Media Coverage of the 2003 Toronto SARS Outbreak

A report on the role of the press in a public crisis

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This report examines the impact of information flow in a public crisis in Toronto. While limited to a highly focused media analysis, the report makes a number of key observations with implications for crisis management, governance and the understanding of global information flows.

Research and writing of this paper was undertaken at the Robarts Centre by Director Seth Feldman, Associate Director Daniel Drache and Research Associate David Clifton. Other collaborators in this work include York University Professor Fred Fletcher (Director, Joint Graduate Program in Communication & Culture and President of the Canadian Media Research Consortium) as well as Andrew Laing of Cormex Research and Communication & Culture graduate student, Anne Doelman.

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As part of its research mandate, the Robarts Centre will continue to examine the impact of global cultural flows as the movement of people, media texts and ideas.

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Summary

This study begins an examination of critical aspects of the press coverage of the 2003 SARS outbreak in Toronto. A preliminary empirical examination of some press coverage of the crisis, the project is the result of the Robarts Center working in cooperation with the Canadian Media Research Consortium and Andrew Laing of Cormex Research of Toronto. Together we examined more than 2600 Canadian and American newspaper articles, and performed a detailed content analysis of slightly more than 1600 SARS related articles from the Toronto Star, the Globe and Mail, the National Post, USA Today and the New York Times. Our study yielded the following conclusions:

• In a number of key periods, the press provided what we refer to as ‘saturation coverage.’ During saturation periods, coverage jumped to 3 to 4 times the average level, with each paper printing as many as 25 articles per day about the SARS crisis. This periodically intensified coverage shaped the perception of the intensity of the SARS crisis.

• Despite an intuitive perception of coverage evolving from health oriented reporting to stories on the economic and political consequences of the outbreak, health centered stories remained a central focus. In both Canada and the United States, at least half of all SARS related coverage was devoted to health issues, the remainder divided into a quarter to economic issues, an eighth to political issues and the rest to mixed coverage. Even during the debate over the WHO travel advisory, the Canadian press still devoted at least 37% of its coverage to health issues.

• Coverage of the SARS outbreak by the Globe and Mail, the Toronto Star and the National Post were remarkably similar in terms of subject matter and in-depth analysis. One discernable difference was the manner in which levels of government were criticized according to the political leanings of the newspapers. The Star was generally more critical of the Ontario government while the Post centered its criticism on Ottawa with the Globe blaming both levels of government more or less equally.

• The message used to contain the outbreak locally was the same message heard by investors, consumers and foreign citizens. As such, the stakeholders in the SARS crises quickly found their communications strategies working at cross purposes.

• In the American press, Canada was often not differentiated from other SARS affected areas where the outbreak was not confined to health care facilities. Including Toronto on the same list as locations where the disease was active in the population created the impression that the risks in Toronto were higher than they really were.

Framing the SARS crisis in Toronto are what have come to be known as global cultural flows: the now ubiquitous global exchanges of people, money and information. Understanding the SARS crisis and communicating its nature requires an understanding of how global cultural flows have reshaped public events within far reaching and complex chains of causality.
Media Coverage on the 2003 Toronto SARS Outbreak

Media Coverage

During the SARS outbreak, Torontonians were inundated with an extraordinary volume of news coverage about the virus. Working in cooperation with the Canadian Media Research Consortium and Cormex Research of Toronto, we examined over 2600 Canadian and American newspaper articles, and performed a detailed content analysis of slightly more than 1600 SARS related articles from the Toronto Star, the Globe and Mail, the National Post, USA Today and the New York Times. The period researched was 91 days in length, running from March 16, 2003 to June 15, 2003. While our analysis was continuous, four key moments in Toronto’s SARS outbreak were given particular scrutiny: the initial outbreak, the implementation of the World Health Organization (WHO) travel advisory, the end of the initial outbreak, and the second outbreak (See table 1).

