Lithuanian media and young adults’ health perceptions: socio-linguistic approach

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Summary
With the rising anxiety levels among young adults, mainly caused by their daily use of social media, it is hypothesized that one of the major reasons why young adults are becoming more physically passive is determined by implicit media influence on shaping their perceptions of health and healthy lifestyle. This study aims to clarify how media created reality in the context of health and healthy lifestyle can be affecting Lithuanian young adults and their perceptions of health. To achieve the above, two procedural steps were followed. First, 30 articles from the Lithuanian media sources such as Delfi, Lrytas and 15min. were collected and analysed in the theoretical framework of cognitive linguistics and Critical Metaphor Analysis by procedurally applying Metaphor Identification Procedure. The media texts were analysed by using the bottom-up approach to deconstructing systematic metaphor and its ideological functions. Second, 44 young adults (aged 18–20) participated in the online health survey, where they provided answers to both closed and open questions. The findings have shown that the prevalent media scenario correlates with young adults’ responses, whose underlying narrative is driven by such frames as health is a (luxurious) commodity, people are passive observers and recipients of services provided by health experts etc. Thus, it can be argued that media consumerist approach to health negatively affects young adults’ perceptions and resonates with an idea of health as an obtained commodity, which deprives young adults of conscious attempts to become healthier and make their own conscious decisions about a healthy lifestyle.

Keywords: media discourse, health; healthy lifestyle, young adults, perceptions.

Introduction
One of the key problems that many governments and health representatives are facing in today’s world is a rapid and somehow unstoppable rise of serious diseases among adolescents and young adults. In the list of the top ten health issues for adolescents (aged 11–19), we come across such as alcohol and drug use, unhealthy eating habits, obesity, insufficient exercise and some others (see World Health Organisation, 2018). More importantly, various problems with physical health are inevitably leading to the problems of social character such as discrimination, violence, depression etc. negatively affecting adolescents and young adults’ social inclusion and mental states (Gortmaker et al., 1993; Dietz, 1998). Simultaneously, in Europe it has been determined that healthy lifestyle among young adults directly correlates with their conscious attitude to it (Steptoe et al., 1994). More specifically, the more optimistic and positive young adults’ personalities are the more consciously aware of the healthy lifestyle they are. A similar observation has been made about the positive correlation between physical activity of young adults and their social cooperation and self-confidence (Vingerhoets et al., 1990). Thus, it can be argued that negative personality symptoms are closely interrelated with young people’s unhealthy lifestyle.

Despite the research findings in the early 1990s, it seems that health symptoms of young adults are marked by even more drastic deterioration. For example, due to the high prevalence of health risk factors such as physical inactivity, obesity, poor diet etc., constant though steady rise of cardiovascular diseases (Andersson, Vasan, 2018) as well as the global rise of Type 2 Diabetes among young adults has been observed since 2004 (Alberti et al.,...
Another more recent study in the U.S. has also confirmed that low cardiovascular diseases risk profile can only be achieved by maintaining a healthy lifestyle pattern as possibly as early in adulthood (Liu et al., 2012).

Meanwhile in the Lithuanian context, the urgent need for health promotion programs that would prevent health diseases has been widely discussed in various fields of health studies. The need for urgent health prevention programmes for all age groups, including young adults, has been shown in the study of oral health (Petersen et al., 2000) and cardiovascular diseases (Petkeviciene et al., 2015). In addition, it has been observed how the use of alcohol and antidepressants is leading to suicidal ideation (Bunevicius et al., 2014). At the same time, the correlation between prevention programmes and the fall of suicide rates, especially among boys, is noted down (Strukcinskiene, Andersson, Janson, 2011).

As shown above, the correlation between both mental and physical diseases and conscious attitudes to lifestyle, i.e. encouraged by prevention programmes, is undisputable. Nonetheless, what has not been addressed is an issue of attitudes or how exactly they are shaped and developed to the de facto perceptions of healthy lifestyle. This study aims to clarify whether and how young adults’ perceptions of healthy lifestyle can correlate with the underlying mainstream media narrative in Lithuania. It is thus hypothesised that the way young adults perceive healthy lifestyle is unconsciously impacted by the media narrative they are being exposed to. To test this hypothesis, young adults’ responses to the online survey with open and closed questions were combined with the qualitative analysis of mainstream Lithuanian media texts from three different public outlets. The paper consists of three main subdivisions. First, some of the literature on the concepts of framing and its importance in media discourse is overviewed, then the specific characteristics of data and methods are provided, and finally the predominant types of framing and their correlation with young adults’ responses are discussed.

