



Perceived Media Bias and Intention to Engage in Discursive Activities for Mental Health: Testing Corrective Action Hypothesis in the Context of Mass Shooting News

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ABSTRACT

The current study tested the “corrective action hypothesis” by analyzing intentions to engage in discursive activities for mental health in response to news coverage of mass shootings. Hypotheses were proposed regarding how involvements with the news influence on people with mental health issues moderate preexisting attitude toward people with mental health issues in predicting perceived media bias, and how perceived media bias predicts intention to engage in discursive activities for mental health. Two hundred eighty eight respondents were surveyed through Qualtrics national research panels. The results suggested participants would not be motivated by their prior attitude toward mental health to take part in discursive activities unless they are highly involved with the news issue and in the meantime perceived mass shooting coverage is biased against people with mental health. The results extended the discussion of corrective action hypothesis to the context of media coverage of mass shooting – a significant issue nowadays that intertwines with public health concerns. The results also provide a basis for the discussion of the potential benefits of employing perceived media bias in educating the public by appealing to individuals’ outcome concerns and value systems.

Introduction

Americans are suffering a period of the worst mass shootings in modern history. According to *The Washington Post*, since Aug. 1, 1966, when ex-Marine sniper Charles Whiteman killed his mother and wife and 14 more people on a 27-story tower at the University of Texas, until Feb. 26, 2020, when a Springfield man opened fire at a Kum & Go convenience store, mass shootings in which four or more people have been killed numbered at 175 (Berkowitz et al., 2020), killing a total of 1246 people.

Devastating mass shootings are generally followed by heated and polarizing political debates in the United States. A rare area of agreement is a belief in limiting gun access to those with serious mental illnesses (McGinty et al., 2014). In the process of covering news and debates, American media frequently position mass killings as the fault of people labeled “mentally ill, deranged, and evil monsters” (Gold, 2013, p. 338). This frame potentially contributes to the formation of negative attitudes toward people with mental health issues (McGinty et al., 2013). Research has suggested that mass shootings are not typical behavior of those with mental health issues and that media reports associating mass shooting with mental illness can reinforce negative stigma; thus, these reports may discourage people from seeking needed treatments and social support by dehumanizing people with mental health issues, compromising their privacy, threatening confidentiality, and interfering with therapeutic relationships (Gold, 2013).

Examining news influence from a mental health perspective can improve our understanding of the public’s opinion on

mental health. While previous studies have focused on analyzing a “dangerous people” news frame and its potential to form or perpetuate negative attitudes toward mental health issues (e.g., McGinty et al., 2013, 2014), the current article aimed to complement the body of research by examining the indirect media effect of perceived media bias, which would shed light on understanding public advocacy of mental health issues.

The perception of biased media coverage is entrenched in the general audience, especially when it comes to a particular news issue involving a particular group of people (Glynn & Huge, 2014). While media can be perceived to be biased because the news coverage indeed is slanted, it can also be driven by a biased information processing because of a psychological need to dismiss cognitive dissonance (Taber et al., 2009). The theory of hostile media effect suggests that people tend to see news coverage of an issue in which they are highly involved as biased against their point of view (Huge & Glynn, 2010). Therefore, individuals’ prior attitudes toward people with mental health issues and their involvement with how society would treat this group are likely to make them perceive mass shooting coverage as biased against people with mental health issues. On the other hand, previous research has suggested communication and advocacy behaviors as possible outcomes of biased media perception (Barnidge & Rojas, 2014; Hart et al., 2015; Hwang et al., 2008), which has significant implication for political and health issues (McKeever et al., 2017). The corrective action hypothesis (Rojas, 2010) posits

that once news audiences perceive a media report to be hostile and influential, they would be motivated to voice their political opinions to “correct” the perceived “wrongs” of the blame. Drawing on this line of research, this study tested a path model that links participants’ attitudes toward people with mental health issues with their intention to engage in discursive activities aiming to inform the public of mental health issues through perceived media bias. In addition to providing a theoretical discussion on these key variables’ roles in predicting perceived media bias and the corrective action, the results of the current study lend insights for public health communicators to consider ways to combat negative stereotypes in news coverage associated with mental health issues and mass shootings.

Literature review

Background: Media framing of mass shootings and influence on people with mental health issues

By selecting and highlighting aspects of a perceived reality while minimizing others, news frames are said to “promote a particular problem definition, causal interpretation, moral evaluation, and treatment recommendation” (Entman, 1993, p. 52). Framing is particularly visible when an occurring event is controversial and ambiguous (Birkland & Lawrence, 2009), and mass shootings are one such issue, given the tragic events have been attributed to many causes, including community security, gun access, a culture embracing violence, masculinity (Muschert, 2007) and serious mental illness (McGinty et al., 2014). Among those frames, a “dangerous people” frame that reports a perpetrator’s mental status in sensationalized details, such as “mentally ill, deranged, and evil monsters” (Gold, 2013, p. 338) is frequently used, attributing gun violence to a selected group of individuals with serious mental health illness (McGinty et al., 2013, 2014). As suggested by cultivation theory, long-term exposure to a certain type of media portrayal of the world might shape the audience’s perceptions of the real world (Gerbner, 1998). The high volume of news coverage focusing on perpetrators with a serious mental health issue can sway the public to view people with mental health issues as a whole as a community threat and treat them negatively. It may not only reinforce the stigma associated with mental health issues and as such, may prevent people with mental health issues from seeking treatment and social support (Gold, 2013).

