



INTERNEWS NIGERIA

# VOICE AND VISIBILITY

Frontline perspectives on how the global news media reports on HIV/AIDS

“The media is trying to undo, correct, the earlier message that if you get AIDS you’re dying.”

—PLHIV LEADER, KENYA





INTERNEWS NIGERIA

**PLHIV and program managers in Africa note an improvement in news coverage of HIV/AIDS, but still find journalists using disempowering words such as “sufferers” or “AIDS victims” in their stories.**

## INTRODUCTION

Twenty-five years since the first news stories on HIV surfaced, media outlets are still struggling to report news on HIV/AIDS accurately, with depth and sensitivity – especially in developing countries that are most affected by HIV.

Television news coverage on HIV/AIDS in many countries is growing, but in many places it is largely limited to announcements and events. Talk radio discussions and newspaper articles often portray people living with HIV as statistics, victims, or unfit citizens – rather than as human beings with life, hope and dignity. In addition, the frequency of news reporting on HIV/AIDS in most countries does not reflect the scale and breadth of the epidemic.

Over the past five to ten years, people on the front lines in HIV prevention, care and treatment, and people most affected by HIV/AIDS, agree that coverage has improved slowly. But

the gaps in reporting are noticeable and there is significant room for improvement in the way the news of HIV/AIDS is treated.

To evaluate perceptions on how the news media reports on HIV/AIDS, Internews Network, with partners Global Network of People Living with HIV/AIDS (GNP+) and the International Council of AIDS Service Organizations (ICASO) undertook two global online surveys, asking people living with HIV/AIDS (PLHIV) and leaders of HIV/AIDS programs around the world about their views on the scope and quality of local news coverage on HIV/AIDS.

HIV/AIDS program managers and PLHIV are the most aware of and most affected by the HIV/AIDS epidemic, and have a unique sensitivity to how HIV/AIDS is depicted in the media. The purposes of the surveys were to:

1. Document the perceptions of PLHIV and HIV/AIDS program managers on news media coverage of HIV/AIDS.
2. Investigate the working relationship between PLHIV, HIV/AIDS program managers and the media.
3. Complement existing studies (single country and regional) on HIV/AIDS and the media.
4. Gather informed suggestions for program development.

This report analyzes responses of more than 130 PLHIV leaders and 200 HIV/AIDS program managers from more than 44 countries. Half of the PLHIV respondents

identified themselves as HIV/AIDS activists, a third said they were non-governmental (NGO) staff members, and 20 percent were leaders of HIV/AIDS support groups. The HIV/AIDS program managers surveyed represent a wide range of roles: health experts for community-based organizations, NGO leaders, HIV specialists in the private sector, medical care providers, United Nations employees, government health services, and local authorities working in HIV/AIDS prevention, health communications and advocacy. More than 60 percent were between 25 and 45 years old and respondents were closely balanced between male and female.

The study focuses on local news media, including radio and television, newspapers and magazines.<sup>1</sup>

The survey was administered as a web-based questionnaire and included both open and closed questions to gather both qualitative and quantitative data. The surveys

were conducted in English, French, Spanish and Russian. PLHIV perceptions were supplemented by focus groups in Nigeria, Côte d'Ivoire and Ukraine, and in-depth interviews with key PLHIV leaders in Kenya.

This study summarizes the findings of the two surveys with full effort to reflect respondents' own words. The findings also echo those of two previous studies: the first by the International Federation of Journalists (IFJ) which concluded that "standards for reporting on the sensitive issue (of HIV/AIDS) are improving, but there is still much room for improvement"; the second by the Southern African Editors Forum, which found that "HIV and AIDS constitute only 3% of total coverage in the (Southern African) region and that 'people with HIV comprise a mere 5% of news sources on the topic.'"<sup>2</sup>

“The few HIV/AIDS-focused television broadcasts are either 30-second news flashes or occasional longer features produced outside the country and aired late at night.”

— HIV-POSITIVE FOCUS-GROUP PARTICIPANT,  
CÔTE D'IVOIRE

## THE FINDINGS:

This summary is organized to reflect findings in these key areas:

1. **Scope and Quality of News Reporting: How Much, How Accurate, How Effective?**
2. **How do the Media Portray PLHIV?**
3. **Engaging the Media**
4. **Areas for Improvement – Strategies and Recommendations**

### SCOPE AND QUALITY OF NEWS REPORTING: HOW MUCH, HOW ACCURATE, HOW EFFECTIVE?

Respondents in both surveys were asked to categorize the effectiveness of local, national, international, and internet-based news media in reporting on HIV/AIDS. Both groups of respondents rated their local/national news as the weakest in disseminating HIV/AIDS information:

- The majority of PLHIV respondents said that the international media provides the most accurate and best coverage, and that they trust news and information gathered via internet more than any other medium.
- In their assessment of local media, 49% of HIV/AIDS program managers rated television

journalists most highly among local media for accuracy and effectiveness, followed by radio, at 40%, and newspaper journalists, at 32%. The majority of PLHIV respondents, on the other hand, view television as portraying PLHIV in the poorest manner (71%), followed by radio (64%) and then newspapers (60%).

