WHAT'S NEWS

Perspectives on HIV/AIDS in the South African Media
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Compiled by
The Centre for AIDS Development, Research and Evaluation (Cadre)
Johannesburg, South Africa

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## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BACKGROUND TO THE PROJECT</strong></td>
<td>4</td>
</tr>
<tr>
<td><strong>INTRODUCTION</strong></td>
<td>4</td>
</tr>
<tr>
<td><strong>RESEARCH OBJECTIVES</strong></td>
<td>5</td>
</tr>
<tr>
<td><strong>LITERATURE REVIEW</strong></td>
<td>5</td>
</tr>
<tr>
<td><strong>RESEARCH METHODOLOGY</strong></td>
<td>6</td>
</tr>
<tr>
<td><strong>FINDINGS</strong></td>
<td>8</td>
</tr>
<tr>
<td>The advocacy role of the media vis-à-vis HIV/AIDS reporting</td>
<td>8</td>
</tr>
<tr>
<td>Strong vs weak advocacy: Information provision or agenda setting</td>
<td>9</td>
</tr>
<tr>
<td>The impact of political allegiance in defining advocacy roles</td>
<td>11</td>
</tr>
<tr>
<td>AIDS, apartheid and advocacy journalism</td>
<td>12</td>
</tr>
<tr>
<td>The politicisation of HIV/AIDS: Impact on the media’s advocacy role</td>
<td>13</td>
</tr>
<tr>
<td>Impact of HIV/AIDS media advocacy in relation to public policy</td>
<td>15</td>
</tr>
<tr>
<td><strong>Perceptions of present coverage</strong></td>
<td>16</td>
</tr>
<tr>
<td>Promoting proactive investigation and research</td>
<td>16</td>
</tr>
<tr>
<td>Increasing issues-based reporting</td>
<td>17</td>
</tr>
<tr>
<td>Enhancing educational content</td>
<td>18</td>
</tr>
<tr>
<td>Adding historical and sociocultural perspectives</td>
<td>18</td>
</tr>
<tr>
<td>Promoting constructive action</td>
<td>19</td>
</tr>
<tr>
<td><strong>Representing people with HIV/AIDS</strong></td>
<td>20</td>
</tr>
<tr>
<td>The quantity of representation</td>
<td>20</td>
</tr>
<tr>
<td>The quality of representation</td>
<td>21</td>
</tr>
<tr>
<td><strong>Constraints to improved coverage</strong></td>
<td>23</td>
</tr>
<tr>
<td>The imperative of news values</td>
<td>23</td>
</tr>
<tr>
<td>Lack of commitment to the story</td>
<td>26</td>
</tr>
<tr>
<td>Economic and resource constraints</td>
<td>27</td>
</tr>
<tr>
<td>Inadequate internal journalistic expertise</td>
<td>28</td>
</tr>
<tr>
<td>Impact of key stakeholder agendas</td>
<td>29</td>
</tr>
<tr>
<td><strong>Potential interventions for improving HIV/AIDS coverage</strong></td>
<td>31</td>
</tr>
<tr>
<td>Training</td>
<td>31</td>
</tr>
<tr>
<td>Web-based support</td>
<td>32</td>
</tr>
<tr>
<td>Editorial-level policy development</td>
<td>34</td>
</tr>
<tr>
<td>Specialist coverage vs beat coverage</td>
<td>34</td>
</tr>
<tr>
<td><strong>Conclusions</strong></td>
<td>35</td>
</tr>
<tr>
<td>Advocacy and neutrality</td>
<td>35</td>
</tr>
<tr>
<td>Advocacy and news values</td>
<td>36</td>
</tr>
<tr>
<td>Approaches to improving HIV/AIDS coverage</td>
<td>37</td>
</tr>
</tbody>
</table>
Background to the project

The Centre for AIDS Development, Research and Evaluation (Cadre) is a non-governmental organisation (NGO) committed to fast-tracking response to the HIV/AIDS epidemic through the development of strategic insights that are grounded in research. This report forms part of a number of activities under the umbrella of a Media Advocacy Project that is conducted in partnership with the Centre for Communications Programs at Johns Hopkins University.

The project includes:

- A bibliography of literature focusing on HIV/AIDS and the Media.
- A literature review on HIV/AIDS and the Media.
- An analysis of HIV/AIDS workplace policies in media institutions.
- An analysis of media institutions’ HIV/AIDS editorial policies and practices (this current report).
- An evaluation of newspaper coverage of HIV/AIDS.
- The development of a network of journalists involved in HIV/AIDS reporting.
- Collaborative work with universities.

A parallel component of the project is work in the field of entertainment education including the development of a 26-part youth drama series for SABC television, and the establishment of post-graduate courses in entertainment education in collaboration with the Centre for Cultural and Media Studies at the University of Natal (Durban). Further information is available on the Cadre website – www.cadre.org.za

Introduction

Burke said there were Three Estates in Parliament; but, in the Reporters Gallery yonder, there sat a Fourth Estate more important than they all. Carlyle, 1905

Public health battles are fought increasingly on the 10pm news, the front pages, the financial section and on talk radio. Shereen Usdin, Soul City, 2001

Media advocacy provides a framework for shifting the focus of health oriented news reporting to policy issues addressing public health. The aim of media advocacy is to increase the capacity of groups or societies to act in a manner conducive to their goals. Media advocacy is therefore part of an overall plan for achieving social change. In this regard, social change is construed as the promotion and protection of human rights and fundamental freedoms, including the right to the highest attainable standards of physical and mental health.¹

HIV/AIDS is a critical social issue that is now constantly addressed in the South Africa news media. What is unclear, however, is the extent to which such coverage is the product of news values associated with HIV/AIDS issues as opposed to being a product of a proactive agenda for contributing to social change in relation to the disease. This research aims to contribute to the development of a media advocacy approach to HIV/AIDS in South Africa by exploring key role-players’ views regarding (a) an appropriate advocacy approach, (b) constraints to fulfilling this role, (c) the limitations of current HIV/AIDS news coverage and (d) potential ways to improve it. Although targeted towards those media practitioners whose voices are represented here, this report should be of use to all those wanting to participate in the public policy process spearheaded by the popular media.

¹ Background paper for Communication for Development Roundtable, Nicaragua, November 2001, Panos Institute.
**Research objectives**

To describe and analyse the understanding of key stakeholders both within and outside print media regarding:

- The role of the popular print news media vis-à-vis HIV/AIDS.
- Perceptions regarding the extent to which this role is being fulfilled.
- Contextual constraints and barriers to fulfilling this role.
- Opportunities to operationalise this role in a coherent and sustained manner.

**Literature review**

A comprehensive literature review, entitled HIV/AIDS and the Media has already been conducted by Cadre. The introduction to this report therefore focuses specifically on the work of those authors whose views regarding the role of media advocacy provide the conceptual framework and motivation for this research.

Wallack and Dorfman (2001) argue that news media influences public policy to change the conditions that sustain public health problems. In this regard, the news media fulfils a complementary role to specific health communication campaigns, which tend to have a primary focus on increasing personal knowledge and behaviour change rather than on promoting collective action or policy change. Unlike health communication campaigns, news media advocacy can therefore expect to influence the larger issues that create an environment determining personal behaviour.

This understanding of the role of media in the promotion of public health is especially useful for framing the news media’s critical role in relation to HIV/AIDS. This advocacy role includes more than educating the public regarding appropriate individual behaviour; it includes the promotion of social change and collective action. More specifically, it includes the promotion of large-scale policy implementation, which facilitates an environment conducive to behaviour change and to managing the impact of HIV/AIDS over the long term.

The methods of media advocacy therefore have more in common with political campaigns than with public health efforts. It is indeed HIV/AIDS activists and the Treatment Action Campaign in South Africa in particular, who have been most active in harnessing the power of the news media to frame and set the HIV/AIDS agenda in South Africa. Thus media advocacy seeks to raise the volume of voices for social change and shape the sound so that it resonates with the social justice values that are the presumed basis of public health.

According to Wallack and Dorfman, media advocacy emphasises the following:

- Linking public health and social problems to inequities in social arrangements rather than to flaws in individuals.
- Changing public policy rather than personal health behaviour.
- Focusing on reaching opinion leaders and policy makers rather than those who have the ‘problem’ (i.e., the traditional audience of public health communication).
- Working with groups to increase participation and amplify their voices rather than providing health promotion messages.
- Having a primary goal of reducing the power gap rather than just filling the information gap.

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A growing questioning of behaviour change oriented public health communication has emanated directly from the difficulties of developing effective communication strategies regarding the HIV/AIDS epidemic. In the last few years, there has been growing debate over differing approaches to HIV/AIDS communication and an increasing emphasis on ‘Communication for Social Change’, an approach which attempts to tackle the underlying issues of discrimination, poverty and marginalisation seen to be driving individual behaviour and the HIV/AIDS epidemic in the first place. The principles and approach associated with communication for social change include a move ‘away from designing, testing and delivering messages and on to supporting dialogue and debate on the key issues of concern’.

The UNAIDS New Communication Framework (1999) uses this approach when it calls for the refocusing of communication interventions on the basis of the five key contextual factors of: government policy, socioeconomic status, culture, gender relations and spirituality.

**Research methodology**

Qualitative research methods were used to explore the ways in which media practices with regard to HIV/AIDS reporting are shaped and constrained by both institutional and wider social (cultural, economic and political) structures. In this way, practices become accessible to reflection, discussion and reconstruction as products of circumstances that are capable of being modified.

This research specifically aims to contribute towards changing particular media practices rather than to simply describe them in general or in the abstract. It is hoped that the research will contribute to an ongoing process of engagement whose fruits are real and will contribute to material changes in what media practitioners do, what they value and the discourses in which they understand and interpret the world.

This research seeks to move beyond a consideration of media content per se to one that includes an understanding of the context, the actors and the processes involved in facilitating effective media advocacy. In this regard, HIV/AIDS reporting is understood as having both objective and subjective determinants, both of which are necessary to understand and transform the practices concerned.

Interviews were conducted with the following key informants:

- **News media gatekeepers**: editors, news editors, and sub-editors who make daily decisions about newspaper content.
- **News media practitioners**: journalists who investigate and write about HIV/AIDS.
- **News media stakeholders**: key role-players in non-governmental organisations and government with a vested interest in HIV/AIDS coverage in the media.

A total of 27 individuals were interviewed. Although the quotations provided in the body of this report are all anonymous, the referencing system tells readers whether quotations come from journalists, editors or stakeholders. Thus, all quotations are labelled as follows:

- **Journalist number 1 - 12**: J1- J12
- **Editor number 1 - 6**: E1- E6
- **Stakeholder number 1 - 9**: S1- S9

In-depth interviews were exploratory and semi-structured.

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5 Background paper for Communication for Development Roundtable, Nicaragua, November 2001, Panos Institute.

6 Roundtable Communication Initiative (www.comminit.com), Rockefeller Foundation (www.rockfound.org)
Five influential newspapers (national and regional) from different media corporate groups, including those with the largest circulation, were chosen. An attempt was made to include newspapers targeting different population groups, as defined by race and class, across South Africa. A minimum of two in-depth interviews (lasting approximately two hours each) with journalists and editors was conducted at each newspaper. Stakeholders outside of the media sector included a variety of governmental and non-governmental role-players involved in HIV/AIDS policy implementation.