When people belong to a minority social group who feel their in-group suffers from negative stereotyping by mainstream society, they risk the possibility of viewing themselves badly and being alienated and estranged from society at large (Tsftai, 2007). In this sense, reporting mass shootings based on a “dangerous people” frame has severe implications for constructing negative images of people with mental health issues, thus, perhaps endangering them. On another hand, scholars studying deliberative democracy (for a review of the literature, see Carpinì et al., 2004) have suggested that discursive discussions on political issues enhance consensus and peaceful conflict resolution, encourage tolerance, and inform citizens (Mendelberg, 2002). Therefore, it is crucial for people who are knowledgeable about mental health issues to initiate and engage in public discussions to “correct” the potential negative effects of the media portrayal of mass shooters.

Predictors of perceived media bias of mass shooting coverage

Contrary to the commonly recognized journalism guidelines of accuracy, balance, and fairness, media bias is prevalently perceived by news audiences (Ho et al., 2011). Perceived media bias itself can be biased when it is a misperception of media content. Therefore, in a broader sense, media bias perception occurs whether or not that perception is accurate (Barnidge et al., 2019). Ho et al. (2011) defined media bias perception as “an individual’s belief that the news media provide unbalanced treatment toward a political issue or party, regardless of any real political biases portrayed in the media” (p. 348).

Perceived media bias can be a result of true media bias (e.g., “liberal media” assumption, D’Alessio & Allen, 2000), slanted coverage (Eveland & Shah, 2003) and the public’s exposure to messages about media bias (de Vreese & Elenbaas, 2008; Watts et al., 1999). It can also be related to a range of individual-level factors, such as conversations with like-minded others (Eveland & Shah, 2003), social group identities (Gunther, 1992), and political trust (Lee, 2005). Glynn and Hugu (2014) also found that perceptions of general media bias can map onto perceptions of media bias in coverage of a particular issue.

Among extensive research examining the cognitive mechanisms underlying perceived media bias, research on hostile media perception provides an explanation that is rooted in individuals’ preexisting attitudes. Hostile media perception (HMP) research proposes that when media are perceived to be biased, it is more likely to be seen as biased against one’s own position (Vallone et al., 1985). HMP is formed because partisans tend to overestimate the power of the coverage in swaying nonpartisans in a hostile direction, even though the news report may be neutral in its tone (Vallone et al., 1985). Applying to the context of the current study, HMP provides a lens of examining perceived bias against people with mental health issues in media coverage of mass shootings. News audience may get concerned not necessarily because mass shooting news actually is biased against people with mental health issues, but because of the potential that if the news report is biased, it could influence how society treats people with mental health problems. Just as put by Perloff (2015), perceived media bias can “precipitate media effects by setting in motion a series of beliefs, attitudes, and behaviors” (p. 703).

Therefore, how the news audience view people with mental health issues likely influences how they perceive the media bias in mass shooting coverage. Previous research has suggested that the general public in the United States has widely endorsed stigmatizing attitudes about mental health problems (e.g., Angermeyer & Matschinger, 2003; Corrigan, 2000; Hayward & Bright, 1997; Hoffner et al., 2017). People tend to view mental health issues as sharing a series of negative stereotypes, such as dangerous, homicidal, need to be feared, etc. (Corrigan, 2000), so labeling mental issues as an illness has a significant negative impact on the public’s attitudes toward people with mental health problems. Negative stereotypes lead to discriminative behaviors against people with mental health issues, and therefore should be examined as a major attitudinal domain (Angermeyer & Matschinger, 2003). Research has suggested

self-reported mental illness stereotypes as positively associated with perceived news influence on oneself (Hoffner et al., 2017).

In the current study, we conceptualize preexisting attitudes toward mental health issues as the stereotypical attitude individuals would hold toward people with mental health problems. Although stigmatizing attitudes toward mental health issues are widely endorsed, individuals' attitudes vary. For those who don't see mental health issues in a negative light, they might be concerned that mass shooting news that frequently uses a "dangerous people" frame makes society see people with mental health issues negatively and treat them unfairly. Hence, a biased information processing of mass shooting news may trigger a biased media perception. Therefore, it is proposed:

H1: Participants' preexisting attitudes toward people with mental health issues is related with perceived media bias. The more positive they view people with mental health issues, the more likely they perceive that mass shooting coverage is biased against people with mental health issues.