HIV/AIDS program managers said they are seeing improvements, but would like to see local news media to be more focused in its reporting, emphasizing local HIV/AIDS activities and interventions by local HIV/AIDS organizations/projects. They view the local media as one of the most important ways to stimulate public discussion on HIV and AIDS, and in this way to break down stigma and discrimination. Respondents still consider local media coverage

### What do you think about the level of accuracy in HIV/AIDS coverage in the media in your country?

	Very Poor	Poor	Average	Good	Very Good
Accuracy about transmission	8%	24%	<b>36%</b>	25%	8%
Accuracy about treatment	14%	28%	<b>34%</b>	19%	4%
Accuracy about statistics and data	20%	<b>32%</b>	29%	15%	4%
Accuracy about PLHIV	26%	<b>41%</b>	25%	6%	2%





GEORGES COLLINET

**HIV/AIDS Program Managers generally report positive relationships with journalists, but say there is much room for improvement. Getting the voices of children and women affected by HIV/AIDS into news stories is a key challenge.**

**“HIV is hardly ever covered in the media and when it is, the information is inaccurate and sometimes very stigmatizing ... the language they use is wrong and they do not think HIV is an issue their readers are interested in.”**

— UZBEK PROGRAM MANAGER

of ‘global’ trends in HIV/AIDS prevention, care and treatment to be important but they do not consider ‘political’ reporting about what local politicians and AIDS funding as of significance – even though this is an area that the local media often focus on to a high degree.

Overall, PLHIV respondents had a low regard for their local media. This included the quality of the coverage about HIV/AIDS and the portrayal of PLHIV which they said ranges from infrequent, inconsistent and inaccurate to crisis-driven, sensational and superficial.

Focus group participants in Côte d’Ivoire emphatically shook their heads “no” when asked if the coverage or quality of media was good. They said that articles on HIV/AIDS rarely appear on the front pages of

newspapers. When there is coverage, it is most likely a sensational headline, such as, “Traditional Healers Find Cure for AIDS,” and often the article has no relationship to the headline. Television reporting, they said, is infrequent and contains little more than public service announcements. They say the few HIV/AIDS-focused television broadcasts are either 30-second news flashes or occasional longer features produced outside the country and aired late at night.

### **Frequency and effectiveness of stories are not the same**

Respondents said that the HIV/AIDS themes covered most frequently by local media are government announcements, HIV-related events, general public awareness campaigns and HIV/AIDS financing, with less coverage given to care and support, orphans and vulnerable children (OVC), and men who have sex with men (MSM). But neither group necessarily correlated frequent coverage with effectiveness.

They said that “these are the stories that are done – not necessarily better than other types of stories.” Their perception echoes the frustration of HIV/AIDS advocates that the media

concentrates too strongly on ‘official’ HIV/AIDS stories that are ‘easier’ and more fitting to the pattern of ‘newsworthy’ current affairs.

An HIV/AIDS program coordinator from Mozambique said that media in his country largely limit themselves to reporting statistics information about of HIV/AIDS workshops and conferences, “sometimes including the amount of funding used to implement them.”

“HIV is hardly ever covered in the media,” according to an NGO program manager from Uzbekistan “... and when it is, the information is inaccurate and sometimes very stigmatizing... the language they use is wrong and they do not think HIV is an issue their readers are interested in”.

### **Wanted: proactive investigative journalism on HIV**

PLHIV respondents would like the media to approach HIV/AIDS in what they called a “different manner and new and different ways of thinking.” What they mean is an accurate, scientific, educational, appropriate, and respectful treatment of the subject, without stereotypes and judgmental tones.



ANSELM OKOLO, INTERNEWS NIGERIA

**Despite issues of trust, more than half of PLHIV respondents have participated in phone-in shows on radio and television. Wali Ado Rano (pictured here) is openly HIV-positive and has a popular on-air radio call-in show on Freedom FM in Kano, Nigeria. His weekly show has a wide listening audience and has changed the way HIV/AIDS is discussed in Kano.**

Respondents would like to see more consistent efforts in the news media's coverage of HIV/AIDS, "not just thinking of HIV/AIDS on December 1st [i.e. World AIDS Day]." They would like to see more training and sensitization of the media on HIV/AIDS issues, and one respondent called for the publication of a periodical journal covering local HIV/AIDS issues. PLHIV also expressed an interest in seeing more media coverage about the media itself, such as stories by journalists about how they are dealing with AIDS issues.

