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Kansas News Service

Final Report

Prepared for:

Health Forward Foundation

2300 Main Street, Suite 304
Kansas City, MO 64108

Kansas Health Foundation

309 East Douglas Avenue
Wichita, KS 6702

Prepared by:

Sarah Ray, MA
Ishrat Alam, BA
Heather Kane, PhD

RTI International
3040 East Cornwallis Road
Research Triangle Park, NC 27709

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Executive Summary

With support from the Health Forward Foundation (HFF), the Kansas Health Foundation (KHF), and other foundations, the Kansas News Service (KNS) provides in-depth reporting on issues relevant to the health of Kansans. In 2017, the Kansas Health Institute (KHI) News Service partnered with Kansas Public Radio station KCUR in Kansas City to create a new media collaboration centered on covering health-related stories that may go unreported. The HFF and KHF sought to learn whether the transition of the KHI News Service to KNS has changed the content and focus of the reporting. In particular, the foundations asked (1) whether KNS continues to provide in-depth reporting on health and health policy issues, (2) how broadly KNS coverage is disseminated, and (3) what perceptions stakeholders have of KNS coverage. The foundations were particularly interested in KNS's work supported by Kansas Grantmakers in Health (KGIH). To address those questions, RTI International conducted a content analysis of KNS news articles and a Web-based stakeholder survey.

The foundations identified several key questions. This executive summary provides a snapshot of the findings of these analyses.

Data and Methods

Media Analysis Methods

We conducted a conventional media content analysis of KNS news articles dated from January 1, 2017, through November 30, 2018. We limited the articles to pieces available through KCUR's Web site and written by reporters supported by KGIH funding. (Some reporters who publish articles through KNS are supported by other funds.) RTI, in collaboration with the HFF and KHF, developed a codebook focusing on topics of interest to both foundations. The codebook consisted of high-level primary codes and more specific secondary codes. Primary codes were used to identify what topics were covered in the article (e.g., health, legislative/budget, politics), and secondary codes were specific to health topics (e.g., special populations, health conditions, health policy). Multiple codes could be applied to a story if more than one topic were covered.

In the initial review, 572 articles were identified and coded with a set of primary codes. Of those 572, a little more than a third (199) were coded as health-related stories; these 199 articles were then coded with the health-specific secondary codes. To ensure reliability, we conducted pilot tests of the codebook with 10 articles and Krippendorff's alpha values for each code to assess intercoder reliability.¹ After debriefing the pilot, we revisited the codes and reassessed reliability, achieving Krippendorff's alpha value of 1.0 across all codes,

¹ Krippendorff, K. (2004). *Content analysis: An introduction to its methodology*. Thousand Oaks, CA: Sage.

which signifies perfect reliability. We then coded the remaining 189 articles, using the refined codes and definitions. Descriptive analyses were used to answer study questions related to the balance of article topics and how those topics have shifted over time. Analyses were conducted in Microsoft Excel and SPSS.

Stakeholder Survey Methods

The HFF, the KHF, and RTI used the 2017 Knight Gallup media survey and the 2018 KHI stakeholder survey as the basis for the *Health News Coverage and the Kansas News Service Survey*. RTI worked closely with the HFF and KHF to develop items about the media coverage of health issues in Kansas and/or Missouri generally and by KNS specifically. RTI administered a Web-based survey to 1,528 stakeholders identified by the HFF, KHF, and KNS. Of those, 235 completed the survey, a response rate of 15.4%. For the administration, the foundations sent an initial lead e-mail to inform stakeholders about the survey; 1 week after that lead e-mail, RTI sent the first survey e-mail, which was followed by three reminder requests at 1-week intervals. After two e-mail reminders, the HFF and KHF sent a follow-up e-mail to help maximize the survey response rate, which was followed up a day later by the third and final reminder from RTI.

We conducted two types of analyses: descriptive and subgroup analyses. For the descriptive analyses, we provide the frequency of responses to all questions from the survey. For the subgroup analyses, we stratified results by subgroups of interest and ran subgroup analyses on the survey data using chi-square tests. We ran additional regression analyses to reveal the nature of the differences among subgroups.

