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Radenko Udovičić (ed.): *Indicator of Public Interest: TV Prime Time Domestic News – Monitoring and Analysis of TV News Programs in 10 SEENPM Countries*, Sarajevo: Media Plan Institute, 2007, 238 pages

The book Indicator of Public *Interest*¹ is published as a result of a project of monitoring and analysis of prime time TV national newscasts in 10 South East European countries: Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Hungary, Macedonia, Moldova, Montenegro, Romania and Serbia. The project was organized and set up by the Media Plan Institute, Sarajevo, with partner organizations: Albanian Media Institute, Center for Independent Journalism from Hungary, Center for Independent Journalism from Romania, Independent Journalism Center from Moldova, International Centre for Education of Journalists from Croatia, Macedonian Institute for Media, Media Development Center from Bulgaria, Montenegro Media Institute and Novi Sad School of Journalism from Serbia. The research was carried out within the framework of the South East European Network for the Professionalization of the Media (SEENPM²) project

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In the Editors' Review (5-22), the editor Radenko Udovičić gives an overview of the research goals and methodology. In each of the 10 South East European countries two TV newscasts were monitored: one of the public service television and the other of the most influential commercial television. The news were analyzed through two dimensions: (1) the professional dimension - coverage of daily events and issues, sources of information, journalist forms, coherence and accuracy of information, information balance, news personalization and journalist ethics; and (2) the social dimension - reports on local, national or international issues, news impact on the community, issues regarding the fight against organized crime, the role of TV news in the state building process based on the rule of law, future is-

¹ The electronic version of this book is available at http://www.mediaonline.ba and http://www.seenpm.org.

² SEENPM is an organization founded in 2000 with the aim to raise journalism standards, improve media environment on the

national and regional levels, encourage cooperation among media professionals, and contribute to general media development and stability in the South East European region.

sues, the role of public service television and the priorities of commercial televisions, news impact on development of positive social values and activities, etc. The news were monitored in April 2007. A sample of eight newscasts was selected. Variables that were analyzed are as follows: news duration in seconds, topic, territorial distribution and assessment of content - orientation toward the subject. The observed trends are: the gender structure of anchors or presenters, selection of top news (headlines), news arrangement, protocol news, advertising and hidden advertising, quality of presentation, deviations from ethical and professional norms.

Udovičić stresses that "a general conclusion of this analysis, at least based on the monitored sample, may be that most public service televisions managed to come out from under the cover of authorities and to produce an impartial program with a strong dis-(14). tance" Furthermore, "the boundaries between public and commercial television are slowly being smeared. In most of the monitored countries, in the harsh market-driven conditions, television stations are trying to please their target groups. (...) A noticeable trend is that public services still have respect for high-ranked social events, even the government, while private stations respect their own ownership interests and commercial advertisers" (22).

According to the Albanian report (23-46) the newscasts of the TVSH public service and of the commercial Top Channel were monitored and analyzed. "The Albanian TV market has witnessed on one hand the steady

decrease of influence of the public broadcaster, and on the other hand, the continuous, although not always smooth, rise of commercial TV stations as information sources and players in the market" (24). It is interesting that the monitoring period coincided with the introduction of a government's proposal on the digital bill, which proves that television in Albania is developing in a modern technological environment. Overall, the prime time newscasts of both the public service and the commercial television "are similar in range of topics, but differ in the details, sources, and priority of coverage. The selection of prime time news (...) points to a specific agenda that sets the news criteria. The agenda's main priority, as the very order, selection, and sources of news shows, is very close to the agenda of the government or politics in general or to that of the TV management and its interests at the moment" (41). It is very interesting that during the period monitored not a single news item on Top Channel was of a positive attitude, while only 1% was of negative attitude on TVSH.

The public service television in Bosnia and Herzegovina (47-69) is characterized "by a specific and complex structure, consisting of three public broadcasters operating in line with the country's division into two entities" (47). BHT was monitored as the public service and NTV Hayat as the commercial television. "The prime time newscast of BHT, compared to Hayat, is characterized by better technical organization, dynamic presentation, better coverage of issues of public importance, and a large number of authentic items" (48). However, despite technical and structural inferiority, the news on the commercial television do not follow the strict protocol as the news in the public service where most of the items had protocol character. Hayat's news is more interesting and its messages are more accessible to the majority of viewers, even though 68% of all news analyzed were agency news. Both televisions had only 2% of news with negative attitude.