Respondents were asked to prioritize from a list of HIV/AIDS issues they would like to see covered more extensively in their countries. The vast majority of PLHIV selected the need for open and transparent reporting about how HIV/AIDS funds are accessed and distributed. They also want to see more news coverage on HIV/AIDS and religion, spirituality and community responses to HIV. Respondents requested more local news coverage on a range of medical or treatment issues, from treatment literacy for PLHIV to detailed coverage of vital treatment

information including sustained coverage of drugs, prevention and co-infection.

The Côte d'Ivoire PLHIV focus group pointed out how the media fails to reflect the complexity of HIV/AIDS. Participants said that the news fails to address the diverse health, development, family, and community themes related to HIV/AIDS. Unfortunately, they said, such a thoughtful approach to reporting doesn't come through in the press or airwaves, or in the types of questions that journalists pose.

An HIV/AIDS NGO leader from Peru commented, "The best analytical reporting on how my country is addressing HIV/AIDS is done by foreign journalists." Others echoed this thinking. Asked what they think is the priority role of news media, they said that it should be to report on local HIV/AIDS activities and interventions, to stimulate public discussion on HIV/AIDS, to serve as a "watchdog" over HIV/AIDS programs and funding, and play a role in stimulating advocacy on critical HIV/AIDS issues.

A number of PLHIV leadership also highlighted the gap between urban

and rural coverage. Independent radio is becoming a powerful force in many urban contexts in developing countries, they said, and state television, radio and newspapers have a predominately urban bias. They suggest there is a real danger of effective HIV reporting 'skipping the periphery', where it is most urgently needed. Vernacular radio is viewed as one of the main local news media routes for reaching rural populations, and more focus and resources in this area is required by media planners in NGOs and government.

### **Inaccurate and stigmatizing language**

Discriminatory, stigmatizing and inaccurate language used by local news media about HIV/AIDS remains a serious concern and continues to undermine effective coverage of HIV news, according to PLHIV respondents. They link this failure to a weakness in research and knowledge of HIV/AIDS by local journalists as well as a lack of interest by their editors and publishers. "Some media houses twist and distort the message and sometimes we have to call and correct the language," said a Kenyan PLHIV leader.

**"Some media houses twist and distort the message and sometimes we have to call and correct the language."**

**—KENYAN PLHIV LEADER**



**Journalists should be the voice of the marginalized who can urge the government to change its negative attitude about care and treatment of the PLHIV.”**

— PROGRAM MANAGER IN GUINEA

Journalists often use words and phrases such as ‘infection’ and ‘black death of the 20th century’ in portraying the disease. Participants in the Ukraine focus group agreed that almost all information provided by media outlets highlights only negative aspects of HIV and “there is an impression that the more fearful a report the better.”

### HOW DO THE MEDIA PORTRAY PLHIV?

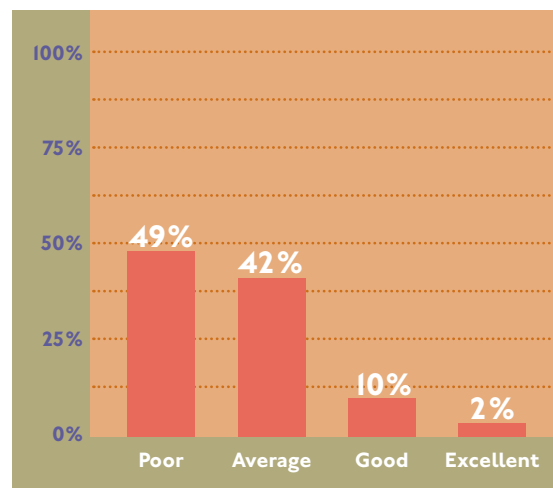
Respondents agreed across the board that the biggest failure of media coverage is in the portrayal of PLHIV, while acknowledging some improvement as activists engage more proactively with journalists. Ninety-six percent of PLHIV respondents said that stories opposing stigma and discrimination need more coverage, such as reporting on internalized stigma of PLHIV and the effect of homophobia on national strategies to combat HIV and AIDS.

This view is echoed by HIV/AIDS program managers, 51% of whom consider the portrayal of PLHIV to be primarily stereotypical and/or discriminatory. Thirty percent, however, consider it to have improved.