Media Analysis Findings

Evaluation Question: Has health-related coverage weakened (been less of a focus) since KNS's shift in location and potentially audience?

For this question, we examined the primary codes for the full sample of articles and compared coverage of topics overall and across 2017 and 2018. Key findings are as follows:

- Overall, KNS coverage during the review period focused on issues related to health care, health insurance, and health policy in Kansas. Coverage of specific health conditions, risk factors for health issues, and prevention and treatment recommendations did not receive as much attention.
- Across 2017 and 2018, health topics represented about a third (34.8%) of the media articles. By year, health topics accounted for about 48.6% of media articles in 2017 and declined to 21.8% in 2018.
- Health was the third most covered topic overall. It ranked behind articles related to legislation/budget and politics.
- Coverage of health generally declined through 2017 and early 2018 relative to other topics, reaching its lowest levels in Quarter 2 2018 (16.2% of articles) before slightly rebounding in Quarter 3 (25.9% of articles) and Quarter 4 (21.3% of articles) 2018.

As coverage of health and legislation topics declined through 2017, coverage of education and politics increased.

Evaluation Question: Is KNS still producing in-depth investigative pieces that dig deep on health issues?

For this question, we examined the population and topics covered within the articles coded as health articles. We explored to what extent KNS covered HFF and KHF strategic areas, what populations were covered, what health categories and conditions were discussed, and what geographies and agencies were represented in the articles. We summarize key findings in turn.

- The research team consulted with the HFF and KHF to identify strategic focus areas. These strategic areas were mentioned in nearly all of the reviewed articles (91.0%). The strategic areas and percent of articles that mention the strategic area are summarized as follows:
 - Medicaid and the Children’s Health Insurance Program (CHIP), 90.4%
 - Health reform, 88.9%
 - Access to care, 80.0%
 - Public health systems and services, 57.0%
 - Community health, 20.7%
 - Health impact assessments, 16.3%
 - Healthy behaviors, 11.9%
 - Community engagement, 11.1%
 - Educational attainment, 4.4%
- Overall, low-income Kansans were the most frequently covered group (47.2% of health articles), followed by health care providers (31.2%), populations with developmental and physical disabilities (27.6%), and elderly populations (22.6%).
- Mental health, rural health, and health disparities were covered in 20.6%, 17.6%, and 10.1% of all health-related articles, respectively. Health categories mentioned less frequently included developmental health (5.5%), noncommunicable disease (4.5%), sexual or reproductive health (3.0%), nutrition (2.5%), environmental health (2.5%), active living (2.0%), oral health (1.5%), and infectious disease (1.0%).
- More than 7 in 10 articles (71.9%) were coded as focusing on health care-related topics, including issues related to general health care, health insurance, or health care administration. When accounting for all articles that mention health care, this topic arose in nearly all health-related articles (96.5%).
- Health policy-related topics (e.g., legislation under debate, regulations of health care delivery, and Medicaid coverage) were mentioned in 71.9% of all health-related articles.
- Medicaid issues, mentioned in 64.0% of articles, included coverage of a variety of topics, including the potential for KanCare expansion and Medicaid coverage for specific conditions or populations. Coverage of the national Affordable Care Act

(30.2%; n = 60) and the potential for its repeal and replacement were often closely tied to coverage of Medicaid issues—especially expansion—in Kansas.