As a full EU member state, Bulgaria's report (71-90) stresses with pride the positive developments in media and especially the unrestricted access of Bulgarian journalists to international sources of information. However, "one of the major problems facing the media industry in Bulgaria remains the inability of its regulatory system to tackle effectively all the issues related to the political and economic independence of the media and to allow the public service broadcasters to perform their function as a pillar of a democratic society" (74). Another major problem that the media faces is "the increasing self-censorship" which is usually attributed to economic motives (75). News on public service BNT are very similar to the news on commercial bTV. However, it is surprising that the commercial bTV broadcasted 29% of news on social protection and healthcare, culture and art, education, science, ecology, religion, youth and children, when these issues are not profitable for a commercial medium (87). Both televisions predominantly broadcast agency news (BNT 45% and bTV 46%) (88).

The Croatian report (91-107) stresses that there is a satisfactory balance of prime time news on the public service HTV and the commercial NovaTV with different approaches to reporting. Issues and events covered in both newscasts are almost the same with the exception of a larger number of news regarding culture on HTV (8%), while NovaTV had overrepresented the crime section of the news. The overrepresentation of news from the capital, Zagreb, is noticeable on both televisions. By popularizing and personalizing the news program, NovaTV succeeded in attracting the audience, which had found the HTV Dnevnik to be "too serious", "boring" or to report "just politics" (96). Approaches to reporting of these two newscasts are very competitive and different. While HTV keeps a more serious, more conservative form, which relies on many years of tradition as a guarantee of credibility, NovaTV is prone to experimenting with combination journalist forms.

The conclusions of the report from Hungary (109-126) state that the Hungarian broadcasters pay little attention to foreign news. There were 79% of national news items on the public service MTV (114) and 68% on the commercial RTL Klub (116). While MTV treats public interest stories in detail, RTL focuses on human interest stories. However, neither of the two is biased in any significant way (123).

In Macedonia (127-144) the focus of both the public service MTV and the commercial A1 is strong on political issues and development. "The general attitude on A1 towards such news is negative to neutral, both in content and attitude, while on MTV it is generally neutral" (138). According to the report, this is the reason viewers consider A1 a much more objective and independent media outlet with high journalist professionalism and neutral news. Even 37% of the total news on A1 regarded the economic and financial news. "The quality of presentation on A1 was higher than MTV, although the latter has made an effort in recent times to improve the quality of its product (...) no major violations of ethical or professional norms were recorded" (139).

Somehow it seems that the strongest political pressure is noted in Moldova (145-160). The bias of the state TV Moldoval in favor of the President and the Government is reflected in the fact that it completely ignored events that throw a bad light on the Moldovan Government. The commercial broadcaster TV7 regularly reported on such events. Moldoval had no items about common people and it did not ask any independent expert to comment on official documents and decisions. Another obvious difference between the public and the commercial TV is that of the quality of the picture.

The conclusion of the analysis of the prime time news in Montenegro (161-174) is that the public service TVCG is more thorough and the commercial TV IN is more diverse. However, "what is easily noticeable in both prime time news programs is (...) absence of a critical approach in covering the day's events. Promotion is far more present than criticism, especially in stories covering the area of tourism, which on both televisions are almost completely deprived of any critical attitude" (162-163). The reporting in the TVCG newscast is accompanied by footage that is more dynamic than in the case of TV IN, primarily owing to the fact that footages were mostly from the scene, while file tape or still pictures dominated on TV IN.

In Romania (175-195) there is a trend of news tabloidization, especially on the commercial Antena1. Infotainment is less present on the public channel TVR1, but it does not entirely bypass it. What must be mentioned is the fact that Antena1 uses hidden camera when reporting and there is no remark about it being legal in Romania.

It was only in Serbia (197-230) that three television channels were monitored: two public service televisions (the national RTS and the local RUV, which covers the area of Vojvodina) and one commercial television - B92. The conclusion is that "there is social consensus on public interest (...) which dominated in the first part of all programs. In the rest, each outlet followed its own program policy, which can be considered as a good standard, because it is necessary, at least partially, to format and programme the media in order to avoid unification of the entire information market" (229).

Since scientific research in the media field, especially of television in the SEE region is very rare, as a result of the mentioned research project this book must be commended. The shortcoming of this research is in the very small sample of newscasts (only eight for each television), which is why it is not possible to use these results as relevant for general conclusions. However, the book will be useful to media analysts and television professionals, the news editors before all. It most contributes, though, to the comparative analysis of public service and commercial televisions in the region.

Viktorija Car

Tanja Kamin: Zdravje na barikadah: dileme promocije zdravja [Health on Barricades: Dilemmas of Health Promotion]. Ljubljana: Fakulteta za družbene vede, 2007, 168 pages

In her book Tanja Kamin has tried to answer, among others, the following questions: What is the discourse of modern public health in Slovenia and Europe? What power relations are constructed therein? How is health constructed? What norms are stipulated? How are health problems constructed? What solutions are proposed for these problems? To whom is the responsibility ascribed? In conjunction with this she determined whether the discourse on health promotion truly enhances the power of the individual in the manner that documents from the World Health Organization (WHO) explain the empowerment of the citizen.

