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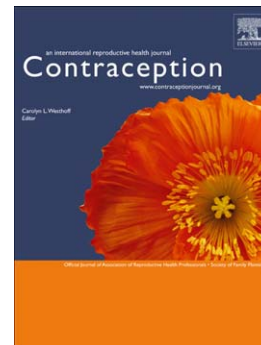
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National Network Television News Coverage of Contraception – A Content Analysis

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Abstract

Objective: To describe and analyze national network television news framing of contraception, recognizing that onscreen news can influence the public's knowledge and beliefs.

Study Design: We used the Vanderbilt Television News Archives and LexisNexis Database to obtain video and print transcripts of all relevant national network television news segments covering contraception from January 2010-June 2014. We conducted a content analysis of 116 TV news segments covering contraception during the rollout of the Affordable Care Act (ACA). Segments were quantitatively coded for contraceptive methods covered, story sources used, and inclusion of medical and non-medical content (intercoder reliability using krippendorff's alpha ranged 0.6-1 for coded categories).

Results: Most (55%) news stories focused on contraception in general rather than specific methods. The most effective contraceptive methods were rarely discussed (implant, 1%, IUD, 4%). The most frequently used sources were political figures (40%), advocates (25%), the general public (25%) and Catholic Church leaders (16%); medical professionals (11%) and health researchers (4%) appeared in a minority of stories. A minority of stories (31%) featured medical content.

Conclusions: National network news coverage of contraception frequently focuses on contraception in political and social terms, and uses non-medical figures such as politicians and church leaders as sources. This focus de-emphasizes the public health aspect of contraception, leading medical professionals and health content to be rarely featured.

Implications: Media coverage of contraception may influence patients' views about contraception. Understanding the content, sources, and medical accuracy of current media portrayals of contraception may enable healthcare professionals to dispel popular misperceptions.

Keywords: contraception; media; culture; unintended pregnancy

1. INTRODUCTION

People often learn about health care issues from the news media. Media portrayals influence what the public thinks about and how a particular issue is perceived.¹⁻⁴ National network TV news still remains an influential information source.⁵ In 2014, 24 million people watched the national network news each night, in part for personal health information.^{6, 7} TV news may also influence the health information people receive from their social networks.^{8,9}

Prior work has characterized print and TV news media coverage of a variety of health issues.¹⁰⁻¹⁷ Yet no studies have examined the coverage of contraception by network nightly news, information which might enable clinicians to identify and address contraception myths and misrepresentations.

About half of all pregnancies are unintended, and the social and economic costs fall disproportionately on lower income and less educated women.^{18, 19} Both the Institute of Medicine and the US Department of Health and Human Services Healthy People 2020 blueprint have prioritized reducing the unintended pregnancy rate.^{20, 21} The ACA's passage expands coverage of contraception, bringing with it a need for accurate information about contraception so that women can make informed choices.

Of course, discussion about contraception in the U.S. frequently transcends the boundaries of public health and enters the world of explicit politics.²² Social narratives about contraception often emphasize the political, ethical and existential aspects of family planning more than the public health implications. This framing influences not only what subjects get covered, but both what aspects of an issue are emphasized as well as who is selected as a reliable source or content expert. Since the media cannot cover every possible angle, framing determines what gets discussed, and what gets left out.

The 2010 passage of the Affordable Care Act (ACA) required health plans to cover all FDA-approved contraceptive methods.²³ This contraceptive coverage guarantee immediately increased women's access to contraception, a change that quickly attracted widespread media attention.

News coverage included some useful information about contraception. Yet the way that information is presented sends implicit messages about how to think about contraception. Our analysis sought to better understand the current framing of contraception in news media.

2. METHODS

We analyzed nightly coverage of contraception on all three major non-cable networks: ABC, CBS and NBC from January 2010 through July 2014. Our sampling period included the months leading up to the March 2010 signing of the Affordable Care Act by President Obama, legal challenges to the contraceptive coverage requirements, and culminated with the Supreme Court decision in *Hobby Lobby v. Burwell* in June 2014. We analyzed the content of each news story in two ways: individual coders independently coded each story transcript and two coders double-coded all available matching video segments. No institutional ethical approval was required for this study.