- The politics of health, including the political implications of health policy decisions, political party and candidate positions, and political leanings, were mentioned in 45.7% of articles; notably, this proportion increased from 43.0% in 2017 to 51.6% in 2018 (an election year).
- Overall, 40.2% of articles mentioned a specific health condition. These tended to focus on mental health (20.6%). Other health conditions mentioned included developmental or physical disabilities (5.0%), violence or injury (3.5%), cancer (3.0%), and diabetes (2.5%).
- More than half (57.3%) of all health-related articles mentioned one or more risk factors associated with health conditions and their impact, including issues related to access-to-care recommendations for mitigating risk and overall health outcomes.
- Overall, 38.2% of articles mentioned or described at least one option, procedure, or recommendation for the prevention or treatment of health conditions.
- Nearly all of the reviewed articles specifically mentioned Kansas as the geographic area of interest or focus (99.0%; n = 197). Missouri was mentioned in 7.5% of articles (n = 15), and other states were mentioned in 17.1% of articles (n = 34).
- Kansas government entities (e.g., agencies, legislature, administration) were mentioned in 82.4% of articles, and federal government entities (e.g., the Centers for Medicare & Medicaid Services, Food and Drug Administration, U.S. legislature) were mentioned in 38.2% of articles.

Stakeholder Survey Findings

Respondent Characteristics

Survey respondents represented a variety of organizations and political perspectives.

- Most stakeholders were individuals from community-based organizations (27.2%), local government departments or agencies (15.3%), or academic institutions (15.3%).
- Stakeholders reported that they were socially or fiscally moderate (28.2% and 31.8%, respectively) to somewhat socially or fiscally liberal (35.5% and 28.3%, respectively).

Evaluation Question: When KNS was at KHI, it was perceived as covering unique stories that no other news source did; is that still the case?

We asked stakeholders whether KNS covers unique stories. We also asked a series of questions about whether KNS helps keep them informed and provides important information. Key findings for this evaluation question are as follows:

- Over two-thirds of stakeholders strongly agreed or agreed (67.8%) that KNS covers unique stories that no other source does.
- Approximately three-quarters of stakeholders strongly agreed or agreed that KNS provides important health information for community and elected officials (78.4%).

- Nearly two-thirds of stakeholders reported that their overall opinion of the quality of health news coverage, in general, in Kansas and/or Missouri was very favorable (24.5%) or somewhat favorable (39.9%).

Evaluation Question: Are stakeholders still paying attention to KNS?

The HFF and KHF wanted to learn whether stakeholders knew about and used KNS since its transition. Key findings related to this question include the following:

- Most stakeholders reported that they are very familiar (42.6%) or somewhat familiar (30.2%) with KNS.
- Most stakeholders had read or heard stories from KNS 1–3 times per week (48.5%) or 1 time per day (14.4%) in the past 12 months.
- Over half of stakeholders reported that their overall opinion of KNS since transition from operating under the KHI to operating under KCUR was very favorable (40.6%) or somewhat favorable (15.8%).
- Most stakeholders reported that KNS made a significant difference (15.4%) or some difference (49.5%) to their work.
- Compared with fiscal conservatives, fiscal liberals were more likely to value KNS radio stories, have more favorable perceptions of KNS, and agree that KNS meets key information needs by keeping them informed about health issues and enabling them to have informed conversations with colleagues.
- Compared with elected stakeholders, governmental agency stakeholders had used KNS significantly *less* in the past 12 months; compared with social conservatives, social liberals or social moderates had used KNS significantly *more* in the past 12 months.

Evaluation Question: Do grassroots advocacy organizations seek out information from KNS and see it as a trusted resource?

The foundations were interested in whether stakeholders from advocacy organizations use and value KNS. We conducted subgroup analysis of these stakeholders (N = 29).

- Most stakeholders from grassroots organizations had read or heard stories from KNS 1–3 times per week (62.9%) or 1 time per day (22.2%) in the past 12 months.
- Almost 9 in 10 stakeholders from advocacy organizations strongly agreed (40.7%) or agreed (51.9%) that KNS provides important health information for community and elected officials. Almost 7 in 10 stakeholders strongly agreed (22.2%) or agreed (48.2%) that KNS stories enabled them to engage people in communities they serve in conversations about health.

Evaluation Question: How do stakeholders prefer to access or receive the information?