Interviews were tape-recorded, transcribed and analysed in accordance with qualitative interview data analysis methods.

The Panos Institute (2001) points out that AIDS has a history of being a highly politicised epidemic which is capable of energising social movements in ways that few other health issues can. In line with the objective of facilitating an increasing understanding of the media’s advocacy role in this regard, this report does not focus on informant’s perceptions regarding how and whether media advocacy in South Africa has contributed to individual behaviour change. Rather, the research is geared towards understanding informant’s perceptions regarding the media’s role in facilitating public policy change by way of increasing informed and inclusive public debate regarding HIV/AIDS.
Findings

The advocacy role of the media vis-à-vis HIV/AIDS reporting

Opinions regarding the role of the media in relation to the promotion of a social change agenda are complex and multi-faceted. Advocacy within the context of newspaper reporting involves an internal policy agenda that is specifically focused on social issues. It can be argued that the news media have a natural role to play in this regard, and that agenda setting is an integral part of news manufacture. On another level, agenda setting exists in the domain of individual journalists themselves.

Most interviewees argued that the media as a whole should play an advocacy role vis-à-vis HIV/AIDS. They argued that the media has a moral responsibility to inform the public about AIDS, to be critical when appropriate and to advocate constructive approaches to dealing with the epidemic:

I think that newspapers are one of the most important tools that we as a people, as a nation, as a human race, have. ... For those of us who have an opportunity to do something and don’t; I think that should be considered a crime against humanity. For having a tool, a vehicle, and not using it. E1

One of the most powerful ways of shifting public policy and resource allocation is through the mass media, through the news media specifically. ... In a way we can make a lot more impact on health through this avenue than you can if you are sitting in a hospital treating an individual patient. S7

For the most part, this advocacy role was not seen to contradict the media’s responsibility to remain neutral and objective. In this regard, there was a general tendency to differentiate between a subjective advocacy role (in the form of editorial and comment) and news reporting per se. It was argued that news reporting must remain as neutral as possible, despite any personal feelings or opinions journalists may hold:

If it’s news, it’ll end up in the paper. ... If my work was that partisan, I wouldn’t have the good relationships that I have with all role-players. J2

This view would seem to imply that news values, rather than advocacy agendas, should determine news coverage. By implication, a good journalist is someone who puts their personal views and agendas aside, talks to all role-players and represents them adequately from their own point of view. Some interviewees, however, argued that there is no clear line to be drawn between advocacy journalism and news reporting in general. They argued that objectivity and neutrality in news reporting are impossible and that personal perspectives will always determine which events and actions are highlighted, and how they are portrayed. From this perspective, advocacy is not a value. It is simply, for better or worse, inherent to media coverage:

I don’t actually agree with this thing about objective journalism. I think that’s an American construct that is totally false. ... Being objective is something taught in journalism classes and it doesn’t have any bearing on reality. J3

It was also argued that the quest for some mythical objectivity is misguided in so far as it falsely implies that credence should be given to points of view which are ‘wrong or crazy’ and lacking credibility:

I think it’s hypocritical to say – and I’m thinking of the AIDS dissident argument here - that we have to give both sides of the story when one side is being presented by a lunatic ... J3

A few informants were dismissive of the notion of an advocacy role for the media. This was on the grounds that journalism is solely concerned with ‘covering’ events
rather than ‘impacting’ upon history or the unfolding of events. On this logic, it is both naïve and inappropriate to ascribe an advocacy agenda to newspaper coverage of HIV/AIDS. As one editor put it:

I’m interested in it [AIDS] as it plays out. Because there is a story to tell and a story to cover, ... It’s like what someone said he would tell his daughter about what he did during the dotcom revolution and he said ‘I’m going to tell her that I covered it for the Wall Street Journal’. E6

The shifting imperatives of advocacy may be a matter of debate, but it is also a matter of practice that the news media are commercial concerns that are driven by profitability:

The idea that it is a moral imperative for a newspaper in the public domain to play an advocacy role is such dangerous territory. A paper’s moral imperative is to make money. That’s the reason it exists. It started because someone wanted to get rich. The media are riding the consensus, not creating it, because that’s how they make money. J6

This view was contested by most interviewees, however, who argue that the profit motive cannot be allowed to shift the basic priority of the news media away from informing and educating the public:

They have a responsibility to discuss and inform people about [HIV/AIDS], the same way they have to inform people on racism or elections. S6

Strong vs weak advocacy: Information provision or agenda setting

Perceptions regarding the nature of the media’s advocacy role vis-à-vis HIV/AIDS were not confined to interviewees’ direct responses to questions in this regard. They emerged in a haphazard and often contradictory way across the entire body of interviews. Informants tended to talk about advocacy in what can be called a strong and a weak sense. Advocacy in the strong sense includes a self-conscious recognition of the media’s power to influence, promote or fast-track collective action and/or policy agendas. The following quotations exemplify this understanding of the strong advocacy role of the media in different ways:

Yes, definitely. We are the fourth estate. Without a doubt, government is sensitive to pressure. So it will respond. I mean, if something is in the press then action on that will be taken much quicker than anything else. J1

We have the biggest influence on society, what we say and do is heard and shapes the opinions of millions of readers. It is not the duty of the media to promote a specific philosophy, but AIDS is such a big problem, we need to revolutionise the way we think. J5

The advocacy role of the media is often, however, defined in a weaker (or more limited) way: In terms of a seemingly neutral educational or informative role, defined as ‘reporting what is happening’ (ie, information-giving) rather than as a direct attempt to influence actions or the course of events (ie, agenda-setting). The following quotation is an example of advocacy understood in this weaker sense:

Journalists have to report what is happening. And the issues speak for themselves. Journalists don’t need to advocate if there are women who can’t get access to drugs. E2

Many media sector informants therefore chose to understand the advocacy role of the print news media as reporting that informs and educates people about HIV/AIDS. Such education is itself seen to be a form of advocacy in so far as it directly contributes to effective social mobilisation:
You can’t get citizens making informed contributions to public policy if they don’t know what’s going on ... or if they do participate, their participation is limited because they are not well-informed. E1

In fact, editors on the whole were noticeably circumspect with regard to defining the media’s advocacy role more strongly. Only one editor explicitly and directly referred to an advocacy role for their newspapers in terms of influencing government policy regarding HIV/AIDS:

We are unashamedly advocacy journalists. We take issue with something and we run with it. We’ve taken issue with AIDS and it’s going to be a long-term battle. E3

Reticence regarding the adoption of an explicit or strong advocacy role on the part of editors of the larger newspapers must be understood within the context of the sensitive, complex nature of the press’s evolving relationship with the post-apartheid government in South Africa.

The interview process as a whole, however, revealed that most editors and journalists in fact have a clear understanding of the powerful influence of the mass media on both public opinion and state policy development and implementation. ‘We set the agenda,’ said one editor (E6). Another editor explained:

My personal view is that newspapers ought to reflect society in general, but ought to lead society in particular in those areas such as AIDS... Don’t ask me to set the limits because I don’t know where they are. E4

Media stakeholders were more likely to assert the need for a strong media advocacy agenda than media practitioners. Thus stakeholders asserted that:

It’s not like they are there just to serve as information officers only. They must interrogate information, explain it and adopt particular positions... That’s the point of diversity, of democracy; that people can adopt different positions in relation to what they think is good and what they think is bad. As long as they are giving it fair coverage. S6

[The media] must recognise that getting proactively involved in certain issues doesn’t necessarily interfere with media independence. S7

Again, it must be pointed out that stakeholders, like media practitioners, sometimes tried to bridge what may be somewhat contradictory views regarding the nature of the media’s role and the extent to which this can or should include an advocacy agenda. Thus, during the course of the interview, the opinion expressed in the quotation above was to some extent retracted:

They can’t be advocacy groups because they have to be critical of the whole process. S6

Clearly, the nature and extent of the advocacy role of the media is contested terrain. Such issues may seem academic to the reporter intent on getting a story out, but the extent to which journalists and editors adopt strong or weak advocacy agendas vis-à-vis HIV/AIDS in South Africa is a vexed issue which is played out and negotiated in the newsroom every day. There is little doubt that any attempt to improve HIV/AIDS reporting depends on a clearer understanding of the terms of this debate as it relates to the questions of HIV/AIDS reporting. Certainly, the nature of the print media’s advocacy role in relation to HIV/AIDS should be explicitly debated, negotiated and refined by the sector as a whole before generic policy guidelines relating to HIV/AIDS reporting can usefully be drawn up.

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7 This paper, which explicitly defined its advocacy role as oppositional to government policy, is the only newspaper in this sample which is not dependent for its existence on making a profit.
It is interesting to note in this regard that it is those interviewees who were explicitly critical of government’s approach, who define the media’s advocacy role more strongly: as an attempt to increase social mobilisation and to influence the nature of government policy regarding HIV/AIDS.

The impact of political allegiance in defining advocacy roles

Data from this study indicates that allegiance to the government’s HIV/AIDS policy is in fact paramount in determining informants’ perceptions regarding the extent and nature of the advocacy role of the media regarding HIV/AIDS. In the following quotation, which limits advocacy to its weaker definition as an informative or educational role, a pro-government stance is nonetheless apparent in the emphasis placed on the health department’s agenda:

The media’s role is to educate, to write stories that educate readers as to how they can prevent HIV/AIDS, tell about various AIDS campaigns throughout the country, especially the Department of Health’s. E5

Likewise, another editor is careful to explain that HIV/AIDS advocacy will be limited to an educational agenda:

We’ll cover that [government policy] but we’ll also be careful that we don’t find ourselves being used as a political tool because that happens pretty often. … It becomes an anti-government and a racism thing. … The plan is to look at providing information about what people can do, where to go if you have this problem… It’s the same with people with disabilities; we take the same approach with our new thrust on HIV/AIDS. E1

The above definitions of the role of the media vis-à-vis AIDS, which stress information-giving as opposed to agenda-setting and opinion-making, can be contrasted with opposite viewpoints:

HIV/AIDS is the new site of struggle... If your publication is on the side of the common man, there is pressure to be brought to bear. E2

It’s quite obvious that government is completely out of step with reality so there’s a major [advocacy] role for media to play. E3

We can thus see that while some editors are circumspect in defining their newspaper’s advocacy role, they all have agendas and allegiances in this regard and have made decisions regarding whether to adopt a supportive or critical stance towards government policy. The adoption of a supportive stance, however, is not understood in terms of an active advocacy agenda. By comparison, the adoption of a critical stance towards government’s current policy is understood as the active promotion of an advocacy agenda.

It is unlikely that editors and journalists are naïve to such subtleties. News editors are certainly cognisant that news coverage, and the absence thereof, is in itself not neutral, in so far as it has clear and unavoidable effects:

When I saw [the President’s] letter, my first thought was ‘Do I really have to publish this?’ But you can’t not publish it. … E6

I have made it a point … that we don’t focus on the controversies around [the President] because this is totally not the issue… E1

Despite initial glosses delimiting advocacy to information provision rather than agenda-setting, the extent and manner in which newspapers cover the government’s

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8 It is important to recognise that allegiance to the government’s AIDS policy is not determined solely along party lines. Thus, ANC members also differ in this regard.
response to the epidemic, and the impact which this has had on both public opinion and government policy, was inevitably considered and reconsidered by almost all interviewees throughout the course of interviews.