2.1 Selection of News Stories

We searched the Vanderbilt Television News Archive (<http://tvnews.vanderbilt.edu>) using a list of both broad and specific terms for contraceptive methods including *contraception, birth control, the pill, emergency contraception, the morning after pill, Plan B, Ella, Ella One, Depo-Provera, Nuva Ring, contraceptive patch, intrauterine device, IUD, Mirena, Paragard, Implanon, Nexplanon, family planning, natural family planning, rhythm method, sterilization, tubal ligation, condoms, male contraception, abstinence and pregnancy prevention*. Our search yielded 1049 possible segments. Manual review led to 935 exclusions, mostly related to search terms “plan B” (884) and “the pill” (32), search terms that pulled in numerous segments unrelated to contraception. These excluded segments were segments that included the phrase “plan B” used in the colloquial sense of a backup plan, and those including discussion of a variety of other medications in pill form. An additional nineteen segments were excluded due to lack of topical relevance. We used the Lexis Nexis database to obtain transcripts for the remaining 116 segments, and requested the video segments from the Vanderbilt Television News

Archive. Eight video segments were not yet archived at the time of the study, and were unavailable for visual coding.

2.2 Content Analysis

We performed a content analysis of the relevant TV news stories, coding both transcripts of news segments and the video segments. To code more reliably, we used 2 explicit coding instruments to code each story, one for transcripts and one for visual coding. Coding instruments were developed by the research team based on a literature review of prior studies addressing media coverage of health topics. Pilot testing, coding scheme refinement and coder training were done on a sample of segments from 2009 outside our study sampling frame.

Manual Coding of Stories

The final coding instrument included four key areas: 1) contraceptive methods 2) story source types 3) medical content including effectiveness, method use, risks, and non-contraceptive benefits (which matched the CDC's definition of "effective contraceptive information") and 4) non-medical ACA-related content including access, coverage and cost.²⁴ We also noted any mention of abortion, given the high political salience of the subject. Each transcript was coded by a single coder (authors EWP, LSH, MHM). A random probability sample of 10% of transcripts were triple coded for reliability testing, and reliability was calculated using Krippendorff's alpha (the preferred reliability coefficient for more than 2 distinct coders: range 0.85-1 for all methods variables, 0.6-1 for all sources variables, and 0.7-0.85 for medical content variables).^{25,26}

Manual Coding of Video Segments

Two authors (EWP and LSH) double-coded all visual segments using an explicit instrument that asked coders to note whether the visuals used were graphics, stock photos/videos (images from a standing gallery of generic representations of a particular topic or theme) or video/images specifically relating to story content (as a proxy for the level of investment in the story), and

whether images were concordant to the story topic. When applicable, coders also annotated the coding instrument to provide detailed characteristics of images. Agreement was generally high, with kappa ranging between 0.75 and 0.88.

The unit of analysis was each television news segment. We calculated descriptive statistics and frequencies on all variables. We also used chi-square testing to look for statistically significant variation between networks in terms of coverage content and use of medical professionals as sources.

3. RESULTS

Between Jan 2010 and July 2014, 116 TV national nightly news broadcasts featured contraception as a story subject: 32 on ABC, 40 on CBS and 44 on NBC. The same story was often covered by multiple networks (Figure 1). Stories were generally concentrated around key events, including the 2011 controversy about over-the-counter sale of Emergency Contraceptive Plan B, the 2012 presidential campaign and reaction to the Obama administration's policy statement that health care coverage should include contraception, and the 2014 *Hobby Lobby v. Burwell* Supreme Court case challenging the ACA's contraceptive coverage guarantee.

3.1 Contraceptive Methods

Contraceptive methods discussed on the nightly network TV news are shown in Table 1. Each network story could mention one or more methods, so totals do not sum to 100%. Contraception as a general concept without mention of a specific method was the most frequent subject (55%). The most specific contraceptive methods mentioned were emergency contraception (including the colloquial name "Morning After Pill" as well as trade names "Plan B" "Ella" and "Ella One") (18% of segments), and the oral contraceptive pill (16%). All other methods were referenced in less than 10% of segments, including condoms (9%), sterilization (4%), rhythm/Natural Family Planning (1%) and abstinence (4%). Long-Acting Reversible Contraceptives or "LARC methods", including Intrauterine devices (IUD; e.g., Mirena, Skyla,

Paragard) and subcutaneous implants (e.g., Nexplanon or Implanon) were mentioned in 4% and 1% of segments respectively.

