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Media’s Authority on Illness: Messages the Public learn In today’sculture, the media influences many aspects of daily life. For the purpose of this research the media will encompass television, newspaper, magazines, and internet and the messages learned from these outlets relating to illness. In addition, investigating how people in power authoritative the messages portrayed on the media outlets and the agenda behind the messages. The people or organizations that influence the media have a big impact on the way we learn or feel about illness.

Human beings can come to accept most anything that is repeated on the news, published in magazines, and said by people of influence. People in power will include, for the purpose of this argument, those with credentials, self-help “ experts”, and funding agencies for specific illnesses. The media and people in power control what the public learns about illness. Moreover, publicizing illness when there is a finical gain or what socio-economic group suffers from the disorder or illness. According to Brumberg (2000), anorexia nervosa was a relatively unheard of disease until the 1980s.

Today it is so commonplace that women will see a friend who has lost weight or looks skinny and refer to her as “ looking anorexic. ” If this disease was only labeled as anorexia around thirty years ago how did it explode into mainstream culture so quickly? There are a number of different arguments to pose: elite women from Ivy League universities took interest in the topic, the three most popular women’s’ magazines published many stories about the disease, and people of social status died from this disease (Brumberg 2000).

Different diverse newspapers became intrigued and jumped on the anorexia bandwagon, even including pictures of gauntly women on the covers claiming outrageously high numbers of women that now have this disease (Brumberg, 2000). It is also important to note that nearly all of the anorexia sufferers were white and came from rich families (Brumberg 2000). These girls coming from wealthy families obviously had themoneyto pay for treatment and doctors. It is possible that their families ran in circles with doctors, scientists, and people that have social status to make powerful decisions.

These decisions generated media attention leading to the general public being flooded with movies, documentaries, and news broadcasts (Brumberg 2000). If these affected by this new disease of anorexia were poor and underprivileged arguably the public would not have learned about anorexia and it might possibly not exist today. Like anorexia, the disease of fibromyalgia did not exist as a labeled disorder until the mid seventies (Barker 1999). Remarkably now six million Americans are diagnosed a syndrome which did not exist thirty years ago.

Self-help literature and the internet is one of the biggest facilitators in generating information to the public as well as funded organizations (Barker 1999). According to Barker (1999) fibromyalgia is characterized by many different symptoms and it can present itself differently for every case. Interesting enough during interviews Barker performed with twenty-five women only one woman had not read self-help books, but she relied on information from her support group leader to learn about her syndrome (Barker 1999).

Debatably, these women may have never learned they had a syndrome, lived their lives without media messages, and possiblysaving money, time, and heartache dealing with this new diagnosis. By looking at the new diseases of fibromyalgia and anorexia it is clear that the media and people of influence taught the general public about these illnesses and facilitated there widespread exposure, but how does the media choose what messages to deliver and what messages to keep away from the general public.

Clearly, anorexia was a disease of wealthy, attractive girls which could make a good story, generating money for the news outlets, doctors, and pharmaceutical companies. In addition, fibromyalgia could generate the same type of financial gain for doctors and medical companies, but are these the only motivators for the media and powerful people. According to Armstrong, Carpenter, and Hojnacki (2004) who constructed a study about whose deaths matter in America with attention to the mass media and the same motivators were congruent with the results they found.

Consistent with powerful people controlling messages in the media, Armstrong et. al (2004) discovered that celebrities and members of Congress become involved with different diseases promoting attention and consequently leading to these promoted diseases appearing on national media outlets. For example, when Karen Carpenter died of anorexia it brought many celebrities together to publicize anorexia teaching the public the importance of treatment for anorexia (Brumberg 2000).

The media claims that the diseases they cover are those that affect the general population but ironically the people that dictate what these general population diseases are, consist of the influential people and those with credentials (Armstrong et. al 2004). During Armstrong et. al (2004) study they also discovered that the media is more likely to cover diseases that affect white people than black people, even if a disease is killing many more blacks than whites. Mass media focuses more on the color of someone’s skin and social status than the mortality rate of a certain disease or illness.

This absurdity can also be seen not only with what the media covers, but with what they choose not to cover. From the 1960s to 1980s black men in Harlem had a lower rate of survival than men in Bangladesh (McCord and Freeman 1990) and this was not publicized or put on any major media outlet. If white men had a lower survival rate it would have been all over the major news headlines because of their socio-economic status and control towards the media. The unequal coverage of media attention because of issues of power, race, and money in turn condition the general public’s perception about illness.

Even people that are educated and intelligent many times cannot control being manipulated by the media to go along with messages they are delivering. What’s more is if the doctors, celebrities, and powerful funding companies are not endorsing an illness, therefore the media does not cover it, the general public will not ever hear about it. Surely, if anorexia suffers would have been black women with low socio-economic status the top women’s magazines in the country would not have published stories, news broadcasts would have been non-existent, and quite possibly anorexia would only be known to few and not a mainstream disease.

Diseases that affect minority groups draw far less media attention and Armstrong et. al (2004) theorizes that it stems from predominantly white broadcasters and media executives. Furthermore, speculating that media workers would rather focus on illness that affects their particular social class and group (Armstrong et. al 2004). This theory continues to support the argument that the people in power are working through the media to control the messages the public learn about illness and disease.

Organized advocates, research scientists, and politically active organizations also have a high investment in messages the media relays to the public. Advocates call great attention to their cause threw drawing on media attention and aligning themselves with politicians that support their cause in accordance with the policygoalsof the politician (Armstrong et. al 2004). It is a win for all involved; the politicians get the media coverage they want for their agenda, again sending messages about illness in a political format.

People in power and the media have an enormous function in controlling what messages the public learns about illness. There are many different reasons they want to control the messages humans take in through various types of media outlets. Facilitating their own social group, money, and political gain are just a few addressed in this argument. The mass media, controlled by powerful people decide what illness they want the public to learn about and often times it has more to do with race and status than how many people are actually suffering or even dying from a disease. References

McCord, C. & Freeman, H. P. (1990). “ Excess Mortality in Harlem. ” New England Journal of Medicine, 322: 25 p. 173-177. Brumberg, J. J. (2000). “ Anorexia Nervosa in Context. ” Fasting Girls pp. 10-21, 33-42 264-267. Armstrong, E. , Carpenter, D. & Hojnacki, M. E. (2006). “ Whose Deaths Matter? Mortality, Advocacy, and Attention to Disease in the Mass Media. ” Journal ofHealthPolitics and Law 31: 4, pp. 729-772. Barker, K. (2002). “ Self-Help Literature and the Making of an Illness Identity: The Case of Fibromyalgia Syndrome (FMS). ” Social Problem 49: 3, pp. 279-300.