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Shaping the conflict: factors influencing the representation of conflict around HIV/AIDS policy in the South African press

ABSTRACT

Prior research suggests there is a lack of editorial-level policy thinking around HIV/AIDS coverage in South African media institutions. At the same time, constraints of time, capacity and resources, common in the commercial newsroom, mean it is often ill-equipped to deal more comprehensively with the complex effects of the pandemic in the country. A quantitative study, conducted as a sister study to this, shows the press took a strongly critical position in relation to the government health policy on anti-retrovirals (ARVs) during the monitored periods (March-May 2002 and March-May 2003). Given the relative complexity of a public ARV treatment programme, the lack of resources and capacity in the newsroom, as well as the lack of widespread editorial-level policy thinking on HIV/AIDS coverage, how is it that the press came to represent a position so strongly in opposition to the government policy? In the context of an overview of the quantitative findings, this paper explores several possible reasons that emerged during interviews conducted with key informants in the field of HIV/AIDS and the media.

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1. INTRODUCTION

It may be true to say that HIV/AIDS in post-apartheid South Africa begins in conflict – that we cannot talk about the pandemic without provoking issues of disagreement or disharmony symptomatic of a country in transition. As noted by Trengove Jones (2001): “All the key fault lines in societies, the flashpoints of class, gender, race and economic inequalities are brought more pointedly to prominence by the epidemic” (Trengove Jones, 2001:10).

These conflicts were inevitably absorbed into the newsroom and played out in various ways. Journalists – particularly those working in the 1990s – have reported splits in the newsroom along racial and political lines [J1 – see end notes], a reluctance among some editors to deal with social taboos, such as homosexual sex [J2], and an awkward positioning of the largely white-owned and white-run media in relation to the new ANC government. Some editors were initially afraid to appear critical of the government in case they were seen to be racist. Some argue this lent an early credence to the dissident discourse [J1]. Fuelling these conflicts was the apparent haphazard response to the pandemic by the government (Sarafina II (1996) and its support of Virodene (1997) are oft quoted examples), Mbeki’s courting of the AIDS denialists, and perceptions of uncertainty around the scientific facts of HIV/AIDS. At the level of the government health policy alone, opponents were accused of being racist, or of participating in a conspiracy against Africans (Fassin & Schneider, 2003). It was a criticism to which the media itself was not immune, and it has, among other things, been labelled unpatriotic and accused of being the cause of the conflict around HIV/AIDS in the first place (Trengove Jones, 2001).

Several studies (see Delate, 2003; Siyam’kela, 2003; Stein, 2001; 2002) have shown the extent to which political conflict between the government and AIDS activists has dominated media coverage of the pandemic. Many argue that the complexity of HIV/AIDS (political, scientific, psychological, social, cultural and economic) means that it needs to be considered a unique kind of story, and approached in a very specific kind of way, other than the news values that dictate much of the media’s coverage of events. However, past research has suggested that this is not the case. Coverage has largely been reactive, frequently ill-informed, and pandering to a kind of sensationalism that sells newspapers (Shepperson, 2000; Stein, 2001) [1].

The extent to which the media, considered generally, has not done a good job in reporting HIV/AIDS is suggested by the continuing gap between what is published and what media consumers want (Jooste, 2003); the widespread negative attitude towards the media in the scientific community [Sc]; and the degree to which the public still appears uninformed about the basic facts of HIV/AIDS. As recently as 2003, a popular talk show

host in Johannesburg received calls from listeners questioning the existence of HIV and its causal link with AIDS.

In the context of an overview of the relevant findings of our quantitative study into HIV/AIDS coverage in South Africa's press, this paper presents the hypothesis (from interviews conducted as part of the study) that a position overwhelmingly in opposition to the government policy on anti-retrovirals (ARVs) during the monitored periods was not a considered one, but symptomatic of a reactive commercial press constrained by a lack of financial resources, capacity, time and skills.

2. METHODOLOGY

2.1 Summary of quantitative research methodology

The quantitative study involved comparative quantitative research of all HIV/AIDS coverage in 43 of South Africa's prominent print media (including all major national and regional daily and weekly newspapers) for the periods from March-May 2002 and March-May 2003.

HIV/AIDS content was identified through a keyword search compiled by the research group. For each content item identified through the keyword search, we captured the following information: sources, key messages, positioning, topic, author, date, headline, page number, medium (newspaper), content type, region and a summary of the content item.

2.1.1 Explanation of data relevant to this paper

Sources

Sources were defined as an individual or group who was accessed for information and quoted directly or indirectly. If that person or group is only mentioned, they are not considered a source. Each content item may have one or more source (or in some cases no sources). For the purposes of this study, the research group predefined specific sources to be monitored. This template was developed and refined where necessary during the course of the monitoring.

Key messages

A key message is the central point being made by the content item. Each content item may have one or more key messages.

Positioning

Positioning as used in this study measures instances of clear favourable or critical representations in content items in relation to a range of groups, institutions or organizations and individuals. The categories for positioning used were 'favourable', 'unfavourable', 'ambivalent' or 'fair' (here shown together as 'neutral'). The 'favourable' and 'unfavourable' categories were used only when this was clearly evident. If this was not the case, the 'ambivalent' or 'fair' categories were used.

Topic

Each content item was ascribed a topic code. There was an adaptable list of 23 topic codes, which ranged from topics such as Treatment, Prevention and Research to Poverty, Labour, Economics, Protests/Campaigns, and Children. The topic referred to what the content item was generally about.

2.2 Qualitative research

Besides background interviews with those involved at various levels in HIV/AIDS to help establish research criteria, face-to-face and semi-structured interviews were conducted with nine key informants. A further four informants completed the questionnaires. The informants included two senior government communicators, two senior editors, two editors, two senior HIV/AIDS journalists, a senior communications officer from a union, a senior Treatment Action Campaign communicator, an academic, a doctor/consultant working in the business sector, and a scientist working in the field of HIV/AIDS.

