. One important finding is that rather than “blaming the victim,” the tone of the media coverage of uninsured individuals and populations appears sympathetic toward those individuals who are working but lack health insurance coverage. Further, the media coverage is sympathetic in its treatment of employers, even though many workers lack insurance because their employers are not providing it. Rather than identifying employers as the agent responsible for the problem, the coverage indicates that employers are in an equally difficult financial position in attempting to afford the high costs of health insurance for their employees. For example, a *Los Angeles Times* article about a survey of LA-based employers notes,

“Los Angeles-area companies expect health-care spending on their employees to jump nearly 15% next year, a survey set to be released today has found. That would come on top of an expected 8.6% bump this year, when employers will spend an average of \$5,628 per worker...”^{xix}

In the media coverage for California and New Hampshire, government entities were also the most commonly identified group responsible for solving the problems of the uninsured. In New Hampshire, 69% of the articles (9 of 13) indicated government entities, and 31% (4 of 13) indicated the health care system itself as responsible. In California, 56% (5 of 9) identified government entities as responsible, with identifiable other parties named minimally.

An example of note in the *Concord Monitor* is:

“[New Hampshire’s acting commissioner of the Department of Health and Human Services] provided a list of strategies the department already had devised to try to save money. This year, the department began a program to save money on prescription drugs for Medicaid patients; froze Medicaid reimbursement rates for hospitals...; and instituted a moratorium on nursing home beds.”^{xx}

In numerous *Los Angeles Times* articles, government is identified as responsible for solving the problem, as exhibited in the following:

“[Gov. Gray] Davis could start with a commitment to up the state’s contribution – among the lowest of such payments in the nation – to Medi-Cal, the state version of the low-income Medicaid program, which would trigger additional matching federal money.”^{xxi}

While the party responsible for solving the problem was common among the coverage, approximately 40% of the stories did not identify a group or individual who is responsible in some way for causing or continuing the problems associated with health care and the uninsured. Only 32% identified government entities; 17% identified the insurance industry as responsible, 13% identified employers/business and 12% indicated the health care system.

Elements of the Frame: Health Care and the Uninsured

Following the perspective of strategic frame analysis, we would expect the frames we see exhibited in the media coverage to be composed of a set of elements that give the frame shape and coherence. Each of these elements is capable of providing the reader with powerful cues about how to think about a particular issue. For this analysis, FrameWorks tracked a number of frame elements in order to evaluate the overall frame construction.

The specific elements analyzed were:

- Messengers
- Metaphors and Models
- Numbers
- Tone

Messengers: Speaking Up for the Uninsured

The study sought to identify the spokespeople quoted in the media coverage – the people who served as messengers of a particular way of framing the issue. We found that advocates and public officials are the most likely spokespeople to be included in our sample of stories about health care and the uninsured.

Advocates	31%
Elected officials	22%
Government entities	21%

In some cases, think tank representatives (14%), private insurers (12%), and physicians (12%) also served as quoted sources. Uninsured individuals were spokespeople in only 7% of the coverage. The emphasis on elected officials as sources attests to the polarized political nature of the coverage, as in this article from the *Boston Globe*:

”Discouraged that recent attempts at piecemeal health care reform have been largely ineffective, [Senators] Wyden and Hatch believe now is the time to launch a national effort to put public participation at the heart of creating a system that will bring quality health care within the reach of every American. ‘For more than half a century, the millions of Americans whose survival depends on quality, affordable health care have never been given the chance to shape their health care future,’ said Wyden.”^{xxii}

Interestingly, almost 1/3 of the coverage from New Hampshire area papers did not identify any messenger at all; and government entities were spokespeople in only one article. This is in part due to the fact that editorials comprised almost half of the New Hampshire area sample. Typical of the New Hampshire area coverage is this editorial from the *Maine Press Herald*, which straightforwardly presents the issue, based on the editor’s knowledge about current events impacting the state:

“Last week, a federal appeals court heard arguments as to whether the Healthy Maine Prescription program conflicted with Medicaid rules.... The U.S. Supreme Court, meanwhile, is expected to hear arguments this term about MaineRx, which is designed to provide discount drug prices to all Mainers without insurance.”^{xxiii}