The debate around the appropriate role of the media vis-à-vis HIV/AIDS brings numerous critical issues regarding the nature and extent of media advocacy to the fore. Balanced news coverage is still upheld as a goal to aspire to. It would appear that most informants therefore construe ‘advocacy’ as a moral imperative to report the truth – and influence opinion accordingly. It is, ultimately, differing views regarding where the truth lies that defines people’s opinions regarding what constitutes ‘objective’ journalism and what does not.

**AIDS, apartheid and advocacy journalism**

HIV/AIDS was explicitly compared to apartheid by numerous journalists pushing for a stronger advocacy agenda. This comparison, which has been used as a mobilising tool designed to generate an activist response to HIV/AIDS, was explored in some depth:

Regarding policy, just as the media under apartheid should have had an advocacy role and it did sometimes, so too with AIDS, it needs to play a role as well. J3

AIDS was compared to apartheid in the sense that newspapers have a moral commitment to cover it and to develop a strong advocacy agenda. However, it was also compared to apartheid in the sense that the media is being influenced towards self-censorship on the subject. It was therefore argued by some that AIDS is something which ‘left-wing journalists’ are aggressively covering:

I covered the Soweto uprising and as I became increasingly politicised, I increasingly became a problem journalist. What I was writing was viewed with suspicion. The same thing is happening to me with AIDS. J2

Under apartheid, we knew that journalists who covered it were going to get zapped in one way or another ... It's the same with journalists who are pursuing the AIDS story aggressively. You're persona non grata. J7

The advocacy role of the media clearly needs to be understood to be determined and/or limited by vested media interests, especially the concerns of business viability and profit:

Papers do make a difference regarding HIV/AIDS, just as they did regarding apartheid. We could have covered more about apartheid and we could have more about AIDS but there’s no such thing as an independent media. Some people will never trash President Mbeki because of a government grant or the CEO of the company doesn’t like it. These are big corporates. It would be naïve to think we have a voice of completely independent reason. That’s giving the media an sanctity they just don’t have. It’s a profit-making organisation. J6

Another journalist stated that:

The media sector is guilty of seeing it [HIV/AIDS] purely from a financial perspective, almost the same way as the drug companies are doing. J5

It was therefore argued that, while the role of the media in South Africa has changed, it has not changed very much.

They [the press] didn’t attack the [apartheid] government much in the 80s and they are not attacking the government much in the 90s either. So there’s no major change there... E3
The politicisation of HIV/AIDS: Impact on the media's advocacy role

The South African government’s controversial response to HIV/AIDS, and the resultant politicisation of HIV/AIDS, has dominated HIV/AIDS coverage by the South African media and shaped the media’s response to the epidemic.

The recent media debate around the views of President Mbeki is therefore a pivotal and dominant theme of many of the interviews and provides a natural vehicle for interviewees’ exploration of the role of the media in relation to HIV/AIDS.

Many informants argued that the prominence of what is perceived as a ‘political debate’ around HIV/AIDS has been a distinct weakness in South African press coverage of the epidemic. This point of view is shared by many media practitioners, regardless of their opinion of the government’s approach:

- It’s always the conflict with government... [The President] writes a letter questioning AIDS deaths – a massive focus. But there’s no focus on the actual AIDS deaths. J1
- Our focus has been so much on the controversial issues that we’ve actually forgotten what this whole thing is about. ... And now that [The President] is not saying anything, where are the news items in the newspapers? E1

The terms of debate raised by President Mbeki are seen to have diverted the attention of the media away from more important, but less controversial issues:

- You had everything relating to [The President] and how he was dealing with it instead of ordinary people and how they were dealing with it. S2
- You are forced to go and discuss the dissident debate – wasting time and space – when you could be discussing more serious stuff. J9

Yet the president’s views and the government’s response to HIV/AIDS are clearly of enormous national significance. The question that is raised is therefore why extensive media coverage in this regard should have provoked so much criticism from interviewees in this study. Why was the fact that the media has played an active and vigorous advocacy role in this regard not recognised, and commended?

Data from this research indicates that, from the point of view of stakeholders and journalists alike, the focus of the media on President Mbeki and resultant government policy has had unintended negative consequences. Perhaps one of the most unfortunate upshots of the politicisation of HIV/AIDS is that it has played into the racial polarisation of HIV/AIDS discourse:

- It plays into stereotypes that populations have. It plays into white stereotypes that blacks shouldn’t be running this country. It plays into stereotypes about the way that black people look at the traditional white media. They are constantly bashing the government. It does a lot of damage. S6

Post-apartheid politics is still largely defined by racial allegiance. While this situation is changing, the ANC government is still widely construed, first and foremost, as a ‘black’ government. By implication, criticism of the ANC government by the largely white-owned media is often understood as criticism of a ‘black’ government. Thus, although many opposition parties, both ‘black’ and ‘white’ have now challenged the ANC HIV/AIDS policy, the terms of the debate have remained dogged by racial affiliation, even within the media sector itself:

- There is a schism between black and white reporters covering the disease. The media is not holier than thou. J5

Certainly, many (white) journalists feel compromised in their coverage of HIV/AIDS by the racial overtones of the debate:
I’ll be very sensitive to criticise government because I don’t want to be portrayed as some white anti-government, anti-transformation, blah, blah, blah. So I possibly censor myself more than I normally would. J1

On the other hand, those who support the government’s approach to HIV/AIDS argue that it is not the views of government, but rather, of media ownership, which influences media coverage regarding HIV/AIDS:

The media deliberately misrepresenting the president is almost a crime. J5

While concerns regarding racial polarisation are foremost, concern was also expressed that the politicisation of HIV/AIDS has meant that the views of individuals on the HIV/AIDS issue are viewed through the lens of their political affiliations. In addition, it means that coverage of these views may be determined by political persuasion. Thus, in the following quotation, the views of Dr Costa Gazi are considered controversial, not because he is white, but because he belongs to the Pan-African Congress (PAC) rather than the ANC:

A lot of our ANC supporters feel that we give Costa Gazi too much space. But Costa Gazi talks sense. He deserves space. This is seen as [our newspaper] pushing a PAC line which isn’t necessarily true. The man just happens to be sensible and in the PAC. E3

The emphasis on the views of the president were also criticised on the grounds that the media had exacerbated, and even ‘partly manufactured’ the debate on the causality of HIV/AIDS. As a government spokesperson put it:

I wonder if it was that significant in our public life and whether it would have affected policy and would have had a real detrimental effect in any way or whether they were just barking at a shadow, and whether they didn’t make that shadow become more real and I can’t say... So I’m not sure but that is a question in my mind”– whether that was partly manufactured. S5

Clearly, however, the making of news is also a circular process, coming back, to some extent, to the need to play a strong ‘watchdog’ role by informing critical analysis of key issues:

President Mbeki made that comment and it could have been a storm in a teacup. The media was in a conundrum there because on the one hand, if you don’t highlight the folly and that folly gets played out into government policy, you are in big trouble. S7

The notion that the media can ‘manufacture’ a crisis of this magnitude in the public sphere is an interesting and vexed one. Arguably, however, it is not only the amount of coverage, but also the quality of emerging discourse that needs to be considered. It is perhaps the terms of the debate as it has been framed by the news media that could have been more constructive:

You know, if you ask the minister of health or the President, ‘Does HIV cause AIDS?’ [that] they are going to fall over their tongues. So it’s become a game. ...

...we’ve had very superficial reporting on it [government policy]. J7

Perhaps one of the most difficult issues raised by the media’s predominantly negative coverage of government policy regarding HIV/AIDS is that it has functioned as an issue provoking increased government and civil society opposition and as a key pivot for political opposition:

I sometimes wonder whether it in a way harmed civil society-government cooperation in a way that didn’t need to happen. S5

Conflict in debate is seen to contribute to sowing social division, to mitigate against constructive action and to account for the lack of a unified response to AIDS across
all sectors of society. This is particularly to the extent that the politicisation and the racialisation of the HIV/AIDS debate have become conflated:

Unfortunately, AIDS is not like that disaster [the US September 11 attacks] which brought people together. Because AIDS has come on a racial basis. That attack struck right at the heart of America. AIDS hasn’t [brought people together] because it’s by and large a black disease. J7

While the politicisation of HIV/AIDS in South Africa has had unintended negative consequences, it may well have had unintended positive consequences as well. It has forced ordinary citizens to grapple with the complexity of HIV/AIDS prevention and treatment issues and it has contributed to opinion-makers from all sectors and communities across the board taking stands in this regard. It has forced government into a position of genuine accountability regarding HIV/AIDS, an issue which most South Africans would arguably have chosen to ignore.

Controversy around the media’s role in the dissident debate highlights the difficulties inherent in the media’s HIV/AIDS advocacy role. These difficulties and tensions are not, however, specific to HIV/AIDS, as a government spokesperson illustrated:

Clearly, the media has a tradition of being on the side of the citizen as opposed to the state. That is in the tradition of journalism and I think we [government] should accept that there is a legitimacy to that as well. ... We are answerable, we use your money. S5

The role of the press in a democracy may always be vexatious. But the fact that both the government and the media of South Africa are accountable in relation to the crisis of HIV/AIDS is no longer contested. In fact, it can be argued that the controversy provoked by President Mbeki’s viewpoints has had a positive outcome in so far as it has provoked enormous public interest and concern regarding HIV/AIDS:

If you say white antipathy made us [undermine the President], then the result has been, ironically, for whites to take HIV seriously. I think in some way, perhaps, the position he has taken on AIDS – and the outcry it has caused – might have done more to conscientise the kind of person who reads [our newspaper]. Had he just rattled on about what a serious thing HIV was, I don’t know. J7

The politicisation of HIV/AIDS has highlighted the difficulties inherent in the relationship between the media, civil society and a democratic government. In the sensitive post-apartheid climate, where a fledgling democracy is still struggling to assert itself, the media is often stuck between a rock and a hard place in balancing a supportive and critical stance towards government.

The relationship of the press to the government and other role-players is therefore a concern that will be seen to permeate the body of this report.

Impact of HIV/ AIDS media advocacy in relation to public policy

Media practitioners and stakeholders generally feel that media coverage can and does effectively facilitate or contribute to social and policy change either in the short-term or over time:

It’s very clear that the pressure from the media shamed them into working more quickly. S7

There was nonetheless a certain amount of pessimism expressed regarding the media’s potential impact on public policy:

I think if it were possible to put pressure on the political leadership of this country to do more, one would. But clearly, that is not possible. E6
It was pointed out that while the media does influence politicians and ‘affect the way people think and see things’ it is not the media in and of itself, but in relation to a complex set of social players and historical variables, which determines what issues gain currency as social policy priorities. The relationship between media coverage and government or public policy is not straightforward:

In terms of creating public policy there are too many variables to generalise the media’s effect. It’s like saying violent films make violent people. S6

Usually there has to be a groundswell in society. Usually there has to be a reality which the media reflects. Very occasionally, I think that the media makes the issue but usually the media is reflecting the reality of what is happening on the ground. S5

**Perceptions of present coverage**

Most media sector informants maintained that while media coverage of HIV/AIDS in South Africa still leaves much to be desired, newspapers are generally committed to covering the epidemic and AIDS coverage has improved substantially over time. Likewise, stakeholders from outside the media sector argue that there has been increasing media coverage regarding HIV/AIDS on a regular basis, and that this has had a fundamentally positive effect in so far as widespread awareness of HIV/AIDS has been generated. However, stakeholders are equivocal regarding the quality of news coverage. Indeed, increasing coverage was considered by many to be ‘a mixed blessing’. (S5)

With the benefit of hindsight, it is clear that some reporting, however well-intentioned, has had unintended negative consequences. The complex repercussions of an increasing amount of highly politicised news coverage has already been alluded to. In this section, other emerging issues as they were raised by informants are addressed. It is interesting to note in this regard that, with very few exceptions, the issues raised by stakeholders outside of the media sector were also identified by practitioners within the sector. In fact, media practitioners are arguably as critically aware of the limitations of media coverage of HIV/AIDS as are key informants from the NGO sector.

