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Disclosure of Health Information: a challenge of trust between the various sectors involved

Carmen Peñafiel Saiz [[CV](#)] [[ID](#)] [[G](#)] Lecturer in the Department of Journalism - Universidad del País Vasco/Euskal Herriko Unibertsitatea, UPV/EHU, Spain / carmen.penafiel@ehu.es

Idoia Camacho Markina [[CV](#)] [[ID](#)] [[G](#)] Lecturer in the Department of Journalism - Universidad del País Vasco/Euskal Herriko Unibertsitatea, UPV/EHU, Spain / idoia.camacho@ehu.es

Alazne Aiestaran Yarza [[CV](#)] [[ID](#)] [[G](#)] Lecturer in the Department of Journalism - Universidad del País Vasco/Euskal Herriko Unibertsitatea, UPV/EHU, Spain / alazne.aiestaran@ehu.es

Milagros Ronco López [[CV](#)] [[ID](#)] [[G](#)] Lecturer in the Department of Journalism - Universidad del País Vasco/Euskal Herriko Unibertsitatea, UPV/EHU, Spain / milagros.ronco@ehu.es

Lázaro Echegaray Eizaguirre [[CV](#)] [[ID](#)] [[G](#)] Lecturer at the University School of the Bilbao Chamber of Commerce, EUCCB, Spain / lazaro.echegaray@eucbb.com

Abstract

Introduction: This article presents the results of funded research on health information and the responsibility of the different sectors involved in communicating this knowledge. **Objectives.** The objectives are to discover whether educational information with rigour and quality is achieved in the Basque press, analyse the health information and examine work done by journalists in the health scope and their relation with doctors. **Methodology.** Quantitative and qualitative techniques have been implemented. An analysis of the contents of the Basque press between 2001-2010 was carried

out: *El Correo*, *Noticias de Gipuzkoa*, *Noticias de Álava*, *Diario de Navarra* and *Berria*. A total of 30,311 newspapers published in the two regions in a ten-year period. The data was compiled based on the ‘composite week’ technique. The qualitative study was carried out by means of in-depth interviews to experts during 2012: journalists who commonly publish health information in the aforementioned newspapers and the directors of health care centres in the Basque Country and Navarra. **Conclusion.** This study raises the issue that health information lacks an educational perspective; professional specialisation is required and doctors and journalists must strengthen a better relation by minimising the differences which separate them.

Keywords: Communication, journalism, health, trust, distrust, healthcare professionals, Basque media

Contents: 1. Introduction. 2. Theoretical approach. 3. Methodological Aspects. 4. Highlights from the interviews with the journalists and healthcare professionals. 4.1. Educational perspective. 4.2. Accuracy and quality. 4.3. Trust and distrust in the relationship between physicians and journalists. 5. Final thought: ideas to foster greater trust between doctors and journalists. 6. Bibliography.

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1. Introduction

The research team that helped put this paper together is committed to conducting health and communications studies, a line of work that we have been working on for several years at the University of the Basque Country (UPV/EHU). We come from different disciplinary fields: sociology, communication, journalism, and documentation. We started with a basic premise: the social concern for health has been on the rise, more and more health information is being created, and society is demanding greater attention to health issues. “Society's growing interest in health issues has resulted in increased news presence in all media, whether written or audiovisual, generalist or specialist, and has also resulted in the emergence of new magazines on health, welfare, etc.” (Blanco y Paniagua, 2007:6). Healthcare and the importance of preventive care is in the social discourse, political discourse, advertising discourse, and little by little, is penetrating social awareness and this information must be clear, written by professionals who tell it like it is, and are informed through expert sources.

Giddens says that “in constructing the self, modern culture makes available to individuals a great many options and resources. The resources might be understood as cultural scripts, or discourses, and modern self identity is formed in a manner that is sometimes quite reflexive” (Giddens, 1991).

For this reason it is important to study the relationship between the media and health. “To understand the potential of relationship between media studies and society –at least where issues of identity and experience are concerned– we must address the issue of where experience comes from” (Seale, 2003: 514).

In this way, the research team poses the same issues that, one day, posed Noar: Mass media campaigns have long been a tool for promoting public health. How effective are such campaigns in changing health-related attitudes and behaviors, however, and how has the literature in this area progressed over the past decade? (Noar, 2006: 21-42).