In New Hampshire, the other most frequently quoted source was advocates. In California, the other most frequently quoted sources proved to be advocates, private insurers, and academics (See Table 4 below). This is best exhibited by the following quotes from a *Los Angeles Times* article:

“‘Are we really saying that reductions in medical care should be ‘experienced mainly by the poor?’ asks Uwe Reinhardt, a Princeton University health-care scholar. ‘I would not want to make that call – other than to plead that we be honest about it.’”^{xxiv}

“‘About half our Secure Horizons members will be asked to pay higher monthly premiums to offset health-care inflation and insufficient federal funding,’ says a PacifiCare spokesman.”^{xxv}

Table 4: Type of Messenger

Type of Messenger	New Hampshire	California
None Identified	31%	22%
Government Entities	0%	33%
Elected Officials	23%	22%
Advocate	15%	11%
Private Insurer	8%	44%
Academic	8%	33%

Because the media already seek out advocates as sources on health care issues, this provides health advocates with an opportunity to work with reporters to tell the story in a new way and to provide quotes and soundbites that reframe the story.

The Tone of Health Coverage

Recent FrameWorks research has consistently shown that when the discourse about social problems becomes too extreme, argumentative or partisan, large segments of the public are likely to tune out and dismiss the message as “just politics.” Few converts to remedial policies are likely to be made.

Tone refers to the style, mood, manners or philosophical outlook of a communication: shrill, liberal, moderate, abrasive, etc.^{xxvi} On social issues, FrameWorks identifies two categories of tone: reasonable and rhetorical. As FrameWorks research partners at Cultural Logic point out:

- People can be both reasonable and opinionated on any given topic.
- When they are in “reasonable mode,” they are more likely to be open to new information and to problem-solving.
- Rhetorical mode is more overtly political or ideological. It reminds people of their hardened positions and political identities, if they have them, and turns many people off.
- Experts and advocates lose credibility when they talk in rhetorical mode, as this violates the “disinterested” requirement for effective messengers.

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In this analysis, we sought to determine the overall tone of the stories. Only news stories were examined, as opinion pieces and letters to the editor are, by nature, more rhetorical. Tone was coded as highly reasonable, mixed in both reasonable and rhetorical tone, and highly rhetorical. A news article was deemed highly reasonable if it was dominated by reasonable tone. The article was coded as highly rhetorical if it was predominantly rhetorical in tone.

An article was identified as mixed if it exhibited a balance of both reasonable and rhetorical tone throughout the entire article. Of the articles examined for this study, the overall tone of the media coverage was generally mixed. 61% of the media included a

mixture of both reasonable and rhetorical tone, while 21% were highly rhetorical. In California, 6 of the 9 (67%) articles were mixed in their tone; and in New Hampshire, 8 of the 13 (62%) were mixed in tone.

An example of a mixture of both rhetorical tone and reasonable tone in a story is:

“Congress has proved incapable of acting on such comparatively minor health care issues as a patients’ bill of rights or a drug benefit for Medicare beneficiaries....But the president’s plan will do little to reduce the ranks of the uninsured and may inadvertently increase them.”^{xxviii}

Metaphors and Models

In some cases, communications problems arise because an important type of mental shortcut is *missing* - one that captures the key conceptual content of an issue. One way to help readers understand the complexity of an issue is to condense it into simple metaphors and cultural models. Metaphors map on to the unfamiliar object or situation and tell us how to think about it. In addition, we use cultural models or familiar mechanisms to make sense of abstract or complex ideas. Simplifying models are a kind of metaphorical frame that both capture the essence of a scientific concept, and have a high capacity for spreading through a population. The absence of a clear mental model keeps people from processing information on the topic that is put in front of them, and keeps them from becoming engaged with the issue.^{xxix} For example, research conducted by Cultural Logic and FrameWorks has shown that most Americans lack any real understanding of how global warming occurs, and that describing the problem in terms of a simplifying model – for example, as *a carbon dioxide barrier that traps heat* – makes it significantly easier for people to understand and engage with the issue.^{xxx}

Metaphors and models were seldom used in the media coverage we analyzed. In fact, 72% of the coverage did not use any metaphors and 94% did not use any models. Given the fact that much of the coverage focused on solutions and little of it on the nature of the problem, strategic frame analysis would suggest that the public is likely to be left with little understanding of the problem it is being asked to solve and thus few yardsticks for evaluating the solutions presented. Again, this provides advocates with an opportunity to explain the problem and policy solutions in a new way to readers, by more readily using metaphors and models in their communications.