We asked stakeholders their preferences for obtaining information from KNS. Key findings are as follows:

- Stakeholders indicated their top three preferences for obtaining information. Radio stories (66.3%), digital stories (54.5%), and stories in local newspapers (36.6%) ranked among the most valued media platforms for KNS reporting.
- Radio talk shows (15.4%), stories in national news organizations (14.4%), and podcasts (11.9%) ranked among the least valued media platforms for KNS reporting.
- Stakeholders who use KNS more frequently place more value on digital stories, radio stories, and podcasts for KNS reporting and less value in stories in national news organizations, social media, and e-mail newsletters.

Other Perceptions of Media Coverage of Health News in Kansas and Missouri, in General

In addition to asking about KNS specifically, we asked a series of questions about perceptions of health coverage in Kansas and Missouri generally. We found the following:

- Approximately one-third (33.8%) of stakeholders reported that not enough investigative journalism to uncover important health issues is a major problem.
- Only 12.4% of stakeholders reported that too much bias in the reporting of news stories in Kansas and/or Missouri is a major problem; over half of stakeholders reported there is little (46.0%) or no (7.2%) political bias in health news coverage in Kansas and/or Missouri.
- Most stakeholders reported that most local news media are careful to separate fact from opinion (57.8%).
- Stakeholders' confidence that the coverage of health issues is accurate and politically balanced was highest for local public radio stations and lowest for national cable news (they reported a lot of confidence in 51.5% and 3.4%, respectively, of these sources).

Limitations

Several limitations should be considered when interpreting the results of the news media content analysis. First, our review was limited to a period of approximately 2 years (January 2017–November 2018). Although this period includes the initial move to KCUR, it does not consider coverage before that move; extending the review period to include coverage from previous years may give a broader picture. Similarly, a review of coverage since the end of 2018 may provide additional perspective on the long-term impact of the move without the shadow of an election year. Our inclusion criteria limited reviewed articles to those written by reporters funded through KGIH and does not include other staff reporters who may cover health content, including two reporters who cover health and who are funded exclusively by the HFF. Despite a systematic review, detailed training, and a multistage interrater reliability assessment, it is possible that individual coders may have interpreted the content of the news stories differently and that, therefore, the application of specific codes may vary slightly.

Because this survey used a non-probability sample, data from this survey are not generalizable. The HFF and KHF were interested in subgroup analyses by geographic region (Kansas and Missouri). We constructed the variable from IP addresses, as the item was not directly asked in the survey. We found 39 cases for which the geographic region of the IP address was outside Kansas or Missouri. For the geographic region variable, we have coded these 39 cases as missing. The subgroup analyses by geographic region lost some of their analytic power because of the smaller sample.

Conclusions

KNS continues to provide important health coverage in Kansas and Missouri. Indeed, stakeholders are familiar with, value, and use the media stories that KNS provides. However, the coverage of health topics declined from 2017 to 2018 in terms of raw numbers and as a proportion of the body of work available via the KNS newsfeed. We caution that these findings may be related to increased coverage of political stories in an election year (2018), to our selection criteria that focused on KGIH-funded reporters only, or both. However, health stories still make up a substantial proportion of KNS stories, and KNS stakeholders value KNS's work and identify it as a key source of information to provide health news, inform their work and conversations, and enable them to be informed citizens.

Although overall, stakeholders had favorable views of the health news coverage in Kansas and Missouri, one-third of stakeholders reported that not enough investigative journalism to uncover important health issues is a major problem in the states. This suggests that though the quality of the coverage may be satisfactory, the amount of it is not. Furthermore, 87.0% of stakeholders strongly agreed or agreed that people like themselves can understand the news stories that KNS develops. Taken together, these findings emphasize the continued need for KNS, given the lack of in-depth health coverage available.

Finally, stakeholders from Missouri overwhelmingly reported less favorable views and did not find KNS useful for keeping them informed about health issues. These less favorable perceptions align with the fact that nearly all of the KNS stories sampled covered Kansas, and very few covered Missouri. If reaching Missouri audiences is a priority for the foundations, they may wish to consider rebranding KNS, increasing coverage of Missouri-focused stories, or conducting additional outreach.