



Media relations and health news coverage: The dialogue on *Influenza A* in Portugal

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Abstract: In Portugal, the use of strategic communication within the health sector has been growing in the past decade. However, the ambience of health information production in the country is controversial and there is a widespread sense of dissatisfaction among agents involved. In order to enlighten this debate, we have been conducting a systematic study on health news coverage in the country. In 2009, the most significant subject in Portuguese health news coverage was *Influenza A*. We have used the *Influenza A* case to analyse the role of media relations strategies and tactics in the construction of news in the health sector.

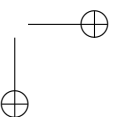
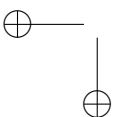
Keywords: health communication, health media relations, health journalism, risk communication.

1. Introduction

Health media relations can be described as those organisational or personal public relations (PR) activities that aim to develop media access on health issues. Its instruments are public statements, interviews, press releases, press conferences, briefings, and pseudo-events, among others. This technical process is recognized by PR professionals as having the potential to increase the quantity and quality of health information that is disseminated through mass media in order to create a stronger sense of public security and enhance the motivation of those involved in the health sector. The media relations programme can be part of a wider strategic communication plan or it can be developed as a reaction to media requests.

In Portugal, the use of strategic communication within the health sector has been growing in the past decade. Driven by the enlargement of the health market (with the growth of private health care institutions), the increase in public demand for accountability, and the rise of market-oriented approaches

The Dialogue Imperative. Trends and challenges..., pp. 63-80.



in public institutions, communication has become a recognized asset for public health organisations. The increase of health media relations is part of this process.

However, the ambience of health information production in Portugal is controversial (as reported in other countries; Springston and Larisey, 2005) and there is a widespread sense of dissatisfaction among agents involved. The health information field is seen as unstructured and fragile. Health agents blame the press, arguing that journalists are careless in their reporting, as a result of competitive pressures and ignoring the scientific process. Conversely, journalists accuse the health community of limiting access to information and erecting barriers to public dissemination of medical research. Sensationalism, biases, conflicts of interest, and lack of follow-up are other problems reported in our exploratory research.

Thus, paradoxically, while media attention and public relations practices have increased in the Portuguese health sector, its actors feel that the public is poorly served by health coverage in the general press. In order to enlighten this debate, we have been conducting a systematic study on health news coverage in the country since 2008. Our research design combines the results of our examination of news contents, news production practices, and news sources. Each year we select the two most salient diseases covered by the press and conduct a thorough study to understand health information construction. This paper presents the results of our 2009 research on the perspective of information sources having the PR framework as its basis.

In 2009, the most significant disease by far in Portuguese news coverage was *Influenza A*. Our research group developed a study on the information sources used by journalists after its appearance in March 2009 and, above all, after the pandemic alert sent by the World Health Organisation (WHO) in April. The study looked at the following questions: first, *what were the main sources of Influenza A news coverage in Portugal?* and second, *how were these sources visible through news contents?* To respond to these concerns, we analysed three national newspapers, chosen by their different periodicity and editorial criteria.

In this article, we use the *Influenza A* case in Portugal to analyse the role of media relations strategies and tactics in the construction of news in the health sector. To begin this debate, we review the literature on Health Communication and Public Relations, as well as on Public Health PR Crises, to



contextualize our research problem and the case study. The references used are international ones, as there is no scientific investigation on Health PR in Portugal. After presenting the theoretical background, we continue with the presentation of our case, the *Influenza A* news coverage in Portugal.

2. Literature Review

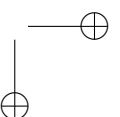
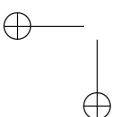
2.1 Public relations in the Health Sector

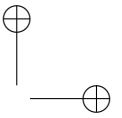
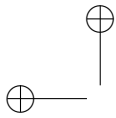
Since the 1990s, there has been a growing increase in health news dissemination; this international trend has continued to grow in the new century. In 2008, for example, a study ranked health news sixth in popularity among news topics in the United States.¹ The progressive understanding of the consequences of this growth to society soon caught the attention of the academy. However, research within the Health Communication field has given more attention to the study of mass media and journalists' activities in terms of selecting and framing health messages, with less attention given to the role of the people and organisations that provide information to the media. We refer to public relations professionals.