Numbers: What Do They Mean?

Too often reporters and advocates rely on large, complicated numbers and data to explain the size and extent of a social problem. This habit is evident in the media coverage on health care and the uninsured. Numbers and statistics were used in all but 27% of the media coverage. However, in most cases (73%), the numbers included were data driven with no interpretation of the numbers provided in the narrative. For example,

“HHS Secretary Tommy G. Thompson today announced 42 grants worth more than \$13 million to create new health center sites and expand capacity at existing centers in 23 states. The grants are expected to provide health care services for an additional 195,000 Americans.”^{xxxix}

An effective technique for describing numbers -- social math – was non-existent in the media coverage FrameWorks analyzed. Social math was developed by public health advocates and defined by the Berkeley Media Studies Group as making “large numbers comprehensible and compelling by placing them in a social context that provides meaning.”^{xxxii} Since the numbers used in the coverage are currently without interpretation, health advocates are presented with an opportunity to make health data understandable for the general public.

Implications

This review of a sample of print media coverage about health care and the uninsured demonstrates that, while solutions are readily conveyed, the nature of the problem and what is at stake for citizens remain largely missing from the public discourse, resulting in an incoherent story, one that lacks simple causal links between problem, effect and solution.

This situation does provide advocates with an opportunity to reframe the debate in some significant ways. The economy, cost, and government prevail as the most common frames in use by media to explain stories about these issues, directing people only to solutions that fit within those frames. In order to promote another set of solutions, new frames will likely need to be introduced to direct people’s line of thinking. Those frames will need to focus on filling in the missing pieces in the media frame, including problem definition.

Government is not seen as a positive force in solving the problems of the uninsured, and yet, governmental organizations are most commonly identified as the groups that *should* be responsible. As numerous other survey researchers have shown, few Americans have confidence that government can solve most social problems. Given this, it may be the case that health care coverage portrays a system that is broken and a solution that is broken as well.

Simplifying techniques to explain the nature of problems affecting the health care system and to interpret data in meaningful ways for ordinary citizens were virtually non-existent in this analysis. We can speculate that confusion about the nature and size of the problem is the likely take-away for many readers. Again, this finding suggests an opportunity for those who can effectively educate the public about the simple causal story, without heaping on additional facts and figures.

The fact that the vast majority of the coverage is thematic remains one of the most important findings from this study. This habit of coverage suggests that readers are likely to understand health care reform as a systemic problem requiring policy solutions, and not as an individual problem to be addressed at the personal or community level alone. This finding also suggests a significant conceptual foundation on which advocates can build.

Finally, the inclusion of advocates as legitimate voices on health care issues in this sample suggests that they can more easily shape public debate on these issues than others where the voices of ordinary people and advocates is seen by media as less germane.

Overall, this analysis demonstrates that advocates have significant opportunities to build on media access to further reframe the debate about health care and the uninsured.

ⁱ Amundson, D., S.R. Lichter and L. Lichter, "What's the Matter With Kids Today: Television Coverage of Adolescents in America." Center for Media and Public Affairs, 2001: 1.

ⁱⁱ Center for Media and Public Affairs, "Youth Media Analysis Code Book." 2001.

ⁱⁱⁱ Kemper, V., "Fewer Have Coverage for Health Care. Insurance: Soaring, Costs and A Shaky Economy Reverse Trend. Crunch Affects All Income Levels." Los Angeles Times, September 30, 2002.

^{iv} Irwin, G., "Health Care Costs Squeeze Many Retirees." The Beacon Journal, November 10, 2002.