The objective of the interviews was to contextualize the quantitative findings, and they were not intended to be conclusive in themselves. The interviews were conducted anonymously and where quoted, they are annotated in this paper as follows:

G1	Senior government communicator
G2	Senior government communicator
ED1	Editor
ED2	Editor
SED1	Senior editor (e.g. news editor)
SED2	Senior editor
J1	Senior journalist
J2	Senior journalist
AC	Academic
Sc	Scientist working in the field of HIV/AIDS

2.3 Other definitions

Conflict

We adopted a loose definition of conflict as referring to public pressure being brought to bear by AIDS activists on the government over the HIV/AIDS policy, and the government's apparent resistance to this pressure. In the two monitored periods, there is a specific emphasis on ARVs: in the run-up to the Constitutional Court's ruling on Nevirapine in the first period [2] and in growing civil society pressure on government around a public ARV treatment programme in the second.

News values

Although news values can be difficult to define, and depend on cultural and ideological understandings of the self and society, our use of the concept is in line with Stein's (2002) in that Stein (2002) describes the "value' which a potential buyer/reader of news ascribes to any particular story" (Stein, 2002:23). Depending on the target audience, this may entail notions of political importance (what the government does), economic importance (what big business does), or involve issues of 'wanting to be entertained', 'intrigued', 'turned on' – as in the case of the Sunday sex pages – or simply made to 'feel good'.

News values frequently place a high value on celebrities and prominent figures in society as well as on scandal, conflict, violence and controversy. These values are often at the expense of the 'ordinary', the 'marginal', the 'everyday' (regardless of the importance of these) and the economically disempowered (the 'non-market').

Editorial-level policy thinking

In this study we define editorial-level policy thinking as a considered and sustained approach to HIV/AIDS coverage, which may include proactive publishing strategies around frequency, prominence and type of coverage (multi-sectoral, investigative, educational, etc.), and may involve specific issues such as human or child rights or gender issues. A comprehensive editorial-level policy might involve in-house training of journalists on HIV/AIDS issues and partnerships with AIDS activists, groups or the government to raise awareness on key issues such as stigmatization or safe sex. Editorial-level policy thinking may therefore include notions such as the social responsibility of the commercial media.

2.4 Limitations of the study

This study captures a specific point in time, and specific responses and understandings of the representation of conflict and HIV/AIDS in the South African press. There are no

doubt instances of disagreement, and a number of issues that warrant further study. This paper should therefore be considered a point of departure for further discussion.

2.5 Acknowledgements

Besides the support and input from the research group, I am indebted to the advice and help provided by Johannes Steyn (Perinatal HIV Research Unit), Helen Schneider (Centre for Health Policy, Wits University), Richard Delate (formerly from CADRE) and Ralph Berold (formerly part of Wits University's student HIV/AIDS counselling programme). The quantitative monitoring was implemented by the Media Monitoring Project.

3. OVERVIEW OF QUANTITATIVE RESEARCH

3.1 Content count by medium

There was a total of 2204 HIV/AIDS content items published in the media monitored over the two periods, with a 32% decrease in content items in the second period.

Count (all)	Count 2002	Count 2003
2204	1313	891

Table 1: HIV/AIDS content count (all)

A total of 62% of the content items (1366) dealt with HIV/AIDS at national level. Although all HIV/AIDS content was monitored, as will be shown in the key message analysis below, the predominance of national coverage is highly suggestive of the impact of conflict around the HIV/AIDS policy on the news agenda [3].

An average of 14 content items were published per day in 2002, compared to an average of 10 per day in 2003. However, there is no even spread of HIV/AIDS coverage among the monitored media. Coverage tends to predominate in areas where there is a high media density and related high level of economic activity. The top seven newspapers with content counts of over 100 (1220 content items in total) were responsible for over half (55.3%) of the HIV/AIDS coverage during the two monitoring periods. All of these seven newspapers are Gauteng based.

Tables 2 and 3 below show the top HIV/AIDS content counts per newspaper (daily and weekly).

Newspaper (Daily)	Count (all)
The Star	316
The Sowetan	192
Die Beeld	185
Business Day	152
Citizen	126
Die Burger	124
Cape Times	85
Daily Dispatch	80
Pretoria News	71
Daily News	66
Natal Witness	59
Cape Argus	57
The Herald	36
Die Volksblad	35
Total	1584

Table 2: Top content count per daily newspaper (all)

Newspaper (weekly)	Count (all)
Mail & Guardian	125
The Sunday Times	71
City Press	58
Sunday Independent	55
Saturday Star	47
Sunday Tribune	33
Rapport	30
Sowetan Sunday World	23
Independent on Saturday	18
Total	460

Table 3: Top content count per weekly newspaper (all)

3.2 Key Messages

Thirty-seven per cent of all key messages (4823) during the two monitoring periods are in opposition to the government policy on HIV/AIDS. These include key messages that stand in relation to the government policy (such as 'anti-retrovirals need to be distributed as part of a comprehensive/sustained treatment programme'), messages that are