The increase in health content in the Spanish media occurred mainly in the 2000-2010 decade in which at least three circumstances coincided: they were economic boom years, it targeted an increasingly elderly population who needed health information and also a population with an exaggerated worship of the body that leads to consuming content on nutrition, sexual health and beauty; the information has been adapted to the needs of new emerging media, specifically the boom of the Internet and social networks which are used for having a closer relationship with readers and are sources of information in a fast-paced news process. “The increased interest in health by the press during the 1997-2006 decade parallels the penetration and distribution of Information and Communications Technologies in Spain (...) In the field of health, especially in biomedical research, this effect is particularly pronounced because there are three circumstances that favor the explosion of information: broadcasting information increases, journalists' access to information increases, and the public's demand increases” (Observatorio de la Comunicación Científica, 2008: 14)

In this scenario, media professionals encounter different difficulties in performing their work. On the one hand, health information unites journalists and doctors who structure their thinking differently. A doctor is a person of science who is used to making very carefully considered decisions. A journalist is a communications professional dealing with daily information where decisions are often made on the spot. Consequently, they write in a different manner and that creates conflict in daily work.

Also, there is pressure from the laboratories every day bombarding them with phone calls and press releases, often when it's just about surreptitious advertising. There are also institutional problems arising from the fear of the influence of the media in society, where political interests turn communications offices into bunkers that no longer serve the institution, but the party that manages them, when they should function as another service for citizens.

Another difficulty is the current economic crisis which has led the media to reduce their workforce and limit the space reserved for all kinds of information.

Fermín Apezteguia, a journalist for *El Correo*, stated the following about the work of scientists and journalists at a conference held in Bilbao on April 18, 2013 within the Department of Scientific Culture of the UPV/EHU: "Scientists and journalists have a radically different way of thinking. If I were driving in a car with a doctor and we came across an accident, I'm sure the doctor would see a patient and I would see a story, but the two of us would see a person suffering and, therefore, we both have areas where we agree and where we can work together. Journalists have to rush and make quick decisions. Doctors write long texts that are the result of months and years of work. We work on the day to day happenings and we need them to share with us in a clear, simple manner.”

Others are involved in this communication of health information besides journalists and healthcare professionals: such as patients who have a vested interest, who are suffering, who have illnesses and who are becoming more informed and organized; readers or an audience that knows the information

and wants different stories to be told and that, on the other hand, are also very knowledgeable; laboratories that are mainly interested in their products being spoken about; and communications offices that serve the interests of their clients, on the one hand, and the media, on the other.

Informative value is necessary in the field of health and in the field of communications. Journalists look for news: therapeutic and surgical news, anything that may have to do with prevention, looking to talk about vaccines, diseases, treatment, research, etc. Both professionals are interested in dissemination and prevention. They form a perfect symbiosis in order to transmit the scientific culture and health information and recommendations to society. In this line of shedding light, both professions come together along the path of innovation.

2. Theoretical approach

Health information in the media has increased substantially and this issue is seen as one of the most important to society and is reflected in the data offered by the Health Barometer (2011) published by the Spanish Health Department and the CIS (Center for Sociological Research). In this information, citizens are looking for an improvement in their quality of life and the answer to their illnesses, treatments, diseases, research, and other health issues.

Coral Larrosa (2003: 43), Elena Barrena (2003: 73) and Idoia Camacho (2010: 141) agree that today all Spanish media has specific sections for health and science. The emergence of the toxic shock syndrome and AIDS in the eighties marked a watershed. From these events, spaces for healthcare and health information were created and there began to be specialized professionals. “Thereafter, health information has been increasingly occupying space in all types of media: newspapers have created sections and/or specialized health supplements, there are new radio and television programs, new specialized publications have been created, communications agencies and public relations specialists in the health sector have emerged, etc.” (Camacho, Peñafiel, Ronco, 2012: 3)

The media is the "driving force" of the public's healthcare education. They begin to use the media as a source for obtaining information on specific health topics and healthy habits, relying on journalism's role of medical disclosure: they become mediators between doctors and the rest of society. “The influence of the media on public opinion is indisputable. Therefore, the treatment given to information, messages, and the images used must reflect the realities of the issues addressed, taking into account the impact on receiving information and any training-educational potential the news may have” (Aecc, 2006: 8)