It is an acknowledged practice that journalists often use public relations sources to prepare news contents. In addition, research has presented evidence that there is a relationship between PR activities and the news media agenda (Hodgetts et al., 2008; Len-Ríos et al., 2009). However, as Grunig (2007) points out, journalists tend to balance PR story frames with those of other sources and, overall, they are able to maintain a neutral story frame. News editors seem to agree that PR professionals provide useful information, yet they do not trust them completely.

The health news organisations' attraction to the public space has been growing for the past 20 years; this is noticeable in the growing 'medicalization' of media speech (McAllister, 1992). Many authors refer to the 'medicalization' of societies as a recent and relevant social phenomenon relating to the growing influence of the medicine establishment in the way individuals see and interpret reality focusing on individual and collective health prob-

¹Survey Report, August 2008: 'Key news audiences now blend online and traditional sources – audience segments in a changing news environment', *The Pew Research Centre for the People and the Press*, <http://people-press.org>



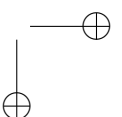
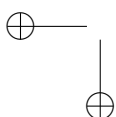


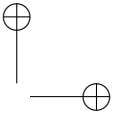
lems. This is a characteristic of the medical theory born in the nineteenth century that comprehends the intent of prescribing people new ways of living, behaving, and acting. The media have contributed strongly to that ‘medicalized’ reality, accepting and reproducing the ‘medicalized’ speech of the health sources.

This active role of health news sources has been strengthened by the use of strategic communication or marketing techniques that help them gain access to the public sphere. Studies highlight the growing activities carried out by official or specialized sources in the health field seeking to influence debates, agendas, and audiences. Several studies show the increase of public relations campaigns by health organisations, including governments, research foundations, hospitals, and other health care institutions. They seek to produce accessible, reliable, and specialized information as part of a conscious strategy to control news production and the social interpretation of health reality (McAllister, 1992; Zook, 1994; Miller & Williams, 1998; Briggs & Hallin, 2010).

The need for and use of strategic communication by public health organisations can be detected in different phenomena. Health institutions are experiencing a consumer-driven demand and, as a consequence, are beginning to deal with patients as ‘clients’. Health issues have become of high media interest. Public relations costs in health organisations have increased and many communication agencies have created specialized teams in health information (Longest & Rohrer, 2005; Springston & Larisey, 2005; Moreira, 2007; Wise, 2008). All those factors have generated impressive news coverage.

In addition, the power of health public relations was reinforced by some peculiarities of health journalism. According to a vast literature (Tanner, 2004a; Tanner, 2004b; Cho, 2006), the health information context is different from general news reporting because media are strongly dependent on the expertise of health organisations, scientists, and the medical community in order to cover the stories. This particular requirement of health journalism (shared with science news reporting) is confirmed in several investigations. Tanner (2004) conducted a nationwide survey in the US and the results showed that public relations spokespersons and health sources have a very significant impact on the health information broadcast to the public. In fact, 60% of TV health reporters said that they frequently found a health expert to explain technical information and 60% confirm that health sources often in-



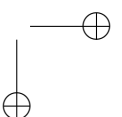
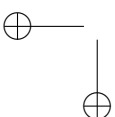


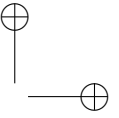
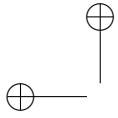
fluence news content. Other studies (quoted by Cho, 2006; Len-Ríos et al., 2009), showed that health journalists received most of their stories from personal contact with PR spokespersons, official proceedings, press releases, and press conferences and that there is a positive correlation between PR messages and media health coverage. PR professionals were seen as mediators between journalists and the health community; because of the technical nature of the information, they exerted a strong influence over the news agenda.

