

Politics, Medicine and Disease

The story of **HIV** in the media from 2002



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Introduction

Have you already read this about HIV?

“HIV is a death sentence”

What you should know

In 2017 **39.9** million people globally were living with HIV. In South Africa, an estimated **7.2 million** people were living with HIV in the same period¹. To put this in context, this is **2 times** more than the **3.5 million** people who have diabetes in South Africa². HIV is a sexually transmitted disease³. Due to the stigma associated with HIV and its transmission, in **35%** of countries with available data, over **50%** of people report having discriminatory attitudes towards people living with HIV. The consequences are that they are being marginalised from society and from basic services they need to defend themselves from HIV⁴.

16 years later is there any progress in South Africa?

It is known that media can break the silence around certain diseases and create an environment that encourages discussion in order to protect individuals and change people's behaviour, where necessary⁵. This is not only because media are a reflection of society but also because they have the power to change certain narratives. Today we are witnessing the rise of online media and with this rise, we see increasing audience engagement with news and media – it can be said that social media has disrupted the traditional news model – “to add to, amplify or even distort traditional sources⁶” across social networks⁷. Read our newsroom report to know more⁸.

What is HIV? HIV is a *human immunodeficiency virus*. It is the virus that can cause *acquired immunodeficiency syndrome*, or AIDS, if not treated. HIV attacks the body's immune system, specifically the CD4 cells (T cells), which help the immune system fight off infections. Untreated, HIV reduces the number of CD4 cells (T cells) in the body, making the person more likely to get other infections or infection-related cancers.

What Is AIDS? AIDS is the most severe phase of HIV infection. People with AIDS have such badly damaged immune systems that they get an increasing number of severe illnesses, called “opportunistic infections”.
How HIV is transmitted? Most commonly, people transmit HIV through sexual behaviours⁹ and needle or syringe use⁹.

[1] <http://www.unaids.org/en/resources/infographics/people-living-with-hiv-around-the-world>

[2] <https://www.health24.com/Medical/Diabetes/About-diabetes/Diabetes-tsunami-hits-South-Africa-20130210>

[3] <https://www.hiv.gov/hiv-basics/overview/about-hiv-and-aids/how-is-hiv-transmitted>

[4] <https://www.avert.org/professionals/hiv-social-issues/stigma-discrimination>

[5] http://data.unaids.org/publications/irc-pub06/jc1000-media_en.pdf

[6] https://www.mediamonitoringafrica.org/wp-content/uploads/2017/11/MMA_Newsroom_Nov.pdf

[7] Adornato, A. 2016. Forces at the gate: Social media's influence on editorial and production decisions in local television newsrooms. *Electronic News* 10(2): 87-104.

[8] https://www.mediamonitoringafrica.org/wp-content/uploads/2017/11/MMA_Newsroom_Nov.pdf

[9] <https://www.hiv.gov/hiv-basics/overview/about-hiv-and-aids/how-is-hiv-transmitted>

How media can break the silence and why is the media so important?

Gender and HIV/AIDS is a real issue in the South Africa context. In 2002/2003, MMA monitored the media's coverage of gender and HIV/AIDS, and produced a report in 2004. We wanted to see if there has been any significant change in the way South African media report on gender and HIV/AIDS. In 2004, a report published by Alan Finlay¹⁰ found that on the issue of HIV/AIDS the South African media was dominated by medical and academic topics and that the SA Government was the most quoted source across all monitored coverage. Given how many people are infected and affected by HIV we want to understand how, or if, media coverage has changed over the last 16 years. The following is an attempt to replicate the 2002/2003 study as much as possible and to track changes in the quality of HIV/AIDS coverage to date.

Methodology

How we conducted the research

What we analysed in each story

In March-May 2002 and 2003, MMA conducted a research report¹¹ analysing media coverage of HIV/AIDS. For a comparative study, we analysed this historical data with new data collected for March-May 2017 and March-May 2018. We followed the same methodology to allow for ease of comparison. For the 2017/2018 period we identified the main topic of each story, the number of stories per media, the sources affiliation, the gender affiliation source and the race affiliation source.

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

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

How we sourced the stories for analysis

This comparative study of all HIV/AIDS media coverage in South Africa was conducted over four different periods (March-May 2002, March-May 2003, March-May 2017 and March-May 2018).

We used 'Dexter' MMA's internal online monitoring tool, that selects all online media content from the websites of pre-selected news media and stores the articles in a searchable database (see *the notes below for the full List of media*¹²).

All stories with the following keywords were included in the database: *AIDS/HIV, HIV, AIDS, Anti retrovirals, Nevirapine, Mother to child transmission (prevention), Pneumocytosis, Opportunistic infection, Orphans/child head households, TB, Generics, Vaccine, Dissidents, Condom/femidom, Safe sex, Activists, Communicable diseases.*

For each story, Dexter automatically retrieves important information, including: (1) name, type and origin of publication, (2) headline and summary, (3) main topics of the story and (4) the identities of quoted sources (including name, race, gender and affiliation). The results from Dexter were then downloaded and manually analysed to produce the following findings politicised manner.

Limitations to the methodology

One of the major limitations to this research was that we did not have access to the original source database of the 2002/2003 study, only the final written report containing the findings and analysis. This meant that some elements were difficult to compare between years, such as gender, race and affiliation of sources. Also, the studies between the two years had different monitoring processes (2002/03 was conducted manually; 2017/18 was undertaken automatically by Dexter). We also monitored different media between the two periods. Despite these challenges, we still see the huge value in attempting to compare the results and findings between the two sets of years in order for us to better understand how issues are HIV/AIDS were and are being framed.

