HIV/AIDS and the Media

A Literature Review

CENTRE FOR AIDS DEVELOPMENT,
RESEARCH AND EVALUATION
HIV/AIDS and the Media
A literature review

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Note
This document represents a companion document to a Bibliographic Review of the titles listed.
The Literature Review and Bibliographic Review are available in Acrobat format and as a
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**Introduction**

HIV/AIDS brings together a potent mix of sex and death, science and politics and deep-seated divisions and inequalities between North and South, rich and poor, and men and women. Galloway points out that HIV/AIDS should therefore have great journalistic potential as it “encompasses all the elements of a great story – probably the story of the late twentieth century.” 1

“[AIDS] throws a bright searchlight into the complexities, contradictions, divisions and needs of the modern world.” 2 This is perhaps especially true in South Africa, which has the largest number of people living with HIV/AIDS of any country in the world.3

The role of the media in confronting the HIV/AIDS epidemic cannot be overestimated. The 1998 London Declaration made by the World Summit of Ministers of Health stated that, “In the absence at present of a vaccine or cure for AIDS, the single most important component of national AIDS programmes is information and education.” 4

Since the media exists to provide information and education (as well as entertainment) to populations worldwide - it is a powerful tool that can be mobilized against HIV/AIDS. The occupational culture of journalism promotes neutrality which provides a countervailing pull against an advocacy or social change agenda within the media.5 Despite this, media coverage nevertheless ensures that HIV/AIDS is seen as an important issue requiring a coherent national polity response. Indeed, it has the power to set the agenda in this regard.6

**Methodology**

This review draws extensively on a companion bibliographic review which has drawn together a variety of texts that have specifically examined the issue of HIV/AIDS and the media. This data emerged through a variety of literature search techniques including searches of journal databases and various internet search systems that collated both journal articles and conference papers. This allowed for the development of a comprehensive database of articles and abstracts. Full copies of relevant key articles were also accessed where possible, although it must be said that these were not readily accessible in the public domain. It is also worth noting that given it's accessibility for research purposes, most texts focus on print media.

The specific purpose of this review is to inform the expanded development of an HIV/AIDS Media Advocacy Programme for South Africa. Consequently a greater emphasis is placed on issues specifically relevant to this context.

**HIV/ AIDS and mass media reception**

In all studies across the globe, the most frequently reported source of information on HIV/AIDS is the conventional mass media as opposed to other sources of information such as targeted educational campaigns or interpersonal sources such as health practitioners or peers. This is as true for adults in Bombay, France and Norway as for students in America and India.7 This is also as true for people living with AIDS and for health workers as it is for the population at large.8

The critical role of the media for conveying information about HIV/AIDS, as opposed to other diseases, can in part be attributed to the persistence of strong social taboos on the discussion of sex-related topics which results in a relative lack of discussion about HIV within those social networks which generally operate to
convey health and other information.\textsuperscript{9} The relative accessibility of TV, radio or newspapers as the main source of media information differs by location as well as by population and gender groups. Exposure to specific mass media sources is related to gender, ethnicity and risk status.\textsuperscript{10} Thus, for example, men read newspapers three times more than women in Mali.\textsuperscript{11}

Approximately 92\% of South Africans have access to radio, 76\% to television and 55\% to newspapers.\textsuperscript{12} The country is therefore ideally suited to use media as a tool for health promotion and development, especially since high-risk populations often have little access to formal education.