**Promoting proactive investigation and research**

While it is self-evident that the role of the news media is to report on ‘what is happening out there’, many informants (including those from the media sector itself) maintained that the media should be more proactive in both uncovering and investigating stories and in defining critical issues.

The ideas should be coming out of the media but by and large the media responds to what other people are doing. It’s not often you see a newspaper coming up with a new initiative or saying, ‘This is what the epidemic is about. We’ve thought it through.’ They just respond. E3

Not all interviewees shared this view. It was argued, for example, that newspapers which advocated their own views and ‘pressed their own angles’, rather than ‘providing a voice for other people who genuinely represent some kind of a force in society’ tend to further minority interests in the country. E5

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9 It is interesting to note that the negative impact of President Mbeki’s involvement in the dissident debate was nonetheless often blamed on the media over and above other role-players, in so far as it was argued that this debate was exacerbated or even ‘partly manufactured’ by the media. E15

10 ‘I suppose there is a question of whether they have a base independently of organisation and mobilisation in society – whether they, without being a representative voice, are nonetheless a legitimate voice in terms of raising alternatives and so forth and I think that’s debated territory.’ S5
The extent to which newspapers adopt an explicit advocacy agenda will in all likelihood determine the extent to which they develop a proactive approach to HIV/AIDS. Newspapers which have facilitated investigative journalism in the area of HIV/AIDS policy have already played a critical role in exposing and criticising public policy and have thereby threatened the legitimacy of the government’s response to HIV/AIDS. In this sense, proactive and investigative journalism means, as one editor put it, that newspapers can and do function, in their own right, as ‘the flea on the Rotweiller’. E3

It remains to point out that proactive investigation and research need not and should not be limited to the interrogation of government policy. There are numerous issues regarding HIV/AIDS in South Africa that could be taken up and investigated in the media which relate only partially or tangentially to state initiatives. These can be seen to include, for example, the promotion and investigation of a multiplicity of sectoral responses.

**Increasing issues-based reporting**

While there is a place for proactive investigative journalism, the bulk of news reporting is reactive; responsive to the actions and events of agents outside of the media. This type of news reporting also needs to be understood as playing a part in an overall advocacy agenda. As suggested earlier, any reporting which contextualises actions and events in a meaningful way such that relevant issues are explained and explored potentially contributes to social action.

Many interviewees, especially stakeholders from outside the media sector, argued that one of the main limitations of news coverage of HIV/AIDS is an overemphasis on high-profile figures and events and the inadequate analysis of the key issues which make those figures and events significant:

[HIV] makes coverage when there is a high profile person or if there is an event. Even then, the issues themselves aren’t explained. S2

The value of reporting in which the significance of events, actions and utterances is considered is apparent. However, this generally involves a degree of explanation, interpretation and analysis which is often seen to lie beyond the scope of news reporting and/or to decrease news values:

There’s an immediate assumption that if it’s analytical, it’s boring or it’s difficult to read. And that’s not the case. S6

In this regard, stakeholders recognise that superficial reporting must be accepted as a necessary evil; in so far as (a) HIV/AIDS expertise remains undeveloped and (b) quality and quantity inevitably diverge.

They nonetheless argued that news should always be presented in terms of the underlying issues at stake such that the significance of events is made explicit. Too many journalists continue to gloss over issues and to display unacceptable gaps in their knowledge, such that most South Africans still ‘don’t understand the absolute hideousness of what’s happening’ (S6).

Increased HIV/AIDS related knowledge and experience among non-specialised journalists would clearly contribute significantly to the quality of news reporting on HIV/AIDS. However, it would also be beneficial if news practitioners committed themselves explicitly to HIV/AIDS coverage which aims to contribute to the public understanding of HIV-related issues. In this way, all HIV/AIDS story-ideas would be explicitly considered through the lens of both whether and why readers need to know something. As one journalist pointed out:
Every six months you hear, ‘SA vaccine tests on humans’ ... But why is this coming out now? Is someone needing the publicity? As a journalist you need to think, ‘Hang on’. It gives people false hope and a false sense of security as well. J3

**Enhancing educational content**

Various interviewees pointed out that there is an urgent need to better educate readers regarding the nature, course and treatment of HIV/AIDS such that both significant events and emerging issues and controversies make sense to the lay public. While there is already a substantial amount of health promoting coverage in the press, this tends to focus on the prevention of HIV infection and the promotion of tolerance, care and support for those infected and affected. Such educational coverage is most often the work of governmental and non-governmental organisations that pursue HIV/AIDS advocacy agenda’s utilising a range of techniques to engage the media. It was therefore argued that the potential to integrate so-called ‘education’ with ‘news’ could easily be better exploited. As one journalist pointed out:

> In every article, we could explain a basic fact about HIV or HIV transmission or ARV’s or whatever, because then it just reinforces knowledge. J1

**Adding historical and sociocultural perspectives**

Inadequate historical perspectives and analysis in HIV/AIDS reporting is seen to result in a limited, biased and simplistic understanding of both HIV/AIDS prevention and care:

> The media should assist to give a holistic understanding of where it [HIV/AIDS] comes from, ... why it’s different and why so many people are infected. The media need to raise these issues, as controversial and touchy as they may be. J5

That the historical context of HIV/AIDS should be viewed as ‘controversial and touchy’ itself needs to be understood in an historical context where journalists who do attempt to unpack issues such as why HIV has spread so rapidly in South Africa are treading on a minefield – especially regarding the issue of sexual behaviour:

> I’ve faced criticism of people saying, ‘You are saying that blacks are promiscuous’. I’m not saying that. J3

South Africa’s apartheid history also means that the distinction between race and class in South Africa is extremely murky such that the issue of who gets HIV/AIDS and why they become infected is particularly loaded. The result is that journalists find themselves stuck between a rock and a hard place when trying to describe the demographics of the epidemic. This dilemma has been exacerbated by the widespread perception that President Mbeki is arguing that poverty rather than HIV causes AIDS, which makes it extremely difficult to untangle the terms of the debate.12 If the media emphasise the class-related determinants of the disease, they are weary of being interpreted as promoting the president’s dissident stance. On the other hand, if they leave the class issue out of the equation, they stand accused of racism.

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11 News stories on HIV/AIDS do not necessarily advance exponentially. Instead, it is not unusual to see the same story with the same angles and uncritical reportage repeating themselves at regular intervals. Whatever their obvious benefits the development of an HIV/AIDS vaccine for widespread public use is many years away, and at issue is what happens in the meantime.

12 The South African Human Rights Commission’s third economic and social rights report states that 20 million South Africans live below the poverty line.
That HIV/AIDS needs to be better understood within a sociocultural and historical context is nonetheless clear. Understanding the spread of HIV/AIDS, and the sociocultural realities determining behaviour contributes significantly to the understanding of both effective prevention and care and to the destigmatisation of the disease. Promoting understanding and debate in this regard is definitely an essential aspect of any AIDS advocacy agenda.

**Promoting constructive action**

The ongoing presentation of the HIV/AIDS epidemic as an unfolding personal and social tragedy has heightened its news value but has resulted in sensationalist news coverage and the unintended promotion of an attitude of group helplessness in the face of the epidemic:

> Often you get the sense that it’s just this outrageous pandemic and that there is nothing we can do... There is far too much reporting that simply says, ‘Okay, the latest statistics show that one in three people are HIV positive and that in five years time the country will be down the toilet because everyone is going to be dying of AIDS.’ How does that help us deal with the issue? What is the purpose of telling us? Is it meant to scare us into something? Because I don’t think that is valid anymore - Making people afraid makes them helpless, it doesn’t promote positive action. S6

While a degree of doom-and-gloom sensationalism in the interests of news values is accepted as a necessary evil, many editors and journalists nonetheless agree that the sensationalism which has accompanied HIV/AIDS reporting has negative consequences in so far as it increases stigma and fear:

> I think that we have contributed significantly to the fear about HIV and the paralysis in terms of doing something. We use glib terms. We refer to AIDS as a death sentence. J7

It was argued that readers should be empowered through the provision of relevant information to deal constructively with the epidemic and that journalist's should therefore attempt to cover the innovative ways in which individuals and communities are coping with HIV and AIDS:

> There’s such heroism out there, and such triumph against the odds and extraordinary faith in life from people who are dying or helping people who are dying. It’s the same spirit that brought the apartheid system down, but it’s not celebrated in the same way, which is very sad. S3

Journalists argue that the perpetuation of a ‘doom and gloom’ scenario is exacerbated by editorial perceptions of what is ‘newsworthy’:

> Instead of coping stories ... the editor wants me to cover suppurating sores and pus. J2

> Unfortunately, the negative stories are more newsworthy... ‘[W]e ran a big success story as a small story on page three and not as a page one lead [because] the editor said, ‘... it wouldn’t have sold the paper’. So I mean, that is your bottom line, and people are quite frank about that. J10

Journalists and editors alike are well aware that they are often accused of ‘sensationalising’ the epidemic in order to improve the news value of HIV/AIDS stories to achieve increased news coverage or better placement of copy. In this regard, it was pointed out that journalists often need to resort to so-called ‘sensationalism’ in order to get space:
Sensationalise. Well, if that means that you’re actually getting your message across then I don’t care. E4

The idea that ‘no news is good news’ often implicitly translates into a conception of news values whereby ‘good news is no news’. Frustration in this regard on the part of key stakeholders wanting to promote what they perceive to be constructive engagement with the HIV epidemic is inevitable.

To the extent that controversy is a key ingredient in defining news values, interventions that are uncontested are not easily promoted via the news media. This confounds the media’s relationship, not only to government, but to civil society and the NGO sector as well:

We have a conflict of interests when NGOs want us to cover uncontroversial stuff but won’t give us access to the controversial stuff. J6

The news value of sensationalist ‘doom and gloom’ reporting is, however, not unambiguous. On the one hand, there is a tendency to perceive horror stories as having more news value than so-called ‘success stories’. On the other hand, there is a clear sense that reader fatigue has set in and that people have had their fill of reading about the human pain and suffering caused by HIV/AIDS:13

Life is cruel and dark and there’s only so much we want to read about it. J6

Some concern was nevertheless voiced about an over-correction in this regard; such that only the positive and best aspects of our response to the epidemic is presented:

I think we also need to criticise where there’s grounds for criticism and unfortunately, there’s a lot. J3

The criticism is that we always write AIDS as a negative story. But, on the other hand, we can’t give false hope either. J2

Clearly, there is a need to profile both the positive and the negative aspects of our response to the HIV/AIDS epidemic. In this regard, the relationship between news-values and a constructive advocacy agenda needs to be considered.