Len-Ríos et al. (2009) also looked for the PR perspective on this matter. They carried out a national survey among America's health PR practitioners and found that these professionals believe they have 'expert power' in media relations. This power was perceived to be higher in the health field, because PR experts working in health organisations have a strong credibility as communication facilitators between experts and the media. And those PR experts believed that the 'power' could be increased by using traditional PR techniques, such as frequent contact and establishment of personal relations with the journalists. Those strategies are referred to in other studies as ways to reinforce respect, trust, confidence, and legitimacy in media relations.

In fact, health reporting requires a certain degree of expertise that many journalists do not have. Tanner (2004b) stated that in the US, more than two-thirds of TV health reporters had no specialized training in the field, and more than one-third concentrated solely on health reporting. In Portugal, the landscape seems to be very similar. In spite of the lack of formal studies in this area, our initial exploratory study pointed out that there are few journalists covering health (13 reporters in national media), and the lack of training is evident. This lack of preparation, coupled with the complex nature of the field and a heavy workload, seems to drive health reporters to rely strongly upon the health community and its communication experts. As a consequence, these journalists quite often use information that comes in the forms of 'information subsidies', that is, information packaged free for the media by those seeking publicity (Len-Ríos et al., 2009). These subsidies seem to be frequent in health information production because they help journalists to cope with lack of expertise and deadline pressures.

In health crisis scenarios, the balance between PR objectives and journalists' information principles becomes even more difficult, because the uncertainty of the environment increases public demand for urgent information. Within such circumstances, the role of media relations seems to be strength-





ened as health organisations try to pacify the population and the media look for fulfilling public expectations.

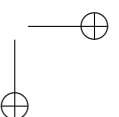
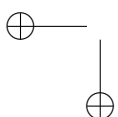
2.2 Public Health PR and Risk Communication

Within the health sector, public organisations have the assignment of protecting and enhancing public health. This mission has become quite difficult with the growing interdependence of economies and societies, as this phenomenon increases public health risks around the world. Cooperation and coordination have become very important to deal with such risks, as diseases, epidemics, pandemics, bio-terrorism, and other health threats.

International public health policies have been giving much attention in recent years to the possibility of a pandemic threat potentially resulting in massive numbers of deaths, many hospitalizations, and high costs. Many researchers have also been discussing the urgency of developing a systematic approach for risk communication in order to improve health information about public vulnerabilities (Moreira, 2007). It has been argued that risk communication frames public perceptions and that those perceptions have a direct impact on the way people deal with a threat.

Risk communication is, therefore, widely perceived as an important instrument to carry out public health policy. The 'risk communication' concept emerged in the 1970s to name all the activities of production and exchange of messages between interested parties about the nature, meaning, and control of a risk situation (Reynolds & Seeger, 2005). It is different from the 'crisis communication' notion that includes the communication process that occurs during an emergency, because it encompasses those messages delivered before the emergency and with the purpose of avoiding that occurrence.

In the public health field, risk communication involves the delivery of public messages to alert the population to health threats and it follows well-known communication models applied in emergency situations, such as media relations programmes and public health campaigns. In general terms, these programmes and campaigns aim to promote changes in public behaviour in order to reduce health threats. These activities follow strategic communication planning rules by including the identification of the target-population, the preparation of persuasive messages, the definition of the media programme, and the evaluation process.





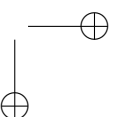
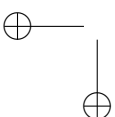
In a pandemic risk scenario, events seem to be largely dependent on the efficiency of a risk communication plan. Communication errors may lead to an inadequate protection of the population. According to some studies, communication efforts must educate, inform, motivate for protection, build trust in authorities, and avoid rumours. During a pandemic situation, communication activities can enlarge the audience's ability to act as an effective partner, promote contention, decrease opposition, and encourage recovery (Vaughan & Tinker, 2009).