**The educative role of the mass media**

Perhaps the most powerful role of the media is in defining the challenge of HIV/AIDS for the general population – especially given that the way a problem is defined determines the way people try to solve it.\textsuperscript{13} “…Media audiences are especially dependent on the media as information sources and for guidelines about how to feel and how to react.”\textsuperscript{14}

The media therefore has as essential function in social learning - to provide the information that will empower ordinary people and to transmit the ideas that structure people’s thinking and “make up the raw material of what we identify as public opinion.”\textsuperscript{15} However, Nelkin points out that the educative role of the media for HIV/AIDS prevention has been constrained in so far as news reports have tended (in some contexts) to “convey an unrealistic and even counterproductive social message about how to prevent the spread of AIDS – abstain.”\textsuperscript{16}

In any event, while there can be little doubt that any disease is best managed in a context of awareness, it cannot be assumed that communicating accurate and comprehensive information about HIV/AIDS will necessarily impact on infection trends. Some studies argue for a direct link between AIDS communication and attitudinal or even behavioural change.\textsuperscript{17} One of the most conclusive studies focusing on behavioural change shows that HIV testing rates increased by approximately 29\% following extensive mass media coverage of Magic Johnson’s HIV diagnosis. However, this finding regarding the impact of media can be attributed to the fact that celebrity self-disclosure is particularly effective as it affects perceptions through mechanisms similar to those involved in personally knowing someone infected with HIV.\textsuperscript{18} As Wallack et al note: “By 6:00 p.m. on Thursday, November 7, 1991, whether or not you were a basketball fan, you knew Johnson was infected with HIV… This single news event inspired more response than had all the CDC’s prior public service announcements on AIDS.”\textsuperscript{19}

A more considerable body of research has demonstrated that whilst information provision is a first step, it has limited impact on individual behaviour change. This may in part be due to the tendency to tune out information not in line with people’s existing beliefs.\textsuperscript{20} Some therefore maintain that the use of specific mass media campaigns in health promotion is expensive, largely cosmetic and has little proven effect on health behaviour.\textsuperscript{21} It is generally agreed that the most effective way of motivating individual behaviour change appears to be interpersonal communication, including interactive face-to-face educational and counselling where “messages are tailored to the specific needs of individuals.”\textsuperscript{22}

LeBlanc\textsuperscript{23} shows that those citing the media as their primary source of information have slightly lower levels of HIV related knowledge than those whose primary sources of information are derived from interpersonal communication within social networks. Likewise, other research has demonstrated that community-based initiatives are more effective than the “top-down dissemination” of education via the mass media.\textsuperscript{24}
While the media has therefore played a greater role in health promotion and education with regard to AIDS than with regard to any other health issue, its impact is generally accepted to be varied and in no way a substitute for specialized education and targeted interventions. Mass media campaigns can nonetheless be highly effective and successful in changing the social context within which individuals operate. This role has not been sufficiently considered in media evaluation and appropriate outcome indicators must be chosen which reflect this goal. Chinai also argues for the role of the media in influencing social attitudes rather than individual behaviour, especially in developing countries.

**Evaluations of HIV/AIDS Media Treatment**

Worldwide, most researchers and writers have been critical of the media’s coverage of the AIDS epidemic and of the media’s role in constructing popular beliefs about HIV/AIDS.

Arredondo, Conde and Coronado argue that the diffusion of misleading and even false information have increased negative attitudes towards PWA’s and have produced fear and confusion in the American public regarding the spread of HIV. According to Brown the news media’s framing of risk “has more to do with its reproduction of moral outrage components than with ‘scientific’ notions of calculable risk.” Likewise, Boeker and Bircher argue that the media has done a poor job of educating the public about HIV/AIDS in Switzerland and Germany, have tended to spread rather than curtail rumours and misinformation, and have acted to reproduce, rather than counter, culturally received prejudices about illness as punishment.

Other researchers have turned their attention to some of the specific ways in which the media have failed to address either the social or scientific aspects of HIV/AIDS. The scientific aspects of AIDS are often simplified by the media – thus failing to provide either adequate social perspective or sufficient analysis and context to the scientific evidence presented. Cohen argues that media mishandling of HIV/AIDS results from the tendency to simplify the mechanics and dynamics of AIDS – which present one of the most complex scientific challenges in the history of mankind. News items also tend to stress the ‘medical model’ at the expense of the ‘public health model’ of HIV/AIDS prevention and care. Other research points to the failure of the press to present constructive alternative social representations of sexuality and gender.