Representing people with HIV/ AIDS

The extent and manner in which the media has represented people living with HIV/AIDS was raised by many informants. Both the quantity and quality of such representations were discussed.

The quantity of representation

Many interviewees argued that the voices of HIV positive people regarding AIDS-related issues are few and far between. It was maintained that the media has tended to feature ‘high-profile’ PWAs rather than ‘ordinary people’:

There must be other people who have disclosed, but it seems the media is just too lazy to look for it. S4

Clearly, the media’s task in this regard is complicated by the lack of disclosure attendant upon such a stigmatised disease:

What we often struggle to do is put a face to AIDS. ... We actually do feel very strongly that by putting peoples names and faces to AIDS we are going to destigmatise it a lot; but we struggle with that. S3

13 In this regard, see ‘Constraints to improved coverage’ on page 23.
Lack of disclosure makes it particularly difficult to expose human rights abuses in the workplace or in hospitals and clinics:

At the Tembisa clinic, they have one queue for HIV positive people and one for the rest, but I couldn’t prove it because no one would admit to being HIV positive. And it’s the same with workplace issues, the human rights abuses there. People just don’t want to be identified. J10

Some journalists are critical of NGOs and professionals who tend to conceptualise their role in terms of shielding their clients from media scrutiny rather than in terms of encouraging and empowering them to talk to the media.14 For their part, NGOs pointed out that breaches of confidentiality are still common:

We get a regular number of complaints from people every month who have been interviewed and requested that their identity not be disclosed. Or doing a story on hospitals and HIV and they will pan across the ward and show people’s faces. There’s not been a lot of thought about the need to protect people’s privacy.... S1

Clearly, journalists and NGOs need to establish a mutually productive relationship that facilitates ethical journalistic access to people (both ‘ordinary’ and ‘high-profile’ citizens) living with HIV/AIDS who are willing and able to publicly disclose their HIV status.

Another ethical issue regarding the representation of people with HIV/AIDS which was raised by many informants concerned the issue of ‘outing’ public figures. Some editors and journalists argued that the outing of public figures is an important and legitimate way in which to destigmatise HIV/AIDS. However, others argued that this is an opportunistic excuse for sensationalist reporting. More specifically, it was argued that coerced disclosure is counter-productive and ‘smacks of hypocrisy’ in so far as prominent journalists have themselves not disclosed their HIV status.

While it is legal to disclose the HIV status of someone already dead, there remain differences of opinion regarding both the ethics and the value of outing people posthumously. As one stakeholder pointed out:

The question that you have to ask is, ‘What is the purpose of saying that he died of AIDS? Is it for the dramatic effect or is it to educate people that anyone can get HIV?’ ... What annoys me is that they don’t say they are publishing this knowing that these are the issues. S6

The quality of representation

Initial media coverage of the epidemic in South Africa tended to feature the gay epidemic to the exclusion of the heterosexual one, such that white gay men remained the face of AIDS long after the extent of the heterosexual epidemic had become apparent. While this has been rectified, the South African media now stands accused of portraying HIV/AIDS as a predominantly poor, black (and female) disease:

AIDS is depicted as a starving black man with flies around his mouth. The same way that Africa is presented. S6

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14 As a result, journalists hear lots of stories ‘off the record’ but are blocked from direct access to the people living with HIV/AIDS. It is often these ‘off the record’ human interest stories told by health professionals caring for those with HIV/AIDS that are the most poignant examples of the kinds of issues which journalists need to expose. One example given of such off the record information concerned a white family who could only afford antiretroviral drugs for one but not both parents. They therefore had to attach relative value to each other’s lives: ‘They were actually sent home by the doctor to draw up a checklist of which one must survive and look after the children. ... Our readers need to know that these are major ethical issues gripping the nation.’ E3
Unfortunately, this is something the media cannot easily rectify in so far as available data indicates that the epidemic does, indeed, affect different groups disproportionately. The publicly available data regarding HIV infection is derived from pregnant women attending public sector antenatal clinics. This is the main source of information for journalists to HIV positive people:

If you talk about AIDS babies and you show black babies, which is all you’ll get at a state hospital, it becomes a huge issue. Like, ‘Why only pictures of black babies?’ J4

Some interviewees felt there is a distinct over-sensitivity regarding racial stereotyping:

Most of the population is black, so therefore most people with AIDS in South Africa will be black on a pure numbers basis... S6

We’re still very new at this non-racial thing. So I think, you know, we are a bit twitchy about it. E4

Journalists are accused of not using examples of ordinary citizens, but when they do, they are attacked for ‘stereotyping’. As one editor pointed out, stereotyping is hard to avoid:

I find it very hard not to stereotype on anything. We try not to but there are always stereotypical examples coming up. I’m afraid that’s the way it is. It is a problem and we try to be sensitive to it but it’s always going to be there. Whether it’s gender or it’s race. E4

In any event, informants are not all in agreement regarding the preponderance of black as opposed to white HIV positive people in the media. Thus, while most interviewees argued that there is a tendency to show only ‘black faces’, it was also argued that those living with HIV and AIDS who have disclosed their status in the media have often tended to be white. It seems likely that it is not necessarily the relative number of white or black people with HIV who are portrayed by the media but rather, the way in which they are represented which is informed by, or contributes to, racial stereotyping. Thus, images of Edwin Cameron, a Constitutional Court judge with HIV, focus on how successful and courageous he is while coverage of ordinary black people tend to show them as disempowered victims of the disease. The story of Nkosi Johnson’s ‘rescue’ by a white woman again re-enforces this stereotype:

[There is] an impression of HIV/AIDS as being particularly disempowering of black people. It has racial implications in terms of suggesting – this is what happens to blacks if they get the disease – they are useless, turn to crime, rape. Whereas white people who get it are clever because they carry on working and fight the disease ... We don’t see stories about people who are in townships and unemployed going to work as volunteers, as caregivers. They are earning no money and that requires a level of courage ... S6

While most interviewees are concerned about the racial representation and misrepresentation of the face of HIV/AIDS, concern was also expressed regarding the portrayal of people with HIV/AIDS as either ‘promiscuous’ or as ‘helpless victims’. It was argued that such stereotyping undermines prevention messages by facilitating denial of risk of infection:

The media has played a role in perpetuating the idea that it only happens to other people. S3

Journalists need to adjust the way they report on these things. This is not a matter of stifling freedom of speech. S6

The representation of people with HIV/AIDS as either ‘promiscuous’ (ie, guilty) or ‘victimised’ (ie, innocent and helpless) is also seen to perpetuate stigma and discrimination.
One stakeholder felt the media should explicitly engage with the public on issues such as appropriate and non-stigmatising terminology:

Write something saying, ‘Are people with HIV/AIDS victims, are they sufferers, are they a burden, or a hero?’ Discuss it in the media so as soon as you do that, people start thinking, ‘Maybe I shouldn’t call so and so a victim because maybe this is more complex than I thought’. A story on the way you write these things is a fascinating idea in itself. 56

None of the media practitioners in this study argue that the imperative to represent people living with the disease constructively contradicts the imperative for journalistic objectivity. This suggests that the space for the development of an advocacy agenda regarding HIV/AIDS may be far greater in the South African media than it may appear at first sight.

It seems likely that policy guidelines regarding HIV/AIDS reporting which include a framework which precludes unnecessary stereotyping and highlights the necessity for an explicit social agenda in this regard would be acceptable to the South African media sector. Such guidelines would facilitate the development of an explicit recognition of the South Africa popular media’s critical advocacy role in defining constructive and non-stigmatising representations of people living with HIV/AIDS. The precedent in this regard has already been established within the South African media, which has generally recognised the necessity to avoid the sort of unnecessary racial identifiers in crime reporting which re-enforce racial stereotyping. Such guidelines should explicitly relate to race, class, gender, individual sexual behaviour and the ‘victimisation’ of those with HIV/AIDS.

**Constraints to improved coverage**

In this section, interviewees’ views regarding four primary constraints to improved media coverage and increased media advocacy regarding HIV/AIDS are explored. These are variously:

- the imperative of news values;
- economic constraints and inadequate journalistic expertise;
- lack of media commitment to the story;
- the impact of key stakeholder agendas.

**The imperative of news values**

Apart from some aspects of government’s controversial approach to HIV/AIDS, the disease is generally considered to have low news value for a variety of reasons which will be explored in this section.

The concept of news value describes that ‘value’ which a potential buyer/reader of news ascribes to any particular story:

> You write for your audience ... what you think they are going to be interested in, you might be wrong. E6

**HIV/AIDS is not about me**

Any issue that has no direct impact upon the individual reader was seen by media sector informants to have low news value. The epidemic was still not considered to have major news value for readers of newspapers catering for a predominantly middle and upper class market who are perceived to be less severely affected by the epidemic:
I don’t think AIDS is going to kill our readers in the same proportion that it might kill other classes of people. The threat for our readership is an economic one, primarily. E4

As a result, educational material in some newspapers is geared quite specifically towards the perceived needs of the economic elite:

*We exhort people with servants, for example, to speak to their servants about AIDS.* E4

*What makes anti-retroviral use news to my readers is that it extends the productive lifespan of the workforce.* J2

**HIV/AIDS is not amusing and engaging**

Regardless of whether HIV/AIDS impacts directly on specific groups of readers or not, it was argued that people across the board are disinclined to read about an ongoing social and developmental problem such as HIV/AIDS:

*It’s a lot more about what people want than what they need. Most people buy [our newspaper] for the job adverts. Or to be titillated. So after a while, you give up trying to change the world. It’s too depressing.* J6

The issue of what people want to read about, as opposed to what they need to read about, is highlighted by the way in which the circulation figures of most newspapers soared because of coverage of the local *Big Brother* television show:

*If someone shits in the garden in Big Brother, everyone will rush out to buy the paper and find out who. Everyone already knows AIDS kills you. But who parked the putty in the garden?* J6

One editor maintained, however, that the ‘give-the-reader-what-they-want’ argument is a red herring:

*It means I’d have to print celebrity divorces, and soccer on the front page… No editor ever does that. We do give readers what we think they need not only what they want. What they want is salacious gossip.* E3

**HIV/AIDS is not new**

Perhaps the main factor detracting from the news value of HIV/AIDS is the perception that – as an ongoing epidemic – it is not ‘new’. Journalists pointed out that while HIV/AIDS is undoubtedly the big South African story of our times, it is nonetheless fast becoming an ‘everyday’ story, albeit a tragic one. Journalist and editors alike argued that they were already struggling to find fresh angles:

*I mean how do you write about AIDS orphans in a different way – How do you? I mean, ‘AIDS orphans are all alone, they don’t have resources’. What else can you say?* J1

While unexpected and tangibly violent suffering is fascinating to all, long-term and drawn-out social problems become tedious. HIV coverage is therefore commonly compared to crime reporting in South Africa in so far as they are both perceived to be immutable social problems with ever decreasing news value:

*HIV is boring. People have stopped writing about crime for the same reason. People would stop buying the paper.* J11

Journalists covering the impact of apartheid on black South Africans were confronted with the same problem:

*They’d refer in the newsrooms to ‘blacks in the rain’ stories. You were just writing about people who were endlessly suffering.* J7
Perceptions of the unchanging nature of the unfolding tragedy of HIV/AIDS results in what the industry calls ‘reader fatigue’ which appears to have set in before the real story of HIV/AIDS has even started to be told.