<table>
<thead>
<tr>
<th>Period</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Outbreak,</td>
<td>March 25, 2003</td>
<td>March 31, 2003</td>
</tr>
<tr>
<td>WHO Travel Advisory</td>
<td>April 20, 2003</td>
<td>April 30, 2003</td>
</tr>
<tr>
<td>End of Initial Outbreak</td>
<td>May 14, 2003</td>
<td>May 18, 2003</td>
</tr>
</tbody>
</table>

During three of these periods, the Initial Outbreak, the WHO Travel Advisory and the Second Outbreak, Torontonians were presented with what we refer to as ‘saturation news coverage’ of the SARS issue. On average, between March 25 and May 30, the Toronto Star ran 6.1 SARS articles per day, the Globe and Mail ran 3.6 articles per day, and the National Post ran 4.3 articles per day. As figure 1 illustrates, during the three periods of saturation coverage, the number of articles per day in each period jumped dramatically. For example, on April 25th at the height of the controversy over the WHO travel advisory, both the Star and
the Globe ran 25 articles, and the National Post ran 22 articles. Importantly, these numbers include only those articles, op-eds and editorials that were substantively about SARS, excluding letters to the editor and articles that made a passing mention of the illness. If these latter groups were included the numbers would be much higher.

With the exception of the coverage spike visible during the travel advisory, the Globe and Mail provided the most even volume of coverage, while the Toronto Star and the National Post appeared more prone to saturation spikes. While it is empirically difficult to measure the impact of media coverage on popular perception, it is conventional wisdom that the news coverage gives the public important clues as to the scope and size of an issue. During periods of ‘saturation news coverage,’ the daily number of articles jumped to between 200% and 300% of average levels, with each paper printing as many as 25 articles per day about the crisis. Saturation news coverage in the local press reinforced the impression that SARS was out of control in Toronto.

**Figure 1: Saturation Periods**

![Saturation Periods Graph]

- **WHO Travel Advisory**
- **Second Outbreak**

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[5]
Methodology

For each of the 1600 articles in the five newspapers studied, our research empirically assessed issues of content, stakeholder representation and tone (critical vs. praising) as described below.

Our content coding was designed to reveal and track the relative balance and prevalence of three different types of coverage over the course of the outbreak:

- Health – Medical information about illness and its management;
- Economic – Stories principally concerned with the economic fallout of the illness; and
- Political – Information about the role of public authority, regulatory preparedness and the political reaction to the illness.

In any crisis, access to the media is critical, and different groups compete for voice and presence in the media. Using a list of 80 stakeholders including patients, health care workers, local and national public health officials, the business community, citizens, the media, politicians, and foreign bodies such as the WHO, each article was coded to identify which stakeholders were given voice, when, where and by whom.

A key variable in our study was the tone of the coverage in each paper. Tone is important in a crisis because it contributes to the allocation of blame. We coded the criticism and praise directed at eight groups over the course of the outbreak. Specifically, these were: the Government of Canada, the Government of Ontario, the Public Health Authorities, Health Care Workers, the World Health Organization, Citizens, Business and Foreign Governments. For each group, it was noted whether the article was critical or congratulatory, and whether those comments related to the health, economic or political aspects of the crisis.
The News Media in the SARS Crisis

In a public crisis such as this, there are four generally recognized functions of news organizations:

- to channel local public health information by connecting public health officials to citizens, and, to a lesser extent, serving as a channel for public health information between groups of professional stakeholders (e.g. medical officials, politicians, businesses);
- to provide a national and international conduit for news reports and analysis;
- to document the economic impact of the crisis on businesses, front line health workers and the community as a whole;
- to offer a venue for public and political debate on the handling of the crisis.

Based on our data, the press coverage of the SARS outbreak did fulfill each of these roles to greater or lesser extents.

During the initial outbreak, coverage focused almost exclusively on health, with as much as 91% of Canadian coverage focusing on health issues. As the crisis progressed, the political and economic dimensions of the crises gathered momentum. During the WHO travel advisory, health coverage fell to its lowest point, accounting for only 37% of SARS related news content in Canada. As figure 2 illustrates however, although economic coverage gained substantial ground, particularly after the travel advisory, it was not allowed to drown out the health story. Individually, the newspapers were quite similar to one another, with the National Post devoting a slightly greater percentage of its coverage to health issues (65%), as compared to 55% and 53% in the Toronto Star and Globe and Mail respectively.
The Canadian newspapers were also remarkably consistent in terms of the way in which they focused on the various stakeholders as the crisis unfolded. As figure 3 illustrates, during the emergence of the first and second clusters, the coverage gave special place to voices from the health sector, including local, provincial, federal and international health officials. Later in the crisis, health care workers such as doctors, nurses and Emergency Medical Service personnel received more attention. At the same time, while the health voices never disappeared, the tone and substance of the coverage changed as the economic costs of the outbreak mounted. After the WHO travel advisory, voice was increasingly given to politicians and business people, including those from the hospitality sector. With the exception of a brief period at the end of the second cluster however, voices from the health sector, if not those of health care workers, dominated coverage of the SARS issue.

