The field of health science communication (HSC) has multiple stakeholders including researchers, scientific societies and organizations, government agencies, universities, news and media organizations and public information officers [1,2]. The optimization of HSC between researchers and the public is crucial in terms of its impact on governmental decision-making, health policies, health promotion, disease prevention and self-care [1,3]. Health communication should adhere to the principles of beneficence, non-maleficence, respect for personal autonomy, and justice [4].

The process of conveying scientific information through the media has been linked to a “communications chain” which has the scientist and the journalist at the ends and in between is several key players such as editors, public relations and public affairs professionals, special-interest groups, and representatives of the food, pharmaceutical, or supplement industries [5,6]. Media misinformation is considered to be driven by several factors, such as an unqualified spokesperson, a lack of context, or an inexperienced reporter. It can also be biased to sell products or services, to discredit other sources or products, or to promote a particular agenda [5–7].

The Internet provides an easy vehicle for the transmission of misinformation. Consumers who seek health information through an online search may get millions of results which are unfiltered or unrated in terms of the quality of the source [6–9].

The disparity between information and misinformation results in part from the conflicting goals, perspectives, biases, and agendas of the involved parties [8,9]. The media strives for scares, scandals, conflicts, and sensational headlines which are considered to be more exciting, compelling, and profitable to report than substantiated science by the media, while industry-sponsored information may be scientifically accurate but present only one perspective [7,9].

In this regard, sourcing of the news is important as it helps the news consumer to determine the credibility of the information provided. It is expected that news people should give as much context and detail as possible about sources (the number, transparency, credibility and variety), whether named or anonymous, to verify information provided. The number of sources cited in the story reflects the reliability of the stories. A story which does not have many sources could be under reported and single source stories are often not reliable. Transparency of sourcing helps the consumer to determine whether it is fact based reporting or rumor presented as news. Hence, it is important that the reporter tells where the information comes from and the report makes clear what the sources of the information are.

Authority and credibility of the sources (being in a position to comment on the subject, knowing the subject well, motives of sources, and trust of reader) can be tough to judge for an outsider. Variety of sources is more than numbers; multiple sources help reports make sure that they get things right and provide different angles. Using a variety of sources and perspectives helps reporters provide information that is accurate and fair.

When it comes to the health-related news, the sourcing issue becomes much more critical, as generally people rely on news to obtain information. The media offer many powerful channels for communicating health information to the public. Consumers rank magazines, newspapers, television, and the Internet among their top sources of health information. The general public is not well educated about science or the scientific process. Therefore it is essential to analyze how the sourcing is presented in the news. Scientists are among the most qualified and credible sources of comment about nutrition research, but they have slipped from the top spot on reporters’ speed dials. Reporters usually are under tremendous time pressure to “get the story” and meet their deadlines.

In order to understand the sourcing practices of health-related news in Turkish internet news media, a total of 285 health-related news items which had appeared in three most popular internet news websites, in the period between 8th and 17th August 2017, were selected and analyzed. The focus of the study was to find out the number, variety and transparency of the sources used in the news and to see whether different angles and perspectives are provided in the news. According to the findings, the type of news included slider galleries with images or photographs (59.4%) and text based stories (40.6%). Whilst only 5.3% of stories listed an author, the source of the information was provided in 59.6% of the articles (sources named in 10.2%, multi-source in 10.5%), while different perspectives and angles were provided only in 2.0% of news (Table 1).
As the findings illustrated in Table 1, the sources of the health-related news have been mainly based on anonymous sources which means the credibility of sources is controversial. Besides, this research covering the analyses of 285 health-related news from the websites of three mainstream media of Turkey reveals discredited sources account for 40.4% range. In other words, approximately half of this health-related news was written without referencing any health-related scientific study or source.

In another study regarding exploratory analysis of authorship and information sourcing for health news on local TV websites in US, authors noted that regarding the authorship of the (health) articles, 23.7% listed no author, while 76.3% of the stories listed an author, 23.7% of the news were attributed to multiple sources and 61.9% attributed to single source with no attribution in 14.4% of news [10]. On comparing the US case to the Turkish one in the context of health-related news' sourcing practices, it is found out that the use of single source in health news is common and widespread. This practice discourages readers and/or viewers in conducting further investigations for validating the authenticity of the news.

In conclusion, the media is the consumers’ main source of health information. News consumers should be more critical about the sources of the news. Some stories included no attribution (i.e., in-text reference of where the health information originated or was first published) or direct quotes from health sources. From a journalistic perspective, it is troubling to find stories that lacked any type of attribution because, ethically and legally, attributing information to a source contributes to the separation of fact from opinion and allows a reader to understand from where, or from whom, the information originates. From a health communication standpoint, stories lacking attribution may leave a health consumer wondering where to turn for additional information.

References