**Interdisciplinary research via framing.** Framing as a multidimensional concept was primarily used in cognitive science in 1970s and has been consequently adopted by a variety of scientific disciplines. In neuroscience and cognitive science, this concept refers to people’s neural capacity to conceptualise experiences and respond to external stimuli by reproducing combined patterns of experience (i.e. embodied, social, cultural) as their knowledge about the world (see Lakoff, Johnson, 1999). In other words, framing is a system of conceptual mappings based on which people unconsciously make judgements and preferences in their everyday life. Frames, as well explained by Fillmore and Baker (2010, p. 314), in this sense, play an important role in how people perceive, remember, and reason about their experiences, how they form assumptions about their experiences.

As a result, the analysis of framing across disciplines has led to many meaningful insights. For instance, it has been shown how positive framing contributes to high consumer involvement and high sales in advertising, i.e. their irrational preferences to positive solutions etc. (Deighton, Henderson, Neslin, 1994). One of the leading cognitive linguists in the world George Lakoff (1996) confirms the effect of positive framing in the U.S. politics by explaining why the U.S. Democrats are unable to frame their public debate well. He argues that instead of creating their own positive frame, they try to continuously negate the U.S. Republicans’ frame and thus always lag behind in public debate. The idea that framing is not just persuasive communication but can change and affect attitudes (Tversky and Kahneman, 1981) is central to this study.

The major reason why framing is used here as a key tool to analyse perceptions is related to the ideological nature of the analyzed output, which is media discourse. Media discourse is commonly perceived as one of the major contributors to shaping public opinion and belief systems about social reality (Fairclough, 2001, 2013). Along these lines, this study carries out the analysis of media health framing combined with the analysis of young adults’ health perceptions. Procedurally, this is done in the theoretical framework of Critical Discourse approach (Fairclough, 2013; Wodak, 2011), systematic metaphor analysis (Musolff, 2016, 2017) and semantic framing (Fillmore, 1982), and Conceptual Metaphor Theory (Lakoff and Johnson, 1980; Lakoff and Johnson, 1999). In order to analyse health framing in media discourse and young adults’ responses the following research objectives were raised:
(1) to identify and analyse systematic patterns of how mainstream Lithuania media frames health and healthy lifestyle;
(2) to identify and analyse systematic patterns of how young adults (18–20) perceive health and healthy lifestyle;
(3) to compare both kinds of framing by cross-establishing associations between the data sets.

Material and methods
The procedure of data collection was performed in two stages. First, the data sample of 44 young adults’ responses was collected, where young adults aged 18-20 participated in the online health survey by providing answers to 14 closed and 1 open question. Respondents’ categorization is summarized in Table 1:

<table>
<thead>
<tr>
<th>No. of participants</th>
<th>Age group</th>
<th>Gender</th>
<th>Background</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>44</td>
<td>18-20</td>
<td>22</td>
<td>22</td>
<td>Last Year High school students Vilnius</td>
</tr>
</tbody>
</table>

To test the research hypothesis of the correlation between media health narrative and young adults, perceptions of health and healthy lifestyle, only high school students from one high school in Vilnius participated with the equal distribution between genders (22 male and 22 female respondents). The participants were asked 8 closed and 3 open questions, regarding health and healthy lifestyle, as provided in Table 2:

<table>
<thead>
<tr>
<th>No.</th>
<th>Closed questions</th>
<th>Open questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Do you think you have a healthy lifestyle?</td>
<td>What is more important to eat: healthy food or tasty food?</td>
</tr>
<tr>
<td>2</td>
<td>Do you pay much attention to what you eat?</td>
<td>Is it possible to have a healthy lifestyle in modern world? Please explain, why yes or why not.</td>
</tr>
<tr>
<td>3</td>
<td>How often do you eat unhealthy food per week?</td>
<td>Do you read popular media on the Internet about health and a healthy lifestyle? Please explain, why yes or why not.</td>
</tr>
<tr>
<td>4</td>
<td>Respond to the statement: physical activity is an important part of a healthy lifestyle.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Do you sleep for about eight hours per night?</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>It is important to avoid alcohol and drugs?</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Do you stay away from cigarettes and other tobacco products?</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Respond to the statement: Healthy lifestyle is more important than genetics.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>11 questions</td>
</tr>
</tbody>
</table>

In the closed question list, the respondents had to choose from such options as strongly agree/agree/neutral/disagree/strongly disagree as for closed questions 4 and 9, while for the questions of (1, 2, 5–8) the respondents were provided with the options of yes/no/maybe. In the case of open questions, the respondents had to respond with an unlimited explanation, specifically related to two issues (1) healthy lifestyle and diet and (2) their accessibility of mainstream media.