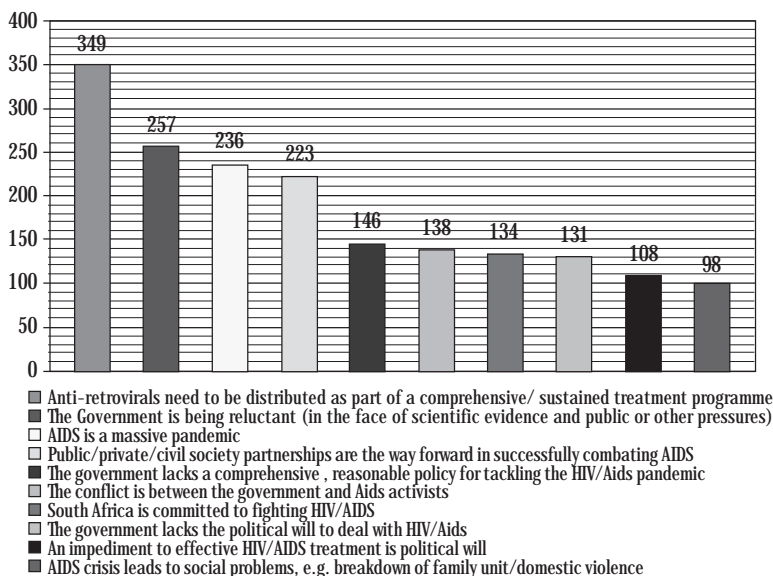
directly critical of the government ('The government lacks a comprehensive, reasonable policy for tackling HIV/AIDS'), highly emotionally charged messages ('The government is killing people') and messages that suggest a strong suspicion of the government's position ('The government is trying to cover up HIV/AIDS').

By contrast, 7% of the key messages can be said to be supportive of the government. These include a broad sample of messages that favour the government, such as 'South Africa is committed to fighting HIV/AIDS', 'The government is protecting the public from anti-retrovirals' and 'The government puts the lives of the poor ahead of profits' to messages critical of AIDS activists or in favour of dissidents.

If we include the key messages that deal directly with the political conflict around HIV/AIDS (such as 'The conflict is between the government and Aids activists' and 'Aids policy is highly politicized') we find that over 50% of the key messages during our monitoring periods represent the conflict between the government and Aids activists directly or stand in relation to this conflict.

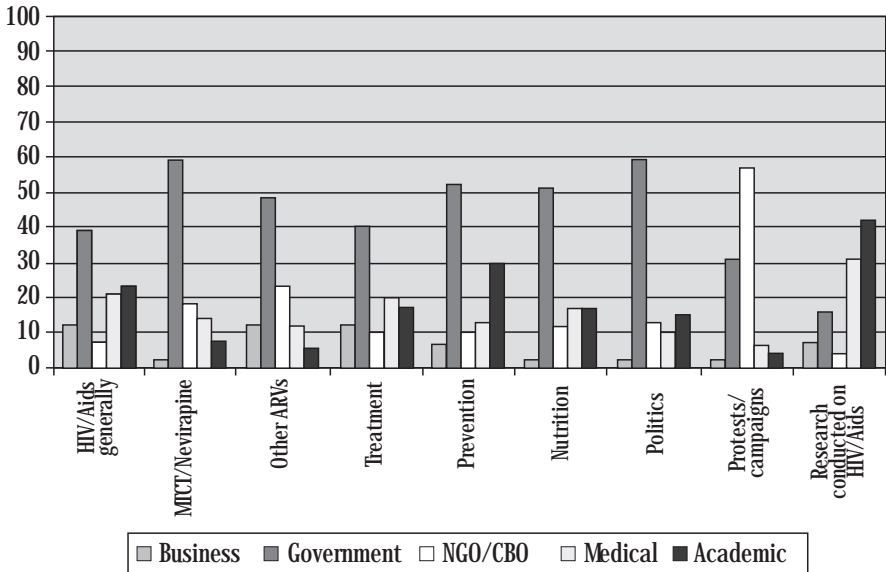
The remaining key messages deal with the role of business (supportive and critical), the international community, and mixed content on HIV/AIDS, such as issues of education, infrastructure and the extent of the pandemic.

As Graph 1 below shows, the top key message over both monitored periods was: 'anti-retrovirals need to be distributed as part of a comprehensive/sustained treatment programme'.



Graph 1: Top 10 key messages (all)

3.3 Sources



Graph 2: Topics and sources (all)

Graph 2 shows that for most HIV/AIDS topics during the two monitored periods, the government is the primary source of information in the newsroom. It suggests strongly that compared to business, NGO/CBOs (of which the TAC (Treatment Action Campaign) alone makes up 55% of the source count), and the medical and academic communities, government positions have a high level of newsworthiness. It is interesting to note the effect TAC protests and campaigns have on the news agenda. By creating newsworthy events that cannot be ignored by the commercial media (public marches, confrontations with the Health Minister and the civil disobedience campaign among them), it inverts a news agenda that has a focus on what the government does and does not do.

The graph also shows that research on HIV/AIDS is predominantly sourced from the medical and academic communities. While this in itself may be a natural reflection of the sectors where most of the research is being conducted, or the sectors from which explanations of research are sought, it suggests that despite the news agenda being dominated by conflict around the HIV/AIDS policy, issues that are not at face value related to conflict are not translated or interpreted within its parameters.

4. FACTORS INFLUENCING HIV/AIDS COVERAGE GENERALLY

A widespread lack of editorial-level policy thinking around HIV/AIDS coverage (Stein, 2002) means that editorial decisions tend to be ad hoc, reactive and largely determined on a case-by-case basis according to pre-determinates (often instinctual) of newsworthiness (Shepperson, 2001; Stein, 2002) [4].

Stein (2002) points out that constraints to better HIV/AIDS coverage involve a number of issues, including the imperative of news values (HIV/AIDS having a relatively low news value); economic constraints; and a lack of commitment to the HIV/AIDS story (Stein, 2002. pp23-30). A reluctance to allocate sufficient resources, capacity and time means that the more complex aspects of HIV/AIDS (psychological, scientific, sociological and cultural, etc.) tend to be under-represented [ED1].

The lack of resources in the newsroom is a common constraint to good – as in critical and investigative – journalism generally, not only in South Africa (Terzis, undated). Yet unlike sports, business or even entertainment, HIV/AIDS – particularly when stories are ‘bad news’, critical or politically sensitive – is generally unattractive to advertisers. Properly covering the pandemic places an implicit financial burden on a media organization [5].

It is interesting to note the level at which the profit motive behind news production has been internalized by journalists. Informants outside the commercial media environment – that is, not involved in the day-to-day production of news – feel that the media has a social responsibility to educate, inform and uncover the deeper textures of the pandemic in South Africa. One government communicator [G2] felt that this role was accepted by the media, despite its commercial orientation.