Accuracy, professionalism, and quality are critical issues because health journalism can provide significant benefits for the welfare of society but can also lead to negative effects, creating false expectations or alarm. “It’s about educating about health with messages that teach and are useful to the public, prepared by responsible professionals that avoid the sensationalism which is extremely easy to achieve in these issues” (Blanco y Paniagua 2007: 6)

The coverage of health news is important, so we asked a group of healthcare professionals for the quality criteria that this news must have. Specifically, they were asked their views on concepts like the accuracy, quality, and professionalism of the writers. For this group, the quality of health news requires knowledge of the sources, quoting them properly, comparing the information with the information sources and, above all, the editorial assistance of professionals from both sectors: healthcare and communications (Peñafiel *et al.*, 2013; Echegaray *et al.*, 2013). All agreed that this type of news should be produced in a responsible, accurate manner and they accorded special importance to the educational component it should have. The combination of all of these factors made for informative health news that is dedicated to serving the public.

3. Methodological Aspects

This paper is part of broader research that has been conducted using quantitative and qualitative techniques.

The overall goal of this paper is to understand the process of writing health news in the Basque and Navarran media and the relationship established between journalists and healthcare professionals in order to produce a rigorous disclosure of health journalism.

We started with the following assumptions:

1. Specialized health journalism is necessary for disclosing information on prevention, disease, healthcare, and healthy habits aimed at society in general.
2. Healthcare professionals distrust journalists and think that they are more concerned about the impact of the news than the accuracy of the information or its educational perspective.

On the one hand, we analyzed the content of the Basque press between 2001 and 2010: *El Correo*, *Noticias de Gipuzkoa*, *Noticias de Álava*, *Diario de Navarra* and *Berria*. Have been to collect data from the technique of 'composite week' for subsequent analysis of content: a research technique that allows making inferences to be able to identify systematically and objectively identified certain characteristics within a text (Stone, 1965).

On the other hand, we proceeded with a qualitative methodology conducting in-depth interviews with experts in 2012: journalists who regularly published health news in the aforementioned newspapers and directors of healthcare centers in the Basque Country and Navarre. “The importance of in-depth interviews is based on the fact that they enable you to get to know people well enough to understand what want to say and create an atmosphere where they are likely to express themselves freely” (Taylor y Bogdan, 1987: 199).

These interviews also fall within the classification 'Interview specialized and elite', according to the Dexter model, where in this case, not standardized. This is an interview with an informant who is given special treatment, not standardized, which allows you to enter the notions of what it considers relevant, rather than relying on the notions of relevance researcher (Dexter, 1970: 5).

Furthermore, unlike other qualitative research techniques such as observation, an in-depth interview is more capable and effective in accessing information that is difficult to obtain without the involvement of an interviewer or an interactive group context (Vallés, 1999: 196-197).

The following were interviewed:

- Fermín Apezteguia, a journalist from *El Correo*
- Ana Ursula, a journalist from *Noticias de Gipuzkoa*
- Carlos Martínez Orduna, a journalist from *Noticias de Álava*
- María José Echeverría, a journalist from *Diario de Navarra*
- Ainara Arratibel, a journalist from *Berria*
- Jose Manuel Ladron de Guevara, Medical Director of the Hospital Donostia, San Sebastian.
- Ana Bustiunduy, Director of Primary Care of the District of Donostia, San Sebastian.
- Ruth Vera, Medical Director of the Hospital of Navarra, Pamplona.
- Karmele Ayerdi, Deputy Director of Primary Care of East Navarre, Pamplona.
- Enrique Barez Hernandez, Medical Director of the University Hospital of Alava, Vitoria-Gasteiz.
- Adolfo Delgado, Medical Director of Primary Care of the Region of Alava and Head of the Olaguibel Outpatient Unit of Vitoria-Gasteiz.
- Victoria Egurbide, Head of the Internal Medicine Department of the Hospital de Cruces, Barakaldo (Vizcaya).
- Ricardo Franco-Vicario, Clinical Director of Internal Medicine of the University Hospital of Basurto, Bilbao.

The results in this paper relate largely to the qualitative analysis consisting of the in-depth interviews mentioned above.