The second data sample for this study is made of mainstream media data sources, the summary of which is provided in Table 3:

<table>
<thead>
<tr>
<th>Media data sample</th>
<th>No. of articles</th>
<th>Tokens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delfi.lt</td>
<td>10</td>
<td>7,485</td>
</tr>
<tr>
<td>Lrytas.lt</td>
<td>10</td>
<td>8,377</td>
</tr>
<tr>
<td>15min.lt</td>
<td>10</td>
<td>8,019</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>23,881</td>
</tr>
</tbody>
</table>

Overall, thirty articles about health and healthy lifestyle (i.e. under the heading of Health and Lifestyle) were collected during the period of the time when the respondents participated in the survey (2019/01–2019/05), with the total number of tokens of 23,881. As can be seen from Table 3, the articles about health and healthy lifestyle are
similar in length. The following section overviews the methodology applied in this case study.

**Methodology.** The collected data was analysed by using mainly qualitative methodology for establishing the prevalent semantic associations in the media narrative. Media data coding was carried out in the framework of two theoretical approaches to critical metaphor analysis:

– cognitive or metaphor as thought-based (Fillmore, 1982; Gibbs, 2006; Lakoff, 1991, 1996; Lakoff and Johnson, 1991);
– discourse perspective or metaphor as discourse-based (Cameron, 2011; Goatly, 2007; Charteris-Black, 2011; Musolff, 2018).

Both perspectives on metaphor analysis are closely intertwined and complement each other, as discourse-based view is inspired by the cognitive view and emphasizes the need for ‘the importance of the metaphorical use of language in context’ (Cameron, 2011, p. 342). By combining both cognitive (i.e. deconstruction of source ad target domains) and discourse perspective (i.e. identification of systematic patterns in the specific context of use), it is attempted to trace how health and healthy lifestyle are metaphorically represented in the mainstream media, and which associations are linguistically enacted.

Procedurally, metaphor analysis in the collected speeches was carried out at three levels: (1) metaphor identification by procedurally applying Pragglejaz group’s Metaphor Identification Procedure (MIP, Pragglejaz Group, 2007); (2) deconstruction of source domains; (3) establishing the systematic narrative or underlying frame of the narrative. During the first step, contextual and basic meanings were compared by using as a point of reference two Lithuanian dictionaries for the data set (http://lkiis. lki.lt/dabartinis, http://etimologija.baltnexus.lt/). Subsequently, the identified metaphorical linguistic expressions were tagged according to their representative source domains derived from the basic meanings of linguistic units (e.g. commodity, expertise, journey). Finally, the source domains are assigned a narrative category or scenario prevalent in its systematic use.

In addition, the qualitative method was complemented by establishing cross-associations between narrative categories in participants’ responses and media texts. The following two sections will summarize and discuss the research findings and raise the implication for the future studies of a similar kind.

**Results**

The analysis of the collected data has resulted in the semantic associations that have been established in the sample of both media texts and participants’ responses. Generally, survey participants tend to avoid taking personal responsibility for their health and healthy lifestyle as well as contribute to its sustenance. Instead, they seem to be thinking that healthy lifestyle can only be provided by experts (i.e. doctors, aestheticians, fitness trainers etc.) and should be obtained as a costly commodity. Similarly, the same kind of narrative is prevalent in the media, which is discursively construed by the semantic categories of expertise and commodity. The established cross-associations are summarized in Figure 1:

![Fig 1. Schematic overview of semantic patterns established in young adults’ responses and media texts. Arrows denote cross-associations found in the data.](#)

As indicated above, the coding of two data samples has resulted in three important characteristics of how health and healthy lifestyle are conceptualized and discursively realized. It has been determined that the category of expertise plays a significant role in shaping understanding of how health and healthy life should be enacted. The fact that health is viewed via the concept of expertise, also results in the perception that it is not personally involving but is rather a collective domain, provided by various experts in the field. In that case, young adults represent themselves as recipients of health services...
rather than active participants and decision-makers. Moreover, the media health narrative is systematically represented vis-a-vis three major categories, as indicated in Figure 2 below:

![Distribution by %](image)

**Fig. 2.** Prevalent health categories in the media by percentage

As can be seen in Figure 2 above, in all three media sources the five source domains of Expertise, Recipient, Journey, Service and Illness/Treatment overcome the threshold of fifty percent when their use is combined into conceptual pattern. The highest frequency is established in Lrytas with 93% for all five source domains, followed by Delfi with 78% and 15min. with 57%. This indicates that all three mainstream media sources systematically evoke a similar health narrative, where the semantic domains of expertise and commodified health relationships are recurrently construed.

