

Role of media and the media hypes in the aftermath of mass casualty incidents a qualitative thematic content analysis

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Abstract

Objectives: To explore the role of media during mass casualty events and its impact on people.

Method: The qualitative thematic content analysis was conducted at Jinnah Sindh Medical University, Karachi, from 2018 to 2020 and comprised of semi-structured in-depth interviews and focus group discussions involving participants from the health sector and policymakers at the provincial level. The Frontline Workers such as the ambulance drivers and the first-aid-givers were also included. Data was subjected to conventional content analysis to generate themes.

Results: There were 5 in-depth interviews and 4 focus group discussions in the study. Qualitative analysis revealed that the media has a great deal to do in times of a disaster. The media is the strongest weapon and largely impacts people's mind and behaviour, but it has been playing with their emotions and creating unrest among them.

Conclusion: There is a need for the policymakers to set guidelines and define the role of the media in times of a disaster.

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Introduction

Any mass casualty incident (MCI) is difficult for any city to deal with while keeping an eye on the available resources, and as the number of casualties rise, the resources get further overwhelmed.^{1,2} The World Health Organisation (WHO) defines an MCI as an event resulting in a number of victims that is big enough to disrupt the normal course of emergency and healthcare services.³

MCIs have affected more than 2.6 billion people globally, with the major incidents occurring in the developing world, particularly in the southeast Asian region where 26% of the world population lives. This makes it more difficult for the developing countries to deal with such incidents because of the existing gaps in the healthcare system, accessibility issues and loopholes in the preparedness and management plans.⁴

According to the Open Source Risk Assessment criteria for the humanitarian crisis, Pakistan has been rated 6.4 globally, with 10 being the maximum limit. Pakistan is not only exposed to natural disasters, but has also faced innumerable terrorist attacks resulting in mass casualties nationwide, which mainly overwhelms the hospitals, leading to lack of services required.⁵⁻⁷ The MCIs cannot be studied without considering the vitality and the importance of the role of media in such situations. In the

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modern era, the importance of the media in everyday life has strikingly increased where the world has turned into a global village.⁸

With increasing influence, the role of media in an MCI has become more integral, sharing the responsibility of minimising the spread of false news that may cause unrest among the public and thereby worsen the crisis.⁹

Karachi is the largest city of Pakistan and one of the most thickly populated cities in the world. The city spreads over 3,530 square kilometres, housing an estimated population of over 17.5 million.¹⁰ It is a city that generates the major portion of national finances through its industries for which it is also known as the trade capital of Pakistan. All these characteristics make the city a target for terrorist attacks and other manmade disasters which often result in mass casualties.¹¹ Studies suggest that media is the strongest weapon in case of crisis and MCIs, which makes it very important to highlight the activities of the media in Karachi in the aftermath of MCIs.¹²

The current study was planned to explore the role of media during MCIs in Karachi, and how it impacts the life of people living in the city.

Subjects and Methods

The qualitative thematic content analysis was conducted at Jinnah Sindh Medical University (JSMU), Karachi, from 2018 to 2020, and comprised of semi-structured in-depth interviews and focus group discussions (FGDs). After approval from the institutional ethics review board, data

was collected till saturation was attained. Purposive sampling technique was used to select participants from the health sector, such as hospital administrators, as well as provincial policy-makers involved in formulating disaster management policies. The sample also included frontline workers, such as the ambulance drivers and first-aid care-givers. None of the participants were previously known to the researchers.

In-depth interviews were conducted with administrators and managers of leading public-sector hospitals, like Jinnah post Graduate Medical Centre (JPMC), Abassi Shaheed Hospital (ASH), Shaheed Mohtarma Benazir Trauma Centre (SMBBTC), (PDMA) The Provincial Disaster management authority, Sindh. Frontline workers were recruited from ambulance services like Aman Foundation and Edhi Ambulance Service operating in the city and from the rescue services most involved in responding to MCIs in Karachi. All these participants had significant experience in dealing and managing MCIs in the city.

To recruit the participants, all the main stakeholders dealing with MCIs in Karachi were identified and listed, among them, all those directly dealing and responding to the emergencies and MCIs were invited to participate in the study. The interviews were conducted at the participant's respective workplace after taking informed written consent from each individual who agreed to participate. The names of the participants were kept strictly confidential.

Data was collected using the unstructured interview technique and the general questions were pilot-tested in a similar context. The main questions, such as "what is the role of media in a mass casualty event in Karachi city?" and "what are the most important activities and resources of the media that would save lives in the first few hours of a mass casualty incident?" and "what are the services that the media can provide to help saving lives in an MCI?" These main questions were followed by further probing to obtain valid information from the participants. Field notes were taken as the participants shared their experiences and their opinions. The interviews were audio- and video-recorded with the participants' permission. Each interview lasted 40-45 minutes until data saturation was achieved (Figure).