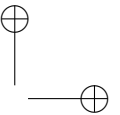
Therefore, when public health is in danger, authorities are advised to develop emergency plans that include risk communication programmes in order to decrease the threat's impact. The confidence in official authorities has been pointed out as essential to public perceptions assigned to risk messages and it is referred to by the specialized literature as a critical element to the success of a public health risk plan.

The urgency of risk management commonly leads authorities to mass media channels. Through the media, they can send urgent messages to the population and benefit from their high level of repetition and redundancy. As argued by several authors, an effective interaction with the media can be of critical importance in conveying consistent information and practical instructions to the community, as well as in developing confidence and trust in leaderships. Moreover, public health crises and risks are media events, with a strong influence in their agenda and responding to the mass media sense of accountability (Pratt & Bloom, 1997; Moreira, 2007; Vaughan & Tinker, 2009; Ferrante, 2010). For all those reasons, the pandemic communication literature emphasizes media relations role in a preventive plan (Chong, 2006).

Some studies also refer to the dangers involved in media health communication, because their messages are not free from errors and contradictions, due to the complexity of health themes, the crossing of news sources, and the confronting of opposing statements. In addition, in media space, news sources' credibility is a basic element for the success of risk communication. We refer to credibility toward both journalists and audiences. In pandemic cases, research reinforces the need of training regarding public health authorities due to the uncertainty of the communication context with the media (Fischhoff, 1995; Vaughan & Tinker, 2009).

As we can conclude, how public relations practitioners frame their health messages to the media may have a direct impact on the public health percep-





tions and decisions. This is why we consider this issue of such importance. Through an analysis of the Portuguese context in a crisis scenario, our research looked to assess the internationally reaffirmed hypothesis that the influence and power of public relations in the health field may be greater than in other areas.

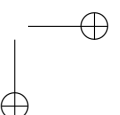
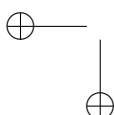
3. The *Influenza A* case in Portugal

3.1 Research Questions, Hypothesis and Methodology

As we have already stated, this research, which is part of a wider project that focuses on the health news coverage in Portugal (Lopes et al., 2009a), aimed the study of *Influenza A* media coverage in the Portuguese press in 2009. The study looked particularly for answering the following questions: first, *what were the main sources of Influenza A news coverage in Portugal?* And second, *how were these sources visible through news contents?* Through the material gathered in the initial study, we looked for another dimension, a PR perspective that could answer a third question: *what was the role of media relations programmes on Influenza A news coverage?*

With these equations in mind, we looked for testing the hypothesis found in the literature review stating the strong influence and power of public relations in health news production. In order to access this assumption, we conceived that a ‘strong influence and power’ exists when public relations activities are the main information sources quoted by the news texts. More to the point, the study of news sources on health issues is a way of understanding health information and it has been a neglected area in Health Communication.

With the purpose of responding to these concerns, we analysed three national newspapers, chosen by their diverse periodicity and editorial criteria: *Expresso*, *Público*, and *Jornal de Notícias* (a weekly newspaper and two daily newspapers). The study involved the identification and characterization of news sources found in news texts. The analysis had two stages, the first consisted of data collection according to seven variables: *existence/absence of sources; number of quoted sources; geographic location; gender; identification; status; and medical expertise*. This task followed a quantitative methodology. The second stage included a qualitative analysis on three variables – *sources type; spokesperson/s; PR instruments* – and interviews.





The year 2009 was selected for the analysis because of the emergency criterion. In that year, *Público* published 260 news on *Influenza A*, *Jornal de Notícias* published 244, and *Expresso* published 51. The sum is a 655 news story corpus.

3.2 What were the sources on *Influenza A* and how did they work?

After this extensive analysis, we can state that almost every newspaper article dealing with *Influenza A* presented its information sources; in our study, more than three quarters of the sources were identified (Table 1). There is special care in pointing out names and people's professional status, documents' origins, mass media news, websites, or blogs. There are not many unidentified news sources and journalists almost never used so-called 'anonymous sources'. However, there is a small percentage of unidentified sources who represent an institution or body (the Ministry of Health, a hospital, or other).