3.2 Sources

TV news stories used a variety of sources in their contraception coverage, including medical professionals, governmental officials, patients, the general public and celebrities (Table 2). As stories frequently featured multiple individuals, frequencies do not sum to 100%. The most commonly featured sources were governmental officials (40%) followed by the general public (25%) and advocacy group representatives (25%). Additionally, a quarter of stories (25%) used sources that did not fit any of the categories delineated in table 2, which were coded as “other”. This “other” category was dominated by religious figures, particularly leaders of the Catholic Church, who were featured in 16% of news segments. Of note, only 11% of news segments about contraception featured medical professionals as content experts and of these 3% were Obstetrician/Gynecologists and 4% were an unspecified specialty; the remainder were physicians whose specialty was not directly related to reproductive health care. Non-physician researchers were similarly featured in a small minority of segments (4%). When we compared use of medical professionals across networks, we found no statistically significant variation between ABC, CBS and NBC (See table 3).

3.3 Medical and Non-medical Content

News segments about contraception focused heavily on access (32%) and coverage (37%), with cost featuring in 10% of segments. Medical content, specified in our codebook as method effectiveness, correct method use, side effects and non-contraceptive benefits following the CDC’s definition of effective contraceptive information, was discussed in only a minority of segments; 69% of segments had no medical content. Method effectiveness was noted in 12% of segments, with side effects, correct use, and non-contraceptive benefits each occurring in 9-10% of segments. We also compared the frequency of these categories across networks, and similar to our examination of the use of medical professionals as sources, we found no statistically significant variation between the networks in terms of these content categories (see Table 3).

Lastly, although we searched for TV news treatment of contraception, not abortion, we found that 31 segments (27%) mentioned abortion in their coverage of contraception.

3.4 Video Segments

Visually, nearly all segments made use of stock footage (91%), but a large number also used graphics (77%) and new footage (72%) tailored to the story subject. Approximately sixty percent used a combination of graphics, stock footage and visuals. Common graphics included contraceptive pill packs (23 story segments (21%)), female silhouettes (4 segments (4%)), the female symbol (4 segments (4%)), and facades of The White House, Supreme Court and Capitol building (6 segments (6%)). Graphics related to the Catholic church including quotes from and photos of the Pope and other leaders (bishops, cardinals), rosaries and church windows were used in 16 segments (15%). Stock videos were frequently used when a story covered an ongoing issue with a broad theme, such as a stock video of a Catholic mass service used repeatedly in stories referring to the Roman Catholic Church, or assembly lines of pill packs for stories related to emergency or oral contraception.

4. DISCUSSION

People who seek to prevent unintended pregnancies make choices. Part of the information to make that decision may come from a health care professional. But part also comes from non-medical arenas, including network news. We found that when the network television media covers contraception, they do so within a largely political frame and emphasize the controversial aspects of contraception, while paying less attention to health aspects and content experts. Only 31% of segments provided any medical content regarding method effectiveness, correct use, side effects or non-contraceptive benefits. Most segments referred to contraception in general, without information about specific methods.

Because nightly news emphasized political controversy, the specific contraceptive methods receiving the most coverage were neither the most effective nor the most often used methods of contraception. Conversely, some of the most effective and safest methods went unmentioned.

For example, although oral emergency contraception was one of the most commonly covered topics, unmentioned was the copper IUD, the most effective emergency contraceptive available.²⁷ A story on the political tussle between the White House and the FDA about approving over-the-counter sale of emergency contraceptive pills could have been easily enriched by a brief contextual reference to the copper IUD.

In fact, one of our most striking findings was the paucity of references made to IUDs. With a failure rate of less than 1%, IUDs are one of the most effective contraceptive methods available.²⁸ Yet utilization rates of IUDs remain low and they received scant media coverage, being mentioned in only 4% of segments.²⁹ Some stories included inaccurate information about IUDs. For example, one reporter asserted that Mississippi's proposed "personhood law," which could have given full legal status to a fertilized oocyte, "would certainly ban IUDs."³⁰ However, there was no mention of how IUDs work, nor of the lack of medical research supporting the oft-heard misperception that IUDs lead to induced abortion. The story thus missed an opportunity both to broaden the social narrative around contraception to include both socio-political and public health aspects, and for important public education.

One could argue that network television news networks are for-profit corporations whose primary purpose is profits, not public education. Yet journalism organizations are seen (and see themselves) as distinct from other corporate entities. All three major news organizations received awards in 2015 from the Radio, Television Digital News Association (including ABC News for "overall excellence" and CBS Evening News for best newscast), whose ethical code states, "Journalism's obligation is to the public. Journalism places the public's interests ahead of commercial, political and personal interests. Journalism empowers viewers, listeners and readers to make more informed decisions"³¹ Providing context is therefore central to the work of television news.