The informants involved in the day-to-day production of news, however, took a more pragmatic approach to news production and showed a common understanding that the objective of news was to sell newspapers. This notion of the ‘business of news’ has been – perhaps uncritically – internalized by journalists (not only editors) as part and parcel of their professional agenda. Coverage of HIV/AIDS is therefore determined by market positioning and by ‘what the reader wants’. These in turn predefine the limits and the shape that HIV/AIDS coverage can take.

As suggested by Stein (2002), HIV/AIDS is seen to have a low news value for several reasons, among them notions such as “HIV/AIDS is not about me”, “HIV/AIDS is not new” and “HIV/AIDS is not dramatic enough” (Stein, 2002:23-26). Coupled with this is a perception of readership fatigue with HIV/AIDS stories (‘Aids fatigue’), which results

in a disinclination to cover the pandemic unless it can be made 'exciting', 'relevant to readers' or 'dramatic' [SED1].

Nevertheless, media institutions do recognize the importance of covering HIV/AIDS. A lack of skills and in-house expertise as well as budgetary and time constraints mean that this takes several forms, including: relying on inexperienced journalists ('green journalists') to cover the story (Stein, 2002; Delate, 2003); relying on news services (such as SAPA or Health-e) for copy; creatively cross-pollinating coverage among three or four beats when necessary (e.g. one informant [SED2] pointed out that an HIV/AIDS story with political, economic and health implications would be referred to the political and economics desks before publication); placing the onus on individual reporters to train themselves [SED1] or to finance the costs associated with covering a story in remote areas or overseas (Stein, 2002); and providing column space that amounts to little more than a forum for differing points of view (much in the style of offering a 'right to reply').

As noted by Harber (Delate, 2003), newsrooms increasingly have "fewer experienced journalists and more and more green generalists" (Delate, quoting Anton Harber, 2003). Twenty per cent of the total author count over the two monitored periods were single authors (over 470 authors). Although this is not a direct reflection on the quality of the coverage, many informants noted that the skills levels of journalists were an impediment to a more comprehensive (and accurate) response to the HIV/AIDS pandemic. A related issue is that of the 'juniorization' of journalists. Stein (2002) points out that in many newsrooms the health beat is still perceived as a 'junior' beat (Stein, 2002:27).

The lack of specialist knowledge is felt through all the levels of the newsroom, and the skills, awareness and sensitivities of the editor and sub-editor also play an important part in how HIV/AIDS finally makes it into the news. Both editors and sub-editors tend to be generalists and not specialists. Sub-editors write headlines. Editors often decide on news angles. They are, in practice, once removed from most stories, and receive much of their information through the media itself. The headlines during the two monitored periods rank among the most provocative in the press's coverage of HIV/AIDS: "People are dying in our hands" (The Star, May 2003); "YES, you will, Dr No" (The Star, April 2003); "We're waging a war on anti-retrovirals, explains Mokaba" (Pretoria News, April 2002) and "Manto 'smokes' Aid lobby" (Citizen, May 14, 2003).

The trend to allow column space for the 'right to reply' is worth elaborating on briefly. On the one hand, this has been used to debilitating effect during the denialist 'debates'. As one informant remarked [J1], this was often couched in a need to be seen to be

objective. One can, however, speculate about the extent to which this was rather the result of not properly understanding the issues at hand and a reluctance in spending the necessary resources to act as an informed mediator of the debates. An analogy can be drawn with talk radio shows, which Trengove Jones (2002) notes frequently have less to do with inspiring informed debate as creating a free-ranging forum for a mishmash of half formed and often ill-informed ideas. Another interesting example of this is the recent coverage of the TAC's status report on the ARV roll-out in the *Mail & Guardian*. Coverage involved an article by Fatima Hassan of the TAC-aligned Aids Law Project under the headline "Slow road to drugs roll-out" and directly beneath that a reply to the TAC report written by the Health Minister entitled "Tackling the Treatment Action Campaign report" (*Mail & Guardian*, July, 2004). Neither of the two pieces nor the TAC report itself was interrogated by the newspaper.

5. THE COMPLEXITY OF THE ARV STORY

On 1 August 2003, a one-day seminar was hosted by the Wits School of Public Health and Perinatal HIV Research Unit called: Scaling up the use of anti-retrovirals in the public sector: What are the challenges? The seminar was attended by doctors, researchers, academics, members of the government and activists among them. The presentations focused on issues such as 'What will ARVs cost?', 'Scaling up: what capacity is required at facility, district and provincial levels?', 'What are the risks to scaling up?' and possible lessons to be learned from TB, termination of pregnancy and Mother-To-Child Transmission (MCT) interventions. A presentation was also made by the Botswana Ministry of Health on the experiences of scaling up access to ARVs in Botswana. One of the purposes of the seminar was for the HIV/AIDS community itself to better understand the implications and challenges of a public ARV roll-out programme. It felt like a significant process and, importantly, for those not directly involved in medical or scientific research, it became abundantly clear that a public ARV roll-out programme is a delicate affair, with many unknowns. The media was not invited to the event, because it was felt there was a need to discuss these complex issues – and to negotiate a dialogue with the government – outside the media spotlight. Three things were obvious from the seminar: at that time, few, if any, of the key issues raised at the seminar – such as the infrastructural capacity of the health sector, the skills levels of care givers, and ARV-associated health risks – were being dealt with by the press; the HIV/AIDS community was itself at that time still in the process of understanding the implications of a public ARV roll-out programme; and the media was openly acknowledged as a destructive presence in the delicate negotiations and attempts to bridge the fractures between the government and the broader HIV/AIDS community. (A casual survey of the media directly after the government approved a public ARV roll-out programme in November 2003 shows that some of these questions only began to be asked then.)