Besides, the tendency of seeing news coverage of a certain issue as biased against one's own point of view is particularly salient when people are highly involved (Perloff, 2015). According to Johnson and Eagly (1989), people feel involved when an activated attitude is associated with a certain dimension of self-concept. According to social judgment theory (Sherif et al., 1965), while individuals categorize incoming information based on their preexisting attitudes into latitudes of acceptance, rejection, and non-commitment, their involvement affects the size of judgment latitudes. In research of biased media perception, involvement has been examined as an antecedent variable for people to care about a political issue, leading to biased processing of political information by motivating selective exposure to information that affirms one's preexisting position (Lavine et al., 2000). Involvement has been found to moderate biased media perception in a positive direction (Hansen & Kim, 2011). As one's preexisting political ideology sets the conditions for biased media perception, one's involvement serves to accentuate such biased perceptions (Perloff, 2015).

However, involvement is "a notoriously difficult term to clearly define, churlishly complicated in its related but distinctive facets" (p. 705, Perloff, 2015). In many studies, involvement was operationalized as a single dimension variable, such as ego involvement (e.g., Perloff, 1989), value involvement (E.g., Arpan & Raney, 2003), or outcome involvement (Gunter & Christen, 2002). Sometimes proxy measures were used as indicators of involvement, such as fanship (Arpan & Raney, 2003) and engagement in political activities (Eveland & Shah, 2003). A few scholars examined the multi-dimensional construct of involvement. Boninger et al. (1995), for instance, regressed three kinds of involvement in participants' attitudes toward three political issues. They found that self-interest involvement (to what extent a political issue influences one's tangible or material goals) consistently served as the strongest predictor of biased media perception compared with social identification (to what extent that a group of people is essential

to the person) and value involvement (to what extent an issue is viewed as being linked to the attainment of cherished values).

Perhaps the degree to which different involvement types influence perceived media bias lie in the nature of the issues. Shavitt (1990) pointed out that different attitude objects orient toward serving different functions; therefore, some political issues may be more powerfully linked to self-interest, whereas others are more closely related to social identity or value. Choi et al. (2009) suggested it is natural that people form their attitudes through different cognitive processes of media content because they become involved with social issues for different reasons. In the context of news coverage of a National Security Law in Korea, it was value-relevant, rather than the outcome-relevant involvement that significantly predicted HMP (Choi et al., 2009).

According to Choi et al. (2009), the audience feels involved with a news issue because it creates a condition that has future consequences for them (outcome relevant involvement), or because it activates a particular set of essential values (value relevant involvement). US news audiences can be involved with the issue of mass shooting coverage blaming mental health problems for both outcome and value concerns. People with mental health issues might personally bear the consequence of mass shooting coverage by suffering from the stigma attached to mental health issues, becoming less willing to reach out. For example, Hoffner et al. (2017) found that after a mass shooting, people who are influenced by mental health problems believed news coverage had led others to view them negatively; therefore, they became less likely to seek support and comfort. On the other hand, the news audience may also be involved with the influence of mass shooting coverage because of how people with mental health issues should be treated relates to their values. Although values are abstract ideals about whether some end-state of existence is worth attaining, it informs individuals which attitudes are personally important (Boninger et al., 1995). Therefore, if news audiences feel mass shooting news risks leading the public to treat people with mental issues badly and that is against their values, they will feel involved with this news issue. In the United States, mental health advocates who have developed social movements influencing the national policy process are not only those who personally have mental health issues (Funk et al., 2005).

Applying Choi et al.'s (2009) framework of involvement, the current study proposed that the relationship between preexisting attitudes and perceived bias in mass shooting news can be moderated by both outcome and value-relevant involvement with this news issue:

H2: Outcome relevant involvement moderates the relationship between preexisting attitudes toward people with mental health issues and perceived media bias. The relationship between preexisting attitudes and perceived media bias will be more positive as outcome relevant involvement increases

H3: Value relevant involvement moderates the relationship between preexisting attitudes toward people with mental health issues and perceived media bias. The relationship between preexisting attitudes and perceived media bias will be more positive as the value relevant involvement increases

Perceived media bias and corrective action hypothesis

Rojas (2010) suggested that how media influence the audience's attitude and behavior depends on how people perceive their position, others' position, and the position of the message/source on a certain ideological continuum. How people perceive the general climate of opinion surrounding the issue is to a great extent influenced by perceptions of bias from the media (Gunther & Chia, 2001). Rojas (2010) proposed the idea of a "corrective action hypothesis" to theorize how perceived media bias motivates people to participate in public discussions. Instead of trying to prevent damaging media content by censoring it, people strive to counteract the perceived negative influence of media content by having their own opinions heard in the public sphere (Rojas, 2010). Corrective action can be motivated by the perceived media bias – when processing information that is inconsistent with their preexisting views, people tend to be more deliberate and believe others are more influenced by such information, hence become more likely to voice their opinions in public to correct the undesirable influence from media (Barnidge & Rojas, 2014; Gunther & Schmitt, 2004).