Ironically, it is exactly those elements (especially the mixture of sex and death) that make the AIDS story so ‘newsworthy’ and unique that also make it difficult to gain acceptance as a focal point. Camerena argues that the Mexican press was not prepared to propose new attitudes towards sexuality which are required in the age of AIDS. An historical analysis of European AIDS campaigns notes “how difficult it was to put forth messages to the general public when many of the images that had to be used seemed to be more appropriate for private than public viewing.”

Shilts argues that in America “People died because the mass media did not like covering stories about homosexuals... Without the media to fulfil its role as public guardian, everyone else was left to deal – and not deal – with AIDS as they saw fit.

Sacks demonstrates that the representation of women in AIDS media reproduces notions of normative sexuality. Apart from prostitutes, depicted as vectors of disease, women are invariable depicted as HIV positive mothers or pregnant women who are of concern only insofar as they may infect their babies or leave their children orphans.
Research has also shown the alarming extent to which HIV positive voices have been marginalised by mainstream media.\(^{38}\) When PWA’s are presented this is almost exclusively as ‘patients’ in need of care and compassion.\(^{39}\) South African journalist Mark Gevisser expresses this most forcibly when he writes that “…the media often kills people with AIDS long before they are ready to die, fuelling the public misconception that if you have it, you might as well be dead…”\(^{40}\)

An analysis of the coverage of African and European daily newspapers also reveals that the objects of AIDS news are usually HIV positive while the subjects are usually HIV/AIDS specialists or government officials.\(^{41}\)

Various authors have commented on the fact that news reporting is widely understood by journalists as neutral. Falobi and Babingbetan\(^{42}\) point out that “…journalists have tended to shy away from taking a proactive response to HIV advocacy, under the guise that they must remain ‘unaffected’ and stand aloof commentators on the issue.”

According to Makinwa et al.,\(^{43}\) this so-called neutrality is “contrary to reality, as the mass media do educate people.” The failure of the media to develop a proactive agenda nevertheless results from an inability of the media to conceptualize their function in relation to HIV/AIDS in terms of an educational and advocacy role.\(^{44}\)

In a similar vein, researchers have maintained that the media has also failed to use its influence in AIDS policy-making or agenda-setting.\(^{45}\)

**Improving media coverage on HIV/AIDS**

The most effective journalism integrates the following three elements: The perspectives of people living with HIV/AIDS, the larger cultural, economic and political context which shapes the epidemic and the science of HIV.\(^{46}\) Most journalists would probably argue vehemently against a feel-good approach to AIDS reporting and argue that the role of social change-agent is beyond their professional duties. However, few would deny that media attention can nonetheless support and endorse social change.\(^{47}\) In this regard, highlighting successful coping strategies, both individual and societal, are essential to fostering an enabling environment for constructive action.\(^{48}\)

It is argued that a comprehensive media response to HIV/AIDS should go way beyond the mere accurate reporting of the facts. Such a response involves a commitment to social responsibility that includes the initiation of workplace policies and programmes within media companies, the involvement of PWA’s and long-standing editorial commitment.\(^{49}\) Ultimately, the quality of media coverage on AIDS depends not only on the presence of motivated and informed journalists but on the sensitisation and commitment of a range of personnel throughout the media hierarchy. The formation of media networks on AIDS also plays a powerful role in stimulating better reporting.\(^{50}\)

Researchers have stressed that the quality of reporting is not the responsibility of journalists alone. Non-governmental organisations should play a far greater role as expert sources for journalists.\(^{51}\) Unfortunately, academics and activists often want coverage exclusively on their own terms and fail to engage with the media constructively.\(^{52}\) NGOs and community based organisations need to develop ‘media savvy’ and ensure that innovative responses to the epidemic receive adequate media coverage and gain credibility.\(^{53}\)
Extent of International Media Coverage on Africa

First world coverage of AIDS in Sub-Saharan Africa has an unfortunate tendency to fall into the category of what can sometimes be called ‘Death Voyeurism’. Garret argues that media coverage in the first world in general is becoming increasingly simplistic, superficial and celebrity-focused. Likewise, Swain argues that the largest theme category for all US news magazines covering AIDS in Sub-Saharan Africa was the ‘disaster/devastation/hopelessness’ theme which is seen to appeal to a large mainstream audience and to fulfil the dramatic requirements for achieving entertainment value.