On World Aids Day, 2003, the preliminary findings of the quantitative part of this research was one of several presentations given to a gathering of editors, journalists and government communicators, hosted by, among others, the South African National Editors Forum. E-tv news head Joe Thloloe told the gathering that prior to attending, he had asked several journalists working at e-tv if they knew what key terms, such as 'CD4 count' and 'viral load', often used in HIV/AIDS reporting, meant. The responses showed, as he suggested, that there was a high level of ignorance in his newsroom about basic HIV/AIDS – and in particular ARV – terminology [6].

On 6 August 2004, at a report-back on the recent international AIDS conference held in Bangkok – which provoked much confused media coverage over the issue of Nevirapine, its efficacy and the government's position on this – SABC journalist Ida Jooste noted that it was the basic science of Nevirapine that was incorrectly reported by the press. Quoting from content items – including from the SABC itself – Jooste said the issue of Nevirapine was “only understood by journalists some days back. It is a complex story”. It is worth remembering that in 2002 Nevirapine was central to most news items dealing with HIV/AIDS, given the TAC's High Court challenge on the issue. It was clear that the basic tools for dealing with and understanding the evolving science of HIV/AIDS had not yet been widely developed by the South African media.

This misrepresentation of the facts on ARVs is not new. For instance, Shepperson notes the bungled reporting on the issue of AZT in 1999 (Shepperson, 2000). Yet, given this paucity of knowledge and awareness in media institutions around ARVs, the question can be posed: How is it that, during the monitored periods, a position so forcefully critical of the government's position on ARVs – and by implication favourable to the objectives of AIDS activists – came to be represented by the press?

6. FACTORS INFLUENCING THE REPRESENTATION OF CONFLICT

6.1. The historical relationship between the press and government on HIV/AIDS issues

Trengove Jones (2002) notes that the relationship between the government and the media regarding HIV/AIDS reached an all-time low in 2000. It was, among other things, the year in which Mbeki included dissidents in his newly convened AIDS Panel, the year in which the government released its five-year Strategic Plan on HIV/AIDS and STDs, and the year of the 13th International AIDS Conference in Durban, where some 5 000 leading scientists and physicians signed the Durban Declaration criticizing Mbeki and the dissident scientists who questioned the causal link between HIV and AIDS (Trengove Jones, 2000). During this one year alone, the press was accused of being unpatriotic, of racism and of sowing the seeds of conflict (ibid.). The notion that the media has

exaggerated – and even fabricated – the conflict between AIDS activists and the government is still maintained [G2].

This sense of mutual antipathy did, of course, not arise out of the blue. Criticism of government policy and interventions around HIV/AIDS had been widespread in the press (see Stein; Trengove Jones; Schneider & Fassin, *et al.*), often focusing specifically on the former [7] and current Health Ministers and President Mbeki. Criticism involved key public interventions, such as Sarafina II, Mbeki's denialist-like comments about the causal link between HIV and AIDS, and his courting of AIDS denialists. Other key historical events include the government's support of Virodene in 1997, the former Health Minister's attempt to make HIV/AIDS a notifiable disease in the face of patient confidentiality and privacy (in sharp contrast to the blanket silence over the cause of death of Mbeki's spokesperson in early 2002, widely suspected to be due to AIDS), as well as early attempts to block the use of anti-retrovirals because of their side effects (1998) (Schneider & Stein, 2001; Schneider & Fassin, 2002; Fassin & Schneider, 2003).

The historical relationship between the government and the press has at least three consequences. Firstly, it sets the tone for future reporting on HIV/AIDS. In the context of a lack of resources, time pressures and deadlines, much of the source material for journalists is derived from media archives – made much easier through the Internet. The media, in effect, constantly refers to itself, silently 'quoting' the tone, angles, perspectives and facts of past reporting on the pandemic. Even if biased or inaccurate, this can play a substantial role in shaping future coverage.

This dependency is exaggerated in the case of the inexperienced reporter. While the 20% total for once-off authors during the monitored periods is only suggestive (there may be any of a number of good or competent stories among them), a first-time HIV/AIDS reporter is more likely to simplify complexity, default to traditional news values (conflict in this instance) and re-represent common positions on the conflict (those most frequently represented in the media already).

Secondly, the historical relationship affects the transparency and level of caution of government communicators. While not precluding criticism, a strong relationship between government communicators and journalists is often built on a sense of mutual trust. Government communicators are gatekeepers to information and are not obliged and do not, in practice, share the same information with each inquiring journalist – particularly when that information is sensitive. As mentioned, government communicators have withheld information from journalists [G1] – in effect amounting to censorship – particularly in the case of inexperienced or antagonistic reporters.

Thirdly, the historical relationship creates a resistance among the upper echelons of power when dealing with the press.

If you feel your back is up against the wall, you might defend something much more aggressively than you would [G2].

While both the Health Minister and President Mbeki have in the past been critical of the press, one could argue that, at a crude level, this compliment has been returned. One need only consider the satirical use of the Health Minister's first name ('Manto') in news headlines to see the extent to which the antagonism precedes any contextual assessment of content. Although 'Manto' is better for letter counts in headlines (preferable, that is, to the Minister's long surname), its use serves as a constant reminder of her infamous exchange with 702 talk show host John Robbie in 2000, where she objected to being addressed by her first name – a common practice in interviews at the station. The exchange served to entrench the caricature of a Health Minister inaccessible and aloof to the needs of the common people.