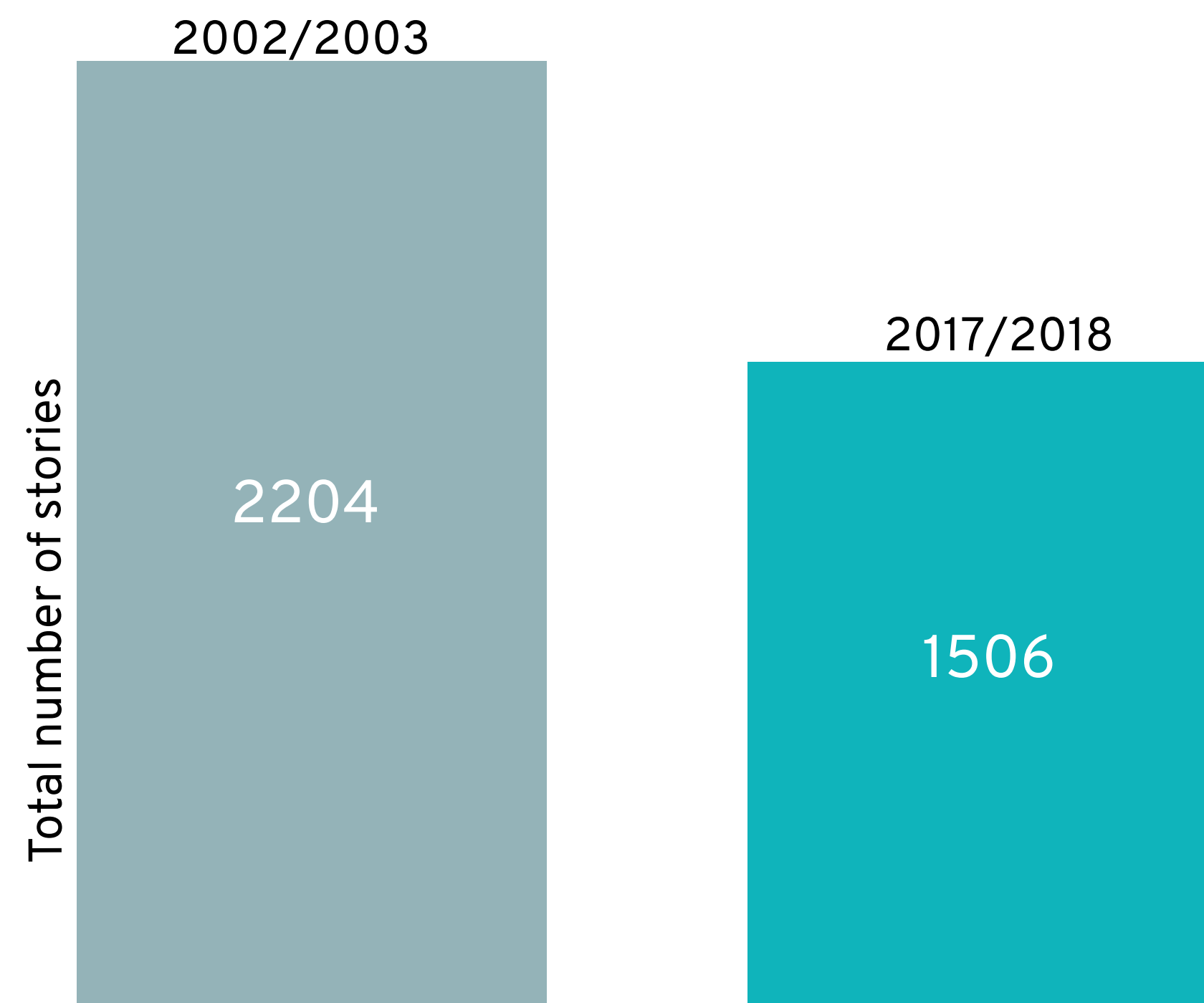
[12] Africa Investor, Mining Weekly, Tabloid Media, The Con, Newspaper, City Press, DA, Weekend Argus, Financial Mail, GCIS, Doc, M&G Africa, My Broadband, Parliament RSA, SABC Online News, Polokwane Observer, African Times News, Business Live, Middelburg Observer, Sunday World, Sunday Tribune, The Post (SA), The Star, Zoutpansberger, Die Laevelder, RNEWS, PoliticsWeb, Saturday Star, Limpopo Mirror, Zoutnet, Business-Tech, Channel Africa, The Daily Vox, Engineering News, Destiny Connect, Pretoria News, Grocott's Mail, The Mercury, GroundUp, Business Day, Biz Community, Daily News, Cape Times, Cape Argus, Africa-Newsroom, Moneyweb, Daily Dispatch, ANN7, M&G, Daily Maverick, Sunday Times, The Herald, Daily Sun, The New Age, The Citizen, eNCA Online, Eyewitness News, Sowetan, The Times, Huffington Post, IOL, News24, All Africa

Media count per daily newspaper

For the first part of our analysis we compared the number of stories published between different media as well as the total number of stories published between the two time periods.