4. Results: highlights from the interviews with the journalists and healthcare professionals

4.1. Educational perspective

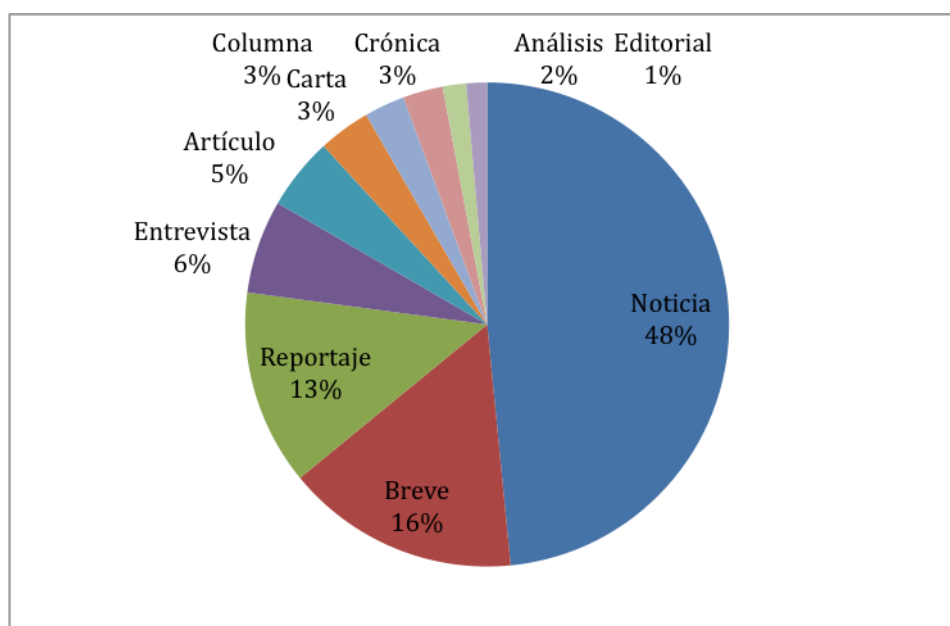
One of the most prominent researchers and communications intellectuals, Jesús Martín Barbero said that the media are not just messengers but rather mediators who help communicate issues that are essential to the public's understanding (Barbero, 2010).

If education is one of the responsibilities of all media towards society, this role is especially important when it comes to healthcare information that is not generally useful to the public if not accompanied by an explanation (Calvo, 1997: 201). The media perform this educational function through medical disclosure, being mediators between the medical profession and society. For example, in 2002 the WHO assumed the role of spokesperson and now it has a closer relationship with the media. When there was an outbreak of severe acute respiratory syndrome (SARS) in China in 2004, the WHO concluded that the media helped them a lot to broadcast the risk. People did not

travel to China as much and they could further control the disease. It went very well for them and they have since maintained that communications policy.

This educational role is taken into account when exercising the journalistic profession and even more so when it comes to issues dealing with health. “That is to say, the informative fact, no matter what it is, should always be published with data and tips on actions that will benefit a person's wellbeing. Undoubtedly, the point is to be thorough and serious when informing, without ever creating false expectations. But also, why not? The point is to educate regarding health issues with messages that teach and are useful to the public, prepared by responsible professionals that avoid sensationalism which is extremely easy to achieve when it comes to these issues” (Blanco y Paniagua, 2007:5). However, the speed, urgency, lack of time and space to echo this information makes it so that most of the information covered does not have that educational perspective. That is how the journalists stated it.

Figure 1. Genres of health texts in the Basque press 2001-2010



In this regard, we can say that in the content analysis we conducted on the Basque press, 76.14% of the published texts did not have that educational facet since 48% is news where data and specific facts reign compared to other genres such as stories or interviews which go more in-depth and care more about the educational perspective, representing 13% and 6%, respectively. “Some of the suitable methods for dissemination in the field of health include news and interpretive genres, specifically reports and in-depth articles, but also feature articles and essays become important as a genre of opinion (...). In the case of reports and interviews, the current criterion is relaxed in order to enable data searches and analysis. When putting together specialized texts aimed at disclosure, prior,

more leisurely and detailed research is necessary which must meet a number of requirements” (Blanco y Paniagua, 2007: 19-20)

