

## Media, morality, and risk factors in health

The way the mass media communicates risk factor epidemiology is a relevant theme for public health. Various studies have analyzed whether the media accurately translates medical knowledge for laypersons. Still, it is helpful to expand the issue's focus to include the subjective dimension of how the public consumes health news.

As consumers, we want news on our lifestyles' risk factors because such news opens up the possibility of being a subject. The future appears calculable and dependent on how we act on our own being, that is, on the part of us that purportedly induces us to carelessness and thus to illness and premature death. Time itself, ticking away relentlessly toward our death, thus appears manageable and full of significant occasions, involving choice, fear, hope, and regret. Based on the risk factor concept depicted by the media, once again in human history, suffering and death appear distant and avoidable.

Even when properly informed, why do we fail to change our lifestyles as recommended by the news? Lifestyle change is usually an invitation to moderation, to be adopted when faced with an opportunity for pleasure. Since the relationship is probabilistic, our lack of constraint may not lead to illness, while moderation may not do any good – one way or the other, we eventually die. Although health-risk news proposes moderation as a sure way of multiplying pleasure (based on extended life expectancy), why would anyone trade the certain for the uncertain (or immediate for deferred pleasure)? If individuals fail to take care of themselves, it is not because they lack information, but because the reward's uncertainty makes it reasonable to “give in to temptation”, and because to “enjoy now and pay later” is not only the key message from credit card advertisements, but also the central motto of hedonistic cultures.

This kind of media presence by medicine thus raises two additional problems for public health, just as relevant as the gap between medical consensus and what appears in the media. First, the emphasis on the scope of individual action simplifies the causality of problems, thereby reducing our capacity to deal with them. The recent discussion on traffic accidents in Brazil stresses motorists' immorality and enforcement power by the police; meanwhile, road quality, vehicle safety, and the multiple cultural meanings of driving a car appear irrelevant, as if limiting the media's agenda to calling attention to the harmful consequences of recklessness and exposing the state's incompetence. And the more we consider ourselves incapable of acting politically to transform social conditions, the more the media prioritizes what supposedly depends on our individual choices.

Secondly, by portraying the onset of an illness as the consequence of opting for immoderate pleasure, risk-factor news comes across as a set of moral rules, equating suffering with punishment. In addition to counteracting modern medicine's efforts to challenge the nexus between disease and sin, such a moral approach can become iatrogenic, since it seduces us to “break the rules”. Last year, a recipe teaching people how to fry equal parts of bacon and ground pork was one of numerous passing hits on the Internet. An important part of the enticement in this concentrated dose of cholesterol lies in its “transgressive” dimension. Individuals try the recipe not because they ignore the relationship between cholesterol and cardiovascular diseases, but precisely because they are aware of it.

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