Apart from the standard doses of ‘death voyeurism’, Moeller argues that consistent and quality international media attention to AIDS in Africa has been a long time in coming largely because the media reflects the pervasive political climate and follows the lead of ‘those with power’. Moeller points out that the international media turned en masse to AIDS coverage in the weeks before the Durban 2000 AIDS conference, “flocking to cover the emergency now that it was government-certified.”

Bracken also argues that there has been a sudden increase in international coverage of the sub-Saharan epidemic since 1999. However, he lists a larger confluence of events as the impetus for turning to a major story long ignored, including: the decision by the White House to categorize AIDS in Africa as a threat to national security, the focus on drug prices and pharmaceutical company profits, and the outrage provoked by President Mbeki’s skepticism about the relationship between HIV and AIDS. Braken points out that the shock of seeing the Pulitzer Price for international coverage awarded to an alternative weekly, The Village Voice, for Mark Schoofs’ series ‘AIDS: The Agony of Africa’ which is replete with haunting stories of people and communities grappling with HIV/AIDS and a contextualised analysis of the difficulties confronting African governments in dealing with the epidemic, may also have prompted chastened newspaper editors to re-examine their own commitments to the issue.

Coverage in African countries

Research focusing on media in African countries shows that coverage has tended to reflect government reaction and points of view. Lear argues that the African media, much like everyone else, moved through the usual stages of denial, scapegoating and blame before responding constructively to the epidemic. Likewise, Gibson suggests that African media, including that which is not government controlled, has only acknowledged the AIDS epidemic after governments have provided the lead. In countries where much of the media is government-owned or controlled, it takes “a great deal of courage to ask questions and demand answers.” However, in countries like Uganda, where the government has lead a concerted and successful HIV prevention campaign, the media has been able to play a key role in AIDS awareness and prevention. By comparison, research in Zimbabwe shows few personalized stories and a relative lack of articles on transmission and risk, counselling and care, or local initiatives and coping strategies. Zimbabwean research also shows that 90% of articles are written as news events and 70% of messages are targeted at policy-makers rather than ordinary people such that no clear educational messages are conveyed on what to do, for example, with regard to breast or bottle-feeding for HIV positive mothers.

In Zambia, however, the AIDS Journalists Association (ZAJA) has helped to reorient journalists to more analytical pieces. The association is lobbying editors to adopt clear, meaningful policies on AIDS articles, which at present describe conferences, speeches and statistics to readers without explanation or analysis.
The communications environment in South Africa

The communications environment in South Africa is well-resourced. There are four national television stations supplemented by subscription based stations. There are a wide range of radio stations covering all South African languages. Newspapers and magazines also offer considerable potential for communications reach regarding HIV/AIDS. The sectoral response to HIV/AIDS initiated in October 1998 called on all South African sectors to join a partnership against HIV/AIDS. This included the media and was seen to involve the protection of human rights, as well as the provision of HIV/AIDS related services and information in the workplace. As yet, however, no research has been conducted to ascertain the extent to which South African media institutions have expanded their responsibility for managing the epidemic through the introduction of workplace policies and programmes.