The conventional content analysis method was adopted to analyse the data. Three researchers coded data independently and then the codes were identified with consensus. The interviews were transcribed verbatim and were analysed concurrently. The verbatim data was analysed using the primary codes through the line-by-line approach and were later classified as per the similarities

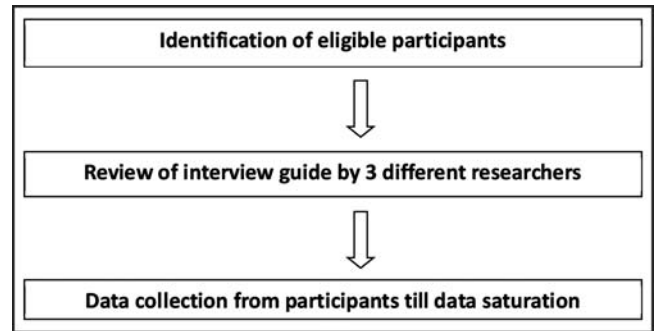


Figure: Data-collection flow-chart.

and differences of the data. The rigour of the study was ensured by discussion and debate among the researchers until a consensus was reached. The credibility of the data was achieved by long-term engagement of the participants. The literature review was partially done by the researchers at the onset of the study which helped in reducing the researcher bias and thereby increased the dependability of the findings. The data was carefully recorded and transcribed to achieve confirmability. The study recruited a diversified group of participants who were directly dealing with the disasters, from the rescue to the transfer, the first aid, and management of the injured victims during MCIs. The approach was aimed at achieving transferability.

Results

There were 5 in-depth interviews and 4 FGDs involving around 30 participants out of which around 15 were ambulance drivers and 10 HCWs and around 5 policymakers. Each Focused group discussion had around 6 to 7 participants. Three main themes were identified.

The first theme was "Playing with people's emotions". The emotional distress that the people get from over-exaggeration of a content over and over again was evident in the words of the participants and, hence, this was categorized as a sub-theme titled, "Projection of Distressing Content".

"If a bomb blast has occurred the media coverage is like, 'People, can you see here? This is the hand and one leg of the suicide bomber ... 'How did you feel when you heard of the bomb blast?'"

"There is no need of showing the gory pictures after a mass casualty incident that they usually do."

The emotional distress that the sensitive minds go through because of the horrific content was much reflected in the words of the respondents while they shared their experiences of MCIs of the past.

"I remember an incidence that I never forget. It never goes

out of my mind. There was a blast that happened in the city and the media showed the decapitated head of the suicide bomber while me and my son were watching the news and my son couldn't sleep for nights and it was very difficult to comfort him at that time."

"All kinds of people watch television old age, children, heart patients; media should realise these things before showing horrifying images."

It was manifested in the words of the respondents that the repetitive showing of the horrific images and all the blood was deeply and negatively impacting the sensitive minds of the people.

"The media says that it's their freedom of rights, but this doesn't mean they damage people's nerves by showing such horrific content."

Some of the respondents also admitted the fact that to a very small extent our media has improved compared to the past, but it needs to be more structured and responsible.

"Our media is unfortunately very immature right now. It has been improved a bit from the past maybe two per cent or five per cent as back in 2009 and 2010 they used to show decapitated heads and other body parts as well."

"Showing the distressing news again and again leaves bad impact on the people's mind."

The second sub-theme identified within the first main theme was "Creating Hype". This sub-theme emerged due to the responses that were indicative of the unrest created by the over-sensationalised nature of the news.

"Media exaggerates the nature of the news and this creates terror among the public."

"Most of the times the news is broadcasted without any validation. They will say there was a blast in ABC area and after some time they will say it was a cylinder blast."

"Media should stop giving fake and exaggerated news."

The second main theme identified was "Irresponsible Actions". The respondents accepted media as the most powerful weapon as it has the greatest impact regardless of how it is used, either positively or negatively. It has the power to create great differences. The quotes from the respondents suggested that there is a need for the national media to provide an accurate portrayal of the news taking care of its great responsibility. Insensitive actions of the media may result in negative and life-threatening consequences.

"Media blocks the site of the disaster to generate their news, obstructing the rescuers from carrying out their job."

"Instead of guiding the people, the media itself becomes a mob in hospitals, making it difficult for the medical teams to do their jobs. Often there is one patient and 40-50 media personnel come to make footage."

"If an MCI has happened in the morning, till the evening and even the next day they will keep on showing the distressing content over and over again."

