Mixed messages and a missed opportunity: Australian news media coverage of Clare Oliver’s campaign against solaria

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ABSTRACT

Objective: To review television and print media coverage of the campaign to regulate solaria that was initiated by Clare Oliver before her death from melanoma in late 2007, and to investigate how the media constructed the aetiology of her disease.

Design and setting: Frame analysis of all direct and attributed statements about the causes of, and responsibility for, Oliver's melanoma, and about the legacy of her campaign, in reportage on five free-to-air Sydney television stations and in Australian capital city newspapers, 21 August 2007 to 20 February 2008.

Results: 26 television and 83 print media reports were identified, containing 279 statements on Oliver: 146 (52%) dealt with the responsibility of solaria or their need for regulation, 23 (8%) were on issues of self-responsibility, and 110 (40%) were on her legacy. Oliver stated she had visited solaria 10 times, but had spent years acquiring a tan outdoors. However, less than one in 10 statements about the aetiology of her melanoma referred to her outdoor tanning history, with most explaining the cause as solarium ultraviolet radiation. Oliver’s campaign was credited with precipitating rapid regulation of solaria in Australia. However, the new regulations will not prevent a person of her age or skin type visiting solaria and fall well short of the ban she hoped for.

Conclusion: Unlike sun exposure, solaria are an entirely tractable factor contributing to melanoma. Failure to ban solaria has been a disappointment in a high-profile window of opportunity to change public health law.

METHODS

We analysed television news items broadcast on Sydney’s five free-to-air television stations between 21 August 2007 and 20 February 2008 and coverage printed in Australian capital city newspapers during the same period, available via the Factiva database (Dow Jones, http://www.factiva.com). Relevant reports were identified via date-limited keyword searches (Clare Oliver; melanoma; skin cancer; solaria) of Factiva and our archive of Australian televised health news. The period chosen covered key events in Oliver’s campaign, including her first interview on ABC television’s 7.30 report in August 2007, her campaign until her death the following month, and subsequent media discourse on enactment of legislation largely attributed to her influence.

News stories were scrutinised using frame analysis, which considers how issues are portrayed “in such a way as to promote a particular problem definition, causal interpretation, moral evaluation and/or treatment recommendation.” Framing encourages closure around the definition of relevant issues, thereby disinclining the audience from considering these issues outside the frames used.

We searched the reports for direct and indirect statements made by, or attributed to, Oliver, her friends, doctors, representatives of non-government organisations and news reporters and presenters, and dealing specifically with her melanoma or the legacy of her campaign. These statements were classified using the frames described in Box 1.

RESULTS

Searches of television broadcasts and Factiva databases yielded 26 television and 83 print media reports, containing 120 and 159 statements, respectively, that used the frames described (Box 2).

Of the 146 statements in the first category — solaria dangerous and directly responsible or need for regulation — 108 (74%) linked Oliver’s melanoma to solarium visits she made when she was 19 years old. One hundred and three (93%) were split equally between those attributed directly or indirectly to Oliver, and comments by news readers, presenters and reporters. For example, a national television report opened: “[A] crackdown on solariums to save people from skin cancer, it’s the dying wish of a young woman whose terminal disease has been linked to excessive sunbed tanning” (sources for this statement and other media statements quoted in this report are listed at <http://tobacco.health.usyd.edu.au/share/).
MJA Oliver.pdf. Eleven (8%) of the 146 statements described solarium tanning as a contributory cause, acknowledging that Oliver’s outdoor sunbathing was also likely to be a factor.

Calls for regulatory reform included five statements by Oliver calling for an outright ban on solaria, contrasting with 14 more circumspect comments by politicians on possible legislative responses. For instance, the then Prime Minister John Howard said he would consult with his Health Minister on uniform laws for the industry, declaring the “whole thing [industry regulation] should be made much tougher”. A notable exception to the general political platitudes was the call by Tasmania’s Director of Population Health in September 2007 for a national ban on solaria.

The issue of Oliver’s contribution to her melanoma was raised in less than one in 10 statements (23/279). Yet, Oliver acknowledged a considerable degree of self-responsibility, saying she was “subconsciously” aware that “cancer was involved with solariums”, and describing herself as a “fanatical tanner”, compelled by traditional cultural aspirations: “it’s embedded in the Australian culture to be dark. It symbolises health, it symbolises just being a beautiful girl”. However, underlying this admission, Oliver had previously emphasised that she “didn’t really know the risks that [she] was exposing [herself to] when she followed guidelines from solarium staff to tan every second day.

Although many news reports assigned the cause of Oliver’s melanoma to sunbed use, there was considerable variation in estimates of her use of solaria. Oliver stated that she stopped solarium tanning after 10 visits, after experiencing discomfort during the last session. Of 31 statements that described the frequency of her indoor tanning sessions, fewer than half (13) used this figure. The remainder, with two exceptions, exaggerated her use of solaria, with descriptors such as “excessive” or “prolonged”, portraying her as having “heavily” or “constantly” used solaria, or as a “frequent” and “regular” user.

There were 110 statements on the impact of Oliver’s campaign. These ranged from crediting her efforts with accelerating government action on solaria, to more far-reaching effects. Just over half the statements (60) depicted her as having dramatically raised awareness about the dangers of not only solarium use, but also tanning generally.

