Author’s response to reviews


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Response Letter

As the authors of this study, we just wanted to say thank you to the two reviewers and editor for reviewing the paper. Below, we have set out point by point, how we have responded to each of the reviewer's comments.

Response 1 Comments

- Abstract: Please explain/define the LexisNexis database.

The LexisNexis database in P2 (line 35) is now defined in the methods section of the abstract. This sentence now reads as: LexisNexis online repository of print media.....

- Is it only lay beliefs or maybe also wording that is used on purpose to have as many people as possible to read the article and to sell the newspaper to a higher number of people, even if this not the "belief" of the journalist? Maybe this reflects also how the general public views the concept of "disease"? Rheumatic condition may be different from other health conditions, e.g. neurological diseases, as rheumatic conditions do not commonly involve a loss of cognitive functions.

To our knowledge there is no literature on the media and rheumatoid arthritis, which has examined the question of whether the wording used by the print media is used with clear intent to influence the public to read the newspaper. However, the first background section does cite...
literature that has suggested the media use pejorative language to portray people with mental health problems. Graham Thornicroft (Thronicroft G. 2006. Shunned: discrimination against people with mental illness. Oxford: Oxford University) does also suggest that as most of the media are commercial entities, they have clear incentives to play on the prejudices of their audience to maximise profitability. We have included the following sentence, which is on P 3 (line 82-85) in the first section of the background section:

Graham Thornicroft [26] asked the question of why the media has tended to trade in the use of such negative stereotypes? One of the main reasons he argues is that as most of the media industry is commercially and profit driven, it has had clear incentives to play on the prejudices of its consumers [26].

The Thornicroft reference [26] has been added to the list of references.

Your point about the possibility of rheumatic conditions being portrayed differently to neurological diseases as they do not commonly involve a loss of cognitive functions is an interesting one. But in the small amount of literature on rheumatic conditions and the media, we could find no references to this. In fact, the debate in the limited amount of literature that exists is about the under reporting of rheumatic conditions, which is seen as a consequence of their low mortality rates.

• Furthermore, the authors could include the aim of the study in the end of the introduction.

The aim of the study is now at the end of the background section, which is now P5 (line 138-140)

The following information (please see below), which followed on from the aim in the first submitted manuscript has been moved to the beginning of the data selection/collection section in the Methods P 6 (line 161-165):

The decision to restrict the study to newspapers is that they are a highly accessible outlet of media, and they are not limited by the subtopics that they can cover about a given health issue [29]. As Adelman and Verbrugge [29] argued, "scientific findings, therapeutic regimens, government policies and programs, personal stories of adaptation, deaths of individuals, and more" have all featured in the popular press.

• Please just include one additional (methodological) sentence on the descriptive statistics that are shown in the results section.

We have now added the following sentence on P9-10 (Line 236-238) in the section at the beginning of the results:
All the descriptive statistics stated in each of the three thematic tables were derived by simple counting methods [51].

Simple counting methods are outlined in Seale C. The Quality of Qualitative Research. London: SAGE Publications; 1999, which is reference [51]. So we have added an additional reference to the list of references at the end of the article.

• Table 2: maybe the information "mass market", "medium market", "quality paper" could be included in table 2.

The reason why we have not integrated the material about types of newspapers and their circulation figures (table 1) with the information in table 2 is that we think it is important to define the differences between tabloid, middle market, and broadsheets in the data selection/collection section of the methods. This is particularly so for an international audience, who may not know the differences between types of newspaper format in the UK context. We therefore do not think that the discussion related to table 1 about the differences between tabloid, middle market and, broadsheets would not fit very well into the discussion at the beginning of the results section.

Response to Reviewers 2 Comments

• The authors state on page 6 (line 151-153) that "the original impetus for the study was the frustration of people who live with RA about society's lack of awareness about rheumatoid arthritis and its daily impact on people with the disease". This is a laudable rationale for the research undertaken, but needs to be contextualized. For example, was this the frustration of the service user leading the study and/or other patient representatives, or was this the experience of the clinicians involved in the research, or has this been demonstrated in previous research (with supporting references; for example this was a theme in Falahee, M., Simons, G., Buckley, C. D., Hansson, M., Stack, R. J. and Raza, K. (2017), Patients' Perceptions of Their Relatives' Risk of Developing Rheumatoid Arthritis and of the Potential for Risk Communication, Prediction, and Modulation. Arthritis Care & Research, 69: 1558-1565. doi:10.1002/acr.23179), or do all of the above apply?

We have now included the following PG 6 (Line 154-159) in the Method section, which contextualises the rational for the research:

Indeed, the original impetus for the study was the frustration of service users with RA, who we come into daily contact with as a rheumatology department about society's lack of awareness of RA and its impact on people with the disease. Recent research has shown that members of the public with no direct experience of RA had a limited understanding of the condition [2,39-41],
including a conflation of RA with OA or osteoporosis [39,41], and a mistaken assumption that RA is a natural consequence of ageing [39,41].


• Some minor suggestions and comments are listed below for consideration, but the main issue I have relates to the description of the analytic approach. Whilst the authors describe adopting a constructivist approach using grounded theory techniques, the resulting themes are somewhat descriptive, rather than interpretative. Insightful interpretation of the results is provided in the discussion section, but the thematic analysis as currently presented in the results section itself seems to lend itself more to a realist rather than a constructivist perspective. The presentation of quantitative information about the number of times each code within a theme is cited is unorthodox for a constructivist study, and more akin to content analysis techniques. Such a presentation of results may in fact enhance the accessibility of this work to readers from a quantitative research background and is appropriate to achieve the research objectives, but the discrepancy between the approach described and the results presented could usefully be addressed.

