

Research Center of Medical Ethics and History of Medicine

Title:

Determining the relationship between media, health, and ethics and compiling media codes of ethics for health professionals and media professionals

A thesis submitted as partial fulfillment of the requirements for Doctor of Philosophy (PhD) Degree

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Abstract

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Background: In the age of mediacracy, confrontation with the media is inevitable. Although this encounter can be an opportunity for both health and media professionals; It is not free from threats.

Objectives: De-threatening and optimizing this encounter requires ethical and professional systematization through compiling and developing local and practical guidelines; The goal this study was designed to achieve.

Methods: This research was conducted qualitatively using conventional content analysis in two stages. In the first stage (library study), in addition to determining the relationship between media and health and ethics, interview questions were derived and developed. In the second stage (field study), 20 semi-structured interviews and a focus group discussion with the interdisciplinary health and media experts were conducted.

Results: The thematic analysis of interviews resulted in 486 codes of ethics classified into 4 groups. The first group was addressed to media professionals, containing 126 codes categorized into 5 categories and 15 subcategories: seeking and reporting the truth (3 subcategories), harm minimization (4 subcategories), integrity (2 subcategories), professional independence (3 subcategories) and respect for the rights of others (3 subcategories). The second group was addressed to health professionals dealing with the formal media, containing 150 codes categorized into 6 categories and 17 subcategories: scientific encounter (2 subcategories), beneficence (2 subcategories), harm minimization (3 subcategories), integrity (2 subcategories), Maintaining the dignity of the profession and professionals (4 subcategories) and respect for the rights of others (4 subcategories). The third group was addressed to health professionals dealing with cyberspace (esp. social media), containing 190 codes categorized into 6 categories and 20 subcategories: scientific encounter (4 subcategories), beneficence (2 subcategories), harm minimization (3 subcategories), integrity (2 subcategories), Maintaining the dignity of the profession and professionals (5 subcategories) and respect for the rights of others (4 subcategories). The fourth group was addressed to the public audience, containing 20 codes categorized into 2 categories: ethics of belief (16 items) and ethics of (re)publishing (4 items).

Conclusion: As the study was concurrent with an international interdisciplinary event (pandemic/ infodemic), its proposed codes can help reduce possible disorders in a similar future situation. Complementary studies to evaluate the proposed codes of this study is recommended. Publicizing the codes through media promotion and including them in the curriculum can be beneficial.

Keywords: Media; Health; Ethics; Codes of Ethics; COVID-19; Pandemic