While criticism – and even condemnation – of both government and the press has been warranted in many instances, it is frequently divorced from analysis, creating a context that is both reductionist (good versus bad, wrong versus right) and ad hominem: the person is attacked rather than his or her actions or ideas assessed properly [8]. For example, one government communicator felt that when the Health Minister talks about nutrition, she is often criticized in the media. Yet institutions such as the World Health Organization are seen to be saying similar things, and “treated in a very, very sympathetic way” [G1]. As another informant put it:

I think efforts by the media to get the President “to just say yes” ...regarding the link between HIV and AIDS, did not help advance the public's understanding of the issues and created a stalemate. Instead of focusing on the evidence of HIV in communities and its impact, the media tried to force the government to back down which helped perpetuate a cycle of indignation and outrage... [ED2]

Although only suggestive, the table below shows that during the monitored periods, for every one content item that represented the Health Minister favourably, 8.8 were published that represented her unfavourably. For each content item representing Mbeki favourably, 4.2 were published that represented him unfavourably.

	Favourable	Unfavourable	Neutral
Health Minister	13	115	11
Thabo Mbeki	20	83	13

Table 4: Positioning – Health Minister and President Mbeki (all)

6.2 The role of the HIV/AIDS reporter

While a particular newspaper may take a (generally tenuous) editorial position on HIV/AIDS – e.g. its newsworthiness, positioning in relation to the market, or in relation to the government or the TAC – as opposed to developing editorial policies around HIV/AIDS coverage, it is mostly the HIV/AIDS journalist [9] who drives the HIV/AIDS news agenda. The vagueness of editorial decisions on HIV/AIDS as well as the expected news-driving role of the journalist are evidenced by comments such as these:

[The journalist] will come to me and say...there is this talk about HIV, and I want to attend it. And then she'll go. I mean she could also not mention it. So a lot depends on the journalists themselves. The support is there, but [journalists] need to initiate it a bit themselves as well [SED1].

Although the overt censorship of HIV/AIDS stories by editors has occurred (notably, at the height of the Mbeki causal debate, one informant reported being forced out of journalism altogether over her refusal to take a pro-government line or to report 'objectively' [J1]), this appears to be the exception rather than the rule. Indeed, news editors balk at the idea that their publication practises censorship of any kind, which runs contrary to the notions of a free press, the role of the media in a democratic society and notions of intellectual independence.

There might be a line in the editorials, but there is no line in the newsroom. We would never go to our reporter and say: "we want you to report it in a certain way" [SED2].

In some instances, it is the HIV/AIDS journalist who can be said to play an advocacy role in the newsroom. Journalists who have covered the HIV/AIDS story closely often become emotionally intimate with the story and those affected by the disease. This can lead to their responding beyond the call of professional duty. One informant [J2] said she had spent some of her time outside the newsroom comforting HIV/AIDS patients in hospital.

In this context, informants felt there was little understanding or support in the newsroom, where they have been expected to argue for or justify their stories and compete for their inclusion in the news agenda. One informant [J1] also pointed to frequent newsroom conflicts between the journalist who is close to the story and the more detached position of the editor. Burnout was cited as common for HIV/AIDS reporters [J1].

Supportive (and sometimes uncritical [J2]) relationships are developed between the journalist and groups like the TAC. This emotional proximity can lead to self-censorship (a journalist withholding information that he/she feels may damage the cause of AIDS activists) [J2].

The extent to which individual journalists may have contributed to the overall tone of press coverage during the monitored periods is shown in the table below. The table shows the percentage of total author count shared by the top ten HIV/AIDS journalists [10], compared to editorials, and to standardized content services [11]. It shows that a significant amount of content over these monitored periods was produced by the ten HIV/AIDS journalists, potentially contributing to a sustained position critical of the government.

Standardized content Service	Editorials	Top 10 HIV/AIDS journalists by author count
7%	3%	15%

Table 5: Count by author (all)

6.3 The complexity of government decision-making processes

Similar to a criticism that journalists do not understand scientific research processes and the extent of the implications of scientific research [12], the government communicators interviewed felt that journalists often do not understand government decision-making processes:

I think there are quite often times when it would seem that the media does not fully understand how the policy-making process works...I think that the [media's] impatience is relative to the issue. The government is an extremely complex institution. Decision-making is very concentrated. And there are also principles about what is public and what should not go into it...There are times when people lose sight of timetables, or because of their complex position, communicators are not always in a position to say when things will happen [G2].

Journalists are seen to want to “[communicate] the magnitude of [a] decision...before its content” [G2] and have “mistrusted the fact that it [the policy process] is genuine, and [has] been painstakingly slow” [G1].

6.4 Government communications

Although the government values the media (the relationship is seen as being “fairly open” [G2]), its communication patterns are frequently out of step with the information needs of journalists:

The reality and the different functions of the organizations concerned [TAC and government] 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 [G1].

While many journalists may cover a story with the single focus of getting that story to deadline, particularly in the context of breaking news, the government communicator has an uneven ratio of calls to field from journalists:

You can have a very hot issue around AIDS happening in one day. But at the same time there are three other queries...the outbreak of meningitis, this and that...given that health has a number of specialties. I think it's not quite like Water Affairs where you provide water, you provide water...And you can find in any one day that you could be answering anything from [questions on] radioactive materials through to people being dropped off stretchers and left to die in hospital [G1].

At the same time, the government communicator does not always have access to the necessary information. In answer to the question: "Why has there been resistance from the government around ARV roll-out?", one government communicator's response was: "I think there are many reasons and I am not sure that I fully understand them all" [G1].

In the context of conflict, government communications are seen by outside observers and many journalists as being non-committal or reactive:

The government shies away from important issues and is only willing to react in a comprehensive way when it comes to 'safe' issues. If the government was more open about controversial issues, there would be little room for wild speculation [AC].

From the perspective of the government communicator, when the issue is sensitive and has political ramifications, he or she needs to be certain about what can or cannot be said (mirroring, perhaps, a similar ambivalence to the media in the scientific community, which is afraid that journalists will simply get it wrong [Sc]):

[It is important to check] back with your principals as to whether there is a desire on their part to actually 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 or whether you're selective when you talk. And there certainly are those in government who feel that you need to be quite selective as to when to talk [G1].

These communication patterns are seen to have impacted on reporting the government perspective on HIV/Aids.