Specific appraisals of her effect on government policy (48 statements) suggested that her efforts had influenced officials to act to regulate the solarium industry. Reports contended that her “campaign about the dangers of solariums has already brought change, with governments at state and federal level pledging to regulate the tanning industry”, and that it was forcing “governments to act, to crack down on solariums across Australia”. More sensational assessments included those by a guest on a morning television program, who contended that Oliver had “changed the world”, while another argued that “[i]t was the most effective public health campaign ever”.

**DISCUSSION**

Given current concern about adolescents’ knowledge of the dangers of outdoor and solarium tanning — particularly the mistaken belief that artificial light is less hazardous than sunlight — and the growing incidence of melanoma-related deaths, the widespread publicity given to Oliver’s campaign promised considerable public benefit.

Media interest focused on Oliver herself, an articulate, educated young woman determined to spread a public health warning despite her obvious physical and emotional distress. The target of media condemnation throughout the coverage was the solarium industry, which, in over half of all direct or attributed statements in the sample, was held responsible for Oliver’s disease and imminent death. Warnings about excessive exposure to natural sunlight appeared far less newsworthy. Further, Oliver’s story was not subjected to the sort of coverage afforded other lifestyle diseases, such as lung cancer and conditions associated with overweight and obesity, where considerations of personal responsibility cannot be avoided.

Framing of Oliver’s melanoma as caused by solaria rather than by outdoor tanning exemplifies how the media can “promote a particular problem definition, leading the audience to make attributions of responsibility or other judgments based on different frames or interpretations offered for the same factual content”. Viewers were invited to consider the story through the juxtaposition of the courageous melanoma sufferer and a venal, unscrupulous industry ignoring its own voluntary code and held culpable for her condition.

**Legislative reform:** The solarium industry in Australia has until recently operated under a voluntary code of conduct: potential users with type 1 skin (defined by the World Health Organization [WHO] as skin that cannot tan and carries the highest rating of susceptibility to sunburn) and those younger than 15 years are prohibited from using solaria; 15- to 18-year-olds require written parental permission; and all clients are to be informed of attendant cancer risks and issued with eye protection. Length of tanning session, hygiene and UV output of equipment are also subject to guidelines. Yet, a survey of code compliance in Melbourne found that over half the sampled solaria allowed teenagers access without parental permission, almost all (90%) allowed access to customers with type 1 skin.
skin, and staff at three-quarters of solaria contravened the code by reassuring clients about the safety of the process.8

Since Clare Oliver’s story “broke” in August 2007, the Federal Court has ruled that the solaria industry made false and misleading claims on Internet sites on the safety of indoor tanning days after Oliver’s death, and that solaria be required to post signs informing customers of the risks associated with UV light tanning.22

At the state level, the Victorian, South Australian and Western Australian governments have enacted regulations governing the solaria industry. The New South Wales and Queensland governments have announced they intend to follow; and talks aimed at national regulation continue. These reforms, typically heralded as “tough” by policymakers, share key elements:

- a prohibition on offering tanning sessions to clients with fair (type I) skin;
- operator training;
- provision of information for clients; and
- enforcement measures and penalties.

SA23 and WA24 have banned those aged under 18 from solaria, the NSW Government has indicated that it will follow these guidelines, while the Victorian age limit has been set at 16 years,25 a standard the Queensland Government has suggested it will use.20

If stringently enforced, these reforms may result in some risk reduction, but the media have uncritically presented them as far more significant. Reports that Oliver’s “courageous campaign paid off”, that governments had promised to “crack down on the solaria industry” may be accurate, inasmuch as regulations have the unintended effect of assuaging public fears about solaria, as pointed out by a Cancer Council Victoria representative who noted that regulation could make the solaria industry more acceptable.30 This acceptance could be inadvertently boosted in SA, which is developing a certified education course and licensing system for solaria operators.23 A further concern is that weak legislation might not only improve the industry’s image, but also potentially protect it from legal action. Furthermore, an assessment of the European experience of solaria regulation has found it to be inadequate, difficult to enforce and failing to “make sunbed users more cautious”.31

Finally, the media devoted little coverage to asking why no state has banned solaria. Oliver herself was clear on this, arguing “you can’t tell me the Government doesn’t realise the dangers of solaria”, and “they should be banned”. Victoria’s Health Minister gave little credence to the idea of a ban, describing his state’s legislation as being “aimed to allow people to make an informed decision about using solaria and not to eliminate the industry”.32

Given the increasing knowledge about the health risks of solaria tanning,33 and the dramatic growth of the industry, coupled with the fact that solaria use has no positive consequences beyond misguided perceptions about cosmetic benefits, then the failure to ban the industry after Oliver’s campaign represents a missed opportunity. The sun cannot be regulated, and campaigns to convince people to reduce sun exposure produce far from perfect results. However, solaria are an entirely tractable risk factor for melanoma. Their demise would almost certainly be applauded by many in the community and nearly everyone in cancer control.

COMPETING INTERESTS
Ross MacKenzie is employed by the Cancer Council NSW, which does not support cosmetic tanning in solaria under any circumstances.

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REFERENCES*
2 Sinclair CA, Makin JK. Sometimes it takes a loss of life to make a difference. BMJ 2008; 336: 73.

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30 Australian Broadcasting Corporation. Melanoma victim to change the shape of public health [television broadcast]. 7:30 report. 30 August 2007.


*The references for media items quoted in the article are available at [http://tobacco.health.usyd.edu.au/share/MJAOliver.pdf](http://tobacco.health.usyd.edu.au/share/MJAOliver.pdf).*

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