In *Expresso* and *Público* nearly half of the articles use at least four sources. In *Jornal de Notícias*, journalists quote a smaller number of sources: more than half the texts (58.6%) have one or two news subsidiaries. Mostly of medium size, the news stories do not make room for a remarkable plurality of voices.

Actually, there are not many actors who comment on the information presented; a tendency to hear the same people should be noticed in this 'news sources economics'. Of the newspaper articles that, throughout 2009, addressed *Influenza A*, it can be said that the number of cited sources is substantial. However, this quantitative analysis must be balanced with a qualitative examination, since the articles repeat a significant part of its source base. With official news sources, for example, there is a trend to look for the Minister of Health, the Health Secretary of State, and the head or vice-head of the Portuguese National Board of Health. With specialized news sources, there is a narrow group of people from different professional groups who give opinions and information on the topic. There is a kind of a 'news source brotherhood', with a dominant speech on what should be said or thought about *Influenza A*.



Table 1. Sources identification on *Influenza A* news

| | <i>Expresso</i> | <i>Público</i> | <i>Jornal de Notícias</i> |
|-----------------------------|-----------------|----------------|---------------------------|
| Identified sources | 77.2% | 80.2% | 77.1% |
| Unidentified sources | 18.6% | 19.4% | 22.8% |
| Anonymous sources | 4.2% | 0.4% | 0.1% |

In the three analysed newspapers, journalists mainly look for partners within the health field to talk about *Influenza A*. These news sources have a diverse status (as official, specialized institutional, specialized non-institutional, common citizens as patient or family, etc.) and a diverse nature (human or document-based).

Table 2. News sources status on *Influenza A* texts

| | News sources | <i>Expresso</i> | <i>Público</i> | <i>Jornal de Notícias</i> |
|----------------------------|---|-----------------|----------------|---------------------------|
| Health field | Official sources | 30.7% | 35% | 45.5% |
| | Specialized and institutional sources | 22.3% | 13.5% | 11% |
| | Specialized and non-institutional sources | 12% | 7.1% | 7.6% |
| | Documents | 6% | 10.1% | 8.5% |
| Out of health field | Other sources | 29% | 33.3% | 27.9% |

Within the health field, official sources are the most valued, including Portuguese official entities (Table 2). At this level, the most common sources are politicians who work in the Ministry of Health and those in charge of



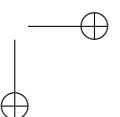
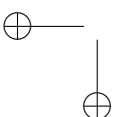
the Portuguese National Board of Health. These actors are almost always present in the journalistic work, whether in the form of direct quotations or indirectly as information remainders. Hospital administrators or health unit directors are not very active voices on *Influenza A* news. Press officers are not much mentioned either, although their action can be perceived in repeated press conferences or press releases aimed at journalists. Also pertinent is that the Ministry of Health felt the need to assign health specialists to speak to journalists about *Influenza A*. As such, these sources are qualified as officials. More than specialists, these sources speak on behalf of the government. Very often, this option was interpreted by Portuguese newspapers as an attempt to control public information.

The control of the situation went so far that all information was centralized in the daily evaluation briefing made by the Ministry of Health, which gave journalists the contacts of four experts able to respond to their doubts (Vera Lúcia Arreigoso in *Expresso*, 1 May 2009).

Regarding specialized sources, they are more valued when part of recognized organisations, such as associations, unions, research centres, public institutions, etc. In this context, journalists are inclined to emphasize leading position voices. Doctors, researchers, and pharmaceutical companies were the most wanted specialized sources on the three newspapers we have analysed.