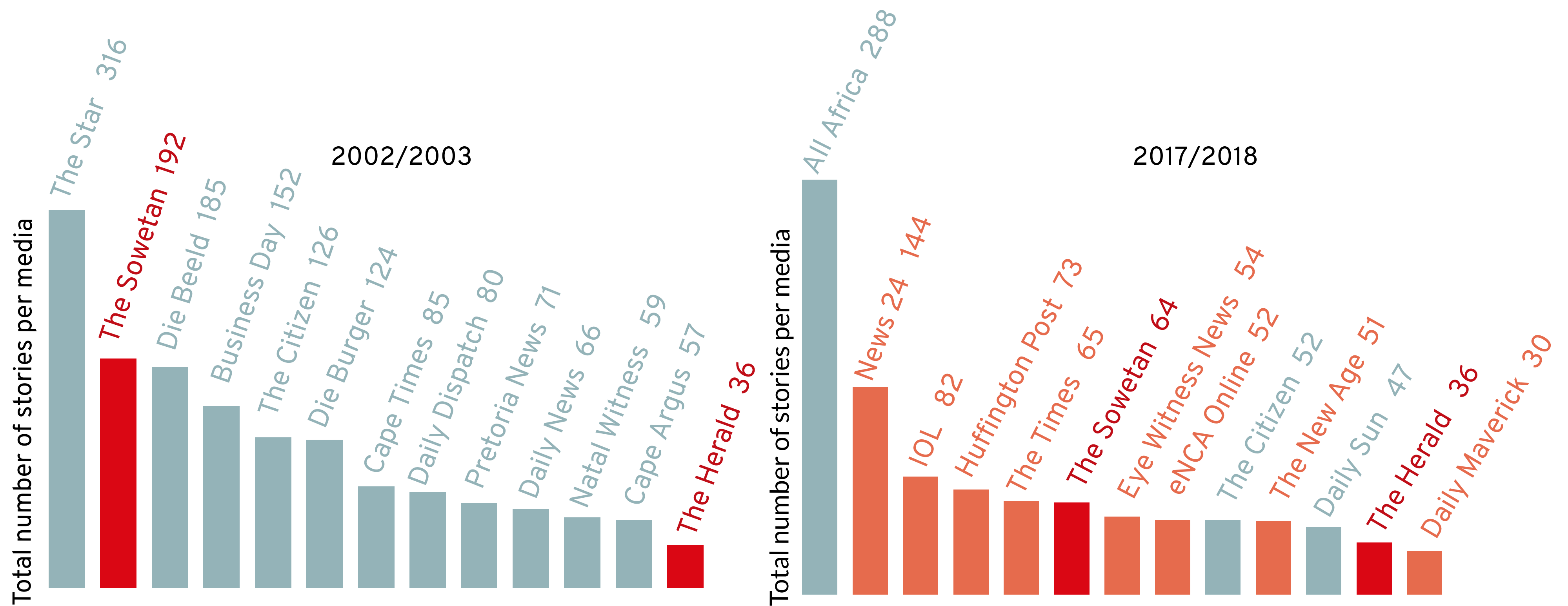
Sources

We also identified the sources in each article. The sources are individuals or groups who were consulted for information and are quoted directly or indirectly in the article. For each source, we identified their racial group, gender and which organisation or group they represented (i.e. affiliation). We specifically identify sources as they speak to the power dynamics inherent in any story and help identify which groups are deemed important by the media and why are neglected.



There were a total of **2204** HIV/AIDS articles for the 2002/2003 period and a total of **1506** HIV/AIDS articles for the 2017/2018 period. **The number of HIV/AIDS stories has dropped by roughly 32% in the second period (2017/2018).**

Graph 1: Number of stories between media between 2002/2003 and 2017/2018



Graph 2: Top 14 Content Count per Daily Newspaper comparison 2002/2003 and 2017/2018

What is immediately clear from the results is that only two newspapers, *The Herald* and *Sowetan*, (as highlighted in red) feature in the top 14 media with HIV/AIDS stories between both the periods. Critically, 8 of top 14 media (as highlighted in orange in the graph above) did not even exist in 2002/2003 and are online medias. This is namely: *News24*, *IOL*, *Huffington Post*, *The Time*, *EyeWitness News*, *eNCA Online*, *The New Age* and *Daily Maverick*. This shows the massive surge in online publications over the past 16 years.

Even more critically, the total number of stories about HIV/AIDS have declined drastically during 2017/2018. For example, the newspaper *The Star* (as highlighted in blue in the graph above) was the biggest contributor to coverage and published 316 stories about the disease across the first monitoring period. *All Africa* (as highlighted in blue in the graph above) was the biggest contributor to coverage for the second period and only published 288 stories on the topic. We expected online media to publish more content especially because of the speed with which information and news could be spread¹³, but we can see that coverage has actually decreased.

[13]https://www.mediamonitoringafrica.org/wp-content/uploads/2017/11/MMA_Newsroom_Nov.pdf

What are the stories about?

Topics

We started by identifying the topics of each story. There was only one topic for each article and the topics were the main theme of each article. Each topic was derived from an extensive list of pre-existing topics. For example, the launch of an ATM-like vending machine for patients with AIDS in order to reduce the wait and congestion in the health facilities (*MoneyWeb* 15/03/2018¹⁴) was classified in the topic ‘Treatment’. Another example is where the President Cyril Ramaphosa is criticized for his promise to roll-out HIV and cancer awareness programmes in 2017 (*City Press in News 24* website 21/05/2018¹⁵), and this was classified ‘Politics’ because it was framed in a highly politicised manner.

Given the data available, we ranked the top eight topics to compare what the media focused on its coverage of HIV/AIDS.

2002/2003	2017/2018
HIV/AIDS generally	Crime/Violence
MTCT/Nevirapine	Justice
Other ARVs	Education/Awareness
Treatment	HIV/AIDS generally
Prevention	Political Parties
Nutrition	Media
Politics	Government
Protests/Campaigns	Treatment
Research conducted on HIV/AIDS	Elections

Table 1: Topic breakdown comparison between 2002/2003 and 2017/2018

[14] <https://www.moneyweb.co.za/news/south-africa/atm-pharmacy-to-cut-queues-for-aids-patients/>

[15] <https://city-press.news24.com/News/ramaphosas-inherited-zumas-turmoil-cant-bring-about-change-20180521>

Only three topics made it in the top 9 during the two periods, and these were: HIV/AIDS generally, Treatment and Government/Politics. (as highlighted in red in the table).