[The impact of the communication patterns becomes more important and they assume a greater size when you're dealing with something that is particularly sensitive [G1].

It's a complex thing we have to unravel...and it becomes difficult to resolve if there is insistence [from the media] [G2].

Communication follows policy, it does not precede policy. And so I think that sometimes creates a certain imbalance [G1].

6.5 TAC communications

Outside its advocacy role, the TAC has been a crucial 'information player' or source of information for journalists – particularly in the context of failed government communications, and the resource constraints, time pressures and skills levels of journalists in the newsroom. Its proactive engagement with the media is in sharp contrast to the government's reactive media relations role and its availability (to help journalists understand difficult scientific concepts, orientate them generally in relation to the pandemic, do interviews, and provide other information such as online resources dealing with HIV/AIDS) are more compatible with daily newsroom pressures and deadlines. The TAC has arguably played an important conscientizing role in the newsroom. One informant likened this to the United Democratic Front during the anti-apartheid struggle [J1].

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 appeal to a 'human exchange' that has influenced its role as a significant information push in the newsroom (albeit that much of this happens behind the scenes):

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. A lot of activist groups make the mistake of coming across so aggressively and antagonistically that they alienate ordinary people [TAC].

The overall positioning count for the TAC shows that for every one content item published critical of the organization, 2.3 were published that represented it favourably.

	Favourable	Unfavourable	Neutral
TAC	53	23	18

Table 6: Positioning - TAC

6.6 The role of Nelson Mandela

The role of public icons and role models such as former President Nelson Mandela in shaping a sense of national identity that is internalized by the commercial news agenda is beyond the scope of this study. However, one informant noted that Mandela [13] had played a crucial role in motivating and orientating general public interest and awareness in response to the HIV/AIDS pandemic [J1]. As a public icon, he had come to represent a range of positive and powerful associations and his historical and contemporary status meant that most of what he did was considered newsworthy by the press.

Mandela signified a clear moral position in the conflict around the government HIV/AIDS policy. His public statements critical of the government's stance on anti-retrovirals in 2002, and by implication supportive of the objectives of AIDS activists, lent a symbolic moral credence to those objectives that were furthered through the former president's 'newsworthiness' [14].

Our positioning analysis suggests that during the periods under review, despite the controversies around his public criticism of the government policy, a favourable representation of the former president continued.

	Favourable	Unfavourable	Neutral
Nelson Mandela*	16	2	10

* Mandela comprises 21% of the total favourable representations of the civil society group. Other prominent contributions to favourable representations in this group include civil society members generally (19%) and prominent people/celebrities (17%).

Table 7: Positioning - Nelson Mandela (all)

6.7 The role of the international press

The role of the international press in shaping local media response to the pandemic is worth mentioning. HIV/AIDS is a global pandemic – and the government's response to it occurs within this context. Many of the tensions around HIV/AIDS in South Africa have been influenced by a dialogue of difference involving dichotomies such as 'us versus them', 'first world versus developing world', 'white versus black', 'colonizer versus

colonized', and 'national versus international'. Arguably, it is this dialogue that has shaped much of the Mbeki government's response to the pandemic. The inclusion of AIDS denialists in Mbeki's AIDS Panel both involves international 'experts' in the local context and insists on a unique African solution to the crisis. Notions such as the African Renaissance or initiatives like the New Partnership for Africa's Development (NEPAD) are, at least in part, about shaping a unique African identity in the global context. In this sense alone, HIV/AIDS in South Africa can be said to have a profound 'global newsworthiness'.

Local journalists – especially if they are inexperienced – frequently see the foreign journalist's role as exotic, and the foreign journalist (who sometimes has many years of experience behind him or her) is someone to be revered and looked up to. The foreign journalist is, after all, often writing for powerful publications – such as the Guardian, New York Times, Washington Post or Le Monde – in industrialized countries. Particularly in times of crisis, the foreign journalist becomes intimately part of the local press pool, influencing and trading perspectives with local reporters. At the same time, foreign news wires such as Reuters or AFP influence local HIV/AIDS copy.

Trengove Jones (2001) notes how coverage in publications like *The Economist* and *Time* served to re-enforce a neo-colonialist perspective of Africa as the other, the dark (and helpless) continent where "disease and inevitable death are [its] inescapable destiny" (Trengove Jones, 2001:41). As has been pointed out, foreign coverage of events tends to perpetuate "a world view that consistently favours the home nation perspective on world affairs" (Terzis, undated). The complexities of HIV/AIDS in the local context need to be made digestible for the general reader abroad. This was cited by one informant [J2] as a potential reason for an oversimplification of the HIV/AIDS story in the local context.

7. CONCLUSION

The above factors influencing the coverage of conflict around the HIV/AIDS policy are not comprehensive, but were the main contributing factors suggested by the interviews conducted.

What is suggested by this study is that there is an absence of a broad analytical role played by the press. On the whole, it has failed as a proactive, informed interlocutor in the conflict. HIV/AIDS reporting in the commercial press – including substantial pressure placed on the government for policy change – is influenced by factors that are in some sense predetermined by a press driven by profit.

Shepperson points out that in post-apartheid South Africa, editorial strategies in the print media have shifted from being predominantly ideological to what can be described as pragmatic (Shepperson, 2000:p17). It is a pragmatism that results in downsizing newsrooms and streamlining news gathering processes. Terzis (undated) notes that institutional constraints inhibit critical, investigative journalism and that the modern news format limits the space to explain complex issues without the use of stereotypes and catchwords (Terzis, undated). The reporting on HIV/AIDS in South Africa has certainly suffered these maladies.

The profit motive means that resources, capacity and time will always be key influencing ingredients of any coverage. In this context, it means that the press has largely been reactive, and driven by commercial news values, rather than by the uniqueness of the HIV/AIDS story itself, which may require significant resources, skills and time for proper understanding and reporting. Rather than respond to the intrinsic and complex requirements of reporting on HIV/AIDS in South Africa, the pandemic has been largely forced to fit into the machinery and known values of commercial news production.