Few network news segments about contraception used medical professionals (11%) or researchers (4%) as sources. In contrast, they frequently quoted or included clips of political figures (40%), religious leaders including Catholic Church leaders (16%), members of advocacy groups (25%) or other media sources (20%) or the general public (25%). The choice of credible

sources by reporters and producers is revealing. If one sees contraception as a largely political issue, credible sources are likely to be drawn from the political realm. If, instead, one sees contraception as a largely medical and public health issue, credible sources are likely to be drawn from health and medicine. (One could, of course, do both.) Other studies examining media treatment of other health topics including mammography and HPV vaccination have found significantly higher rates of medical professionals used as sources, perhaps because these issues were viewed as health issues first, and policy issues second.^{11, 15} Network TV news media reporters and producers could seek out physicians and other health care providers as sources for stories about contraception as they do for other health topics.

Improved balance in the framing of health care news by the media could lead to straightforward, less politicized coverage of health care and health care reform.^{32, 33} Health care providers and public health professionals can also help improve the quality of TV news. Pribble's study of local TV news found minimal use of health care providers as sources, as did we.¹⁷ Providers who are interested in engaging with the media could both seek out opportunities for media training (for example, Physicians for Reproductive Health's Leadership Training Academy) and take the lead in interpreting health information.

While we summarize what the TV nightly news said, we do not know how individual viewers heard it. Other news sources may be as (or more) influential, particularly for young, reproductive age women. However, women's choices are influenced by influential people in their social network, including older family members, so TV news broadcast information may be passed on to younger women by older viewers.^{8, 9} Because we focused on a period of intense political change, our sample may have a higher proportion of politically related stories. However, events unrelated to the ACA drew substantial coverage, such as the FDA decision to make emergency contraception available without a prescription. Coverage of these topics displayed similar patterns of focus and source use as did other segments.

Unintended pregnancy rates remain high. Women have many reasons to space childbirth or prevent pregnancy entirely.^{18, 34} Our patients need reliable, informative, useful news media reporting on contraception, and our community needs a full, inclusive socio-political narrative

about contraception, including its medical and public health aspects. This is a broad goal, but having a greater awareness of how contraception is presented by the media can be an important early step. Understanding how network TV news presents contraception might help those who provide reproductive health care or work in reproductive public health to counsel patients effectively and to design public health interventions. Being cognizant of the paucity of medical professionals used as sources for contraceptive coverage might also help those who work in public health and medicine and those who work in the news media to seek to work together to expand the frame of contraception coverage to include not only politics but also individual and public health.

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Details of the contributors:

EWP(guarantor), MHM, LSH, LB and JDH conceived of the study design; EWP, MHM, LSH did the data collection and analysis, and EWP led the writing of the manuscript with significant editorial contributions from MHM, LSH, LB, and JDH.

Transparency declaration:

The lead author affirms that the manuscript is an honest, accurate and transparent account of the study being reported, and that no important aspects have been omitted.

Conflict of interest disclosure:

The authors declare that (1) EWP, MHM and LSH had support from The Robert Wood Johnson Foundation for the submitted work; (2) EWP, MHM, LSH, LB and JDH have no relationships with any companies that might have an interest in the submitted work in the previous 3 years; (3) their spouses, partners, or children have no financial relationships that may be relevant to the submitted work; and (4) EWP, MHM, LSH, LB and JDH have no non-financial interests that may be relevant to the submitted work.

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Figure Legend:

Figure 1. Key events relating to contraception in the era of the ACA: The 2010 - 2014 timeline

Table Titles (tables attached to end of document):