Extent and Content of coverage of HIV/AIDS in South Africa

The requirement for what Parker calls ‘an element of drama’ is as much at work in South African media coverage of AIDS as it is elsewhere. This has been achieved in part in the usual fashion, through the proliferation of sensationalist reporting in the form of flashy headlines, the trite analysis of emerging ‘scandals’ and images of emaciated people, often referred to as ‘victims’ and ‘sufferers’ dying of AIDS. As Gevisser notes: “More than anything, the photos of ‘AIDS Victims’ struck me… every single media image of a person with AIDS I could find had that person in a passive, submissive position – reclining, huddled over a suitcase, lying in as hospital bed. Their wrists were limp, and they were useless.” Gevisser reviewed a decade of clippings on AIDS in South Africa prior to 1995 and found descriptions of gay plagues and black deaths, innocent victims or guilty sinners and malicious infectors. He argues that ‘this nonsense of guilt and innocence’ which he calls ‘a peculiar obsession of the media’ continued unabated when the initial understanding of AIDS as a ‘gay plague’ gave way to the realization that HIV was spreading (or rather, ‘exploding’) among black heterosexuals.

It has also been argued that the predominantly white controlled mainstream media prior to 1994 followed the apartheid government’s lead and was subject to an inexplicit disregard, not only for gay people, but for the black lives which were being affected. It has been argued that in post-apartheid South Africa, government-endorsed silence about the severity of the epidemic is still impacting on the media; now as a result of the need to attract investors to fund economic initiatives. However, it is more generally argued that in post-apartheid South Africa, HIV/AIDS has now achieved extensive media coverage. Unfortunately, this is largely in so far as conflict around AIDS policy has achieved the status of ‘high politics’. AIDS policy has become a political ‘hot potato’ which has been used to gain (and lose) political mileage by just about every political player. Media stories with an overtly political angle and which involve conspiracy or controversy have taken precedence.

South African press coverage can in fact be said to distinguished by what Schneider describes as the very public disagreement and almost complete non-accommodation between senior politicians in the African National Congress and a range of non-governmental actors in South Africa. “In a cycle established by early criticism of government around Sarafina 2 in 1996, public debate on AIDS has been dominated by a series of responses and counter-responses in which actors have competed to set the agenda for AIDS in South Africa.” Schneider argues that the prominence of AIDS media coverage in South Africa has
been as much about the airing of differences between activist and scientific communities on the one hand and government on the other as it has had to do with the growing realization that millions of South Africans are infected with HIV and will die within the next ten years. In this regard, the debate raised by President Mbeki regarding whether HIV causes HIV/AIDS, which received extensive media coverage, is a case in point.

Shepperson reviewed national and regional publications and shows that there is now a high volume of articles related to HIV/AIDS with an average of 0.46 articles per day in the case of 13 daily newspapers. However, he argues that the South African print media have yet to do full justice to the impact and scale of the epidemic. Clearly, how AIDS is reported is as important as whether it is reported at all. Shepperson shows that most reporting in the South African press is derived from single sources and that the media agenda is not set by media formations themselves but is driven largely by the agenda’s of those, particularly government, with press liaison machinery.

Cullinan also argues that the interests of the ruling political party, the African National Congress, tend to dominate the media. Some 30% of articles in Shepperson’s study were derived from government press releases, press conferences, events or statements by government officials. By comparison, non-governmental organisations were represented at 11%. To some extent this data would seem to contradict Schneider’s analysis regarding the existence of a vibrant media-based policy debate in South Africa.

The South African media reports regularly on the activities of high-profile activist organisations such as the Treatment Action Campaign which recognizes media logic and adopts its tactics. However, there remains little scope for individual journalists within media organisations to follow the example of authors such as Schoofs and take the initiative in laying bear the way in which HIV/AIDS exacerbates social prejudices, economic inequalities, discriminatory practices and political injustices.