Our analysis raises many questions about voice and access to the media in times of crisis. While the allocation of voice is not a perfect predictor for the arguments put forward, it is nonetheless useful in determining who had the press attention at key moments.
Inevitably, every major crisis takes on a political dimension. Whether political leaders excel in communicating with the public as Lucien Bouchard did during the ‘ice storm,’ or are merely using the crisis to their own partisan advantage, politicians inevitably play a role in civic emergencies. News organizations play their own well established role in reporting on and critiquing the comments and activities of politicians.

Although it is difficult to be definitive, one of the negative roles the press arguably played in the SARS crisis was to politicize the crisis along partisan lines, drawing the spotlight away from health care workers and the more substantive health policy story. As figure 4 illustrates, after the WHO travel advisory, health care workers, and nurses in particular, received substantially less voice than did professional politicians. Although Torontonians had access to a range of ideological opinions, it is important to remember, as the National Advisory Committee on SARS and Public Health pointed out, that ‘health politics’ is not ‘health policy’ and that the public interest is never served by partisan battling.
SARS coverage in the Canadian newspapers was remarkably similar but not identical; the greatest single difference was which level of government each paper criticized most during the outbreak. Each of the three Canadian newspapers was critical in about one-third of their coverage. Although they were consistent in their volume of criticism, the newspapers were predictably different in whom they targeted for criticism. Particularly in editorials, the *National Post* tended to be most critical of the Federal Liberals, while the *Toronto Star* most often criticized the Provincial Conservatives (See Table 2). The *Globe and Mail* apportioned the blame more equally between the Provincial and Federal governments.
Table 2: The Apportionment of Blame

<table>
<thead>
<tr>
<th>Criticized Group</th>
<th>National Post</th>
<th>Globe and Mail</th>
<th>Toronto Star</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal Government</td>
<td>34 - 8.7%</td>
<td>22 - 6.7%</td>
<td>37 - 6.7%</td>
<td>93 - 7.3%</td>
</tr>
<tr>
<td>Provincial Government</td>
<td>24 - 6.2%</td>
<td>26 - 8.0%</td>
<td>60 - 10.8%</td>
<td>110 - 8.6%</td>
</tr>
<tr>
<td>Public Health</td>
<td>14 - 3.6%</td>
<td>13 - 4.0%</td>
<td>13 - 2.3%</td>
<td>40 - 3.1%</td>
</tr>
<tr>
<td>Health Care Workers</td>
<td>3 - 0.8%</td>
<td>8 - 2.4%</td>
<td>6 - 1.1%</td>
<td>17 - 1.3%</td>
</tr>
<tr>
<td>WHO</td>
<td>24 - 6.2%</td>
<td>16 - 4.9%</td>
<td>24 - 4.3%</td>
<td>64 - 5.0%</td>
</tr>
<tr>
<td>Citizens</td>
<td>3 - 0.8%</td>
<td>10 - 3.1%</td>
<td>5 - 0.9%</td>
<td>18 - 1.4%</td>
</tr>
<tr>
<td>Business</td>
<td>2 - 0.5%</td>
<td>1 - 0.3%</td>
<td>5 - 0.9%</td>
<td>8 - 0.6%</td>
</tr>
<tr>
<td>Foreign Governments</td>
<td>13 - 3.3%</td>
<td>17 - 5.2%</td>
<td>23 - 4.1%</td>
<td>53 - 4.2%</td>
</tr>
<tr>
<td>Total # of Critical Articles</td>
<td>117 - 30.1%</td>
<td>113 - 34.6%</td>
<td>173 - 31.1%</td>
<td>403 - 31.7%</td>
</tr>
<tr>
<td>Total # of Articles</td>
<td>389</td>
<td>327</td>
<td>556</td>
<td>1272</td>
</tr>
</tbody>
</table>

* number of critical articles as a % of the total number of stories run by each newspaper.

