

## Media helped win the drugs fight

But the end of conflict over antiretrovirals shouldn't mean the end of Aids coverage

By Alan Finlay`

The government's announcement that it would finally commit itself to a public anti-retroviral treatment programme came, for many, with a sense of bitter relief. For some it felt like a war, a description used once or twice in the press at the height of the public clash between Aids activists and the government; and for others it was reminiscent of the kind of activism that characterised the struggle against the apartheid state.

Research into HIV/Aids coverage by South African newspapers, conducted by the Perinatal HIV Research Unit and Wits University's Department of Journalism and Media Studies and funded by US-AID, shows that the press played its part in growing civil society pressure on government's HIV/Aids policy - even if this had more to do with selling newspapers than actively taking sides in the conflict.

The comparative study analysed all HIV/Aids content in 35 newspapers from March to May 2002 and March to May 2003.

The issue of anti-retrovirals was marked in both periods: the first by the run-up to the Constitutional Court ruling on Nevirapine, and the second by growing civil society pressure on the government to commit to a public anti-retroviral treatment programme.

Notably in the second period, which lacked the obvious news cues such as the Constitutional Court ruling, and which was marked by a relative absence of controversial commentary on HIV/Aids by the likes of former president Nelson Mandela and President Thabo Mbeki, there was a 32% drop in HIV/Aids coverage - an indication of the extent to which conflict and personalities have dominated the HIV/Aids news agenda, and highly suggestive of what happens to HIV/Aids coverage in the absence of conflict.

At least half of the key media messages over the two monitored periods dealt directly with the conflict around anti-retrovirals or implicitly took a position in relation to government policy. Most of these key messages were critical of government, and, by implication, supportive of the objectives of Aids activists.

It is interesting to try to understand how this came to be, especially given that there appears to be a widespread absence of editorial policy thinking around HIV/Aids coverage in South Africa's press. And commercial media institutions have been known to be at best cautious and at worst dismissive of the politics of social campaigning and protest.

The Constitutional Court's ruling on Nevirapine and comments made by Mandela in 2002 set a public moral precedent. The fact that some big businesses committed themselves to anti-retroviral plans in the workplace no doubt helped to cement the moral tone of the conflict. There appeared to be a very clear right, and a very clear wrong. One might argue, that given the much-criticised precedents that have "defined" government health policy - Sarafina II and Mbeki's denialist-like comments on HIV/Aids amongst them - that the press did not so much jump, as was pushed. A tone critical of government came easily.

The research, which included interviews with journalists, editors, government communicators, scientists and the like, suggests that this was exacerbated by government communications - government spin, if you want - frequently out of step with the information needs of journalists. There is a feeling that journalists do not properly understand the complexity of government decision-making processes, and that this contributed to a lack of perspectives supportive of government.

Communication follows policy, it does not precede policy. That sometimes creates imbalance, that the reality and the organisations concerned have a different appeal to the media and a different compatibility with the media and the media's interest, which is for news; for ever-changing angles; for human stories; and for conflict.

When the issue is sensitive and has political ramifications, the government communicator needs to be certain about what can or cannot be said: it is important to check back with your principals as to whether there is a desire on their part to be talking at this point in time. This is sometimes a time-consuming exercise. I think, too, there are differences of opinion as to whether talking always is a good idea.

The result is that "people have mistrusted the fact that [the policy decision-making process] is genuine, and it's been painstakingly slow".

In contrast, the Treatment Action Campaign has been likened to the United Democratic Front. It has arguably played an important educational and conscientising role in the newsroom. As a single-issue campaign, its birth was seen as something inevitable in the absence of a progressive government agenda around HIV/Aids. As one interviewee put it: "If the TAC wasn't formed, something else would have been."

While the TAC is commonly understood to have an effective media-savvy advocacy campaign - creating events that cannot be ignored by the most basic news agenda - it is equally its

accessibility, and its appeal to a "human exchange" that has secured it as significant in the newsroom.

Our media strategy is driven by common sense. We try to co-operate with journalists as much as possible. We don't treat them with disrespect (unlike many senior members of government). We make a point of explaining things as clearly as possible without spin. We keep our messages clear and we always try to be reasonable.

In many instances a mutually supportive relationship developed between the TAC and the HIV/Aids reporter. In the absence of editorial policy decisions on HIV/Aids coverage, it was frequently the HIV/Aids journalist who played an advocacy role in the newsroom, and largely determined the nature and extent of HIV/Aids coverage.

This was fuelled by a journalist's proximity to the HIV/Aids story, often driving him or her beyond the call of professional duty. One interviewee said that she had spent some time outside of the newsroom comforting dying Aids patients in hospital. And it's this emotional proximity to the story, in the context of newsroom jostling and competing for column space, that is partially responsible for a number of seasoned HIV/Aids reporters burning out on the job.

The dramatic drop in HIV/Aids coverage in the 2003 monitoring period is problematic for those who argue that HIV/Aids is a chronic lead, and needs to be approached differently from other news stories. It is an opportunity for journalism: a chance to stretch its legs and write about an important issue in new ways. Yet the interviews suggest that journalists have internalised the notion of "the business of news" and, despite the advocacy role, are aware that their job is to sell newspapers.

While some editors said that they would like to cover HIV/Aids more frequently, there was a striking absence of imagination of how to go about this without putting off readers (read: losing sales). Others pointed to a lack of resources and time to cover HIV/Aids more comprehensively. Given the conditions and objectives of the commercial newsroom, this is perhaps unavoidable. As it stands: "Conflict is news.

Consensus is only news when it has followed conflict."

As we move into a period of relative consensus - at least as far as anti-retroviral policy is concerned - it will be interesting to see the extent to which the press takes up the challenge of telling the more difficult story of what many still cannot see.

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