Many PLHIV commented on the numerous epithets by which they were characterized in the press. Ranging from ‘statistics’ to ‘murderers’, the most common depiction was that of ‘victim’ accompanied by a ‘sorrowful’ or ‘sad and depressed tone that is fixated on death.’ Respondents commented, “we are people... not just a ‘sick AIDS face’” and “portraying people like us as victims and sufferers is offensive in the extreme.”

Others went further, stating that blaming the ‘victim’ is a frequent part of media portrayal. “Most stories lately are about PLHIV infecting others. We have gone from victims to criminals in the eyes of the media... it is very alarming!” said a

### How do you rate the portrayal of PLHIV in the media in your country?



U.S. respondent. Stories also portray PLHIV as “unfit” and therefore unable to support the community. One PLHIV from the UK asserted: “They tend to brand us all as sex murderers, AIDS assassins, gay scroungers, health-care tourists, etc.”

### How should the media portray PLHIV?

The survey revealed a common view reflected by a U.S.-based program manager that “our objectives and the media’s objectives are at odds.” Respondents agreed widely that these kinds of portrayals fuel rather than mitigate stigma and make PLHIV even more reluctant to be open and disclose their status. They call for the media to radically alter its approach and provide a more comprehensive portrayal of PLHIV.

For example, PLHIV should be portrayed as people who can live with dignity as does everyone else who has various health problems. According to a communications manager in Cambodia, “The media should portray the *positive* living of people living with HIV/AIDS and shed light on

“...media don’t talk much about social support activities for PLHIV such as where to get free food, school fees for the children, small micro-credit loans and free basic financial support.”

—UGANDA, MEDICAL CARE PROVIDER



**PLHIV and program managers would like the media to expand their coverage of HIV/AIDS, “not just thinking of us on World AIDS Day.”**



DENIS KLIMENTOV/INTERNEWS NETWORK

the truth that PLHIV can lead normal lives provided they have access to proper medication, care and support.” In India, a PLHIV thinks the media should “help people to understand that this is not just the end of road,” while a program manager from Guinea said that journalists should be “the voice of the marginalized” who can urge the government to change its negative attitude about care and treatment of the PLHIV.

### **A need for more psychosocial coverage and support information**

Respondents and interviewees mentioned the need to increase the voice and visibility of PLHIV on local news media. A Kenyan PLHIV explained that PLHIV give the disease a face and a voice: “I went to a parliamentary conference where they were saying, ‘Let’s put a mark on these people and put them in one compound so they do not spread it around.’ But after I shared my personal experience with them it all changed. The MP was embarrassed, he apologized and now that guy is my friend. It’s very instrumental in changing people’s attitudes, reducing stigma.”

By being seen and heard in the media, PLHIV are able to “increase their own profile, bolster self-esteem and reduce stigma.” As one survey respondent noted, “I hope to reduce the self-inflicted stigma, which is the first step to ridding the world of the stigma it imposes upon those living with HIV/AIDS.”

Respondents also want local news media to cover such topics as HIV-positive role models including sports, music and film stars mentoring for prevention; getting PLHIV back in the workforce; the simple human story of everyday survival; parenting; and involvement of PLHIV at decision-making and planning levels.

### **ENGAGING WITH THE MEDIA**

#### **Focus group feedback – the voice of PLHIV**

##### **UKRAINE**

Participants agreed that it is always better to get information from those who are best informed -- in this case, PLHIV. “Nobody can explain better what it’s like to understand the problems of HIV than a person who is actually living with it. Unfortunately, journalists prefer offering their own comments on news without checking with us.”

##### **CÔTE D’IVOIRE**

Participants agreed that there need to be more PLHIV voices on radio and television. But there is a lot of mistrust and misunderstanding between the press and HIV/AIDS NGOs and PLHIV. “The only fixed programs on major radio or television are those hosted by the head of the media AIDS network (REPMASCI). It is unclear how he chooses his themes and his guests. They get into long discussions about how it’s just not important to be on the radio, but to be prepared.” The focus group participants said most PLHIV are not prepared to be on the radio, on television or in the print media. They can be too easily manipulated by the journalists or program host because they feel intimidated.

Both groups of respondents are increasingly experienced in engaging with the media. Most have had some proactive relationship with the media. However, the PLHIV and program managers reflect a significant difference in their perception of the quality of that relationship. While PLHIV see some improvement and positive engagement, they are largely frustrated by the continued misinterpreting and misquoting.



**The media has a bias toward and trust in the medical world, which is perceived as safer and more professional. So they interview doctors instead of people living with HIV. There is still stigma against positive people having a say.”**

— PLHIV LEADER, KENYA

Managers, on the other hand, see room for improvement, but view their relationships with the press as far more positive than negative.