People see ‘AIDS’ and their eyes glaze over. They don’t want to read about it.

J10

This appears to be as true for some editors, even as readers:

I find myself not reading most AIDS stories. ... The story doesn’t change. I have decided where I stand on the argument. I have seen the graphs. I know how many people are going to die between now and 2010. E4

While certain aspects of the HIV/AIDS story may remain unchanged over time, journalists could avoid repetition if they attempted to engage the story in all its complex aspects and root out new and different nuances and perspectives. A seemingly stagnant news story can therefore change if journalists and editors make a conscious effort to find new angles and related issues to explore.

HIV/AIDS is not dramatic enough

The HIV/AIDS epidemic may lack news value in so far as it fails to meet the dramatic requirements of other ongoing causes of large-scale mortality, such as war:

If somebody took weapons and killed 250 000 people last year – which is how many people we lost to this virus – most newspapers would devote most of their journalists to it. Money would not be an object. J7

The human drama of HIV/AIDS is minimised because the impact of the disease on individuals and society alike is slow and gradual, albeit potentially devastating. HIV/AIDS thus lacks the drama associated with sudden and unexpected death. Its greatest impact is upon the poor and marginalised, who are not immediately visible in the media radar. The HIV/AIDS tragedy is therefore nuanced by the peculiarities of narrow perceptions of news values:

If someone’s burnt because of their status, it will be covered any time of the year. Or if twins are born, one negative and one positive, it will be covered. J3

News value vs education and advocacy

Another reason why much HIV/AIDS reporting is seen to lack news value is because it is seen to have an explicitly educational agenda. Thus, on the one hand, informants argued that educating the public about HIV/AIDS is an essential component of the media’s advocacy role. On the other, they argued that attempts to influence journalistic coverage towards an educational agenda are based on a misunderstanding of the journalist’s role and of news values:

You can only educate if it’s news. You need to hang it on news. I have to find a way to grab the reader. J1

Is this the sort of thing you would say over a dinner table? ... Worthy stuff can be newsworthy but isn’t always on its own. J3

The challenge raised here is the very same challenge presently confronting HIV/AIDS education in general. People are unlikely to read anything, including educational material, if it is perceived to be boring. As a result, health promoters often attempt to locate educational material within entertainment formats such as

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15 In MediaChannel’s Roundtable on AIDS Media, South African journalist Judith Soal stated that: ‘A typical editor’s quote will be: “I don’t want worthy, give me sexy.” That’s what so many NGOs don’t seem to understand. They think that just because the issues are so important we should be running educational stories every day.’
TV soap operas and other dramatic vehicles. In fact, the location of AIDS education as news (a product people want and buy) could therefore be seen as a strength rather than a limitation inherent in the use of the popular media for HIV/AIDS education.

**Dealing with the problem of news values**

Although the perceived failure of HIV to meet the criteria of news value was identified as a problem, it was felt that newspapers nonetheless have a moral imperative to keep the epidemic in the news:

> It's a problem but it's a problem we're ignoring, actually. We can sell newspapers in other ways but we will hope that people keep reading the AIDS stories. E4

Rather than continue to ignore the problem, the media may require a strategic proactive advocacy agenda in order to ensure that the ‘news value’ of HIV/AIDS stories is maintained and increased. Finding and developing the news value of HIV/AIDS will require additional commitment and initiative from the media sector itself. It remains to point out that reader-fatigue is in all likelihood determined by the quality as well as the quantity of journalistic coverage.

**Lack of commitment to the story**

While news values are important, what is equally important is the interest, or lack thereof, of the media sector itself. Journalists who have chosen to cover HIV/AIDS accused their editors of failing to appreciate the scope of the HIV/AIDS story:

> Partly, the editors think that readers aren't interested. I say, well, they ought to be and we need to find ways to make them interested. J2

> There's no direction coming from editors or news editors to say we need to cover this story more aggressively, let's get a different angle. J7

Some stakeholders were equally sceptical of editorial commitment and argued that editors merely pay 'lip service' to the epidemic.

For their part, editors argued that journalists do not prioritise the story:

> The staff themselves get bored with it. They reflect society and get bored with it. E4

Thus while editors tend to blame their staff, and journalists tend to blame their editors, everyone is in agreement that there is a lack of interest in the HIV/AIDS story within the newsroom itself. Explanations of this disinterest often hinge on the same analysis – people's failure to appreciate the extent to which HIV/AIDS affects them personally:

> I think that the media, both black and white, has to be confronted with it personally before they change their attitude. It's only if one's relatives die or become infected that attitudes change. The coverage shows that the whole country, including journalists, are in a pattern of denial. J7

For those who have not yet been directly affected, HIV/AIDS coverage entails a difficult personal and political commitment to the most marginalised in society:

> We who live in conditions of comfort don't actually want to deal with the poor. We wish they would suffer quietly and die quietly. J7

On the other hand, it is arguable that black journalists from communities hard hit by the virus may be equally reserved on the topic of HIV/AIDS:
I think that lots of people who live in communities that are most affected are terrified of this virus and so, in some way, if you stay away from it, maybe it won’t come to you. J7

AIDS is also an uncomfortable subject to cover in so far as it is about sexuality, culture and gender relations:

Black male reporters don’t want to cover sensitive issues around sexual and cultural issues, like men sleeping around... And if it’s white people who are always doing the commenting regarding those who are infected, commenting on black people's problems, it also becomes a huge issue. J4

It’s about my behaviour... Am I going out and having a few drinks and ... sleeping [around] without a condom? J3

**Economic and resource constraints**

One of the biggest constraints to both increasing and improving HIV/AIDS coverage is diminishing financial resources. Growing economic constraints caused by diminished advertising revenue were seen by informants to be having a negative impact on the extent of news coverage in general. This was seen to be especially true for HIV/AIDS specific coverage, which generally falls within the ambit of the health beat and is still seen as ‘soft’ news with limited news value.

It was pointed out that the legislation preventing cigarette advertising has resulted in the loss of millions of rands in revenue for the media industry. This is compounded by the impact of HIV/AIDS on business and, by implication, on advertising revenue; resulting in smaller editions with less space for news than was previously the case.

Investigative journalism and feature writing typically requires that journalists spend time away from the newsroom, and this is far more costly than desk reporting:

They want us to be telephone and fax and email journalists. You can never ever report properly unless you’re going out into the community. J3

Certainly, reporters who want to cover stories in distant areas generally have to do so at their own expense. Thus even those journalists with the luxury of weekly deadlines do not tend to cover HIV/AIDS outside of the major urban areas despite the fact that the epidemic impacts most severely in the poorest and most remote areas of the country.

Budget cuts were also seen to result in the ‘juniorisation’ of newsrooms, such that most South African journalists are under 25 or at most 30 years of age. Again, this is especially true of the health beat which is still perceived as a ‘junior’ beat despite the fact that HIV/AIDS is an extremely complex and multi-faceted problem that requires experience and specialised knowledge.

Economic constraints impact not only on coverage of outlying areas, but on distribution to economically disadvantaged and rural areas where the need for education regarding HIV/AIDS is, unfortunately, greatest:

We reach maybe 3 million out of 40 or 50 million South Africans. J6

It is not just the size but also the spending power of a newspapers’ readership that determines its advertising revenue and by implication, its profits. As a result, most newspapers are carefully niched towards higher income earners:

We are not going after the woman in the Mitchell’s Plain bus or the man in the Alex taxi. Of course, it would be nice if they picked up a copy occasionally but they are not the readership we are after – which is AB income black. E3
While this limits the educational reach of newspapers, it does not necessarily detract from the advocacy role which newspapers have to play. This is especially given that publications with a large circulation are seen to cover HIV/AIDS most simplistically and sensationalistically.

By comparison, newspapers targeting upper income levels are perceived to have ‘better’ content and are read by policy makers in government and business as well as by opinion makers in the civil and NGO sector, including leaders of trade union and religious movements:

We can still, despite our small circulation, have massive impact on the way AIDS is covered in South Africa. ... The Minister of Education reads it ... the most powerful people in the country read it. Other papers pick up on our stories. We can still make news. E3

It remains to point out, as one journalist argued, that while economic constraints are a reality, they are also used as an excuse by journalists who are insufficiently ‘committed’:

We are not getting the time or the money. But when we covered the anti-apartheid struggle, we didn’t have the time and money ... So the arguments are rubbish. It’s all about personal commitment to the story. ... We can use lots of excuses. J7

**Inadequate internal journalistic expertise**

It was argued that the potential to improve coverage of the epidemic is highly dependent upon the development of journalistic competence. Journalistic competence impacts directly on the ability of the media to develop a strong advocacy agenda:

In a nutshell, I think journalists have to be trained. At the moment, if you get a whole bunch of rubbishy reports, nobody really cares. Because they [the government] don’t have to respond to things that are not very intelligent. J1

Editors argued, however, that their newspapers have limited capacity or resources to develop HIV/AIDS specific competencies. Some of those newspapers that do currently have beat-specific coverage are in fact considering doing away with beats altogether because of staff and funding crises on most papers. The larger newspaper groups are considering pooling their journalists such that beat-specific journalists provide coverage across the entire group’s newspapers. Thus, one health journalist will supply all the newspapers (morning, afternoon and weeklies) of a particular group. At the moment, many health-specific journalists are funded by the Kaiser Family Foundation rather than by newspapers themselves. This model has provided South Africa with a limited pool of health journalists with sufficient dedicated time to develop expertise in the area of HIV/AIDS coverage. However, this model is gradually being replaced by the Kaiser Foundation with the development of Health-e, a health-specific news agency supplying copy to all South African newspapers. As a separate news agency with dedicated donor funding, the Health-e news agency is enjoying growing respect across the sector. It was pointed out that Health-e is well resourced to develop features or to follow ‘more arcane policy issues’. E2

However, some argued that there are disadvantages as well as advantages to the outsourcing of AIDS stories. In this regard, it was argued that the outsourcing of HIV/AIDS stories to Health-e might prove to be counter-productive for developing internal company expertise. Another disadvantage of locating AIDS journalistic expertise outside of specific newsrooms is that outside agencies ‘are not in the loop’ and have little clout regarding story use and placement. In addition, it was pointed out that outside agencies write generically and do not always conform to the specific stylistic requirements of individual newspapers.
Impact of key stakeholder agendas

The politicisation of HIV/AIDS has highlighted the difficulties inherent in the relationship between the media, civil society and a fledgling democratic government. In this regard, the need to guard against becoming implicated in key stakeholders’ agendas is clearly integral to journalism.

There’s always pressure. There’s pressure from all sides. There’s pressure from government. We have to be scrupulous. We can’t be tainted with accusations of bias towards a particular organisation or influence. J8

While pressure from the government was of paramount concern to some, the AIDS fraternity was also accused of wanting to push their specific agenda:

The AIDS fraternity sees itself as experts but they are lobby-groups who want to push their agenda. NGOs want to tell you what to say. They judge the media, not according to news value, but according to whether there own issues are being aired. J4

Like attitudes towards advocacy agendas, informants’ attitudes towards outside ‘influence’ or ‘pressure’ are often determined by their views regarding key stakeholders’ relative approaches to HIV/AIDS. Thus editors and journalists who adopt a pro-Mbeki stance regarding the government’s approach to HIV/AIDS generally do not view the government to have any undue influence on their coverage.

