



By email: ec.sen@aph.gov.au

Dear Committee,

We are encouraged by the instigation of the **Murdoch Media Inquiry Bill 2023** because it signposts the importance of democratic media representation in Australia. As public health experts who utilise the media to disseminate research findings to the public, we contribute evidence to the Inquiry about how the perceived trustworthiness and credibility of public health messaging is undermined by the commercialisation of the media landscape. The media can be a critical mechanism for health scientists to broker health risk information to the public. Our concern is our data (collected 2017 to the present) indicates public perceptions of reduced trustworthiness in the media as a source for health risk communications.

Our data is collected during research projects occurring within the Research Centre for **Public Health, Equity and Human Flourishing**, Torrens University Australia (detailed in Addendum), which focus on trust in public health information with a specific focus on information communicated through mainstream media (i.e. the Murdoch Press). Our studies have investigated a) how/where risk messages about the science linking alcohol consumption with increased breast cancer risk are delivered through the media and how the messages are perceived and b) communications pertaining to SARS-COV-2 during the COVID-19 pandemic; and trust in these sources. Our data sources include an analysis of how health risks are communicated in Australian newspapers (both the COVID-19 pandemic and link between alcohol and breast cancer) and qualitative interviews (n=98) which explore how women receive and perceive the truthfulness, credibility and believability of messages about alcohol and breast cancer delivered through the media.



Using this evidence, our submission addresses the following key terms of those raised by the Inquiry:

- (e) the need for a single, independent media regulator to harmonise news media standards and oversee an effective process for remedying complaints;
- (g) the culture, ethics and practices of media outlets operating in Australia;
- (m) the role of government in supporting a viable and diverse public interest journalism sector in Australia;

Our data ('evidence') is collated from research projects funded by the Australian Research Council the National and Health Medical Research Council, the Public Health Association of Australia, the Flinders Health and Medical Research Institute and the Flinders Foundation (albeit does not represent the views of these Funding Bodies). Further detail about the methodologies is detailed in our peer-reviewed publications and listed at the end of the submission. All of the research detailed that involved human participants was provided full ethical approval via the Human Research Ethics Committee at Flinders University and pseudonyms are used to protect the privacy of those who participated.

We wish to emphasise our support for a more diverse and balanced media landscape in Australia, which our research data suggests has potential to reduce ambiguity/confusion about health risk information, the harms of misinformation, and the lack of trust in commercialised media.

We would welcome dialogue and discussion about any of the points we raise. If you have any questions or clarifications please contact us at:

Kristen Foley, doctoral candidate:

Professor Paul Ward, Professor of Public Health and Director of the Research Centre for Public Health, Equity, and Human Flourishing:

Dr Belinda Lunnay, Post-doctoral Researcher:

Evidential Contributions

(e) the need for a single, independent media regulator to harmonise news media standards and oversee an effective process for remedying complaints;

Our data analysis suggests that introducing an independent regulatory body to improve the standards of news media reporting has potential to reinstate trust in the Australian media landscape and the information it publishes. Women we interviewed (n=49) conveyed a generalised scepticism and distrust in media and mainstream media journalists. In order to make sense of health risks communicated in the media, they ‘triangulated’ information by collating what they had heard from a ‘few different sources’ to help build their trust in facts and ideas (Ward et al., 2021). This process of ‘searching for the truth’ rather than trusting news sources could be improved/negated through the regulation of news media standards. Consistency in risk messaging was strongly desired by individuals we spoke with who wanted to ‘do the right thing’ – whether that be stay up to date with countermeasures during the pandemic (Ward et al., 2021) or understand information about the link between breast cancer and alcohol (Meyer et al., 2022). Yet, the *commercialised nature* of mainstream news media led to women feeling distrusting of what was being reported in the media, because news sources were not viewed as supporting the public interest nor a neutral actor – because everyone had an ‘agenda’ (Foley et al., forthcoming):

I take a lot of things on the mainstream media, such as, Murdoch Press and things like that, with a major grain of salt... Because Murdoch is an arsehole... It’s all commercialised and everything else, and I know that. And it’s not just him, it’s all the other commercial stations as well; they give you this information and you know that there’s somebody else backing it up. It’s a bit like when you go to – and I do wonder about this nasal spray too, from the doctor, whether it was the latest drug rep that said this is great shit, make sure you push it. (Michelle, pseudonym)

Our analysis suggests that women have learned, whether through formal education or experience, to be cautious of information gained through media. The women interviewed were wary of information that appeared to serve a particular organisational or individual agenda, and this is the case with Murdoch Media. Michelle later went so far as to differentiate between



mainstream media sources as being more (the ABC, government subsidised media company) or less (Murdoch Press) credible.