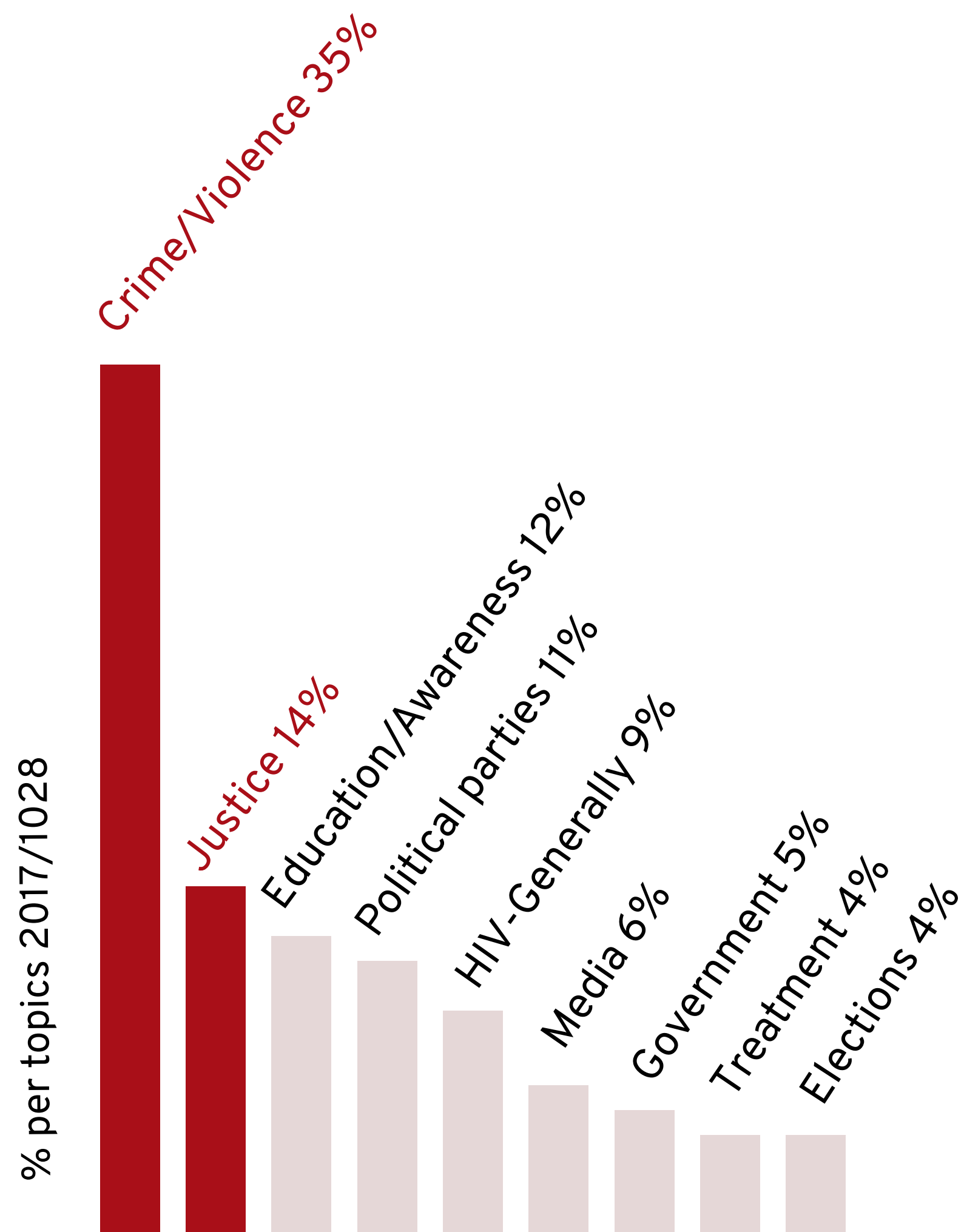
What is really interesting is that during the 2002/2003 period, the topics are generally from a research, academic and medicinal point of view, where the big focus is on the practical side of HIV including nutrition, treatment, prevention etc. The two-main targets for the Plan for South Africa¹⁶ (2000-2005) was to decrease new infections, and decrease the effect of HIV/AIDS on individuals, families and communities. However, plans for the provision of ARV drugs was almost non-existent and in 2001, the Government successfully authorised the domestic production of less expensive, generic brand medicines, including ARVs¹⁷.

For the 2002/2003 period, the top key messages of stories discussed the importance of AIDS awareness, the promotion of treatments, how the Government was reluctant in implementing AIDS programs and the importance of the NGO/CBO in combating AIDS. For example, the top key message was the importance of the distribution of the Antiretrovirals and the less popular key message was the social problems that AIDS can cause¹⁸. This may stem from the fact that the virus was still relatively recent and that political forces were at play attempting to disprove that HIV and AIDS were inextricably linked. However, in 2017/2018 the topics are more diverse, and are explained further below (*Graph 3*).

[16] <https://www.sahistory.org.za/topic/history-official-government-hivaids-policy-south-africa>

[17] <https://www.sahistory.org.za/topic/history-official-government-hivaids-policy-south-africa>

[18] *Shaping the Conflict: Factors Influencing The Representation of Conflict Around HIV/AIDS Policy in the South African Press*



Graph 3: Topics breakdown 2017/2018

The topic general Health was removed but was on top of the list with a total of 709.

Stories focused on crimes and violence (as highlighted in red in the graph) broadly dominated the media coverage in South Africa during the 2017/2018 period. This represents 35% of the top 9 topics. When we see how the issues of crime/violence are also intrinsically linked to the issue of justice, we can see that these topics combined make up almost half of all media coverage (49%). It could be the result of the reportedly high rates of crime and violence in South Africa. For example, an anti-crime activist and former journalist Yusuf Abramjee decided to open a criminal charge against Mcambi, posted on his Facebook page and said: “Please fellas, join me, we have to rape their kids with AIDS virus too!” (SIC), (*Daily Dispatch 21/03/2017*¹⁹) was classified in the topic ‘crime/violence’. Ideas such as this and presenting counter-narratives can be a key part of media’s role in combating the spread of HIV.