On the other hand, while it was pointed out that government has not exerted direct pressure on newspapers to change their views, newspapers perceived to be hostile to the government argued that they are generally cold-shouldered. The result is non-communication and increased polarisation between government and newspapers perceived to be antagonistic:16

We don’t have direct pressure from government and we don’t have direct criticism ether; but they sulk. E3

It was pointed out by all journalists however – and not only those adopting an anti-government stance – that it is difficult to get critical comment or even accurate information on HIV/AIDS, especially regarding controversial issues, from government sources:

They are trying to do their jobs … telling a journalist what is really happening will handicap their work in the future. J3

It makes it very, very difficult to get leaks because people’s necks are really on the line. J9

This was also seen to be true of non-governmental sources:

The research community doesn’t say Nada [nothing]. Their funding depends on it so they don’t want to speak. J2

Unfortunately, ongoing criticism of the government has resulted in a generalised fear of engagement with the media, especially on the part of governmental informants, such that communication regarding the government’s point of view can be said to have decreased. As a government communications division stakeholder pointed out:

If you make a comment you’re attacked on all sides because it’s going to somehow affect someone. … Most people are very nervous of the media. On the one hand they dislike it and on the other hand they defy it. So it’s a completely unrealistic engagement … people are only too glad to leave it in the hands of people like ourselves. S5

16 Many government departments and ministries, as well as the President of the country, refuse to talk to one of the newspapers concerned.
Journalists who have taken issue with the government’s approach to HIV/AIDS therefore identified President Mbeki’s views on HIV/AIDS as a barrier to the effective mobilisation of the media in an advocacy role. This ranges from the suppression of information to the perceived intimidation of those (both sources and journalists) expressing criticism of government policy.

The impact on the quality of media coverage is arguably substantial in so far as quotable sources are few and far between:

> When a reality is silenced or censored then you will find what a difficulty the media has - it is really hard to create news with no agency attached to it. S5

The government’s approach is also seen to impact on newspaper coverage in so far as it discourages people from publicly disclosing their HIV status in the popular media:

> Given the climate, where government is trying to suppress information about HIV and the seriousness of it, it means that there isn’t a climate for open discussion about HIV/AIDS and about your own HIV status. J1

One editor maintained, however, that throwing blame on the government regarding HIV/AIDS coverage in the media is inappropriate:

> It’s just an excuse, a defence mechanism that we are finding as a diversion. If Thabo Mbeki doesn’t believe in AIDS, what stops me from doing what I can, what stops us as a newspaper from doing what we can do? E1

In any event, many journalists say their coverage is determined at editorial and newsroom level, rather than by outside influences:

> Also, given the sub-editor’s support for government, I’ve been blatantly, blatantly censored. Everyone critical got sidelined. J4

> Our chief-sub was supportive of Mbeki so it influenced our coverage at the level of selection and placement. It was a blockage. E2

On the other hand, it was argued that this is to some extent mediated by democratic decision-making procedures within newspapers such that ‘reasonably balanced output’ was ensured (E5).

It was also maintained that journalists can and do push their own agendas and that they largely determine their own story-ideas:

> It’s very easy to blame the editors but most stories don’t come from editors at all. Editors actually have very little to do with what appears in papers. Editors are basically people who go to lunch and meetings and oversee, sometimes, the final product. J9

In this regard, it remains to point out that journalist’s are subject to the same personal and experiential influences as everybody else.

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**Potential interventions for improving HIV/ AIDS coverage**

Interviewees’ views regarding specific potential interventions for improving HIV/AIDS print media coverage were elicited. In particular, views regarding the following interventions were explored:

- training workshops and journalism training;
- an HIV specific media website;
- HIV/AIDS reporting guidelines.

It should be noted that many of these views are critical of past initiatives and that scepticism regarding potential future interventions is also expressed. Journalists’
reservations regarding such initiatives should be understood as a positive engagement – an attempt to contribute constructively to the development of future interventions.

**Training**

Informants clearly recognise a need for increased competence in the content area of HIV/AIDS. Almost all journalists expressed a need for increasing their biomedical and statistical expertise in particular. Yet, when asked whether training workshops on the topic of HIV/AIDS for journalists might be valuable, many journalists expressed reservations in this regard:

I think these training programmes are a dime a dozen and most of them are useless. The only way you learn about this virus is the way that we learn about every other story that we do: You do the story, you go out there and speak to people, affected and infected people, people who are treating it, people who are managing it. We are failing to do the research and to consult with the people who are being infected. J8

And despite a clear understanding that HIV/AIDS requires complex specialist knowledge, many specialist health journalists argued that they themselves would not particularly benefit from further training:

These courses are a waste of time for experienced health journalists. They must aim at the rest of the newsroom. We experienced health reporters should be presenting the courses for the average journalist in the newsroom. ... AIDS experts can’t teach the media how to write, which is why Soul City can’t run a workshop. What you need to learn is – how to turn it into a story. J4

What is being expressed in the quotation above is not so much a general scepticism of training per se. Rather, it is a scepticism of training which is funded and provided by NGOs specialising in HIV/AIDS rather than by media sector practitioners themselves. This is on the grounds that NGOs have their own agendas, lack an understanding of journalistic imperatives, and are therefore biased in their approach to media coverage of HIV/AIDS. The view that media practitioners should teach media practitioners is also based on the understanding that improved HIV/AIDS reporting is not dependent upon increasing specialist knowledge alone. It is equally dependant upon the development of skills which are specific to journalism. As a result, journalists specified that HIV/AIDS training conducted by HIV/AIDS experts was often ‘not practical’ enough. (J9)

It remains to point out that specialist health journalists recognised that a certain amount of professional pride is at stake in the rejection of training from outside agencies:

We assume too much knowledge, even in ourselves, and are too proud to say we don’t know something. J1

We really don’t know how retarded we all are. I can’t define DNA either, but I’ve come across the concept so often that I’m not going to ask. J2

While the training of inexperienced, young and generalist (rather than specialist) journalists by outside agencies is encouraged, this is also seen to involve personalised awareness training rather than the imparting of technical information regarding specific issues per se:

They must be able to put themselves in the shoes of the person in their coverage. For me, that is the biggest obstacle because we don’t have such things to foster a more progressive culture of HIV/AIDS. J5
It should be noted that any kind of training for generalist journalists already in the field presents its own set of difficulties. Newsrooms are highly pressurised environments and generalists have little time for specialised training. In addition, high staff turnovers limit the impact of both training and experience on the quality of news coverage. Stakeholders involved in training journalists therefore point out that HIV/AIDS specific education for journalists should ideally be initiated in training institutions and incorporated into journalism curricula:

You’ve got to influence the new cadre of journalists and the next generation of journalists... How you get the newsroom people, the working journalists to change, is just a much bigger challenge. S7

Web-based support

Journalists were asked whether they thought that a web-based resource for journalists would be useful to them. The overall response can be summarised as: ‘It might be useful. It depends’ (J8). Concerns and suggestions regarding web-based support largely correspond to those voiced regarding training.

It was suggested that the following specific resources, in particular, could be useful:

Contact names and phone numbers

Journalists are enthusiastic about a contacts database which specifies areas of expertise, as they have insufficient time for broadening their contact base:

There is a lot I don't know about, research groups and people who would be useful to talk to. I stumble onto my sources by accident. J11

Analysis of science journal articles

Help accessing and interpreting data available in biomedical journals would also be welcomed. However, it was pointed out that this service might be problematic in so far as summary and explanation involved interpretation:

Maybe there is a need for a service that distils what's in an article but I don’t like doing that. I like to phone the author to get it explained. I don't want someone else's spin on it. ... J2

The requirement for journalists to retain independence and integrity is highlighted in the quotation above. Concern in this regard is also voiced with regard to the provision of story ideas in the section below.

The provision of story ideas

While many journalists welcome the provision of story ideas, they are weary of web-based resources designed for, but not by, journalists. These concerns mirror those expressed regarding training provision from outside organisations:

My problem would be whether the funders provide the agendas for the list. You need to ask, ‘Is the list complete? Who provides the agenda?’... I wouldn’t easily use a list of news ideas sent from the pharmaceutical association or a drug company. I’d have a healthy scepticism. But that doesn’t mean I might not use the ideas in some way. J3

It was argued that those story lists currently available are often patronising, written by people who do not understand what the value of news is, and that while specialist journalists do not need them, junior reporters ‘won’t understand them’. J6
Journalists pointed out that the service would only be as good as the person providing it and that individual journalists would all require specific case studies to follow-up in their areas:

Issues don’t do it, you’d need to offer case studies. Basically, you’d have to produce the story for them. To the extent of telling the person in the case study what to say. J4

Journalists also expressed concern, however, about the degree of plagiarism involved in adopting someone else’s story ideas. On the one hand, they argue that unless the story idea is quite well developed, it will be useless. One the other hand, however, journalists feel they need to develop their story ideas themselves:

The whole impetus is to do it yourself ... There’s an ethical issue there somewhere. I don’t know about a story-ideas list. Certainly, you need to do your own interpreting and your own quotes. J2

The challenge presented to any outside agency in providing story ideas is substantial: Specific case-studies need to be provided to individual journalists while any prescriptive intervention regarding who is or is not interviewed, and what angle is adopted, must be avoided. Despite concerns such as those outlined above, most journalists were responsive to the idea of a website and/or newsletter containing story-ideas on the grounds that ‘anything contributing to ideas is, on balance, useful’. J3

Only one respondent argued that a story-list, regardless of its quality, is not required:

I find the idea of wanting to be fed story-ideas bizarre. There are too many ideas, not too few. I need someone to filter them out. J6

A web-based resource for journalists will have to be carefully designed to ensure acceptance by journalists working in the field. It would have to take cognisance of a number of issues and challenges, including:

- Any advocacy agenda may be perceived as a form of bias or partisanship.
- The integrity of the journalistic process (research, fieldwork, interpretation) must be respected.
- Different journalists will want ‘ownership’ of specific stories, such that the same story is not used by more than one journalist and/or publication at a time.
- An ongoing supply of regionally specific case-studies and expert sources tied to emerging issues and events will be required for journalists to follow through on.

**Editorial-level policy development**

Journalists were asked whether they thought the development of editorial policy on AIDS coverage would be beneficial. Most argued that while this is a good idea in principle, it was unlikely that such policies would be implemented in practice:

I just don’t think newsrooms function that way. I think newsrooms are too chaotic and too unpredictable to have a strategy. And people will say, like, ‘Why the exception?’ We don’t have a strategy for reporting on land reform, or labour, so why have a strategy for AIDS? J10

Once again, concern was also raised regarding ‘agenda-setting’ from above.\(^\text{17}\) A stakeholder with past experience in health-related media advocacy argued that while codes of conduct and policy guidelines should exist, it must be recognised that a great deal more needs to be done if these are to be implemented:

\(^\text{17}\) ‘The lines between editorial commentary and policy and independent news need to be very, very clear. Or you don’t know what interests are buying in or who’s behind what gets published.’ J8
It was presented to the editors and the editors just said, ‘It’s not implementable. It’s lovely, we all agree with it, but…’. S7

**Specialist coverage vs beat coverage**

It was agreed that generalist writers without time to specialise will inevitably struggle to keep up to speed with the multiple and ever-changing complexities of HIV/AIDS:

> You have to be on top of the latest medical knowledge, otherwise the story can go off in the wrong direction. J6

> You have to be really informed and know what you are reporting on to sort the rubbish from what is good. J10

It was therefore argued that certain journalists should have ‘the right’ to focus on and develop their understanding of HIV/AIDS. On the other hand, however, specialised HIV/AIDS reporting is seen to create difficulties in so far as HIV/AIDS is arguably not beat-specific:

> It would be irresponsible for anyone to depend on specialists. ... As you know, one of the adverse affects of AIDS is the loss of manpower... All of us must be experts. J5

It was pointed out that the specialisation, as opposed to mainstreaming, of HIV/AIDS reporting may result in the marginalisation and compartmentalisation of HIV/AIDS. In some ways, mainstreaming the issue may result in more balanced and consistent coverage:

> ... we’ll all give it a different flavour and our readers will see that it’s pretty well spread. J2

HIV/AIDS specific journalists may also be prone to emotional burn-out:

> ... And you can’t report on poor people dying all the time. It gets to you. An AIDS specific reporter won’t last longer than a year or two. J4

Those papers with dedicated AIDS reporters however, pointed out that having specialist coverage in no way prevents journalists on other beats from covering the story. It is indeed those papers with specialist AIDS journalists or columnists that were often viewed by interviewees to be those strongest in their AIDS coverage.