The corrective action hypothesis has received empirical support. Biased media perception has not only been detected to be positively related to political discussion with like-minded people (Eveland & Shah, 2003), but also to the political discussion diversity (e.g., Barnidge & Rojas, 2014; Barnidge et al., 2015). Biased media perception has also been found to influence public discussion of controversial health issues such as vaccination (Gunther et al., 2012) and breastfeeding (McKeever et al., 2017), which are "somewhat political in nature" (p. 814, McKeever et al., 2017). Rojas (2010) study with a national probability sample collected in Colombia suggested perceived media bias is positively related to a series of offline and online political behaviors. Barnidge and Rojas (2014) analysis of another national representative survey's data from Colombia suggested those who have higher levels of biased media perception will be talking politics more often and seeking a wider range of viewpoints. In light of the above-mentioned research, the current study proposed:

H4: The more positive participants view people with mental health issues, the more likely they intend to engage in discursive activities concerning mental health

H5: Perceived media bias of mass shooting coverage against people with mental health issues is positively related to the intention to engage in discursive activities concerning mental health

H6: Perceived media bias mediates the relationship between preexisting attitude toward people with mental health issues and intention to engage in discursive activities concerning mental health

The conceptual model is presented in Figure 1.

Methods

Procedure and participants

An online survey was administered to Qualtrics' national market research panels. Qualtrics also used a quota sampling technique to match gender, race, and education quotas with the national census to improve sample representativeness. The data were collected during a two-week period (Jan. 22 to Feb. 4) in early 2019. Participants were first presented with a consent form, at the end of which they were asked if they self-identified as news consumers in the US and older than 18.

To enhance the validity of the answers, screening logic was added to two questions in the survey to terminate anyone who straight-lined through. Besides, a soft launch with 30 participants suggested a median completion time of 1173 seconds. An industry standard of 40% of the median time was applied, and participants who spent less than 469 s on the survey were excluded. During the 2 weeks, a total of 394 individuals completed the survey, 18 were randomly deleted because of going over the quota, and 76 were filtered out for failing the attention check questions or not spending the required time. The answers from 2 participants appeared to be outliers when checking assumptions of statistical analysis, hence were deleted from the dataset. The final sample consisted of 298 participants with 149 selecting males (50%) and 149 females (50%). One participant did not report a valid age, leaving 297 participants ranging from 18 to 81 with an average of 46.47 ($SD = 17.72$). The majority of the participants were Caucasian ($n = 184$, 62%), followed by Hispanic ($n = 51$, 17%), African American ($n = 37$, 12.3%), Asian ($n = 16$, 5.3%), Native Hawaiian or Pacific Islander ($n = 8$, 2.7%) and others ($n = 2$, 0.7%). The

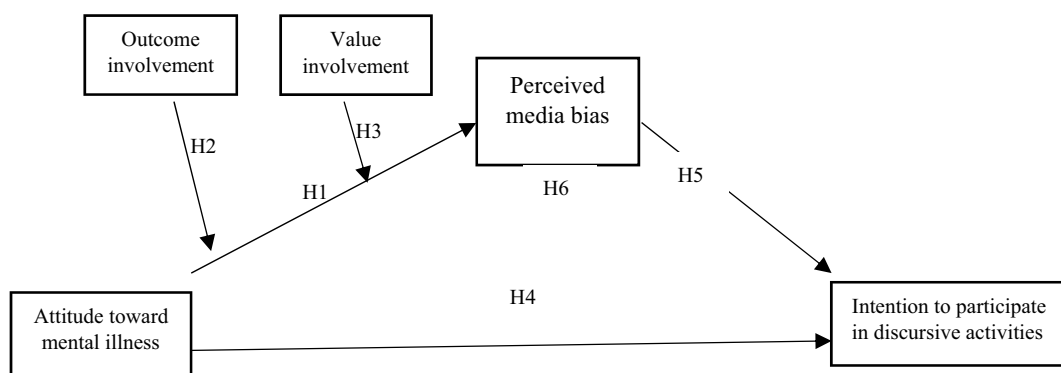


Figure 1. The conceptual model of the study.

majority of the participants reported having somewhat of college to bachelor's degree ($n = 171$, 57.4%), followed by high school degree ($N = 76$, 25.6%), master or professional degree ($n = 36$, 12%), below high school ($n = 11$, 3.7%) and doctoral degree ($n = 4$, 1.3%).

Measurement

Preexisting attitude toward people with mental health issues

A scale was borrowed from Hoffner et al. (2017). Participants were asked what percentage of people with mental health issues they perceive to have several stereotyped characteristics, such as cannot be trusted, are dangerous, are to be blamed for their problems, are hardworking, are unpredictable, will not recover or get better, or are prone to be violent. The scale ranged from 1 (10% or less) to 10 (91% or more). In data analysis, all the negative terms were reverse coded. Average was then taken for subsequent analysis ($\alpha = .83$, $M = 4.54$, $SD = 2.35$, $N = 298$).