It's all commercialised and everything else, and I know that. And it's not just him, it's all the other commercial stations as well; they give you this information and you know that there's somebody else backing it up. (Michelle).

This led questioning the interests being served in health promotion campaigns, as has been documented with other health promotion efforts (e.g. vaccine hesitancy). The women we interviewed wanted transparency with regards to the intention and the origins of messages. Information was trusted particularly when the message might be to the short-term detriment of the messenger (e.g., the government losing tax revenue in promoting reduced consumption of alcohol).

Advertising was a further major noted deterrent by women we spoke with. For Laureen, the commercial nature of the source helps to form a line between what is trustworthy, or not – whether the source might be 'even-minded and even-handed about things', which conveys how critical women are of the media source that carries information:

"I'll always consider things in the media. You know, even research things, and ads and those kinds of things, I will query where does the information come from and why is this person telling me this? I suppose I believe something that is occurring on the ABC, probably somewhat less sceptically than a commercial radio or TV, purely and simply because of the less commercial nature of it. I do always like to see 'you know, this information is provided by such and such a research organization or such and such a product or chemical product or a women's health organization'. I'd be more inclined to take notice of a women's health organization promotion and/or a breast cancer support organization than some media outlet that's purely and simply news.com, just because of advertising. I don't—I'm not a big fan of advertising and a lot of the time if I see something advertised I'll be averse to it rather than inclined to take it on... Sometimes and mostly, I would say. I suppose I do—I'd rather a personal story. I'd rather something biographical than advertising a product or produced by somebody who's got something to sell, if that makes sense?" (Laureen).

Introducing an independent regulator to harmonise news media standards and remedy complaints effectively, from our perspective, would address these concerns along two axes:



1. Support trust in health risk communications, knowing that they are subject to a set of standards (accuracy, no conflicts of interest, credible) and there is an effective regulatory process for remedying complaints;
2. Cultivate trust in the Australian media landscape, by explicitly recognising its commercialisation (and the commodification of information therein) and seeking to address this through formal regulation by a balanced adjudicator – even if this process is complex and takes time to refine.

A single body overseeing standards for media reporting of health risks may further help build more proactive, stable and robust partnerships between media and other functions of government – our example is health science communications – and facilitate the transmission of information and expertise between sectors when needed for exchanging knowledge, clarification and questions (Lunnay et al., 2022; Foley et al., forthcoming).

(g) the culture, ethics and practices of media outlets operating in Australia;

Our research showed the importance of media outlets in raising public awareness about health risks; however, the ethics and practices of media outlets operating in Australia were questioned in ways which discredited health information. Salena describes the importance of media stories in raising awareness about breast cancer and preventive management:

I guess the last time I can even think of is when Angelina Jolie got a mastectomy, like a double mastectomy because she was at increased risk of breast cancer, so she decided to cut her breasts off, and I was, like, okay, that's interesting. I didn't realise that you could map your risk like that. (Salena)

Many women we interviewed (n=98) reported that news stories were often 'fear driven' and made them feel anxious during the pandemic. The result was that rather than taking heed of the news, and the potential for public health information, they 'switched off' all together, in order to protect their mental health. Importantly and worryingly, women did this despite recognising this would cause a delay in their access to critical information (Foley et al., 2023). In particular, specificity and precision were key concerns in the transmission of information, with journalists and radio presenters perceived to lack skills in accurately interpreting or conveying messages about scientific evidence:

I'm a registered nurse I would probably know if [health advice] wasn't trustworthy because things you read in the paper aren't always accurate. I'd just think 'oh it's the



paper. They're not accurate because it's the paper.'... I just know that that's just poor journalism. (Barbara)

[Radio presenter has discussed] alcohol and all cancers. But they always end up saying things like one or two glasses two or three nights a week is fine. You go, yeah, well what size glass does that mean and does that mean one or two and a bit or does it really mean one... (Trudy)

Public health advocates specifically encourage people to consider whose interests are being served by health information (Meyer et al., 2022) – so the commercial media landscape urgently needs to be addressed.