[19] <https://www.dispatchlive.co.za/news/2017-03-12-yusuf-amramjee-lays-criminal-charges-against-man-for-hate-speech-on-social-media/>

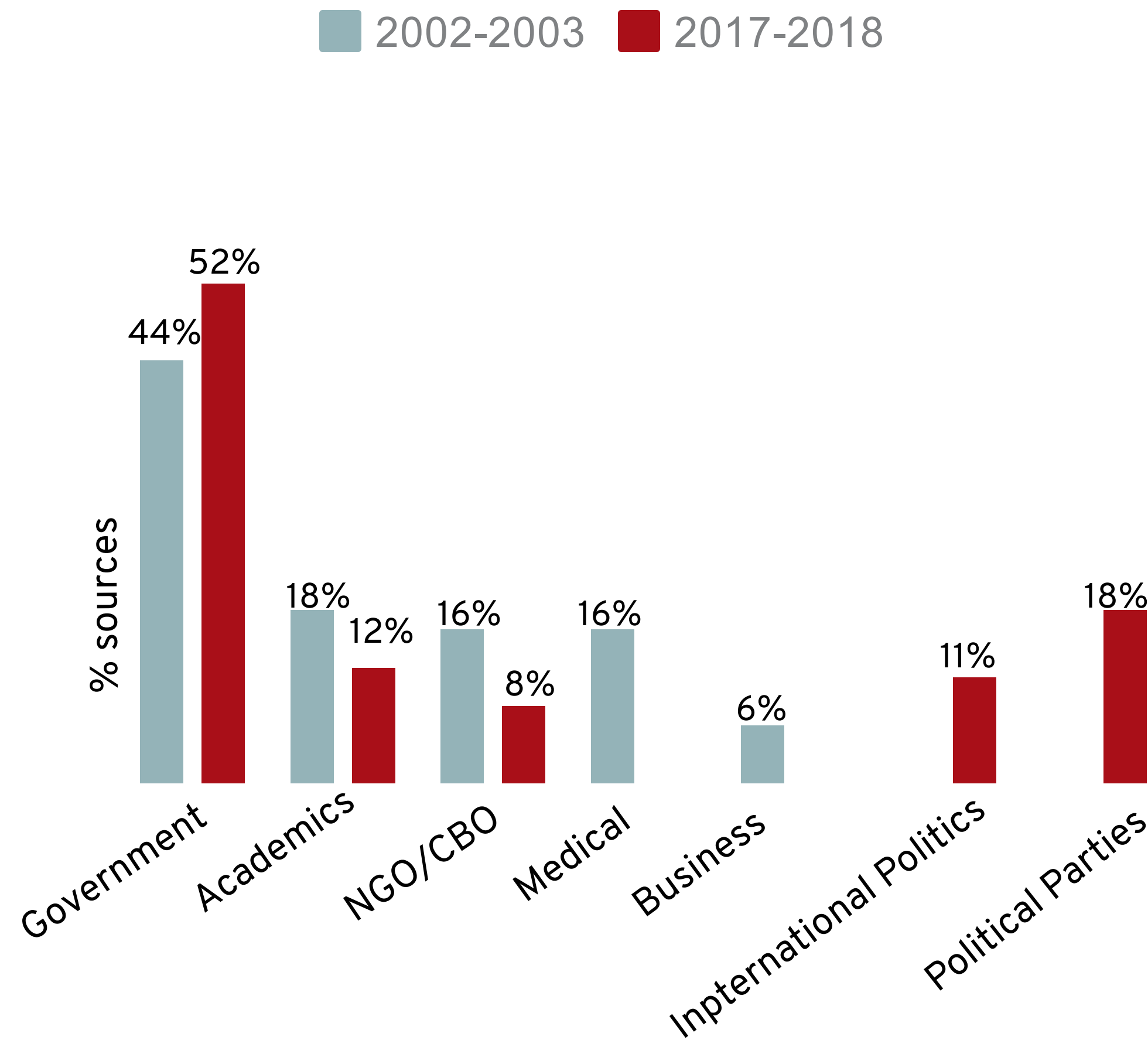
The lowest topics are treatment (4%) and elections (4%). We take into consideration the topic treatment, because our data stories about elections are mainly focused on neighbouring countries. The topic treatment (4%) compared to the 2002/2003 period dropped significantly. However, gender or female issues as a topic is almost non-existent. It represents less than 1% in all the topics listed in our research.

Importantly, 20 to 25%²⁰ of new HIV infections specifically affect young women. This may be as a result of the way in which gender-based violence, poverty and the low status of the woman result in their ongoing abuse and oppression . For these types of issues and framings to be left out of the media discourse when it comes to HIV, particularly with the high infection rates, is disturbing and it shows that there is a massive gap and oversight when reporting on gender in South Africa.

[20] <https://www.avert.org/professionals/hiv-around-world/sub-saharan-africa/south-africa>

Whose voices do we hear?