Outcome and value-relevant involvement with how people with mental health issues are treated by society

This study adapted a scale from Choi et al. (2009) for outcome and value-relevant involvement. Choi et al. (2009) factor analysis found a two-factor model consisting of five items measuring value-relevant involvement and four items for outcome involvement. Their scale measured involvement as news-issue specific. The news issue in the current study was conceptualized as the potential negative consequence of mass shooting coverage on mental illness; that is, how people with mental health issues will be treated by society. For example, one item measuring outcome-relevant involvement was "My life would be changed if our society treats people with mental health issues differently" and one example item measuring value-relevant involvement was "My position on how people with mental health issues should be treated reflects who I am." Participants were asked to rate their agreement to these statements on a 7-point scale (1 = strongly disagree, 7 = strongly agree).

Perceived media bias toward people with mental health issues

Using the scale adapted from Tsfatı (2007), the current study asked participants to what extent they agreed with five statements on a seven-point Likert-type scale ranging from "1" (strongly disagree) to "7" (strongly agree). Items include: (1) "The current US news coverage of mass shootings ignores the rights of people with mental health issues"; (2) "The current US news coverage of mass shootings presents people with mental health issues as primitive"; (3) "The current US news coverage of mass shootings present people with mental health issues in a negative manner"; (4) "The current US news coverage of mass shootings present people with mental health issues in a distorted way"; and (5) "Most people working in the US news media belong to social groups that are hostile to people with mental health issues". The scale appeared to be internally reliable ($\alpha = .85$). The average of the five items were taken for subsequent analysis ($M = 4.34$, $SD = 1.36$, $N = 298$).

Intention to engage in discursive activities concerning mental health

A scale was adapted from Hwang et al.'s (2008) scale measuring willingness to engage in discursive activities. On a five-point scale, ranging from 1 (not willing at all) to 5 (very willing), participants were asked how willing they would be to take part in eight activities if they had a chance, including (1) "signing a petition representing my position on mental health issues", (2) "attend to public forums where citizens discuss mental health issues", (3) "let my opinion about mental health be posted on the web page of an organization that I support", (4) "meet with an elected official to discuss mental health issues", (5) "do some volunteer work related to the mental health issues for a group that I support", (6) "look for more information on mental health issues", (7) "talk about mental health issues with others who may have a different view", (8) "Talk about mental health issues with others who share my views". ($\alpha = .92$, $M = 4.58$, $SD = 1.54$, $N = 298$).

Attention to the news

To control the potential influence of exposure to news on perceived media bias (e.g., Hwang et al., 2008; Tsfatı, 2007), participants were asked on a 5-point scale about how much attention they paid to mass shooting coverage with 1 being "not at all" and 5 being "a great deal of attention" ($M = 3.69$, $SD = 1.08$, $N = 298$).

Analytical approach

First, data cleaning and preliminary analysis were conducted with SPSS (version 25.0). Next, with the aid of SPSS AMOS, confirmatory factor analysis (CFA) models were tested to identify factors for involvement. The original model with the two factors of outcome- (five items) and value-relevant (four items) involvement did not find a good fit ($\chi^2 (26) = 195.84$, $p < .01$, $CFI = .80$, $RMSEA = .14$, $SRMR = .11$). The results suggested one value-relevant involvement and two outcome-relevant involvement items' factor loadings were lower than .30. The modification index suggested their errors were highly correlated with other errors. Hence, a model was tested again with the three items deleted and generated satisfactory fit ($\chi^2 (23) = 15.33$, $p = .053$, $CFI = .98$, $RMSEA = .05$, $SRMR = .08$). Specific items and factor loadings were shown in Table 1.

The correlations of variables of interests were examined before a regression model was fitted to the data (Table 2). Hayes (2018) PROCESS macro version 3 procedure was implemented in SPSS version 25. PROCESS Model 9 was applied to test how perceived media bias mediated the moderated effect of preexisting attitude toward mental health by the two involvement dimensions in predicting intention to participate in discursive activities concerning mental health. The PROCESS macro uses an ordinary least squares (OLS) regression-based path analysis to test conditional indirect effects. Variables are standardized before the interaction terms are created. Statistically significant interaction terms indicate the presence of moderation. Indirect effects are interpreted as statistically significant when the bootstrap analysis with 10,000 iterations and bias-corrected estimates generate 95% upper or lower confidence intervals (CI), not including

Table 1. Factor loadings for involvement with how society treat people with mental health issues ($N = 298$).

Item	Factor 1	Factor 2
	Outcome involvement ($\alpha = .82$, $M = 4.5$ $SD = 1.43$)	Value involvement ($\alpha = .77$, $M = 5.08$ $SD = 1.27$)
My life would be changed if our society treat people with mental health issues differently	.75	
It is easy for me to think of ways in which society treat people with mental health issues affects my life	.79	
Changes of the ways that society treat people with mental health issues affect me	.80	
The values that are the most important to me are what determine my stand on how people with mental health issues should be treated		.71
Knowing my position on how people with mental health issues should be treated is central to understanding the kind of person I am		.80
My position on how people with mental health issues should be treated reflects who I am		.70

Estimation procedure for CFA: Maximum likelihood

zero (Hayes, 2017). For both mediation and moderation analyses, PROCESS generates unstandardized regression coefficients. Age, gender, education, and news attention were entered as covariates to control the potential confounding effects.