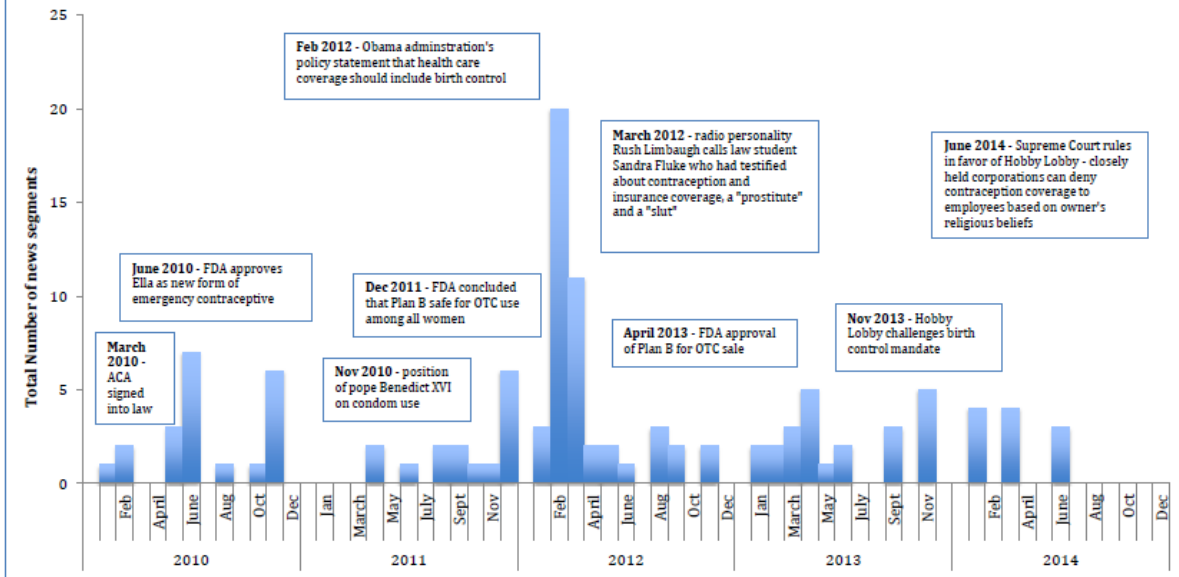
Table 1. Number of contraception stories in the nightly news, by method, 2010-2014

Table 2. Sources for contraceptive stories in the nightly news, 2010-2014

Table 3. Chi-square comparison of stories using medical sources and medical content, by network

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**Figure 1. Key events relating to contraception in the era of the ACA:
The 2010 - 2014 timeline**



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Table 1. Number of contraception stories in the nightly news, by method, 2010-2014

Method Name	Frequency, %
Contraception (general concept - no specific method)	64 (55)
Emergency contraception/Plan B/The Morning After Pill	21 (18)
Birth control pill	18 (16)
Condoms	10 (9)
Sterilization	4 (4)
IUD (Mirena or Paragard)	4 (4)
Abstinence	4 (4)
Other/Off Topic	2 (2)
Rhythm method/withdrawal/"Natural" FP	1 (1)
Implanon or Nexplanon	1 (1)
NuvaRing	0
OrthoEvra patch	0
Depo provera	0

Totals do not equal 116 segments or 100% because stories could feature multiple contraceptive methods.

Table 2. Sources for contraceptive stories in the nightly news, 2010-2014

Source	Frequency, %
Medical professional	13 (11)
OB/GYN	3 (3)
Advocacy	29 (25)
Researcher/Academician (non-MD)	4 (4)
Patient/Patient family	10 (9)
General public	29 (25)
Governmental	45 (40)
Corporate/For-profit business	10 (9)
Celebrity	3 (2.6)
Other media source	23 (20)
Other	28 (25)
Catholic Church Leader	18 (16)

Totals do not equal 116 segments or 100% because stories could feature multiple contraceptive methods.

Table 3. Chi-Square comparison of stories using medical sources and medical content, by network (rounded to whole percent)

	Number of segments	Medical Professional as Source	Medical content-effectiveness	Medical content-side effects	Medical content-noncontraceptive benefits	Medical content-correct use	Nonmedical content - cost	Nonmedical content-coverage	Nonmedical content-access
p value		p = 0.81	p = 0.98	p = 0.26	p = 0.11	p = 0.42	p = 0.8	p = 0.43	p = 0.86
ABC	32	3 (9%)	4 (13%)	5 (16%)	6 (19%)	1 (3%)	4 (13%)	10 (31%)	9 (28%)
CBS	40	4 (10%)	5 (13%)	4 (10%)	2 (5%)	4 (10%)	3 (8%)	18 (45%)	13 (33%)
NBC	44	6 (14%)	5 (11%)	2 (5%)	3 (7%)	5 (11%)	4 (9%)	15 (34%)	29 (66%)
Total across all Networks	116	13 (11%)	14 (12%)	11 (10%)	11 (10%)	10 (9%)	11 (10%)	43 (37%)	37 (32%)

N = number of segments (% of segments for each network); Totals for each network may be greater than 100% as each segment could have multiple content topics.