Medical professionals look at the educational perspective from two different facets. First, they consider that the educational concept of the story leads to prevention. Ruth Vera from the Hospital of Navarre gives an example: "This year we analyzed waiting lists. We found that 40,000 people did not come to their appointment in outpatient settings. We used the press to warn people about this fact and to alert the public about the consequences." So, Ruth Vera argues that when people are informed about what is going to be done, how it's going to be done, and when, they are being educated. Karmele Ayerdi, Deputy Director of Primary Care of Navarre, believes that health news is increasingly seeking the educational component, especially in recent years. She argues that education exists from the moment that something is told that is related to an issue that people should respond to. Such is the case when it comes to issues such as vaccination. "From an informative point of view, this specialized field is closely linked to Service Journalism and useful information. It is not just about publishing news related to diseases and scientific developments, but especially on how these advances benefit people, how you can avoid the risk of certain ailments or how certain behavioral aspects such as diet and exercise have a beneficial effect on wellbeing and health” (Blanco y Paniagua, 2007: 5)

Moreover, some believe that not all news must have an educational component. Some are likely to have it and others do not. The general trend is to establish a comparison between what is educational and what is entertaining.

Enrique Barez is also not sure if not having a clear educational perspective is very serious since newspapers live off of news and he gives the following example: "Every summer educational news is published on the prevention of sunburns and skin cancer. Dermatologists actively and passively insist on what we should and should not do, what times we need to get out of the sun, what to do with children, the elderly, how to avoid dehydration, athletes are also given rules on how to stay hydrated, etc. It's just like during the flu season. And this is purely educational, purely public health. It's not very newsworthy, that is to say, the story is published and that's it for the news.

However, for the media it is surely much more interesting to follow an outbreak of an infectious disease at a healthcare center and how the healthcare system addresses it, controls it, cures it and what its consequences are. This leads to many more written pages than the previous example. Anyway, if health education is published it will have an impact and might reach a lot of the general population.

Adolfo Delgado says that if health journalism had that side it could do a great work of dissemination: "We are using all types of media, networks, etc. for health communications and so far, the mass media is really strong. I don't know if they will be in the future, but since they are now, we would be able to accomplish a lot if we used the media for transmitting the educational perspective."

Ricardo Franco-Vicario also insists that the media is very enthusiastic about the news and they create hope and expectations that do not come to pass and this results in great frustration. Specialization by journalists in the field of health would help avoid sensationalism in the information and devoting

time to reflect on the news would avoid creating false expectations of miraculous healings among the audience” (Mediavilla, 1999: 4).

Contrary to educational news is sensational news which sells more than the former. Dr. Egurbide believes that the news about medicine and health published in the media seek more urgent news and its impact than the educational aspect of the people.

On the journalistic side, Fermín Apezteguia, a journalist specializing in health at the newspaper *El Correo*, asks for accessibility from the scientists, and specifically medical professionals: "They should be accessible. They should give us the time we need to get the information, documentation, and pertinent explanations and they shouldn't get rid of us in five minutes because, the more time we have, the better we can tell our audience about the subject matter. We should be able to reach them at five or seven in the evening, at the time when the news breaks in order to give our readers what they need in a clear and simple way. I will trust the professional in front of me and you must trust the journalist next to them. Most of all, we want news because we are first and foremost journalists."

Educational news might emerge from a joining of forces between expert reporters and doctors who are committed to disclosure. Then there would be true health journalism to serve the public.

The concepts of information, communications, and education are essential tools in promoting health, precisely because of the need for educational and communications resources to achieve changes in society's health behaviors and practices.

Healthcare professionals agree that the institutions do a good job of disclosing information and think that this objective should be a much more sustained, continuous work of educating the population, especially when it comes to health. They also demand this obligation from the media because they believe that this educational aspect in health news is just as important as reporting.

In addition, the WHO has been calling on health professionals and public authorities to facilitate the public's access to health information. It is aware that citizens are increasingly interested in health journalism and it is important to take advantage of this demand for information to help educate them and promote healthy behaviors.

4.2. Accuracy and quality

It is difficult to concur or agree on the criteria that govern the quality of the information. In general, we can say that we are informed with professionalism, responsibly, and with an abundance of approaches and resources (graphics, photography, data sheets...). Health information requires complicated balancing acts and, except for a few exceptions, it is reported on in an ethical manner. When talking about professional ethics, it must translate into accuracy that must accompany professionalism, reliability, independence, impartiality, accuracy, objectivity, knowledge, and training. And a second translation of any of these elements leads to specialization (Catalán Sesma, 1998: 3).