Results

H1 proposed that individuals' preexisting attitude toward people with mental health issues predict perceived media bias in mass shooting news against people with mental health issues. As Figure 2 suggested, attitude toward mental health was not observed to be significantly associated with perceived media bias. Therefore, H1 was rejected.

H2 and H3 predicted that as outcome-relevant involvement and value-relevant involvement increase, the relationship between preexisting attitude and perceived media bias will become more positive. As Figure 2 showed, the interaction effect between outcome-relevant involvement and attitude was significant ($B = .07$, $SE = .03$, $p < .05$), while the interaction effect of value involvement and attitude was not. The "regions of significance" derived by the Johnson-Neyman technique (Hayes & Matthes, 2009) suggested that the effect of attitude on perceived media bias was not significant until both outcome-relevant involvement and value-relevant involvement

were one standard deviation above the mean ($B = .12$, $SE = .04$, $p < .01$). As Figure 3 showed, the effect of attitude on perceived media bias was significantly enhanced by the two types of involvements. H2 was supported and H3 was rejected. An examination of the regression results found that both outcome-relevant involvement ($B = .25$, $SE = .08$, $p < .001$) and value-relevant involvement ($B = .23$, $SE = .09$, $p < .01$) had significant direct effect on perceived media bias.

H4 proposed attitudes toward people with mental health issues is positively associated with intention to participate in discursive activities. As Figure 2 showed, no significant direct effect of attitudes toward people with mental health issues was observed on the intention to participate in discursive activities, hence H4 was rejected.

H5 proposed perceived media bias predicts intention to engage with discursive activities, while H6 predicted perceived media bias mediates the effect of preexisting attitudes on intention to engage with discursive activities. The results suggested a significant direct effect of perceived media bias on the intention to participate in discursive activities ($B = .65$, $SE = .15$, $p < .001$, Figure 2). The mediation effect of perceived media bias depends on the level of outcome involvement and value involvement. As Table 3 suggested, the conditional indirect effect of attitudes toward mental health issues on intention to participate in discursive activities was not positively significant until both outcome and value involvement were one standard deviation above the mean ($B = .12$, $SE = .04$, 95% CI [.04, .21]). Therefore, H5 was supported, and H6 was partially supported.

Discussion

McKeever (2015) suggested attitude toward people with mental health issues predicts public's intention to help this particular group (McKeever, 2015). Building on the literature of biased media perception and corrective hypotheses, the current study examined a more complicated picture by testing a moderated mediation model predicting intention to participate in discursive activities for mental health through perceived media bias. For decades, researchers have observed that when it comes to media effects, whether or not news content is objectively biased is less important than the perceived bias from the audience. Understanding the antecedents and consequence of perceived media bias in mass shooting news toward people with mental health issues will help improve public health professionals' abilities in creating more effective strategies toward combatting stigma attached to people with mental health issues.

Table 2. Bivariate correlations between variables of interests ($N = 298$).

	Attitude toward mental health ($M = 4.54$ $SD = 2.35$)	Outcome involvement ($M = 4.38$ $SD = 1.05$)	Value involvement ($M = 4.89$ $SD = .97$)	Perceived media bias ($M = 4.34$ $SD = 1.36$)	Intention to participate in discursive activities ($M = 4.58$, $SD = 1.54$)
Attitudes toward mental health	1	.23**	.24*	.15*	.14*
Outcome involvement		1	.38**	.34**	.37**
Value involvement			1	.31**	.35**
PMB				1	.40**
Intention to participate in discursive activities					1

* $p < .05$; ** $p < .01$

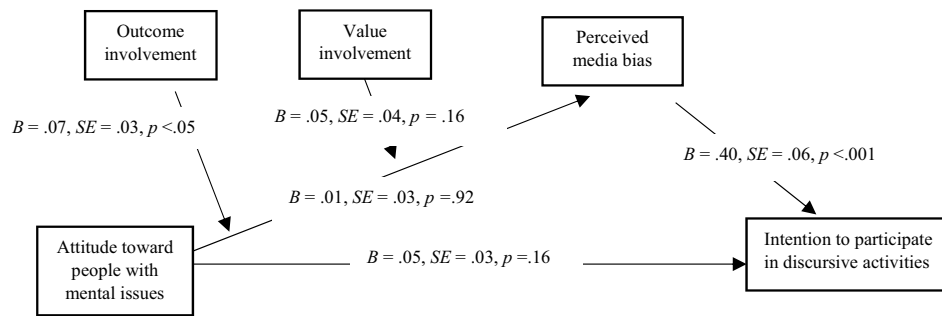


Figure 2. Tested moderated mediation model predicting intention to participate in discursive activities concerning mental health (N = 298). Note: Age, education and attention to news were entered the model as covariates.