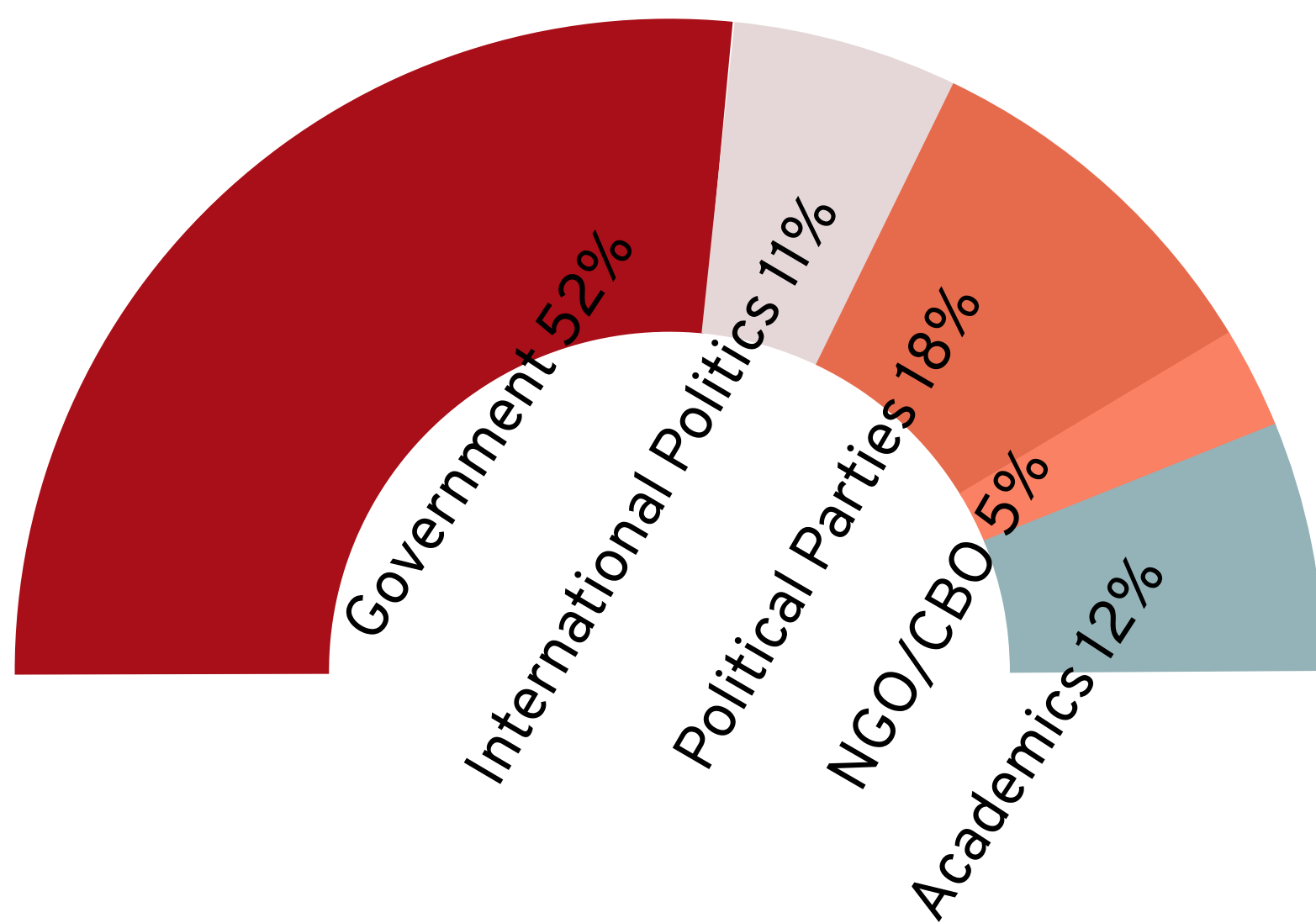
In *Graph 4* we compared the sources of the 2002/2003 and 2017/2018 periods. For *Graph 5* we analysed the sources of the 2017/2018 period. *Graph 6* we discussed the race sources for the 2017/2018 period and for *Graph 7* we discussed gender sources for the 2017/2018 period.



First and foremost, interestingly, the Government (South African) was the most commonly accessed source across both periods. What this tells us, is that those in government positions hold power over the narrative over HIV/AIDS, even more so than NGOs or those most affected, such as citizens. Importantly, even though the mandate of public representatives is to represent the voices of the people, including those most affected by HIV/AIDS, often their concerns are more narrowly focused on political interests. Another interesting result is that the voices of NGOs/CBOs halved between the two periods, despite them often representing the views of those affected the best. Importantly, those most affected should be given more opportunities to speak about their experiences, and even more critically, to offer their solutions.

Graph 4: Comparison of the affiliation of sources between two time periods (2002-2003 and 2017-2018)

Our research shows that individuals infected with HIV/AIDS make up **less than 1%** in all sources analysed. While we understand that interviewing people about their condition requires consent and a high level of sensitivity, this does not mean that these voices should be excluded from the discourse altogether. For the second period new topics appear such as: international politics, political parties. The 2017/2018 periods will be discussed more below (Graph 5).



Graph 5: Top 5 sources 2017/2018

A big shift in the sources accessed was seen between 2017/2018 and 2002/2003. Specifically, political voices (i.e. government, political parties, international politics) represent almost 80% of the quoted sources.

It's important to understand the political context during during the 2002/2003 and 2017/2018 period. In 1999, Thabo Mbeki was President of South Africa, with Dr. Manto Tshabalala Msimang as Minister of Health. Thabo Mbeki argued that HIV did not cause AIDS, as well as made various controversial public statements about HIV/AIDS. In 2009, Jacob Zuma was President of South Africa, with Dr. Aaron Mostoaldi as Minister of Health. Like his predecessor he also had a lot of controversies. An example of this is the criminal charge of the rape of a HIV-positive woman in 2005. He also made many controversial public statements about HIV/AIDS during the trial. For example, taking a shower "*It would minimise the risk of contracting the disease*²¹."