For journalists, quality information is reliable information which takes into account the different players in the field of health (administration, professionals, patients, industry, healthcare centers) and conforms to reality. Martínez Orduna from the newspaper *Noticias de Álava* thinks that one of the determining factors of quality is determined by the greatest possible number of sources which takes time – which there is increasingly less of – and more space – which there often is not – and, above all, following up on the issues. Ana Ursula adds that "within the urgent need for diverse sources, it is important to add personal testimonies of those affected and the fight against the clock is important to quality information. The lack of it is a handicap." "Journalists work under two important factors: response time and space to tell the stories. The news is defined by the attributes of newsworthiness, novelty, and interest" (González Borjas, 2004: 307).

They try to flee from paternalism in health information without forgetting that patients and readers are people who are suffering. Fermin Apezteguia states that they cannot deceive people. "There are doctors who say don't give this information because it will cause great harm to the patients being treated. We cannot cause additional pain, but we also cannot create false expectations. How then can we hide a story if we are journalists? Now, we know that when it comes to health, it is very important to know how to say it and how to tell the story."

Although, most of the physicians interviewed believe that health news in general is handled with journalistic accuracy in the media. They make some remarks noting that, although there is accurate information, there are a lot of news stories where impact prevails over accuracy. Victoria Egurbide states that "It's not that they lie, but they do not give relevant information. For example, they used the following title: *We have identified the problem of lung cancer metastasis* and whoever reads this headline believes that we are solving the lung cancer metastasis problem; however, although significant progress in basic research has been made, it has no clinical translation." Egurbide also argues that there are various types of news and the accuracy in each one of them depends on how they are covered. "News about general health (vaccinations) may be somewhat more accurate, and in other news, even for specialized medical professionals, it's hard for us to know the truth about an issue in order for it to appear in the media."

Healthcare professionals believe that, apart from these occasions that qualify as negative, there is a symbiosis between health professionals and communications professionals and among the journalists there is a desire not to make any mistakes that may lead to corrections in scientific terminology. Journalists reporting on health are professionals who have more knowledge and have mastered the issues because they are the regulars, though not specialized, in many cases, they do their research and confirm the data with the medical staff before publication.

Victoria Egurbide stresses that a person who is already trained in the subject will be much more prudent in handling the information because he will know the difficulties and reality of the medical information.

Ricardo Franco-Vicario argues that "when a good journalist has a story, he goes to the hospital to talk to expert sources and if, in turn, he detects gaps in the facts, he contacts other experts. This means that we must rely on medical personnel when it comes to health issues even though there are many doctors who are reluctant to talk to journalists. Why, I do not know. It's an interesting topic."

Adolfo Delgado claims that accuracy is a highly variable quality among journalists, that is to say, it is not always present. He has personally had some negative experiences due to a lack of accuracy. "There is no homogeneity. Information is transmitted that is taken from a specific context, and above all, the headlines are often misleading. When you say that 'cancer is about to be overcome' or 'cancer will be a thing of the past', I think that headline is repeated 300 or 400 times, however, they are referring to small advances (...). When information is given accurately, it is to the benefit of society as a whole."

Another part of the healthcare professionals say it is easy to differentiate between accurate news and sensationalist news or commercial breaks. Quality news should contain the sources. "There must be full transparency because we are talking about health", says Enrique Barez. "It affects the general population, even us as potential patients. For example, when a story is published about a new type of surgical procedure, if we put a first and last name on it as to which professional wrote it, we back it up, both vis-a-vis the public and other medical personnel. Not mentioning the sources is like launching a weather balloon which can sometimes be dangerous."

Many of the journalists who are responsible for reporting on health issues have healthcare professional as contacts in order to inquire personally in a broader fashion. That is to say, they turn to medical professionals as a source in order to make it more easily understood by the public. "We are seeing an increasing amount of journalists who understand and have sufficient knowledge to work with this type of information. On the other hand, agencies have specialized professionals and when they need something from health professionals they receive a very filtered request which is highly targeted. Furthermore, there are journalists at Osakidetza (Basque Public Health) in the Press Offices that write more informative information so that scientific terminology is understood," says Barez.

According to the healthcare professionals interviewed, we see that a healthcare system should have a communications strategy. We must be able to manage information, not so much with regard to the content of the message but how to get it to the audience, which channel should be used, and how to make it much more effective. The communications department is key to the organization of a healthcare system when it comes to covering information. They all feel that it should be organized in a socially responsible manner. Physicians point out that it is vital that there be feedback with reporters. They should be able to review the information, especially when it is very scientific.