Arguably, overall beat coverage as well as expert dedicated coverage are therefore required in order to ensure that the science, medicine and politics of AIDS can be adequately presented. Unfortunately, economic constraints are such that some companies are talking about doing away with beats altogether because there is such a staff crisis on newspapers. A large number of key informants therefore attributed poor HIV/AIDS coverage, first and foremost, to a lack of journalistic expertise.18 The short-term solution to this problem is clearly to develop a group of journalists specialising in HIV/AIDS coverage who could make an immediate impact on the quality of HIV/AIDS reporting at key publications across the country.

In the long-term, however, all South African journalists will need to have a sufficient grasp of the impact of HIV/AIDS on all aspects of life and sectors of society such that adequate, integrated coverage of the epidemic across all journalistic beats can be achieved. A two-pronged, or short- and medium-term approach, to improving the quality of AIDS-related coverage, is therefore required.

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18 Also see ‘Inadequate internal journalistic expertise’ on page 28.
Suggestions for increasing specialist coverage

Suggestions regarding outside funding for specialist coverage were raised spontaneously, by a number of interviewees. In particular, the following ideas were mooted:

- Donor resources might be spent in the training and funding of a number of specialist journalists, to be located within exiting newsrooms.
- A fund could be dedicated to the initiation of an award incentive for the publication or journalist who writes best on the topic of HIV/AIDS. This could take the form of an award for excellence.
- A fund could be established for journalists wanting to write stories such as investigative features that go beyond the scope and funding available at their specific publications.
- An independent HIV/AIDS specific news publication could be initiated. This would have to be donor-funded so that the requirement of profitability need not determine coverage.

Conclusions

The complex and multiple issues raised around improving HIV/AIDS reporting and adopting an explicit and well-developed HIV advocacy position does not suggest a lack of conviction regarding the potential role for social change which the news media can play regarding HIV/AIDS in South Africa. Rather, these findings point to areas for further development.

The detailed representation of media practitioners’ and other stakeholders’ views provided in this report inform a deeper and more textured understanding of the issues at stake in facilitating an advocacy agenda within the context of HIV/AIDS news reporting in the South African print media. In this regard, two over-riding issues stand out for consideration. These are:

- balancing the imperatives of advocacy and neutrality.
- balancing the imperatives of advocacy and news value.

Advocacy and neutrality

While an advocacy role vis-à-vis HIV/AIDS is broadly accepted by most informants in principle, the requirement to remain neutral and objective was often seen to delimit or undermine the media’s advocacy role. As a result, the media’s advocacy role was defined in a variety of ways along a continuum of weaker and stronger advocacy agendas. In particular, there was no clear agreement on the part of study participants that agenda-setting for public health policy is a legitimate role of the news media. This will clearly need to be negotiated by all those interested in fast-tracking an advocacy response on the part of the media. At the same time, it should be noted that informants from the media sector represented in this study are in fact far more open to the imperatives of an advocacy agenda than it may appear at first sight.

Reticence regarding the adoption of a strong advocacy role regarding HIV/AIDS should also be understood within the context of the media’s evolving relationship with the post-apartheid government and its controversial approach to HIV/AIDS. Although a growing momentum towards HIV/AIDS advocacy journalism has developed, this is unfortunately seen to have been spearheaded by the white media and by vested

19 The traditional journalistic requirement – to aspire to what is arguably an outdated notion of objectivity and neutrality, clearly persists.
political interests and to have limited impact as a result.

The development of a strong and consistent advocacy response on the part of the South African media can usefully be compared and contrasted to the previous development of an advocacy agenda on the part of the media to apartheid, especially in so far as this comparison provides many role-players with an ethical justification for such an approach in relation to HIV/AIDS.

The trend of public disagreement between senior politicians in the African National Congress and a range of non-governmental actors in South Africa, which started in 1996 around Sarafina 2, has continued to be highlighted by the South African media.20 The South African media has received substantial criticism for the extent to which and/or manner in which it has played a role in demanding government accountability regarding HIV/AIDS. Whether the press should be criticised or commended in this regard depends largely on one’s point of view regarding whose interests the media should represent. Certainly, the findings of this study seem to suggest that the interests of the state and ruling political party are reflected in, but do not in fact dominate, the South African media as suggested by Cullinan (2001)21 and Shepperson (2000).22,23 This distinguishes the South African media from much other African media, which according to Gibson (1994) only acknowledged the AIDS epidemic after governments provided the lead.24

It should nonetheless be emphasised that advocacy journalism, and pro-active investigation and research in particular, need not and should not be limited to the interrogation of government policy. There are a range of other role-players, including the business, trade-union and religious sectors, not to mention the media sector itself – whose roles and responsibilities vis-à-vis HIV/AIDS require media attention and interrogation.

**Advocacy and news values**

A contradictory imperative that frustrates media advocacy agendas regarding HIV/AIDS is the requirement to conform to news values, thereby ensuring the financial sustainability of the media. In this regard, the media also requires a proactive advocacy agenda in order that the news value of HIV/AIDS is not only maintained, but also increased. It seems likely that over-saturation and reader fatigue can be avoided by increasing the quality (range and depth) of HIV/AIDS related topics covered. In this way, the news values of HIV/AIDS stories could be expanded and redefined. As one journalist put it:

> To do more is not necessarily the right way to go about it. Maybe to do it differently is the way to go about it. ]8

While political controversy has meant that AIDS has retained a constant presence in the media, certain aspects of the disease, which are potentially equally controversial, are seldom addressed. For example, the media urgently needs to report on the larger socioeconomic forces and sociocultural practices that drive the disease. Clearly, this will require focused commitment and increasing initiative from a sector with ever


22 Shepperson’s findings indicate that the media agenda in South Africa is largely dominated by government. If this was true at the time of Shepperson’s study, the situation may well have corrected (indeed perhaps over-corrected) itself.


increasing resource constraints. Indeed, the findings of this study indicate that adequate commitment to the HIV/AIDS story in the newsroom and leadership at editorial level are key ingredients to any increasing advocacy initiative.

**Approaches to improving HIV/AIDS coverage**

On the basis of this report, key ingredients for improving HIV/AIDS media coverage can be seen to include:

- Increased commitment to the story at editorial and newsroom level and a concomitant reallocation of resources; including training resources, such that constructive engagement with all aspects of the epidemic is ensured.

- Negotiation of a shared and/or extended understanding of the necessity for an appropriate and explicit HIV/AIDS advocacy agenda within newsrooms such that:
  - story ideas are assessed through the lens of whether and why coverage is required;
  - representations of the epidemic and of those living with HIV/AIDS do not perpetuate denial and discrimination.

- Strategic alignment of this advocacy agenda to relevant news values such that sustainability is ensured.

While most informants felt that the quantity of HIV/AIDS coverage has increased substantially in South Africa, most felt that the quality of such reporting still leaves much to be desired. The specific ways in which news reporting was seen to require improvement are multiple and varied, and each of these can usefully be understood in terms of their relationship to the three key ingredients for effective advocacy mentioned above. Thus, for example, the promotion of constructive action, the enhancement of educational content and the development of socio-historical perspective all need to be considered and evaluated in relation to one another, and in terms of the three points above.

A conceptual grid of the key issues requiring consideration, as they emerge from this report, is as follows:

<table>
<thead>
<tr>
<th>Commitment to the story and reallocation of resources</th>
<th>• pro-active investigation;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negotiation of appropriate and explicit advocacy agenda</td>
<td>• issues-based reporting;</td>
</tr>
<tr>
<td></td>
<td>• educational content;</td>
</tr>
<tr>
<td></td>
<td>• historical and sociocultural perspectives;</td>
</tr>
<tr>
<td></td>
<td>• constructive action;</td>
</tr>
<tr>
<td></td>
<td>• empowering representation of people living with HIV/AIDS.</td>
</tr>
</tbody>
</table>

If these emerging issues are addressed coherently, the quality of HIV/AIDS news reporting would be substantially increased and a coherent media advocacy initiative regarding HIV/AIDS should emerge.

Specific strategies to fast track this process, which were suggested by participants in this study, included an immediate increase in specialist HIV/AIDS coverage within the popular media itself.

The quality of reporting could be significantly increased through the development of an HIV/AIDS specific advocacy publication or website which informs story development and offers analysis of key debates. Such a publication could also provide
the scope for specialist journalists to publish stories beyond their own publications. If widely disseminated and read, such a publication would inevitably set new standards for HIV/AIDS reporting, inform the debate around media advocacy and contribute towards improving the quality of news reporting in the popular media itself.

Increased scope for specialist development could be complemented by the development of a variety of training initiatives for generalist journalists. This should involve a continuum of increasingly specialised and updated training initiatives beginning with curriculum-based HIV-specific education at tertiary institutions, as well as ongoing training for journalists already in the field; supplemented with web-based support. Such training should focus on providing all journalists with the skills to marry the need for news value and education, provide balanced and well-informed coverage in line with advocacy agendas, and navigate the complexities of HIV/AIDS, including political and sociocultural aspects. Those involved in training initiatives need to understand that journalists are justifiably wary of training from experts and organisations perceived to be imposing their own understandings of an ‘appropriate’ advocacy agenda. While the need for an advocacy agenda is largely accepted, the terms of this agenda remain to be negotiated. Trainers also need to address and negotiate the contradictory imperatives and pragmatic constraints which journalists in the field face.

It remains to point out that HIV/AIDS media advocacy initiatives cannot focus on the training needs of media practitioners alone. Media advocacy is largely dependent upon the ability of community groups to ensure that their voices are heard above the loudspeakers employed by those engaged in political debate. Those interested in improving media coverage on HIV/AIDS need to recognise that it is they themselves, and those they represent, who have the power to influence and develop an HIV/AIDS advocacy agenda for the media.

It is important to note that media institutions need to separately address HIV/AIDS issues as they pertain to the workplace. A recent study, which forms part of this research series, showed that many media companies have not conducted impact assessments, workplace HIV/AIDS policies are not being implemented, and care issues remained to be addressed. In addressing issues of practice in relation to HIV/AIDS reporting, it is important for media institutions to also reflect on their internal practices in relation to HIV/AIDS.