Still within the specialized sources (institutional and non-institutional), the medical community retains the highest number of citations: 16.8% in *Expresso*, 10.3% in *Público*, 8.8% in *Jornal de Notícias*. However, those sources are not always presented as experts in specific medical fields, although the percentage of identification is substantial and close to the total sum of sources' quotes (15.6% in *Expresso*, 8.2% in *Público*, 6.6% in *Jornal de Notícias*). The most requested medical fields were similar in all three newspapers, in spite of some curious options: pulmonologists, gynecologist/obstetricians, paediatricians, and public health doctors.

Documents did not emerge as very significant sources in our study. Within this context, however, it should be noticed that in *Influenza A* news coverage the number of press conferences, press releases, briefings, or interviews quoted in the texts was higher than usual in health news (Lopes et al., 2009b). *Influenza A* risk raised strong media relations efforts by official sources in order to control the information. The main sources - the Ministry of Health, the



Portuguese National Board of Health, the Portuguese Medical Association, and their press officers - developed intense public relations programmes in order to influence news or react to media questions.

During the *Influenza A* crisis, my work was to respond to media phone calls from 9 am to 12 pm... Our chairman was always questioned about the subject and gave several interviews... the Ministry of Health and the Portuguese National Board of Health had several press officers and communication agencies working in media relations and other communication initiatives... (Portuguese Medical Association - Press Officer, interviewed December 2010)

It can also be stressed that both *Expresso* and *Jornal de Notícias* preferred official documents to specialized ones; this trend is once again divergent from previous studies on media coverage of other diseases (Lopes et al., 2009b). In *Público*, the percentage of official and specialized documents is closer. As a general evaluation, however, we can state that document-based sources are mainly official. More than explaining what a pandemic is, these sources looked to impose political actions on the disease.

Outside the health field, journalists did not use many other sources, although there are two groups that stand out: one connected to the business arena and another linked to the political arena. Both groups had a remarkable presence within the voices speaking on *Influenza A*. It should also be highlighted the value journalists gave to other media as news sources (newspapers, news agencies, TV channels, among others), which emphasizes the circular process of information referred by Pierre Bourdieu (1997).

If there are some groups with easy access to media channels, others seem to be part of a huge *spiral of silence*. Within the official sources, hospital administrators and health unit directors were, in 2009, not valued by newspapers. As for specialized sources, there is a noticeable devaluing of nurses in every newspaper we analysed. While general media were highly valuable news sources for journalists, specialized sites and blogs were not very helpful; they did not have enough strength to generate a quote. The same happened with press officers within the health field; they are not quoted very often, but their presence is perceived in the preparation of events promoting *Influenza A* prevention (we refer to press conferences, seminars, vaccination campaigns, etc.).

Nevertheless, among these silent voices there is one worth emphasizing: the patient or the common citizen who is or might be carrying the H1N1 virus. Daily newspapers did not pay them much attention. In *Público*, this group is represented in 4.4% of stories and in 5.3% of stories in *Jornal de Notícias*. In *Expresso*, that percentage grows to 12.7% because this newspaper has a higher number of news reports and opens up space for hearing other news sources, especially those more testimonial-oriented. However, it is expected that a newspaper look up to common citizens, who should be at the heart of its information goals.

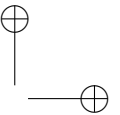
Regarding news source geography (table 3), all the analysed newspapers stand out in their preference for national actors, especially those who represent the country (as members of the government or public organisation administrators). This happens even when the news angle is located abroad. When the news sources are from a particular place in the country and speak with a strict connection to that place, the news priority seems to be given to the capital, Lisbon. This happens even when the main newsroom is located in the north of the country, as with *Jornal de Notícias*.

Table 3. News sources geography in Influenza A texts

| | <i>Expresso</i> | <i>Público</i> | <i>Jornal de Notícias</i> |
|----------------------|-----------------|----------------|---------------------------|
| National | 80.7% | 67.2% | 73.2% |
| International | 19.3% | 32.8% | 26.8% |

In the international panorama, the trend is the same: to privilege statements with a global level, regardless of their geographic location at the moment (for instance, people in charge of international institutions, like the WHO). When the news sources reveal a strict bond to a certain geographic place, the European continent has the highest number of voices in the Portuguese newspapers that were analysed.