Our analysis of articles extracted from Australian newspapers that contained alcohol and breast cancer messages of some description (n=153) showed conflicting information; three of these five papers analysed were owned by NewsCorp (Rudge et al., 2022). Individual choice and responsibility in modifying health behaviours tended to be over-emphasised in mainstream media at the expense of structural and non-modifiable risks (Rudge et al., 2022). Regarding reporting on the pandemic, analysis of the timing of media reports by Murdoch media showed that it was late and likely underestimated or misunderstood the threat of the pandemic (Thomas et al., 2020). This reflects an unethical format for media reporting, and was further exacerbated by the economic framing of the issues the pandemic would bring – rather than emphasising the health risks to the Australian population (Thomas et al., 2020).

(m) the role of government in supporting a viable and diverse public interest journalism sector in Australia;

Our research substantiates a clear role for the Australian Government to regulate the Murdoch Media and support a viable and diverse public interest journalism sector in Australia. We are concerned by the reduction of diversity in news sources, particularly Independent sources such as Croakey Health Media and The Conversation. Given our evidence that commercialisation within the Australian media landscape is viewed as a threat to balanced 'investment free' information (Foley et al., forthcoming), we would support legislative action to mandate the funding of news media. We suspect financial support is required to support a diverse public interest journalism sector.

Conclusion

Thank you for the opportunity to submit evidence about the potential for harm to the Australian public from the commercial enterprise of Murdoch media.

Peer-reviewed publications supporting this submission:

Foley, K., Lunnay, B., & Ward, P. R. (2023). Feeling and (Dis) trusting in Modern, Post-Truth, Pandemic Times. In *The Emerald Handbook of the Sociology of Emotions for a Post-Pandemic World* (pp. 211-232). Emerald Publishing Limited.

Foley, K., Lunnay, B. & Ward, P.R. (forthcoming). When the politics of contextuality (can) subvert science: A case study of Australian women’s perceptions of alcohol consumption and breast cancer risk. In Farina, M. & Lavazza, A. (Eds). *Overcoming the Myth of Neutrality: Expertise for a New World*. Routledge.

Lunnay, B., Foley, K., Meyer, S. B., Warin, M., Wilson, C., Olver, I., ... & Ward, P. R. (2021). Alcohol consumption and perceptions of health risks during COVID-19: a qualitative study of middle-aged women in South Australia. *Frontiers in Public Health*, *9*, 616870.

Meyer, S.B. **Lunnay, B, Foley, K.,** Wilson, C., Warin, M., Olver, I., **Ward, P.R.** (2022) Examining social class as it relates to the perceived trustworthiness of information regarding the link between alcohol and breast cancer risk, *PLoS One*, *17*(9) e0270936. DOI: 10.1371/journal.pone.0270936.

Rudge, A., **Foley, K., Lunnay, B.,** Miller, E. R., Batchelor, S., & **Ward, P. R.** (2021). How are the links between Alcohol consumption and breast cancer portrayed in Australian newspapers?: A paired thematic and framing media analysis. *International Journal of Environmental Research and Public Health*, *18*(14), 7657.

Thomas, T., Wilson, A., Tonkin, E., Miller, E. R., & **Ward, P. R.** (2020). How the media places responsibility for the COVID-19 pandemic—An Australian media analysis. *Frontiers in public health*, *8*, 483.

Ward, P. R., Lunnay, B., Foley, K., Meyer, S. B., Thomas, J., Olver, I., & Miller, E. R. (2021). The Case of Australia: Trust During Pandemic Uncertainty—A Qualitative Study of Midlife Women in South Australia. *The International Journal of Social Quality*, *11*(1-2), 289-308.

Addendum: Information about the research centre submitting evidence

The Centre for **Public Health, Equity and Human Flourishing (PHEHF)** is a world-leading multidisciplinary research centre extending the horizon of public health research. We generate internationally renowned and cutting-edge research that creates thought leadership for the significant and varied public health problems of our time. We focus on undertaking research and advocacy activities that improve equity in society, locally, nationally and globally, and will enable human flourishing for all. Our 'field of vision' is on the systems and structures that currently hinder or destabilise human flourishing for some groups, but not others. We are interested in how inequality is present and operates within society.

Our research programs focus on understanding and improving social justice globally. Our researchers have expertise in academic disciplines such as sociology, epidemiology, psychology, human physiology, nutrition, anthropology, medicine, philosophy and laboratory sciences. This means we are uniquely placed to respond to 'wicked problems' in contemporary society. Our research studies bridge disciplinary borders in order to synergise the strengths of multiple and complimentary research designs. Our home at **Torrens University Australia** means that we are able to extend this knowledge work into education and disseminate through the national reach of campuses and academics. The centre holds an exceptional h-index of 81 and 42,321 citations demonstrating its prominence in researching health equity and human flourishing at global, national, regional, and local levels.