^v Iyengar, S. *Is Anyone Responsible?: How Television Frames Political Issues*. Chicago: University of Chicago Press, 1991.

^{vi} Amundson, D., S.R. Lichter and L. Lichter, "The Myopic Neighbor: Local, National Network Television Coverage of the World." Center for Media and Public Affairs, 2001:18.

^{viii} Broder, J., "More in Middle Class Lack Health Coverage." New York Times, November 24, 2002.

^{ix} Pear, R., "Bush and G.O.P. to Push for Medicare Drug Benefit." New York Times, November 10, 2002.

^x McEachern, B., "Pro: Should We Have Universal Health Care?" The Oregonian, October 7, 2002.

^{xi} Berkeley Media Studies Group, "American Values and the News About Children's Health." Issue 12, August 2002: 3.

^{xii} Bales, S.N., "A Five Minute Refresher Course in Framing." KIDS COUNT E-Zine #8, FrameWorks Institute Web Site, November 2001. For more information about the concept of framing and framing issues in terms of values, please visit the FrameWorks Institute web site at www.frameworksinstitute.org.

^{xiii} Dorschner, J., "Goals: Insure More People." Miami Herald, October 26, 2002.

^{xiv} Register Editorial Board, "First: A Fair Shake." Des Moines Register, October 8, 2002.

^{xv} Amundson, D., S.R. Lichter and L. Lichter, "The Myopic Neighbor: Local and National Network Television Coverage of the World." Center for Media and Public Affairs, 2001: 18.

^{xvi} Flanigan, J. "Radical Surgery Is Needed on the Way America Finances Health Care." Los Angeles Times, November 10, 2002.

^{xvii} Ascribe Newswire, "Book 'More than a Market' Explores Health Care Solutions for Uninsured, Underserved Americans." September 30, 2002.

^{xviii} Rovner, J., "US Voters Send Mixed Messages on Health Initiatives." Reuters Health, November 6, 2002.

^{xix} White, R., "Employers Expect to Spend More on Health Care." Los Angeles Times, December 9, 2002.

^{xx} Wangsness, L., "Budget Crunch Could Lead to Medicaid Cuts." Concord Monitor, November 21, 2002.

^{xxi} Los Angeles Times Editorial Board, "A Loud 'Yes' on Health Care." Los Angeles Times, November 11, 2002.

^{xxii} National Desk, Health Care Reporter, "Sens. Wyden, Hatch Introduce Bill to Reform Health Care System through Citizen Involvement." US Newswire, October 7, 2002.

^{xxiii} Maine Press Herald Editorial Board, "States Should Have Authority to Address Health-Care Issues." Maine Press Herald, December 8, 2002.

^{xxiv} Flanigan, J. "Radical Surgery Is Needed on the Way America Finances Health Care." Los Angeles Times, November 10, 2002.

^{xxv} Ibid.

^{xxvi} Aubrun, A. and J. Grady. Cultural Logic.

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- ^{xxvii} Lubia, A., and M. McCubbins. 1998. *The Democratic Dilemma: Can Citizens Learn What They Need to Know?* Cambridge: Cambridge University Press.
- ^{xxviii} Aaron, H.J., "Template for Health Care Coverage." The Washington Post, November 25, 2002.
- ^{xxix} Aubrun, A. and J. Grady, "Opening Up the Black Box: A Case Study in Simplifying Models," FrameWorks E-Zine #19, FrameWorks Institute Web Site, October 2002.
- ^{xxx} Aubrun, A. and J. Grady, "Simplifying Early Childhood Development: Findings from Cognitive Analysis and Phone Interviews." *Cultural Logic*, January 5, 2003: 6.
- ^{xxxi} National Desk, Health Care Reporter, "HHS Continues to Strengthen Health Care Safety Net by Awarding \$13 Million to Create and Expand Health Centers." US Newswire, December 9, 2002.
- ^{xxxii} Wallack, L., K. Woodruf, and L. Dorfman, *News For A Change*. Thousand Oaks, CA: Sage, 1999: 63.

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