The book shows that the health promotion discourse constructs health as a process, as a life project with which each and every individual must unconditionally and constantly be concerned. In the name of health people encumber themselves with a number of tasks, take on ever-new challenges, as well as burdens. No area of everyday life remains free from health. Health is constructed as an all-embracing benevolence, a goal in itself, and a process that is dependent on continuous measuring, monitoring and (self)controlling.

What, then, does it mean to be healthy in the health promotion discourse? Being healthy means the absence of illness, which is the single clearly characterized and structured category in the relation 'healthy-ill'. Further more, it means ensuring that I will never be ill, that I will be psychically and bodily ready for constant adaptation to uncertain social and economic circumstances. It means taking care that I will be an active, vital elderly person, and that, rather than becoming a burden to society, I will continue to serve society. It means avoiding various risks, in particular those against which experts have warned.

In her book, Tanja Kamin revels that the authorities of public health are aware of the socio-economic determinants of health and at the declarative level they even express it openly. However, at the level of preventative measures the health promotion dis-

course is individualized such that the key factors of health are constructed by an individual's lifestyle. This is known from a collection of specific behaviours that are, statistically, characteristically connected with mortality. Among these in the Slovene health promotion discourse are the priority given to the (ab)use of tobacco and alcohol, physical exercise and nutritional habits, AIDS and, judging by communication interventions, hepatitis B. These are also the main health problems in Slovenia as indicated by public health authorities in communication interventions, political programs, as well as in the interviews.

The neglecting of socio-economic factors in the discourse of prevention is not surprising, since it stems from medical views of lifestyles and the 'truth' of epidemiological knowledge, which are primarily based on quantitative rhetoric and risk calculation. The analysis of foreign experts and foreign scientific literature confirms that a similar situation exists abroad. The assertion that the Slovene discourse is preventative, especially with regard to changing lifestyles, and leads to the changing of symptoms rather than causes, is shown by the research to be a legitimate one.

In accordance with an individualist theory of health and/or a healthy lifestyle in Slovenia the number of communication factors in the framework of health promotion has been growing from year to year; in the last four years communication interventions as a whole have increased by 50 per cent. With this trend, in particular there is a rise in those communication interventions that represent an individual's

way of life. We see this in the focus on the following: physical fitness, healthy eating, alcohol, as well as heart and circulation concerns. At the same time the number of communication interventions is falling for those themes that are primarily matters of medical health: individual diseases, among these especially AIDS and cancer. With the broadening of the definition of health to all areas of individuals' lives, the Slovene discourse on health promotion is very much in accord with that of the WHO, which no longer speaks directly about some diseases (such as cancer) but does so indirectly by problematizing individuals' habits and, specifically, bad habits that can lead to disease. With this sickness is constructed primarily as a matter of the individual, in whom the sense is instilled that proper health behaviour exists for the prevention of each individual disease. This is in accordance with the thesis of healthism.

Kamin also uncovers that the authorities for the promotion of health believe that intensive informing of individuals about health dangers and risks empowers the individual and enables him/her to participate independently and actively in the changing of lifestyle in order to accord with health recommendations. The followers of a medical model or health belief model are also convinced of a linear relationship between informing and behaviour. This is in contradiction to the supposition that an individual's behaviour stems from his/her own sovereign, independent decisions. From this viewpoint the discourse of prevention is fundamentally aimed not at informing, rather it is persuasive in nature, if not an outright concealed imperative. This is confirmed by the paternalistic discourse in communication interventions for health promotion, which very clearly shows the power relations in the health promotion discourse.

(Legitimate) power is held by those who set up health norms. It is expected that individuals heed these norms and do so 'voluntarily.' Those who do not follow the regulations voluntarily are moralized by the discourse and are depicted in a negative light. In some cases those individuals who do not respect recommendations are constructed as - in addition to oafish, incapable, ugly, dangerous and weak above all as irresponsible towards themselves and the state. As the responsibility for health in the health promotion discourse is tightly linked to the right to health, irresponsible individuals can also be stripped of the right to health, for example of (subsidized) health care.

Among the primary strategies for changing lifestyles the promoters of health extol communicating via mass media. This is shown by the way of thinking of the interviewees, namely, that whatever is not in the media simply does not exist; it is also shown in the growing number of communication interventions in the mass media.