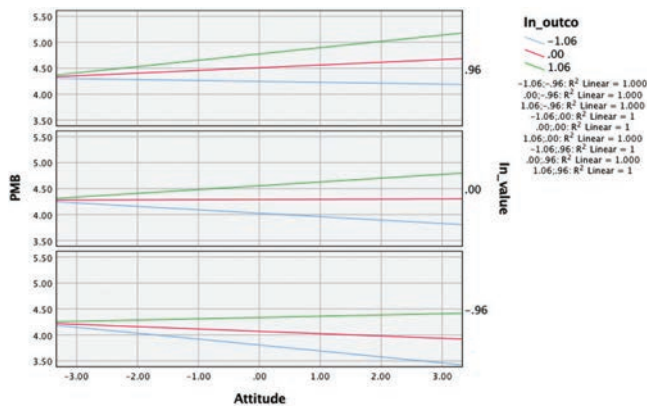


Figure 3. Interaction effect of two involvements and attitudes toward mental health in predicting perceived media bias of mass shooting news. Note: Attitude: Preexisting attitudes toward mental health; In_outco: Outcome relevant involvement; In_value: Value relevant involvement; PMB: Perceived media bias

Table 3. Conditional indirect effect of PMB on intention to engage with discursive activities for mental health at different values of outcome relevant involvement and value relevant involvement (N = 298).

Outcome involvement	Value involvement	Effect (BootSE)	Boot 95% CI
Low	Low	-.11 (.05)	[-.22, -.01]
Low	Medium	-.07 (.05)	[-.17, .03]
Low	High	-.02 (.07)	[-.15, .12]
Medium	Low	-.05 (.05)	[-.14, .05]
Medium	Medium	.003 (.03)	[-.06, .07]
Medium	High	.05 (.05)	[-.04, .14]
High	Low	.03 (.07)	[-.11, .15]
High	Medium	.07 (.04)	[-.01, .16]
High	High	.12 (.04)	[.04, .21]

For outcome involvement and value involvement, respectively, "medium" values correspond to the sample mean, "low" values correspond to one standard deviation below the mean and "high" values correspond to one standard deviation above the mean. Bootstrapped standard errors and confidence intervals were computed using 10,000 bootstrap samples. Bold text was used to denote significant effects. PMB = Perceived media bias. CI = confidence interval.

Antecedents of perceived media bias of mass shooting news

To start with, participants' attitude toward people with mental health issues itself was not observed to be a significant predictor of perceived media bias of mass shooting news. Since not a strong attitude toward people with mental health issues was reported ($M = 4.54$, $SD = 2.35$, $N = 298$), this result should not be considered as a surprise. Originally, the theory of HMP was

proposed to explain partisans' perceptions of news bias. Later empirical research found perceived media hostility prevalently exists, however, it becomes stronger when people's political attitudes become extreme (e.g., Matthes, 2013; Matthes et al., 2019). The lack of a significant association between attitudes toward mental health and perceived media bias in the current study is likely to be a result of a non-extreme preexisting attitude.

Compared with preexisting attitudes toward mental health, involvement seems to play a more important role in predicting perceived media bias. Although value-relevant involvement itself was not a significant moderator, the conditional effects with the two moderators in the model suggested the two involvement dimensions simultaneously enhanced the effect of preexisting attitudes in predicting perceived media bias (see Figure 2). Regression results also showed both outcome-relevant involvement ($B = .25$, $SE = .08$, $p < .001$) and value-relevant involvement ($B = .23$, $SE = .09$, $p < .01$) were significant and positive predictors of perceived media bias. As involvements in the current study were measured as to what degree participants were concerned with how people with mental health issues are treated, this result supported the argument that perceived media bias is triggered by defensive thinking, which occurs when people presume a broad and undesirable media influence on others (Gunther & Liebhart, 2006; Gunther et al., 2009). The significant direct effects of both involvement dimensions suggested that people perceive mass shooting news as hostile toward people with mental health issues not only because they'd be personally influenced by the way society treats this particular group, but also because of value concerns. Perhaps empathy for people with mental health issues kept the audience from being apathetic toward mass shooting news. However, the current study is limited by not specifying what values are involved. Future research could improve the measurement scale by specifying values relating to the mental health issues to improve the predicting power of value involvement.

Test of corrective action hypothesis

Previous research suggested that whether biased media perception leads to corrective action is contingent on a range of factors, such as perceived opinion congruence with other people (Kim et al., 2014), attitude certainty (Matthes et al., 2010), perceived persuasive intent of the source (Lim & Golan, 2011), etc. Aligning with this line of research, testing the moderated

mediation model of the current study allows us to predict intention for corrective action based not only on perceived media bias but also on individual-level variables such as attitudes and involvement. Combined, our results showed that participants would not be motivated by their prior attitude toward mental health to take part in discursive activities unless they are highly involved with the news issue and perceived mass shooting coverage is biased against people with mental health issues. In general, our results supported the corrective action hypothesis, which posits that people feel the need to make their view present in the public sphere when they perceive media effects as so negative that they could sway public opinions (Rojas, 2010).