The American Coverage of SARS

In Canada, there was a popular perception that the American media took an alarmist tone to the SARS outbreak in Canada. On April 24, an article on the front page of the New York Times read: “Travelers Urged to Avoid Toronto Because of SARS.” Although the headline caught the attention of Canadians, less attention was paid to the editorial that ran the next day which pointed out that the US Centers For Disease Control (CDC) did not agree with WHO’s travel advisory, and was advising Americans that travel to Toronto was safe, provided they did not visit health care facilities.

While there was a common perception that the American press was detrimental and biased in its SARS reporting, the actual stories about Toronto in the American newspapers we analyzed was neither reactionary nor alarmist in comparison to stories in the three Canadian newspapers.

The greatest difference between the American and Canadian newspapers was the volume of their coverage. Using standard criteria, our study examined 556 articles from the Toronto Star versus 273 from the New York Times. While the American papers took the SARS story seriously, it nonetheless shared the news agenda with the war in Iraq, a story of
far greater interest to the American reader. When local (*Toronto Star*), national (*Globe and Mail* and *National Post*), and American (*New York Times* & *USA Today*) coverage is compared, what is most striking is how similar the coverage patterns were. As table 3 outlines, in each area about half of the coverage was devoted to health issues, a quarter to economic coverage, an eighth to political coverage and the rest to mixed coverage.

**Table 3: Coverage Types**

<table>
<thead>
<tr>
<th>Area</th>
<th>Health</th>
<th>Economic</th>
<th>Political</th>
<th>Mixed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toronto</td>
<td>52%</td>
<td>24%</td>
<td>17%</td>
<td>7%</td>
</tr>
<tr>
<td>National</td>
<td>51%</td>
<td>24%</td>
<td>19%</td>
<td>6%</td>
</tr>
<tr>
<td>American</td>
<td>59%</td>
<td>23%</td>
<td>12%</td>
<td>6%</td>
</tr>
</tbody>
</table>

When the coverage is looked at over time the similarities persist. Figure 5 looks at the combined *New York Times* and *USA Today* coverage. In comparing this chart to figure 1, it is clear that while not identical, the SARS story received the same spikes in attention as it did in Canada.

**Figure 5: News Content by Type – American**

When the American ‘health’ story is unpacked into its various subtopics, it too is very similar to the narrative found in the Canadian papers. Although the Canadian coverage focused more on the lack of preparedness of Canada’s health care system and less on the
need for more scientific research, the coverage in both countries demonstrated more similarities than differences (See figure 4).

<table>
<thead>
<tr>
<th>Health Subtopics</th>
<th>American Sources</th>
<th>Canadian Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cites current list of probable/active cases</td>
<td>2%</td>
<td>4%</td>
</tr>
<tr>
<td>WHO travel advisory</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>Reports of new clusters, cases</td>
<td>7%</td>
<td>10%</td>
</tr>
<tr>
<td>Deaths/fatalities from SARS, profiles of victims</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>Changes in social practices/customs</td>
<td>9%</td>
<td>8%</td>
</tr>
<tr>
<td>Quarantine and infection control measures</td>
<td>40%</td>
<td>40%</td>
</tr>
<tr>
<td>Research on disease (spread)</td>
<td>27%</td>
<td>14%</td>
</tr>
<tr>
<td>Impact on health care system</td>
<td>1%</td>
<td>13%</td>
</tr>
<tr>
<td>Other</td>
<td>3%</td>
<td>3%</td>
</tr>
</tbody>
</table>

In addition to the similarities and differences in Canadian and American press coverage, we were also interested in how Canada was featured in the American coverage of the outbreak. Canada received some form of mention in 45% of the New York Times’ SARS related articles, and 61% of those in USA Today. As Figure 6 illustrates, these references were of two types. In the New York Times and USA Today respectively, only 17% and 20% of the SARS related stories were actually about Canada or featured Canadian voices. A much larger percentage, 28% and 41% of articles, were not about the Canadian outbreak as such, but made passing references to Canada as a SARS affected area, grouping it with affected areas in Asia such as Hong Kong or Guangdong Province in China. Including Toronto on the same list as locations where the disease was active in the population created the impression that the risks in Toronto were higher than they really were.
The Role of the Press in a Public Crisis