Another interesting observation is made about the respondents’ attitude to health, which is twofold. Primarily, most of the respondents demonstrate their self-awareness of what healthy life should be like, i.e. the majority indicates that it is important to eat healthy food, regularly exercise and sleep on an average eight hours; despite that, their own behaviour contradicts this high trend of accurate knowledge. The overview of the respondents’ knowledge and their contradictory behaviour are represented in Figure 3:

![Knowledge vs. Behaviour correlations](image)

**Fig. 3.** Knowledge vs. Behaviour correlations

As shown above, there is a clear trend of oppositional correlation between high-level knowledge and conscious understanding among the respondents of what healthy lifestyle is and low-level behaviour of their own healthy lifestyle. In almost all four categories, except for addictions, young adults indicated that they know the importance of healthy diet (75%), regular exercise (96%) and regular sleep habits (89%). Despite that conscious knowledge and self-awareness, most of them prefer tasty and unhealthy foods to healthy diet (i.e. indicated only by 8.3%) and passive life style to regular exercise (i.e. indicated by 21%), and staying out at night to regular sleep habit (i.e. indicated by 42%). The difference for addictions is the least divergent, as 83% choose to argue that addictions are wrong, and only 25% of the respondents pointed out to practising addictions such as smoking, alcohol or drugs. This can be explained by their conscious awareness of legitimising the so-called ‘bad behaviour.’ If irregular sleep, unhealthy dieting and a lack of exercise are concerned only with well-being and healthy sustenance, addictions are also related to amoral behaviour and are criminalised in public domain. Thus, young adults might be either hesitant about speaking openly about their addictions, though 25% of them still acknowledge their personal involvement, or they do not practice addiction behaviours to such an extent, as they are committed to unhealthy living habits of irregular sleep, unhealthy diet and sedentary lifestyle.

Nonetheless, it becomes clear that young adults’ conscious responses and their possessed knowledge
are contradictory to their behaviour patterns, which might confirm the hypothesis that media health associations are deeply entrenched in public discourse and have become stereotypes that might be affecting young adults’ behaviour and their unconscious perceptions of how to live a healthy life. The following section will discuss and conclude the findings by providing specific examples.

Discussion

The media narrative in all three mainstream media sources of Delfi, Lrytas and 15min. is systematically construed by five semantic frames (Fig. 2), with the conceptual domain of Expertise being the most prominent and recurrent in Delfi (22%) and Lrytas (38%), and the third most recurrent category in 15min. (8%). By evoking this category, it is emphasized that health and healthy lifestyle is not an autonomous enterprise but is rather created and governed by various experts. Here are some of the typical examples¹ of the Expertise frame across three data samples:

**Health As Expertise**

1. 8 dalykai, kurių niekuomet nevalgo mitybos specialistai. (2019/04/28, Delfi.lt)
   [8 things that are never eaten by nutritionists.]
2. O pedikiūro specialistai sako, kad rūpintis savo kojomis turi būti taip pat įprasta, kaip ir valytis dantis. (2019/05/03, Lrytas)
   [And pedicure specialists say that taking care of your feet should be as normal as brushing your teeth.]
3. Dėl to pasirinkus profesionalius sporto pagalbininkus ir trenerius galima visiškai pakeisti savo požiūrį ir atrasti sportą iš naujo. (2018/07/22, Lrytas)
   [As a result, choosing professional sports assistants and coaches can completely change your mind and rediscover the sport.]
   [Vitabiotics Expert Group, with a special focus on the baby’s needs, has created balanced childhood supplements “Wellkid”]

The systematic recurrence of Expertise frame realised via such references as “diet specialists” (1), “pedicure specialists” (2), “professional sport assistants and coaches” (3), “the group of experts” (4) contributes to creating a perception of health and healthy lifestyle as an area of experts and specialists. In that context, young adults seem to be losing control of their own health and delegating it to specialists instead. This kind of perception has been traced in the respondents’ explanations to the open question whether it possible to live a healthy lifestyle. Many of them indicated that to live a healthy lifestyle is “hard but possible” and that it is hard “because you need no configure activities and you need specific complicated knowledge,” or that “modern ways require to take up health promoting activities.” Thus, healthy lifestyle is viewed as something that is possible but complicated and, which requires professional assistance. In this context, the Expertise frame is closely intertwined with the two more systematic media health scenarios: health as commodity/service (5,6,7) and person as a recipient of health service (8, 9, 10). The typical examples of these health scenarios are provided below:

1. Na, o nusilpusį organizmą vertėtų papildyti trūkstamomis medžiagomis. (2019/03/29, 15min.)
   [Well, it would be worth supplementing the weak body with the missing substances.]
2. Trenerė pataria išbandyti kuo įvairesnes treniruotes ir dalinasi, kaip tarp didelės gausos išsirinkti labiausiai sau tinkančią. (2019/02/21, Lrytas)
   [The trainer advises you to try as many different types of workouts as possible and shares her opinion of how to choose from a large variety of options.]
3. Odontologas nurodė pigiausią būdą turėti gražius dantis. (2019/05/02, Delfi)
   [The dentist pointed out the cheapest way to have beautiful teeth.]
4. Galima gerti tik žaliuosius kokteilus, pavyzdžiui, 3 dienas, tada organizmas pats natūraliai apsivalo, mažėja apimtys (2019/04/22, Delfi)
   [It is possible to drink only green cocktails, for example, for 3 days, then the body naturally]

¹ The examples are provided in the following manner: Lithuanian extracts are followed by English translation. In both versions the metaphorical instances and references to the scenario are boldened and given in italics.
cleanses itself and gets lighter/shrinks in weight.

(3) Kai žmonės suserga, valstybinė sveikatos apsaugos sistema padeda išgydyti simptomus, prailginti gyvenimo trukmę, bet kartu ji padidina žmonių, vartojančių sveikatos paslaugas, skaičių<...> (2019/04/14, Lrytas)

[When people get sick, the public health system helps cure symptoms, prolong life expectancy, but it also increases the number of people who use health services]<...>]

The perception of a healthy individual as a passive recipient is discursively construed via such language use that describes human organism as something that can be controlled by external forces such as “vitamins” (6) or “cocktails” (8). It is also interesting to observe when the frame is developed by such story line when cocktails are performing the role of affectants, who can naturally and passively just “get lighter” (8). This again legitimizes external authority and unconsciously deprives the audience of a thought to make their own conscious and individual efforts for sustaining and improving health. The service scenario is linguistically enacted by the use of such expressions as “the cheapest way” (7) or “health services” (9). This kind of passive and consumerist perspective is also found in the respondents’ explanations why it is not easy to lead a healthy lifestyle. Most of them indicate that “it is a costly affair, and if you are poor you can never be healthy,” or that “it is expensive for an average person, though shops offer a lot of fruit and vegetables”.

Hence, commodification of health seems to be one of the major reasons why young adults perceive healthy lifestyle as complicated. They explain it by repeatedly mentioning how expensive it is and that they are too young to have money for that. Finally, their passive attitude to lifestyle has been confirmed by their response to the statement that “Healthy lifestyle is more important than genetics,” with only 33% expressing their agreement to it, while the majority of 77% disagreed with that. This indicates that young adults tend to believe that healthy lifestyle is genetically predisposed and cannot be changed by one’s own behaviour and habits.

Conclusions

The qualitative analysis (i.e. both media narrative and young adults’ responses has resulted in three systematically evoked semantic scenarios across two data sets: (1) health as an expertise, (2) person as a recipient of health service, and (3) health as a commodity. It has been determined that the mainstream media sources in Lithuania discuss health and healthy lifestyle from the perspective of authoritarian guidance within the context of vertical social hierarchy. Health is thus encompassed as an entity that has to be rather given but not earned by personal effort or hard work. Similarly, young people tend to perceive health from the position of passive recipients, who either attribute responsibility for their health to health practitioners and other experts or by perceiving as a genetic disposition. It has been also revealed that the majority of young adults are self-conscious of what staying healthy means; however, they fail to practice healthy habits and prefer to remain uninvolved in self-regulated health maintenance and sustenance. The hypothesis that media narrative can have an effect on young adults’ perceptions of health and healthy lifestyle has been confirmed, as the semantic associations of health established in the media texts are found to be recurrent with the young adults’ perceptions.

This case study admittedly has its limitations in terms of data scope and data processing. The data samples were collected only from one high school. In the future, the data will be expanded to other schools in Vilnius as well as other Lithuanian cities. Also, by this study it has been attempted to test the hypothesis of correlational associations between media health narrative and young adults’ perceptions by collecting young adults’ responses without interviewing them in person, which might have provided with more specific detail and accuracy of underlying perceptions. Despite the limitations, this study has contributed to developing an interdisciplinary template for the analysis of health perfections and their impact on young adults’ behaviour, by combining both public sources (i.e. media texts) and direct young adults’ responses.

REFERENCES


**Raktažodžiai:** žiniasklaidos diskursas; sveikata; sveika gyvensena; jaunimas; suvokimas.