This may in part be explained by the fact that the relationship between the spread of the disease among black people and the heritage of apartheid for racial inequality has now become a political football between black and white political groupings which few journalists have the stomach to kick around. In this regard, Cullinan shows that even the seemingly scientific debate regarding the cause of AIDS initiated by Mbeki became highly politicized in South Africa. “Many of those critical of Mbeki’s flirtation with AIDS ‘dissidents’ were labelled as being anti-government, even racist, by government officials. For example, Health Minister Manto Tshabala-Msimang claimed in a press conference at the AIDS 2000 conference in Durban in July that criticism of Mbeki’s handling of the debate was simply the media ‘bad-mouthing the black government’.”

According to Shepperson, the highest proportion of subject focus was that of AIDS impact which accounted for 14.2% of articles while reports related to actions taken in response to HIV/AIDS accounted for 36% of articles. Shepperson also looked at the prevalence of different kinds of articles and found that news stories accounted for fully 82.8% of items whilst commentary and features made up less than 10% of the total respectively. Of these, many feature articles were produced by outside services like Health-e or internationally syndicated articles. The vast majority of articles detailing research findings related to biomedical rather than social science research. In news reporting on the Mbeki/dissidents HIV causes AIDS issue, most articles therefore presented both the orthodox and dissident points of view in somewhat equal measure and left it to the readership, largely unable to understand the terms of debate, to decide.
Galloway argues that there is wide inconsistency in AIDS reporting in South Africa - quality varies dramatically depending both on the publication and individual journalist.

Shepperson provides many examples of the press over-sensationalizing aspects of the epidemic, perpetuating inaccurate information and giving disproportionate and uncritical emphasis to non-normative aspects of the epidemic. Other South African authors all seem to agree that the media are alarmist, and as Smith states, give no idea how to manage the virus and “take political stances instead of the only one that counts – a people oriented stance”.

Osborn points out that the media contains little if any information targeted specifically at PWA’s, who comprise a substantial segment of the general population of South Africa: “…the media messages were subtly telling me that if it had already happened, then I had better either curl up and die or accept my predicament.”

Micheal specifically analyses four major business publications and argues that clear, concise and well-considered accounts of the facts have largely been sacrificed to doomsday scenarios. She points out that although valuable information is conveyed it is “often buried under an avalanche of fluff and or swathed in hysterical adjectives, and is only discernable to the expert eye. The next logical question,” she says “is how much reporting on AIDS in the business press has done to enlighten its target audiences. The answer, unfortunately, is not very much.” She argues that business press coverage should concentrate less on the replication of often inaccurate statistics and pay more attention to managing the epidemic pragmatically.

In an AIDS media roundtable hosted by mediacannel.org, Smith, a South African journalist argues that “the media in South Africa should be ashamed of our shocking failures when it comes to reporting AIDS.” Cullinan, also a journalist, agrees: “South African journalists are far behind some African countries with lower HIV infection rates than our own.” However, there is little doubt that reporting on HIV/AIDS in South Africa, as elsewhere, is no easy task. AIDS is a slow-moving disaster which does not easily meet the standard conventions for breaking news. Journalism, on the other hand, thrives on speed and novelty and therefore reserves its attention for events that are novel, violent and intense.

As Soal, health writer for the Cape Times, points out, “Editors, like everyone else, often glaze over AIDS stories. Once they’ve done the shock horror stats story on World AIDS Day, that’s enough for the year.”

In South Africa, both cultural and educational factors pose an added challenge to writers. Fear of offending so-called traditional cultural beliefs and practices is increased by the racial delineation of notions of ‘culture’ and a perceived need to protect African cultural traditions from Western influence. It is worth emphasising that a major imperative of the South African media today is ‘to sell newspapers’ rather than to meet a challenge demanding intervention from all sectors.

**Improving media coverage of HIV/ AIDS in the South African context**

Parker and Kelly review the potential for the development of a proactive response by the South African media such as that developed in the face of apartheid. They point out that this role is undermined by a variety of factors including ideological constraints as determined by information gatekeepers and the commercial interests of mass media formations who are motivated by the need to reduce costs. They argue that an understanding of both journalism and newspaper practice, as well as systems of media production, are required in order to inform a proactive strategy towards HIV/
AIDS in the media. This would entail an orientation towards informative and factual reporting on the one hand, and critical analysis on the other.