[21] <https://www.sahistory.org.za/topic/history-official-government-hiv-aids-policy-south-africa>

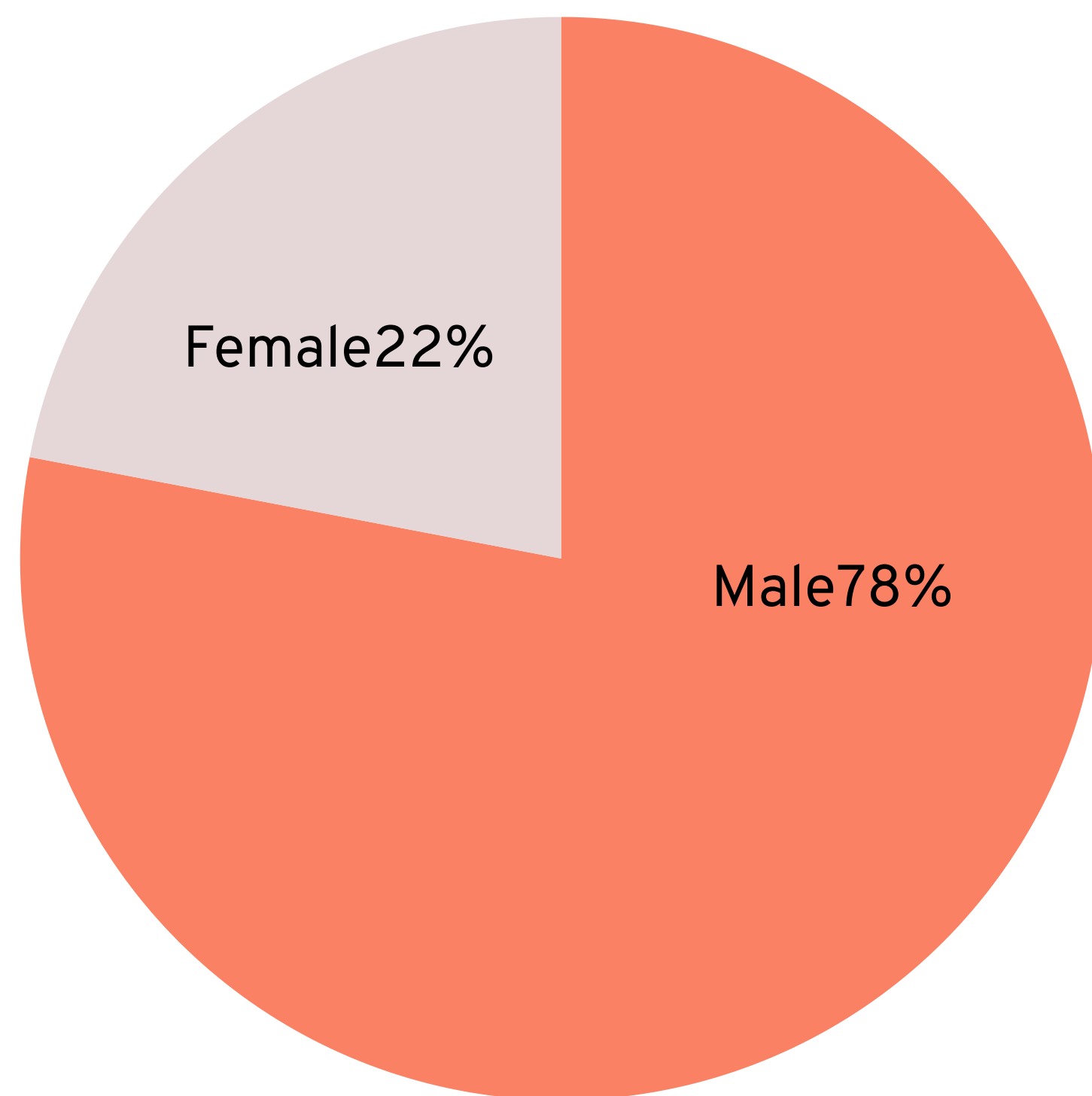
Today in South Africa the Government has made a lot of progress for people living with HIV²². In 2017, 19.5 million people in South Africa received antiretroviral treatment. Many received medication for the first time. That is more than half of the people living with HIV²³.

The results of this research suggest that during the 2002/2003 period, NGO's/CBO's were embroiled in ongoing conflicts with the South African Government. During that period (2002/2003), one of the important key messages was how the Government was reluctant to implement AIDS initiatives and the importance of the NGO/CBO sector in combating AIDS. For example, in 2002, the NGO Treatment Action Campaign (TAC) took the government to court and won the trial²⁴. The case was taken to court in order to force the government to implement a prevention of mother-to-child transmission programme. In this way, NGO-based sources were accessed far more regularly and stories that included them were reported far more frequently than in the second time period.

[22] <https://africacheck.org/reports/yes-south-africa-has-the-worlds-largest-antiretroviral-therapy-programme/>

[23] <https://www.avert.org/professionals/history-hiv-aids/overview>

[24] <https://africacheck.org/reports/yes-south-africa-has-the-worlds-largest-antiretroviral-therapy-programme/>



Graph 6: Gender sources 2017/2018

Male sources are much more quoted than female sources.