In the SARS crisis, the media was a key tool used by stakeholder groups to advance their agendas. Public health officials used the media to communicate the severity of SARS, and the need for citizens to respect the quarantine measures. The business community used the media to communicate the severity of their economic plight. The Ontario Government used the media in their efforts to extract compensation from the Federal Government. In turn, the Federal Government used the media, most notably during its dispute with the World Health Organization, to show that they were actively working on the SARS issue. In addition to reporting the events of the crisis as they unfolded, the media was also a key part of each group’s communication strategy.
Competing stakeholder groups worked to capture the sympathy and attention of the media in order to advance their own agendas. During the SARS crisis, the objectives of the affected stakeholder groups were increasingly at cross purposes to one another. In order to contain the outbreak, public health officials had to communicate the message that SARS was a serious threat. The message that SARS was a serious threat scared visitors away from tourist sites and Asian businesses in Toronto. The public health message and the economic recovery message worked at cross purposes, competing with and undermining each other at key moments.

In a crisis situation where every major stakeholder has a media management strategy, it is naive to argue that the press simply reports the news as it unfolds. Media organizations must consciously choose where, when and how to divide their attention among the various stakeholder groups. In choosing how to divide this attention, the press plays a proactive role in defining the nature of the crisis and which of its aspects are important at each stage. The cumulative decision making that formulates press coverage, in effect, defines the nature of crisis itself.

**SARS, Media and Global Cultural Flows: Preface to a Conclusion**

The story behind the story of the SARS crisis in Toronto is the role in structuring public events of what have come to be known as global cultural flows: the continuous and ever growing exchanges of people, trade, media and ideas in all their evolving forms (e.g. diasporic nationalities, internet commerce, transnational broadcasting). Understanding the SARS crisis requires an understanding of how global cultural flows behave in complex chains of causality. In the case of Toronto, the global flow of people resulted in an infectious disease being brought into the city. The global flow of information between public health authorities in several nations also resulted in that disease being identified. The flow of
information at both a global and local level, both in terms of medical information exchanges and media coverage, was responsible for controlling the disease and, as an unintended consequence, impacted upon the flow of global capital in the form of reduced tourism.

Put in broader terms, flows are most often altered when they collide with other, seemingly unrelated flows. In this case the physical flow of the disease stimulated an information flow that had negative economic consequences and sparked political conflict.

This model, taken in conjunction with the information and analysis presented above had a number of ramifications in the management of crisis situations such as those faced by Toronto in 2003. The following points serve to contribute to this rethinking:

- It is difficult in a global information environment to target media messages to individual audiences. The message used to contain the outbreak locally was the same message heard by media consumers around the world, consumers were then more prone to associate the outbreak, rather than its containment, with Toronto.

- Neither the media, the stakeholders nor the public at large are yet used to a “new normal” that transcends ordinary categories of what constitutes news. In Toronto, the SARS outbreak was simultaneously local and international. Over the course of the event, it became medical news, economic news and political news. This traditional categorization of news reporting might itself need to be rethought.

- There is a need to strike a balance between the medical realities of an epidemic and the media’s use of saturation coverage during particularly “newsworthy” moments. To the general public, the severity of the crisis was often communicated by the quantity of news coverage. Busy front pages
were, inevitably, read as indications that becoming infected was suddenly more likely.

- The rhythm of the outbreak itself differed from that of the coverage. The cumulative number of cases and persons quarantined might resemble something like a bell curve (though in this case, the daily outbreak reports spiked). The spiked coverage had, in this context, a life of its own independent from these other measures of the severity of the outbreak. This disconnect contributed to a perception that the disease was more widespread than was actually the case and that future spikes were more likely than they actually proved to be.

- Because most locations within the global community receive international press attention only sporadically, the news they do engender comes to characterize those locations. This factor contributed to what Naylor characterizes as the “unprecedented” and “unwarranted” coverage received by Toronto.

- The complex, interdependent and interconnected matrix of global cultural flows require focused communication strategies, proactive public health systems and a realistic understanding of the global reach of local communication.

Finally, this report deliberately narrows its inquiry to an empirical study of the role of the press in the SARS crisis. The question that is not addressed and needs to be is whether the front line health workers, the key health and political officials and the public as a whole believe that media coverage of SARS was fair, balanced and responsible. The press itself, in a public forum, may also find it salutary to review its own role in dialogue with all
stakeholders. It is only with this further research in hand that definitive recommendations can be made as to the management of future crises.