In sum, our findings suggest that: (a) the official sources were the dominant information suppliers on *Influenza A* news coverage in Portugal; (b) these official sources were mainly political representatives and official authorities on health issues; (c) the medical sources quoted in the news were largely consultants suggested by health authorities; (d) the sources were generally located in the capital, Lisbon; and (e) those national representatives looked for influ-



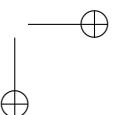
encing media agenda through the intense use of public relations techniques, such as press releases, press conferences, interviews or regular briefings.

4. *Influenza A*: a pandemic drawn by the media and controlled by official sources

This analysis was an extensive media study, looking to produce a deeper reading on the broad *Influenza A* media coverage in Portugal. On average, throughout 2009, the national press published one story every day on the topic, creating an impressive ‘agenda-setting’ effect (McCombs & Shaw, 1972). This would guide the public opinion toward what was worth thinking and debating. Newspapers dictated what to think, how to think, and how much importance this disease should be given, all through the suggestion of themes, categories, and hierarchies.

With an oversized media coverage, the need to organise information dissemination became manifest. Since the beginning, the WHO at an international level and the different state governments at a national level showed a great concern in managing risk communication. They chose opposite strategies: the alarming scenario was favoured by the WHO (‘WHO alerts to the Influenza A virus’, *Jornal de Notícias*, 26 April 2009; ‘The world should be prepared to face the worst scenery, warns the WHO’, *Público*, 29 April 2009); and Portuguese authorities preferred to call on serenity (‘The first Portuguese case: Influenza A was confirmed with serenity’, *Jornal de Notícias*, 5 May 2009; ‘Portugal is ‘perfectly ready’ to face a new pandemic’, *Público*, 14 June 2009).

Both organisations soon understood that it was essential for each of them to manage the communication channels with journalists as a strategy to strengthen the official sources’ interpretation of reality and control the pandemic. The regular presence of these sources in Portuguese newspapers reinforced the dominant vision, pushing journalists back to mere messengers in the official sources communication plans. However, time has shown us that this excessive information control by official sources, combined with the passive attitude of the media, was not the best attitude for society. Neither did the WHO’s tragic predictions happen, nor did the Portuguese political and health authorities’ statements of apparent normality protect the population from a generalized fear:





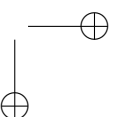
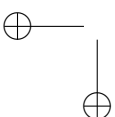
The number of calls to 'Saúde24' [the Influenza A official information call center] increases especially after the press conferences within which the Minister of Health makes a state of play on the disease's evolution in Portugal. These moments are almost always broadcasted live by TV channels (Alexandra Campos, *Público*, 10 July 2009).

Along with political and public health authorities, doctors have also gained the right to speak or give journalistic opinion, either because they were chosen by the Ministry of Health to explain to journalists what was supposedly happening (this was somehow criticized by the media), or because they had management positions in certain organisations or bodies and were included in the 'organised sources' group. These specialized sources were important to the journalistic texts that wanted to explain the pandemic. They were understood as reliable because of their specialized knowledge, even when they were professionals suggested by official sources. However, this study shows that journalists did not much value these sources to tell their stories on *Influenza A*.

In summary, our study reinforced the theory on the media and the official sources' role in health risk communication processes. Here are some of the main ideas presented by the scientific literature on Health Communication that have been strengthened by the *Influenza A* study: (1) media are key communication channels in public health risk situations; (2) health journalism, mainly the type produced in a risk environment, shows a great dependency on official and specialized sources for decoding requirements; (3) official sources in the health field show a high degree of professionalization in PR and risk communication; and (4) citizens are the weakest link in health risk situations because they are at the mercy of this power game between journalists and official sources.

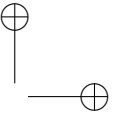
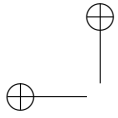
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