Fassin and Schneider (2003) argue that “through the mobilization of activists as well as lay people and through the fight for social justice [HIV/AIDS] has also come to be a resource for democracy”. The increased capacity and skills at public health institutions to accommodate a public ARV roll-out programme will have a wider benefit for health services and provision generally. Taken as an analogy, one cannot help feeling that it is this opportunity – for a better journalism – that has been forfeited by the country’s media institutions.

8. END NOTES

- 1 See also Stein (2002:33-34) for a response to the proposal of editorial policy on HIV/AIDS coverage, which informants felt was problematic, citing issues such as ‘agenda-setting’ from above, incompatibility with unpredictable newsroom processes, and perceived difficulties in implementing the policy.
- 2 In March 2002 the Pretoria High Court granted the TAC a Temporary Execution Order forcing the government to make Nevirapine available in public-sector facilities. Amid much controversy, the government appealed the Execution Order. In April 2002 the Constitutional Court denied the government’s appeal (Schneider & Fassin, 2002:S48).
- 3 Besides reflecting a predominance of coverage of the conflict around the HIV/AIDS policy, national coverage would include topics such as HIV/AIDS statistics, HIV/AIDS benefit events, and issues such as AIDS orphans.

- 4 In this context newsworthiness is essentially the same as the news values defined above. Newsworthiness tends to be instinctual because it is often not debated in the newsroom and is entrusted to the unwritten experience of the editors (sometimes sub-editors) and is absorbed consciously or unconsciously through the overall positioning, ethos and working environment of a particular publication. Our quantitative findings suggest that in line with news values as defined, prominent personalities, government positions and conflict have a high newsworthiness in HIV/AIDS coverage (Finlay, 2003).
- 5 It is worth noting in this context Shepperson's point: "When major commercial groups like Pick 'n Pay, or strategic sectors like the gold mining industry, can make the effort to provide anti-retroviral treatment to staff...then there is some reason to expect that they...may find supporting dedicated commercial media reporting on HIV/AIDS will have a similar marketing effect (Shepperson, 2002:16). Similarly, the Mail & Guardian recently ran a 16-page supplement (Investing in Life, August 6-12, 2004) focusing on HIV/AIDS in the workplace. Prominent advertisers included Anglo American, Eskom, ABSA, Transnet, BMW and Vodacom.
- 6 As part of this study we selected a random sample of content items with a high HIV/AIDS factual content, and asked a doctor experienced in HIV/AIDS to assess them for clarity, accuracy and relevance. The results are presented below.

Sense/readability/clarity	1 (Very unclear)	2	3	4	5 (Clear)	N/A
		1	8	15	11	1
Accuracy of medical facts	1 (Very unclear)	2	3	4	5 (Clear)	N/A
		1	8	15	11	1
Relevance of medical facts to argument in article	1 (Very unclear)	2	3	4	5 (Clear)	N/A
		1	8	15	11	1

Table 8: HIV/AIDS fact check (all)

- 7 Nkosazana Dlamini-Zuma. Except where otherwise stated, when I refer to the Health Minister I am referring to the current Health Minister, Manto Thsabalala-Msimang.

- 8 Schneider and Stein (2001) have, for example, argued that the common notion that the government lacks the political will to deal with HIV/AIDS is a fallacy.
- 9 In this context, when I refer to the HIV/AIDS journalist, I mean the journalist who covers HIV/AIDS specifically as a beat and over a protracted period. Like any beat, he or she is well-versed in the issues at stake, and is close to the story. I do not include here incidental journalism by cub reporters, journalists who happen to be given an AIDS story to cover for the day, or seasoned political reporters and the like reporting on HIV/AIDS because a particular issue happens to have a high political content.
- 10 The lowest author count for a single author in this group was 17 and the highest 80. The author count in total (2301) is more than the total HIV/AIDS content count for the monitored periods, because some content items have been co-authored, or may have three or even more authors. In some instances, two or more author counts may therefore account for one HIV/AIDS content item.
- 11 The editorial count includes only those items that were clearly marked as editorials, or occurred in the space typically allocated for editorials in a particular publication. The standardized content services count includes only those items that were clearly sourced to a service (for example, SAPA, AFP or Reuters), and not items where a journalist's name was used instead of the name of the service.
- 12 The media is seen by some scientists to have a tendency to present scientific advancements as having immediate public health implications ("they want to make a big flame") [Sc].
- 13 In the context of HIV/AIDS, in different ways, former Archbishop Desmond Tutu, and Justice Edwin Cameron may be others.
- 14 The Constitutional Court functions for many in a similar symbolic way, and its decision on Nevirapine arguably helped to set an ethical position on access to anti-retrovirals (or at the very least simplified the complexity of the argument), despite the fact that its ruling provoked issues around government accountability and questions around whether the state or the courts decide the country's policies. Similarly, that big business (DaimlerChrysler and Anglo American among them) initiated anti-retroviral programmes in the workplace arguably served to cement the moral tone of the argument. Big business, although often treated critically in the press, is part of the ideological make-up of contemporary South African society. Sixty-two per cent of a total of 402 key messages that dealt with businesses and

HIV/AIDS presented business in a positive light. The situation is no doubt more complex, but the hypothesis is based on the basic assumption that the commercial press tends to represent commonly-held ideological codes back to us – “a framework that is reassuringly familiar to both reader and journalist” (Braham, P., *How the media report race*, p275, included in Bennett, T et al., 1982), and on the general understanding that society coheres through these codes, many of them commonly held associations with public symbols, whether individuals, groups or institutions. It is a small step from these ideological symbols (with a high news value) taking a position implicitly or explicitly on the conflict around government policy on HIV/AIDS, and for the press to represent, internalize, or mirror these positions, particularly in complex situations. They simplify the complexity, and signify what is or ought to be reasonable to all.

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