Previous research suggested that biased media perception might not mobilize the public in general, but it does mobilize expression on controversial issues (Ho et al., 2011). For example, Tsfaty and Cohen (2005) showed that biased media perception against settlers increased the settlers' justifications of aggressions during the violent conflict of the Gaza settlement. If that is the case, the significant direct effect of perceived media bias on the intention to engage in discursive activities for mental health in the current study might indicate the controversial nature of the mental health issues in this country.

On the other hand, people facing a controversial issue may feel a threat of isolation when thinking of expressing their point of view. The fear for isolation might create a chilling effect as the theory of the spiral of silence suggested (Noelle-Neumann, 1974). Considering the threat of isolation and fear of isolation are two key antecedents of the spiral of silence, it is possible that participants in the current study were willing to engage in discursive activities for mental health because they did not perceive themselves as holding a minority opinion toward mental health, or did not fear that voicing their opinions could isolate them from the social majority. Perhaps public education has already informed people about mental health issues, so participants perceive a lot of other people also advocate for people who have mental health issues.

On the other hand, Noelle-Neumann (1974) also suggested a group of individuals with minority viewpoints can be impervious to the threats of isolation and can openly express unfavorable opinions. Research of stigma has also suggested that the stigmatized people may go to great lengths to refute stereotypes through behavioral performance (Elliott et al., 1982). Hence, it is also possible that the highly involved participants suffered from the stigma of mental health issues, therefore become more sensitive to the biased media frame and be more willing to speak out. Future studies can focus on those who are personally experiencing mental health problems and examine to what degree the intention to participate in discursive activities for mental health is driven by perceived isolation or perceived stigma that is attached to them, as well as other potential mediators between biased media perception and the intention of public discussion. It will help us better understand the psychological mechanism of the corrective action hypothesis.

The findings shed light on how to motivate the general public to speak out for people with mental health problems, which may potentially counteract the negative effects of media coverage of mass shootings blaming mental health problems. First, as biased media perception has the potential to drive

people to step out and speak for mental health issues, a public health campaign advocating for mental health should remind the public of the media bias against people with mental health issues in mass shooting news. Second, campaign managers can better understand their audience not only by being conscious of people's existing attitude toward people with mental health problems but also by looking at the way people feel involved with how society treats people with mental health problems. Public health communicators should be aware that people don't have to see individuals with mental health issues in a positive light to be able to recognize media bias and thereby become willing to advocate for mental health. Scholars studying social justice functions (e.g., Goodman, 2000) suggested that privileged groups support the rights of an oppressed group, not only because of self-interest but also because of moral principles and response empathy, both of which may be cultivated through education. Howard's (2011) study on privileged college students' involvement with social justice efforts showed that self-interest should be broadly defined as mutually beneficial. As social justice work alleviates students from a feeling of guilt of unearned privilege, validates their achievement, and convinces them that they were "compassionate, kind, and giving (p. 11)", involvement in community service activities had considerable ideological value. Our results lend support to the above-mentioned propositions by showing the significant role of outcome involvement and value involvement in driving biased media perception toward mass shooting news, which led to increased intention to engage in discursive activities concerning mental health issues. Accordingly, when designing advocating messages, health advocacy campaign managers can start with thinking about how to integrate outcome and value benefits to persuade the public to support people with mental health issues.

Limitations and future research

The results of the current study are limited by several sampling and measurement concerns. First, the use of a convenient sample limits the ability to generalize the conclusion to a broader population. Second, survey studies only reveal the associative relationship, so future studies need to employ experimental designs to test potential causal effects of involvement on biased media perception and engagement with discursive activities. Thirdly, as discussed above, the measurement of a few variables needs to be improved. For example, value involvement needs to be further specified to capture concrete value dimensions involved with different political issues. Corrective action can be expanded to include more online actions to stay current with the advancement of communication technology. With the rise of new media, research has started to examine political discussions online and in social media (e.g., Bowman & Willis, 2003; Chung et al., 2015; Lim & Golan, 2011). Future research could continue to examine people's intention to discuss mental health online.

Conclusion

Despite limitations, this study extended the discussion of the influence of biased media perception and tested the corrective

action hypothesis with a news issue that intertwined with public health concerns, which is an important domain. Future studies should continue the effort of understanding the public's sentiment toward a health issue by examining their reactions to the news. By doing so, health communicators will be able to remind the public that an important health issue needs to be discussed, or a much-discussed health issue needs to be discussed differently. Reminding the public of media bias in news will potentially help discredit the misunderstandings and introduce critical perspectives into a debate over a health topic. Understanding individuals' preexisting attitudes and involvement not only helps public health communicators better segment their audience but also helps them to promote advocacy of mental health and many other health issues in ways calculated to enhance persuasion.

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