On reflection, we agree with you that the research fits with a realist rather than a constructionist perspective. As you indicate, this is especially the case given the descriptive nature of the codes under each of the three themes. Indeed, early versions of grounded theory have been associated with a realist approach, especially the suggestion that the researcher should bracket out their assumptions when carrying out a grounded theory analysis. We have now amended the discussion of the analytical process in the manuscript to indicate this realist approach as follows on P8 (lines 199-209) of the Method section:

A thematic analysis based on a realist perspective [50] was applied to the dataset of newspaper articles. In this approach, codes and themes were not predetermined deductively by a theoretical framework, but were generated inductively from the data [51]. As the results of the literature search/review discovered little information about the language used in the popular press to
portray RA, an inductive orientation [51] to the analysis fitted in with the explorative nature of the research.

In reference to a grounded theory approach, the second author systematically interrogated the data set through 'open coding' [52] with the 'constant comparative' method [53]. In this way, simultaneous comparison of codes and data were identified, followed by the refinement of codes into themes.

Please also note that the term realist perspective has replaced the term constructionist in the abstract P2 (line 38)

- P5 (line 120-121): Rephrase to describe a content analysis of newspaper articles about gout; rather than a content analysis of gout itself.

We have now rephrased this sentence to: The second study [15], involved a content analysis of UK and US newspaper articles about gout P5 (line 124-125)

- P5 (lines 123-125): It would be useful to further emphasise how the article described here by Hanson et al and the current study are different, given that there is a degree of overlap in the material covered. The authors correctly state that the Hanson paper was restricted to reporting about new medical treatments for RA (though in fact it would be more accurate to say the focus was on reporting about research on new treatments) but could emphasise a little more why it is important to broaden the scope of this previous work as undertaken in the current study, or other ways in which this study adds to existing findings (for example, led by patient researcher).

We have now rewritten parts of this section, which should emphasise more how this research broadens previous work, and how the research is unique in its adoption of a service-user led approach P5 (line 133-140):

Despite the insights of these three studies [15,35,36], to our knowledge there have been no publications on the construction of RA in the UK popular press. Given the prevalence of RA in the UK population [37] and the important role of the media as a source of information about the condition [27], this omission is surprising. In contrast to Hanson et al.'s [36] study, our research was led by a researcher with RA, and in addition, was designed to examine the use of language by the printed press in the portrayal of RA. Specifically, the aim of the study was to explore the language used by UK national newspapers in its reporting of rheumatoid arthritis (RA) over a defined five year period between 26th July 2011 and 26th July 2016.
As suggested, we have rephrased the sentence to reporting on new treatments for rheumatoid arthritis P5 (line 127-129)

• P7 (line 178-179): It is possible that some relevant articles might be omitted because neither the headline nor the lead paragraph contain the phrase "rheumatoid arthritis". For example early paragraphs might focus on the burden of "arthritis". Therefore it would be helpful to provide justification for this approach, or to acknowledge this as a potential limitation in the discussion section.

We have now acknowledged this as a limitation on P 17 (line 437-439) in the discussion as follows:

Relevant newspaper articles may have been omitted from the study, as an inclusion criterion was to restrict the search of items with the phrase 'rheumatoid arthritis' only to the headline and/or lead paragraph.

• P8 (lines 199-200): State the percentage of coded articles that were cross-checked

We have now included the percentage of 25%, which was the proportion of coded articles that were cross-checked P8 (lines 209-210)

• P8 (line 201): Unless the cross-checking procedure involved blind independent coding by multiple researchers/stakeholders it's probably fairer to state that the procedure was designed to limit, rather than minimise researcher subjectivity.

We have now rephrased this sentence as:

This form of triangulation [49] was designed to limit researcher subjectivity during the analytical process, which is now P8 in the method section Line 210-211)

• P8 (line 202): The process of member checking usually refers to validity checking by research participants. It could be argued that other stakeholder groups would constitute more appropriate 'members' in this context; e.g. patient / non-patient newspaper readers; journalists etc. Therefore this approach would benefit from further justification.

We have now rewritten this section and provided justification for involving clinicians in the validation process (please see below) on P8 (line 212-217) in the Method section:
The results of the thematic analysis were member checked [54] by proxy with a group of clinicians (e.g. nurses and doctors) drawn from the authors' academic rheumatology department. We used this approach, because departmental expert service users recommended not to approach service users for the validation of findings, but instead involve clinicians in this process. Service users have at times disclosed negative reactions to media coverage of RA to our clinical staff during consultations.

- P15 (lines 378-381): There are other ways in which the current findings align with the previous paper by Hanson et al - for example the negative media portrayal of the 'burden' of RA. It would be useful to highlight how the current study has extended on previous findings.

We have now included the following P 15 (line 370-375) in the discussion section, which shows another way in which our findings accorded with, and extended on Hanson et al. paper:

The emotive vocabulary that we found in the printed press portrayal of RA accorded with the findings of Hanson et al's [36] study, which showed the negative newspaper representation of the 'burden' of RA through its use of terms such as "crippling", 'debilitating' and 'constant agony". However, in our analysis, we discovered differences in newspaper type, with the tabloid and middle market press far more likely to have drawn on negative terminology to describe RA than the broadsheets.

The next new passage of text P15 (line 380-383) that we have also added to the discussion section of the manuscript shows how the study aligned with the negative media portrayal of the 'burden' of RA that Hanson et al found in their study:

It was also evident that our findings aligned with the observation from Hanson et al's [36] research, in how the printed press deployed startling statistics, such as "700 000 sufferers" or "1000 a year have to give up work" [36], to associate RA with a societal 'burden' or 'cost'.