Professional health journalists say that they try to tell their stories without causing alarm. In health information and other information as well, they try to sufficiently protect people's privacy, especially when it comes to children and the elderly. They are also very careful with anything that accompanies the text such as photos. "If we do a story on Alzheimer's, we try not to put a picture of a person in a very impaired state but rather other images related to the topic but that do not make your heart sink, especially if the information is informative. We are very careful when it comes to these topics," said María José Echeverría, a journalist for *Diario de Navarra*. Reporters consistently emphasized that they pay a lot of attention to the people who are illustrated in their stories, treat their identity with great care, and make sure to pay careful attention to anything that has to do with confidentiality.

For journalist Ainara Arratibel, there are three fundamental elements that define the quality of health information: truth, not creating alarm, and having a clear objective of disclosure. Careful news coverage must be given to health issues. You cannot add more to the level of alarm that there is per se as was the case with mad cow disease, the bird flu, and E. coli.

The journalists interviewed indicate that, although there are newspapers that like sensationalism more, they generally treat these issues rather cautiously and take good care of the information. "Many times, health issues are hard, difficult and, therefore, we like to give an optimistic view or one of improvement. We also like to convey that message. We like to talk to people who have overcome illnesses or who are struggling. This helps give a positive message and not an alarmist one," says Ainara Arratibel. A positive, didactic approach is added to this," points out Carlos Martínez Orduna "so as not to turn the information into a spectacle."

Fermín Apezteguía points out that there is no written code of ethics but they do work with some rules that have been imposed. "We know that when we talk about health, we are talking about people who are suffering which are our main readers. That is why we try to be as careful as possible without falling into paternalism. From a stylistic point of view, years of experience have given us some good standards. Here are two examples to help you understand better: everyone knows that the word AIDS comes from the acronym for Acquired Immunodeficiency Syndrome. That is why AIDS is almost always written in upper case. We have decided to write it in lowercase letters because we believe that any disease written in upper case always fosters stigmatization for patients and because the dictionary of the Royal Academy also lists "aids" as a noun. Another example, for the same reasons, are Alzheimer's and Parkinson's which are written in Castilian as indicated by the RAE [*Royal Spanish Academy*]."

4.3. Trust and distrust in the relationship between physicians and journalists

On many occasions, we have heard journalists say that they are used to not being treated very well by healthcare and science professionals and feel their distrust. This is a daily occurrence and is disheartening for many professionals who have dedicated many years to health journalism.

The people we interviewed think that more and more there is a flow of relations between the two professions and, in general, the impression is that journalists come well-informed when they approach healthcare professionals as a journalistic source and the relationship between journalists and doctors is good, although not all doctors have access to journalists and vice versa. In both professions there is talk about a cordial relationship, although it is noted that the transfer of information is not always smooth, especially from the hospital communications offices. "It's true that medicine and journalism are two disciplines that are unknown to each other (...). Healthcare professionals only showed interest in scientific publications (...). The mass media, meanwhile, mainly approached medical centers when there were negative or sensational stories that made them a news item from time to time because this subject has no drawing power these days" (González Borjas, 2004: 306)

Journalists working with medical and health information show some sensitivity to health issues and are careful about how they cover the information because small errors and small successes can create public alarm in the audience or the lack thereof. "Their relationship is also built when a story is going to be published and the healthcare professionals like to oversee the writing of the story with a single purpose in mind: making sure it properly conveys what needs to be said" says Victoria Egurbide.

Those in health journalism are usually well documented by the various sources they consult when writing their stories: "Properly informed journalists have information they get from the specialist press and scientific journals that are in the hospitals which update them because they are a reflection of what is happening in other countries and they speed up the access to information with respect to what the public receives, which does not have access to these publications, basically because it is very scientific and it would be difficult to understand" says Enrique Barez.

However, Ana Bustinduy says that the relationship with the media is not very close. "They do things together, but are not very close. We should we use the press more to influence health prevention without being alarmist". "Fortunately, journalists and health professionals are progressively beginning to come together. The medical sector is becoming aware of the importance of the mass media as primary agents for communicating knowledge to a society that is increasingly interested in preserving their quality of life and who also bring social relevance to the work of healthcare professionals. The creation of media offices has been essential in this coming together" (González Borjas, 2004: 307).

Victoria Egurbide believes that if patients were to go to their doctor's appointments with a good healthcare education, a good many of the unrealistic expectations they bring could be minimized.

