



# The social construction of cancer beliefs:

Critical discourse analysis of racial differences in cancer messages in the popular press.

# Problem: disparity in survival rates

◆ Costs

◆ Time demands

◆ Beliefs

- Cancer is a death sentence
- Only go to the doctor if you are sick
- My life is in God's hands

# Problem: disparity in survival rates

- ◆ Lack of communication w. physician
- ◆ Culturally insensitive health information

# Our idea

- ◆ Media participates in defining illness
- ◆ Survival stories are prevalent in popular press
- ◆ Are African Americans getting the message?

# Research Questions

- ◆ Are Black articles more fear-based than White articles?
- ◆ Are readers of White magazines encouraged toward active engagement in detection & treatment of cancer more often than readers of Black magazines?

# Methodology

- ◆ Sample – popular press magazines for year 2000
- ◆ Inclusion & Exclusion criteria
- ◆ Procedure
  - Initial reader
  - Second judge – interrater reliability = 98% & 86%

# Critical Discourse Analysis

- ◆ Discourse analysis used to expose social inequality
- ◆ Researchers hold a political stance
- ◆ Findings detail the discourses that create and support the problem
- ◆

# Domains that were assessed

- ◆ Content
- ◆ Who (portrayed, given voice, etc)
- ◆ Action / Processes
- ◆ Context / Social Structure
- ◆ Personal & Social Cognition



# Data Analysis

- ◆ Critical discourse analysis:
  - Comparative descriptive analysis
  - Comparative impact on reader's beliefs about cancer
  - Socio-political context in which the discourse occurs.
- ◆ Descriptive statistics on quantifiable data
- ◆

# Results – Question 1

- ◆ Significant differences found in:
  - Level of fear ( $t=2.3$ ,  $p < .02$ )
  - Self other dichotomy (chi-sq 11.2,  $p < .01$ )
  - Who was excluded (chi-sq 12.0,  $p < .03$ )
  - Agency & Object of action (chi-sq 13.3,  $p < .02$ )
  - White magazines encouraged more active processing of information (Chi-sq 4.9,  $p < .02$ )

Conclusion: Black magazines present more fear messages, attribute agency to others, exclude the voice of the patient, and present a wider divide between those given voice and the reader. White magazines encourage more active thought.

# Theme 1: Establishing Credibility

## ◆ Black articles

- 1<sup>st</sup> known as insiders
- 2<sup>nd</sup> as knowledgeable
- Conversational tone
- Emotionally charged
- Advocate for activism in medical system
- With cancer fight battle on 2 fronts

## ◆ White articles

- Align with medical experts
- More information
- Presented with scientific base
- Rational tone
- Arguments for better consumer

# Theme 2: Encouragement of critical thought

## ◆ Black articles

- 1 side perspective
- Implausible promises
- Hope is offered but without direction
- No information for surmounting obstacles or coping with treatment

## ◆ White articles

- Presented both sides
- Balance between acknowledging seriousness without evoking fear
- Use arguments to support author's position
- Recovery stories provide information on what to do and difficulty

# Theme 3: Level of Urgency

## ◆ Black articles

- Emphasis on fear, urgency, & dire consequences
- Personal accounts feature famous people

## ◆ White articles

- Offer a more tempered approach
- Minimize the possibility of cancer
- Places power within the patient
- Personal accounts feature ordinary people
- Fear messages are tempered with positive
- Depicts quality of life even with cancer

# Theme 4: Health seeking process

## ◆ Black articles

- Science is key
- Black health marginalized in medical system
- Science only available to a few
- Access is greater problem than cancer
- Must navigate issues of mistrust, exclusion, & socioeconomic difficulties
- Thin details make information less available

## ◆ White articles

- Akin to a journey
- Assistance is available from medical system
- Science is key
- Great details offered for how to negotiate the medical system

# 2<sup>nd</sup> Level: Comparative impact on reader

## ◆ Black articles

- Fear & anxiety
- Resources are relatively unavailable
- In order to obtain medical care, one must fight other injustices
- Fear tactics result in denial unless accompanied by detailed information

# 3<sup>rd</sup> Level: Political-economic context of the discourse

- ◆ Marked disparities in diluted content, absence of thought-provoking information, simplistic approach, & fear tactics
- ◆ Cancer is another battle that must be won in a more large-scale war against poverty, racism, & drugs.
- ◆ Talk is strategic and maintains the social structure selectively
- ◆ Health fail because they are delivered within the context of the dominant social structure's perceptions and misconceptions



# 3<sup>rd</sup> Level: Political-economic context of the discourse

- ◆ Language & images reinforce stereotypes imposed by dominant culture.
- ◆ This provides comfort to those in power & keep minorities ignorant of facts, arguments, & counterarguments
- ◆ One can see patterns of discrimination without having enough information to negotiate the system
- ◆ Internalized images of stereotyped black culture leads to disempowerment in the patients

# Potential Solutions

- ◆ Continue efforts to make the unconscious conscious, as in this study
- ◆ Encourage the media to include detailed medical information in straightforward language
- ◆ Encourage the inclusion of average AA in cancer survival stories
- ◆ Refrain from using fear tactics
- ◆ Foster cross-cultural awareness
- ◆ Encourage discussion of “isms” in health care
- ◆ Change subtle reinforcers of white entitlement