

AN ETHICS OF CARE FOR HEALTH JOURNALISTS (AND THEIR EDITORS)

Health journalists are not immune from pressures to break great stories before the opposition does and, in the digital age, all stories have to be entertaining and enticing to be read. So how do we think about the ethics of health journalism in the 21st century? Does health journalism, because it is about health, a special case, require different ethics to that of other subjects covered by journalists?

These kinds of issues formed the focus for an intimate symposium at Rhodes University in June this year, where about a dozen journalism scholars and a dozen journalists gathered for a two-day deep think and dialogue about ethics.

In partnership with Idasa, the Open Society Foundation, and the newly-established Discovery Centre for Health Journalism based at Rhodes, the symposium focused on linking new thinking in global media ethics to the day-to-day dilemmas faced by working journalists in Africa. The symposium also focused on the role of health journalists in promoting civic awareness and the health rights of citizens.

Key to this were ideas presented by Professor Clifford Christians, one of the world's leading scholars on ethics in media. Christians introduced discussion on developing an "ethics of care" that could have especial relevance for health journalism.

Christians' foundational idea is to centre ethics on a desire to encourage "caring communities and compassionate citizens". Christians pointed out that all ethical theories are based on philosophical presuppositions, and an ethics of care approach is grounded in what he sees as a universal "protonorm" – that all human life is sacred. "Different cultural traditions affirm human dignity in a variety of ways, but together they insist that all human beings have sacred status without exception."

He elaborated three key principles that this ethics of care invokes: other-regarding care, human dignity, and truth in context. This approach has profound implications for the doing of health journalism and challenges some of the core values of the liberal journalism tradition, such as the neutrality of the reporter. Christians put it starkly: "In the ethics of care, journalists are morally responsible to help citizens contribute to healthier communities. The primary mission of health care journalism is not the watchdog role but facilitating civil society."

Seeking to reintroduce an emotional component into media ethics, Christians draws on philosophies such as Confucianism, where equilibrium and harmony are seen as desirable ends to be striven for in human societies. He also draws on African notions of ubuntu as a foundational ethic. If the tenets of ubuntu are correct and a person's humanity derives from their interaction with other persons – and the notion that communities exist prior to individuals – then locating health journalism in what Christians calls a communitarianism ethics of journalism, creates a different kind of ethical calculation.

This leads Christians to suggest: "We are humans first, and journalists second," and that "emotions give us benevolence that we need to represent human experience"

– and that this is especially important when writing about health.

Christians used this as his basis to talk more practically about how to reduce what is often an external “gaze” or voyeuristic view of subjects. This can be particularly true when doing stories about people who are ill, or seeking medical help for some condition, or who are “different”. Using the example of Joseph Merrick, the so-called “Elephant Man” (as he was called both in real life and as depicted in the famous film of the same name) Christians suggests that by foregrounding an other-regarding care drawn from feminist theory, journalists can and should become “pre-occupied” with those they are reporting on, particularly when they are writing about suffering, ill-health, or any difference from what is defined as normative in any society, including alternative sexualities.

Christians introduced the notion of “engrossment” – a real involvement with the subject rather than mere “looking” and describing – although he conceded this is often hard to do, or even think about doing – when it comes to actual day-to-day news journalism. But he made a strong case for the necessity of this kind of ethic for health journalists which also involves an element of “steadfastness”, Christians’ notion of an ongoing commitment and compassion and a desire to see things through.

Deepening this into an ethical paradigm for every-day work life as journalists is complex. Christians suggests that this necessarily involves a commitment to “truth in context”. The fullest possible context should always be given in stories and ideally, the truth should enable audiences, “the public” to make better decisions, better health decisions and, ultimately, to be better citizens.

A wide variety of issues were discussed at the conference that echoed the themes and challenges that Christians raised. Sessions included looking at the media’s role in facilitating the public understanding of health and medical science, asking in terms of “Stigma, blaming and shame: are journalists helping, healing, or harming?” and a presentation by David Holwerk from the Kettering Foundation on the relationship of journalism to civic life, particular with reference to community journalism in the US.

A particular area explored was how to equip journalism students (and working journalists) with every-day ethical tools, inspired by Christians’ communitarian approach, or by other philosophical traditions. In the context of a decline of “disinterested science” and what appears to be a rapid rise of privately-funded research and even co-authorship of scientific research articles by pharmaceutical companies and their PR agencies, questions were asked about how to ensure the credibility of health journalism in particular. Should health journalists for example reference their articles (particularly online) in ways that journalists don’t usually do, so audiences can easily verify sources and data?

A discussion about how the tension between indigenous knowledge, alternative medicine and scientific knowledge could be balanced, took place, which is particularly important in a context where many South Africans rely on all three traditions for their health care advice. How does the state impact on this, and how do health journalists make sense of their role as nurturers of civic awareness, in both health care and health policy? was an important question.

The journalists at the symposium said they were often troubled by their news organisations’ expectations of them. In the final session, which focused on a possible Hippocratic oath for health journalists, particularly for graduates of Africa’s first specialist postgraduate degree in health journalism now offered at Rhodes, most journalists felt that any such code of ethics should be bought into by management and editors first of all.

The relentless pressure to get the story, even in the face of what is often a special set of challenges for those writing about human health, seems to be getting worse, not better, in a more competitive and digital media environment. How, in this context, might the space be found for thinking about and putting into practice an ethics of care as the basis for better health care journalism?