The media has a great responsibility to maintain a state of calm among the public, but ignoring this fact the media performs activities that creates hype and unrest among the general public, resulting in negative consequences to deal with.

"If for some reason a strike is going on in one city, the media will again and again show that and this often results in the same unrest among other cities."

"Unfortunately, the bitter truth is that the media has to sell negativity and they generate their revenue in this way."

"Often they give live coverage of critical rescue operations, such as where and how many cops are deployed, on what sites, and once it happened that due to such media coverage the terrorists got the benefit."

The third theme comprised "Suggestions" that the respondents had given as to what activities media could perform to benefit the public and the country in case of an MCI.

"If a mass casualty incident has happened, the media should be suggesting the alternative routes to the public."

"Media can play a very important role in increasing awareness among the people about what they should do in a mass casualty incident."

"Media should give the disaster news once and after that, they should be suggesting the measures to the public."

"Media is a very strong weapon which should be used to create awareness among the people on how to behave in a mass casualty incident."

"We live in an era where media is reachable to all people and it can give simple messages to the community, like what they should do if a building is on fire or a bomb blast happens."

"Karachi is a city where mass gatherings happen very often, so the media must at all times create awareness among the public on how to behave in mass gatherings."

"I remember an incident in 2011 where a blast occurred and

most people were trampled to death by the mob, so the media should be educating the people."

"Media can be the best tool to spread important messages. The media can teach people how to give first aid, how to apply pressure bandages."

"If an MCI happens, we (hospitals) are in great need of blood. The media instead of creating unrest in the public, should be motivating the people to donate blood so that lives can be saved."

Discussion

This current study highlighted the perceptions of different stakeholders of disaster management regarding the contribution of media during MCIs, and the recommendations to ensure its positive involvement during and after such an incident. Since in Karachi these incidents usually include terrorism, road traffic accidents (RTAs), building collapse, etc, the focus of the respondents was generally on man-made disaster. Research on media reporting during disasters is mostly done in the United States, therefore, the current study has filled the knowledge gap to some extent by providing shreds of evidence on disaster reporting in this region.

The study emphasised that the media coverage of MCIs is very insensitive and disturbing for people of all ages, and this needs careful considerations of the relevant authorities as post-traumatic stress disorder (PTSD) and other psychological implications are positively associated with television-viewing after disaster.¹³ Also, there should be some guidelines on reporting disaster-related news, so that the media is obliged to follow certain regulations, like how and to what extent damage to life and infrastructure which will not cause long lasting disturbing memories.

The positive role of media during disasters has been reported both nationally and internationally. A Pakistan-based study reported that media informs the officials about loss, motivates the public to help the victims, and update the communities on danger signs, which, in turn, help the officials in evacuating high-risk areas.¹⁴ Moreover, the literature search of three databases on role of media in different incidents worldwide reported activities of media like promoting counselling programmes, collecting and promoting funds for the victims as well as sharing the correct information.¹⁵ These results were not in concurrence with the findings of the current study. However, such activities of the media were reported as suggestions, which depicts that media is not contributing in the manner it is supposed to.

The narrative that detailed reporting of terrorist incidents might be helpful for the perpetrators needs careful

consideration, as this gives rise to the recommendation that media should be carefully propagating the news, especially the ones which can help or guide the perpetrators, like stating the number and places where law enforcement personnel are deployed can be helpful for the criminals. Though the job of the media is to deliver the truth, it should not forward the facts that can turn out to be beneficial for terrorists. There are many instances where the hostages have been killed due to the news leaked by media which was supposed to be kept secret.¹⁶ These findings were also similar to those of the current study.

Management of disaster is a complicated process, especially in Karachi, as different factors like uncontrolled traffic, overpopulation and lack of interdepartmental collaboration has further complicated the situation. In such a situation, media, instead of streamlining and facilitating the processes, creates hindrances in the emergency response system by blocking the way of ambulance drivers and rescue teams at and inside hospitals for the sake of getting some footage. This was an unusual finding in the current study and no parallel could be found in literature, to the best of our knowledge.

On the basis of the findings, a more comprehensive study is recommended that may encompass the current media activities in all phases of disaster in the region.

In 2011, the Pakistan chapter of the United Nations Development Programme (UNDP) along with the National Disaster Management Authority (NDMA) formulated certain guidelines¹⁷ for the media to follow during a disaster, according to which media should act as a bridge between the relief organisations and the victims, and elaborate on the actions taken by government and other philanthropic organisations to provide relief. Keeping the current findings in view, there is a need to design guidelines related to media coverage during disasters so that media may be positively utilised during disasters, and the rescue services may not have to carry out their critical tasks.

Conclusion

There is a need for the policymakers to set guidelines and define the role of the media in times of a disaster.

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