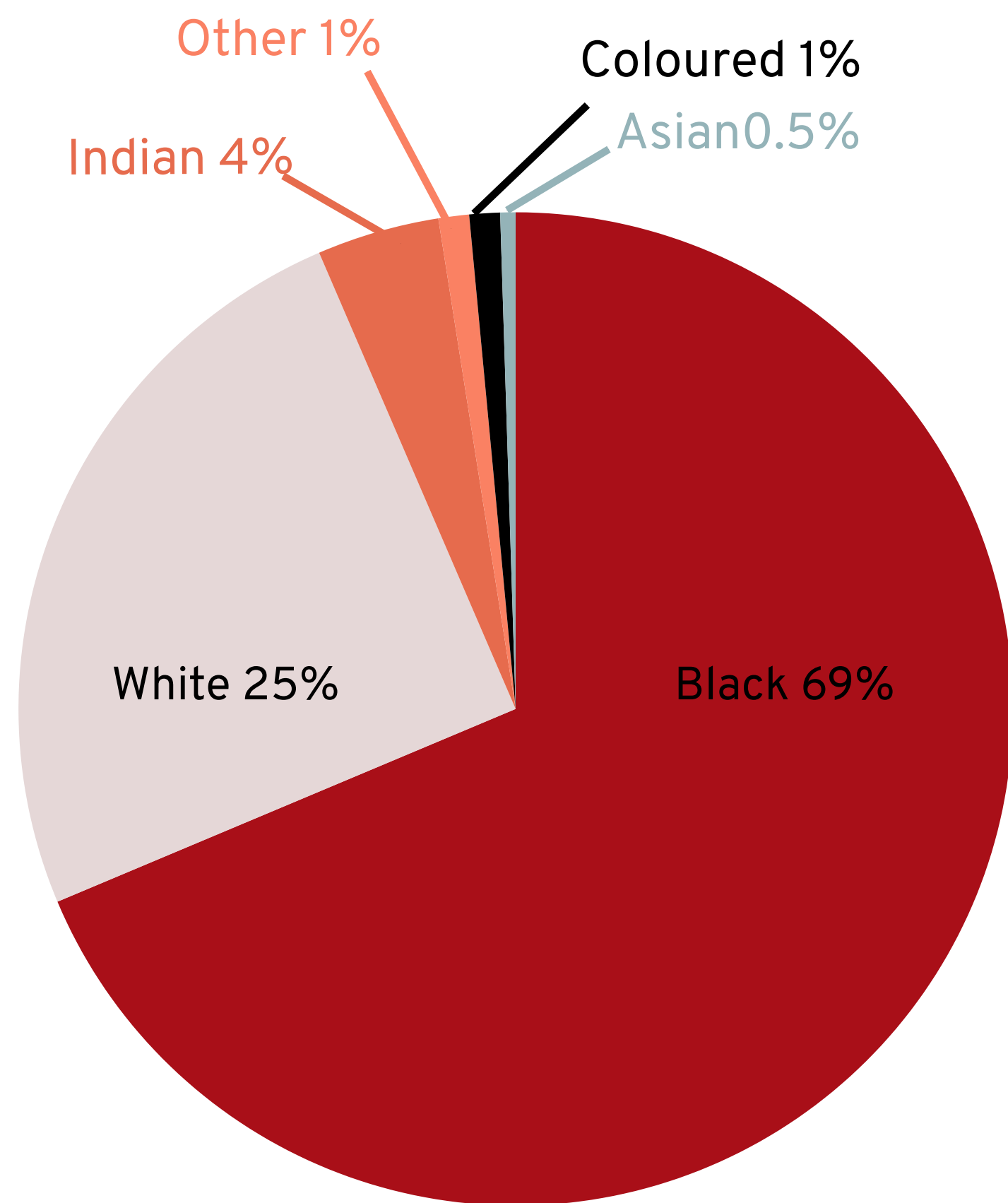
The situation is appalling. Women are continuously and consistently under-accessed and under-represented, even though they represent 51% of the South African population²⁵. This means that men dominate the conversation about issues that women are equally, if not more, affected by.

This is not unusual, as previous research conducted by MMA again points to the ongoing gendered biases in media coverage such as the elections report²⁶ “15 years of reporting South African elections: Same same but different ” or the Migration report “Where do we belong? Media coverage of migration in the Sub-Saharan Africa²⁷.”

[25] <http://www.statssa.gov.za/?p=10325>

[26] https://www.mediamonitoringafrica.org/wp-content/uploads/Research_Reports/15-years-of-reporting-South-African-elections_-Same-same-but-different-.pdf

[27] https://www.mediamonitoringafrica.org/wp-content/uploads/Research_Reports/FESmigrationreportWebv2.pdf



Graph 7: Race sources 2017/2018

When looking at the race of accessed voices, Black sources represent 69%, while White voices represent 25% of the quoted sources. However, Black people make up 80,2%²⁸ of the South African population, while White people represent only 8.4%. White sources are over-represented.

In our findings the main affiliation of White sources is Academics (at 29%), and sources such as sports, entertainment, citizen, criminal, other commission and municipalities make up less than 1%. Media tend to generally over-represent White voices and this is seen across various pieces of research conducted by MMA like the *Race and Migration in the Community Media*²⁹ report.

[28] https://www.indexmundi.com/south_africa/demographics_profile.html
 [29] https://www.mediamonitoringafrica.org/images/uploads/MDDA_report_final.pdf

Conclusion

16 years after the first report looking at HIV/AIDS coverage in South Africa, little progress has been made in the quality of media reporting on Gender and HIV/AIDS. The media content and the number of stories has decreased by just under a third (32%). This despite the fact that the media landscape has changed significantly since the first study. The shift in coverage can be seen in how new online news media that did not even exist in 2002/2003 make up the biggest disseminators of content about HIV/AIDS online currently. While we expected that online media would publish more content because of the effectiveness of new technologies, in reality they have published fewer stories. The decrease may also be linked to fewer journalists overall, but with dedicated health journalism units like *Health-e news* and *Bhekisisa* and the scale of our national HIV programme and the epidemic, it would be expected there would be a greater focus on the issue.

Another indicator of poor coverage is the diversity of sources accessed. Here, the Government remain the most quoted source in each period (2002/2003; 2017/2018) and political players (including political parties and international politics) also dominated sources accessed, especially during the second period (2017/2018). In addition, the imbalance of voices is also seen in how men remain far more quoted than their female counterparts and how White sources are still over-represented relative to other South African population groups. Given the disproportionate impact of HIV/AIDS on women and girls in particular, it would be expected for more diverse women as well as more people of colour to be accessed. Unfortunately, this has not been the case. It is therefore clear that power dynamics and historical inequalities remain in place and appear to have not really changed over the last 16 years.

A positive aspect of our findings, however, is that there is a shift in the range of HIV/AIDS related stories. We can see how in the second period (2017/2018) there were far more diverse issues related to HIV that were reported. This demonstrates a big move away from looking largely at the medical and political aspects of coverage. Now, we see stories about the links between HIV and crime, or HIV and politics. By covering a broader spectrum of issues, this helps readers bridge the gap between seeing HIV as an individual stand-alone topic to one in which many aspects of societal life is affected.