Cullinan points out that it will become a challenge to keep the HIV/AIDS epidemic in South Africa newsworthy. "As more and more people start falling sick and dying, we will have to find new and creative ways of covering what will soon be an everyday, common tragedy."

Cullinan also argues that issues relating to race and class are paramount in reporting on HIV/AIDS in South Africa and need to be carefully negotiated. "Journalists are all middle class (no matter what their origins may be) and many are white. The majority of those interviewed are black and poor... Under apartheid, the lives and experiences of poor black people were devalued. There is a danger that the HIV/AIDS pandemic will perpetuate this if reporters see themselves as 'outsiders', and portray HIV/AIDS as a disease of those who are poor and black."

Cullinan argues that there are many ethical issues – such as the conflict between what is in the public interest and what is in the interests of the individual – which remain to be debated amongst journalists and the public. She adds that one of the biggest challenges is to ensure that every person and child interviewed understands that they have the right to refuse to be interviewed or photographed.

In the Working Document for an HIV/AIDS and STD Communications Strategy for South Africa: 2000-2005 Parker outlines guiding principals for communication regarding HIV/AIDS including: accuracy and consistency in reporting, the use of non-alarmist, non-moralistic and non-discriminatory language implicitly or explicitly blaming those with HIV or involved in high-risk activities, the promotion of basic human rights and gender equality, the use of home languages, and the promotion of HIV related services and resources. The strategy also outlines specific areas of communication which would facilitate prevention, treatment care and support, the promotion of human rights and programme evaluation and monitoring.

There have been some developments in South Africa to foster improved reporting on HIV/AIDS in the media, particularly the press. These include workshops and programmes conducted by the Beyond Awareness Campaign which sought to improve reporting on the work of community-based and non-governmental organisations through its Mediaworkers project. This project has demonstrated that it is possible to orient reporting on positive rather than negative aspects of the epidemic and to promote social action by finding news values in constructive social responses to HIV/AIDS.

The Health-e news agency, initiated in 1999, is another initiative designed to introduce specialized articles into the national media (radio and press). The agency was set up by the Kaiser Family Foundation in order to augment reporting given the fact that newspapers and radio stations lack the resources to pursue health issues in depth. While both Health-e and the Mediaworkers project have been effective in promoting and increasing quality media coverage on HIV/AIDS, these initiatives were not initiated by the mainstream media. Media institutions themselves have yet to give sufficient attention and resources to the development of their role in responding to the HIV/AIDS epidemic.

Greater attention should therefore be paid to working within existing media institutional frameworks to train journalists and promote editorial policy conducive to the production of good quality reporting in line with health promotion aims. In this regard, the South African National Editor's Forum (SANEF), together with Soul City and Health-e news agency, are currently organising provincial workshops for journalists on reporting on HIV/AIDS. Galloway argues that there should be compulsory training for all media personnel on HIV/AIDS. "The story is so big and impacts on so many beats that all
staff (e.g., political, economic, sport, education and even crime reporters) ideally need exposure to and familiarity with the major debates.”

Shepperson suggests that news media requires specialist HIV/AIDS desks focused on proactive investigative reporting. However, as Stally points out, it is essential that HIV not be relegated to the health desk in media organisations as the media approach to HIV/AIDS should be multi-sectoral.

Media institutions urgently need to develop codes of good practice for reporters and safeguard against reporting which simply counts the numbers of the infected and the dead and which explicitly or implicitly presents AIDS as an issue of public morality rather than of public health. Editors need to translate a superficial commitment to the HIV/AIDS epidemic into newsroom policies, an editorial agenda and a comprehensive sectoral response.