The group of journalists, in the daily tasks of their profession, relies primarily on developing different sources of health information. They are generally health professionals, private communications offices, patients' associations and NGOs, professional groups, professional associations, and public administrations. There is an advisory panel of experts. The 10-year Quiral report's findings reflect this: "The sharing of the use of sources is mainly disputed between the science-healthcare sector and the political-administrative sector (...). The pharmaceutical industry and, to a lesser extent, other companies, are also a source of information, (...). Finally, the role of civil society itself as a source of information should be noted, either associatively (NGOs, patient associations, consumer associations, etc.) or individually (Observatorio de la Comunicación Científica, 2008: 17).

If we focus on the professional relationship between one group and another, María José Echeverría, from *Diario de Navarra*, thinks a relationship of trust has been built over time and that helps a lot. "Medical professionals are quite accessible, they want to disclose health information, and the relationship with the media suits them. They tend to be quite effective when addressing informative topics, however, it is a lot harder to get their opinion."

On the other hand, where we run into barriers is when we have to verify health issues with Osakidetza which is sometimes difficult", explained Ainara Arratibel, from the newspaper *Berria*.

Other journalists concur with this idea, including Fermín Apezteguia: "Sometimes, public services act as a barrier to prevent access to information. The patient's right to privacy is often used as an excuse for not giving complete information. How do they act when they want to avoid providing information? They give vague responses, prevent you from contacting the professionals who know the subject matter, delay handing over information, and when they give it to you, it is so poor that there's not very much to work with. Hospital communications offices work to protect their hospital's image. Mistakenly, private healthcare centers often lack a communications advisory team or they have teams that are far removed from the daily news reality. I believe that professional associations and, despite the above, also certain private institutions offer the best services for the media."

Meanwhile, Ana Ursula, from *Noticias de Gipuzkoa*, says that she doesn't usually have any problems with the experts from the medical establishment, it is a direct relationship, however, with hospital communications offices access is difficult because they act as a filter. "When there is a public health problem, sometimes you have to fight first and try to convince the communications office to give you authorization to be able to interview the sources. The fact that a communications office is the one that decides what can and cannot be released affects you in your daily work," emphasizes Ana Ursula.

What journalists who are looking for a story want when they sit down with a doctor with a tape recorder is for the medical professionals not to distrust their professional duties, to communicate their experience or scientific knowledge clearly, using plain language so that they can convey to the audience what they need to know and, most of all, for them to trust them.

Although there is still a relationship of distrust between the two professions, we see that there is a majority will to collaborate in order to produce an accurate disclosure of health information, diseases, and assistance.

5. Conclusions and final thought: ideas to foster greater trust between doctors and journalists

1. Mutual collaboration between doctors and journalists needs to be worked on. There should be an ethical partnership based on trust that provides society with information and knowledge in order to satisfy the public interest on issues of health and medicine. Journalists act as a link or channel of information between doctors and patients.

2. The quality of the information is good but can always be improved upon. Specialization in health journalism is a must and, in addition to the social agenda issues (cancer, AIDS, child health, etc.), other rare or low incidence diseases that may be more stigmatized should be reported on in order to contribute to normalizing them as much as possible.

3. The media should make an effort to incorporate the educational perspective in health information (news and reports primarily) in order to create a good scientific dissemination, heading towards greater prevention and properly educating the public.

4. The time and space devoted to health information should be evaluated in order to achieve better news coverage in favor of journalistic quality and thus having more evidence and different sources.

5. Health information must be managed properly by the public administration, private healthcare centers, and communications offices, not so much with regard to the content of the message but how to get it to the audience, which channel should be used, and how to make it much more effective. The communications department is key to the organization of a healthcare system when it comes to covering communications and information.

6. Doctors and journalists have to build a better relationship, they have to show that they are two professions that 'are forced' to get along as a social commitment and solidarity, minimizing the differences that separate them. Medical professionals seek prevention and journalists seek stories, but both have the same goal: to disseminate health information in order to prevent disease in tens of thousands of citizens.

7. Journalists must continue to treat medical and health issues with great care, accuracy, honesty, and quality. Specialized health journalism is necessary because it goes hand in hand with being better welcomed by medical professionals. The better reporters carefully focus on the issues and the more knowledge they have of them, the better healthcare professionals will respond: with less suspicion, providing more information, and with a spirit of collaboration when they see the results. All of this benefits society.

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