Although action in the health system in the health promotion discourse is bound to the principles of efficiency and control, the research shows that neither of these find expression in the area of implementing health communication interventions. Her study shows an explicit irreconcilability between those carrying out (executors) and those calling for communicative interventions (subscribers); the activity of the latter, despite apparent decentralization, becomes more centralized in the direction of the Ministry of Health. The subscribers are aware of the significance of health communication interventions as a whole for influencing citizens' changing of behaviour. But the data also show that subscribers and executors have different understandings of the concept of 'entirety.' For the subscribers 'entirety' primarily means that a communication intervention addresses the entire population and that it is transmitted via as many media as possible. What the executors think, even when they are communication professionals, is not important for the subscribers; subscribers have absolute power in the strategic planning of health communication interventions, and they leave to the executors only creative realization, though even in this regard they are restricted by the need for a 'universal' message and the a priori limitations of individual forms of media.

Her main point is that health communication interventions in Slovenia are, as a rule, based on inadequate studies about the intended audience. From the viewpoint of social marketing this leads to a whole series of problems, from the unsuitable segmentation of the public, inappropriate problem definition, insufficient communicating and, not least, inadequate problem solving. The data which lead to the formation of health communication interventions are primarily epidemiological facts from which the health problem is identified, and from which the interest of the subscriber in

solving the problem stems. Due to lack of knowledge of the problem from the viewpoint of the intended audience or of the individual, or even his/her ignorance, it is easier in communication interventions to recognize the interest of the subscriber as the interest of the individual at whom the recommended behaviour is aimed.

From the health promotion discourse it is evident that it is the new political and economic circumstances that are responsible for the intensive movement in the direction of prevention. This is shown by the key mechanism of the health promotion discourse, which is of a socio-economic nature. The budget of the health system, taking into account the rising costs of health care, is strained both because of the development of medicine as well as due to the ageing population. It seems that for politics concentration on health is the convenient solution, as such a concentration redirects attention from societal problems to problems of the individual. The ideology of prevention and the strong accent on individual responsibility for health aims to supplant collective political obligation, which is in accordance with the thesis of healthism, but also with that of medicalization.

Kamin's book on the health promotion discourse in Slovenia shows that the changes are directed at an increase in the use of market principles for the organization and distribution of services, as well as for the regulation of the medical profession in the health care activities, and the regulation of individuals in implementing healthy behaviour. In relation to this at least two things should be pointed out: firstly, a redirection of responsibility for the condition of one's health from the health care system and the state to the individual, interest groups and commercial sector, and secondly, the exposure of the individual as the fundamental generator of societal changes.

From this stems the main paradox of the empowerment of the citizen, especially when the concept of empowerment is interpreted as strengthening the power of the individual. The health promotion discourse, if the state is taking the empowerment of the citizen seriously, then includes the possibility of activism and demands towards the state, to transfer the responsibility for the health of the citizen from the administrative level also to the level of provisions. But this could bring along as well the sapping of the power of the dominant societal order. Because of this she believes - and this is confirmed by the research – that empowerment in the health promotion discourse actually means docility and the increasing of individual responsibility. The individual is, in relation to health issues, stimulated to independence and activity only to the extent that he/she follows the recommendations of health authorities, and also does not threaten their socio-hierarchical untouchability.

Like the old public health, the new public health is equally guided by the need for healthy (productive) citizens. But for the late-modern, individualized subject and the political circumstances in which liberal principles proceed in the foreground, explicit health normalization is not admissible, just like the accenting of societal interests ahead of the interests of individuals. Gradually, in accordance with the development of medicine, with processes of the de-traditionalization, secularization, and invidualization of society, public health discourse excludes explicit addressing of individuals of a collective spirit and of the meaning of health for the development and prosperity of the nation, such as it had been characterized for decades after the Second World War. Public health at the declarative political level denounced the centralization of action and took on the economically 'more efficient' participative, dispersed action, for which discourse has an essentially domineering integrational role

At the level of public health discourse a number of paradoxes are apparent. At the political level public health, with the concept of health promotion, is defined as an activity, which on the one hand is concerned

with the putting into force of health policies at all levels of political activity, and on the other with emancipation and the health-literacy of individuals. In this manner - under the slogan of 'health for all' - public health symbolically offers a visage of humane, socio-economic rights. In the political documents public health occupies a freeing, non-normative, nonobligatory and non-moralizing discourse. But at the level of media communication interventions it is precisely the opposite. Mediated health promotion discourse is decidedly individualized, normative and moralizing.

This book presents an excellent view on the problems of health promotion and is suitable for students, scientists and also for wider readership not only in Slovenia, but also former Yugoslavia.

Karmen Erjavec