In order to play a constructive role as watchdogs ensuring that appropriate policies are being implemented, journalists need to analyse and promote effective and proper responses rather than simply criticize inaction or despair of the way in which funds are being spent. It is important to recognise that the shortcomings of HIV/AIDS reporting in South Africa is not the responsibility of news groups and journalists alone. As Galloway points out, non-governmental organisations, academics and the government all need to develop a more constructive partnership with the media.

People living with HIV/AIDS have the potential to make a significant contribution to the media response. The potential to use PWA reporters has to some extent already been utilized by the South African media. The Sowetan and Cape Times newspapers both have a regular column featuring the views of HIV positive journalists. In 1999, Cape Talk started the first weekly African HIV/AIDS phone-in talk show co-hosted by PWA's. A talk-show involving PWA's was also recently screened on SABC. The value of positive representations of PWA's in the media cannot be overemphasised. As Crewe points out, how a particular group is represented determines in a very real sense what it can do in society.

In spite of the constant presence of information about AIDS in the media, certain aspects of the disease are seldom addressed. Reporters urgently need to unpack the larger social forces, including the legacy of Apartheid and gender inequality, that drive the disease. Likewise, analysis of the negative cultural practices that enhance the spread of the disease are urgently required.

In an article entitled, SA's media should get off the fence and take a stand, HIV-positive columnist Kevin Osborn pointed out that simply in the process of reflecting changing social structures, norms and values, the South African media has an instrumental role to play in the battle against AIDS.

**Conclusion**

This review demonstrates the complexity of understanding media response to HIV/AIDS, and emphasises the difficulties of coherence between the imperatives of education and social action on the one hand, and the imperatives of news values and company profits on the other.

There is undoubtedly considerable potential for the media to contribute more constructively to the conceptualisation of the HIV/AIDS epidemic and to be proactive in shaping societal and government response to the epidemic. The potential for South African media to do this needs to be critically examined, with a view to developing strategies, policies and programmes that coherently bring together diverse imperatives.
Footnotes

1. Galloway, 2001
2. Weeks, 1998
3. UNAIDS, 2000
5. Miller and Williams, 1993
6. Wellings and Field 1996; Cooke, 1997; Wallack et al, 1993
7. Bedagar, 1994; Chatterjee, 1999; Cline, 1991; Cohen, 1990
10. Woltisky, 1996
11. Jeay, 1995
12. Galloway, 1995
13. Roth & Hogan, 2001
14. Moeller, 1999
15. Altschull, 1990; Kitzinger, 1993
17. Hirose, 1996
18. Kalichman, 1993
20. Hertog, 1995
22. Wellings and Field; Cohen et al, 1990
23. LeBlanc, 1993
24. Lyttleton, 1995
25. Netter, 1992
27. Chana, 1996
28. Arredondo, Conde and Coronado, 1989
30. Boeker, 1993
31. Birchmeier, 1989
32. Cohen, 1994
33. Westwood & Westwood, 1999
34. Camerena, 1991
35. Wellings and Field, 1996
36. Shilts, 1987
37. Sacks, 1996
38. Hallett and Cannella, 1994; Schoofs, 2000; Sergeant and Ariss, 1993; Treurnicht, 2000
40. Gevisser, 1995
41. Tassew, 1995
42. Falobi and Babingbetan, 2000
43. Makinwa et al, 1996
44. Crosier, 1998; Riyadi, 2000
45. Backstrom and Robins, 1998
46. Schoofs, 2000
47. Parker, Dalrymple & Durden, 1998
48. Stally, 2000; DeCenival, 2000
49. Galloway, 2001
50. Foreman and Deane, 2000
52. Karkaria, 1994
53. Moulik and Jana, 2000
54. Garret, 2000
55. Swain, 1997
56. Moeller, 2000
57. Bracken, 2000
58. Lear 1990
59. Gibson, 1994
60. Garret, 2000
61. Nakityo, 2000
62. Pitts, 1993
63. Nyazéjma, 2000
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