#### **How do PLHIV interact with the media?**

- 74% of respondents have been interviewed by a journalist
- 59% have been photographed
- Just over half of respondents have participated in local radio or TV programming or have actively contacted newspapers
- 55% have participated in a TV or radio panel discussion
- 52% have phoned in to a radio show
- 53% have written to a newspaper
- 33% have written articles, a column or appeared regularly on radio or TV
- Most respondents say that they have been quoted accurately in the local media (53%); however a large minority have been misquoted on occasion (41%).

Despite serious weaknesses in media coverage of HIV/AIDS and the portrayal of PLHIV, both are slowly improving across all local mediums. During the past five to ten years, PLHIV have viewed local media as less judgmental and stigmatizing and less prone to present inaccurate information. In addition, they cite a greater ‘voice’ of PLHIV, more focus on positive living and less on infection, and greater production partnerships between media and PLHIV.

When it comes to effectively reaching audiences, PLHIV cited their appreciation of participatory news media formats— “anything more than just a journalist reading a press release”, such as ‘human interest stories’ (45%), ‘talk shows with experts and/or a panel’ (41%), and ‘drama’ (39%). They viewed other media formats as less effective, such as ‘newspaper ads,’ ‘letters to the editor,’ and ‘public service announcements.’

Some PLHIV who have had interactions with their local media view their experience with the media to be respectful. They note improvements and have seen how news media stories can boost their PLHIV network and highlight

important issues. They say they are most interested in promoting media respect for confidentiality and putting a positive and empowering face on PLHIV. This, they say, can help to lessen other people’s fear of disclosing their own HIV status.

“The media is trying to undo, correct, the earlier message that if you get AIDS you’re dying. But it will take quite a while to rebuild trust and to undo the damage...the skeleton image, the death sentence. Because we have established a partnership with the media in Kenya, most people won’t mess with us. They know they will be exposed by the media if they do. If I call Kenyatta hospital and they refuse to attend to a patient, if they know it’s me calling they will react, because they know I will expose them.” — PLHIV leader, Kenya.

Respondents attribute the improvements in media coverage of HIV/AIDS and in the portrayal of PLHIV in large part to the increasing advocacy influence of PLHIV and NGO networks. But they still exhibit a high degree of frustration and lack of trust at the continued inappropriate use of stigmatizing language.

“The media has a bias toward and trust in the medical world, which



By providing interviews to radio media, we avoid having to pay airtime and still take advantage of the opportunity to address the public with information and messages.”

— NGO COUNTRY DIRECTOR, HAITI

is perceived as safer and more professional. So they interview doctors instead of people living with HIV. There is still stigma against positive people having a say,” commented a PLHIV leader in Kenya.

According to PLHIV in the Ukraine focus group, journalists often request to use HIV-positive children in films or programs and ask HIV-positive people to tell negative and terrifying stories about their lives – even if they are not true. Participants also cite misquotation, sensationalizing, inexperience and lack of preparation as well as breaching of confidence and misquoting. This includes interviews broadcast without their knowledge and their names used despite explicit refusal to grant permission.

### Local news coverage

Program managers consider their relationships with the local media to range from good to excellent. They are frequently called upon by the press as a source of information, and HIV/AIDS program managers also reach out to the media themselves, with press releases and media briefings.

How are HIV/AIDS program managers interacting with the press?

- 56% have excellent relationship with local news media.
- 75% have been interviewed by a journalist, and 60% have participated in a TV or radio panel discussion.
- 64% have sent a press release, and 69% have given media briefings, although 67% have not written articles or a column or appeared regularly on a radio or TV show.
- 68% have participated in workshops with journalists, and 45% have offered/ run HIV/AIDS training workshops for journalists.
- 87% have sponsored a journalist to specialize in HIV/AIDS reporting.
- 75% have purchased airtime on radio or TV; 80% have purchased editorial/feature/insert space in newspapers.
- 11% of respondents run their own radio or TV show as part of project.

Respondents report that they are active in training local media, the majority participating in workshops with journalists. Eighty-seven percent of program managers report that their organization has sponsored a journalist to specialize in HIV/AIDS

“Journalists often request to use HIV-positive children in films or programs and ask HIV-positive people to tell negative and terrifying stories about their lives – even if they are not true.”

— HIV POSITIVE FOCUS GROUP RESPONDENT IN UKRAINE



JIM CLARKE/INTERNEWS NETWORK

**Journalists need newsroom support and resources, and support from media owners and editors to allow them to focus on in-depth HIV/AIDS stories.**

reporting. “The news media has benefited from training...however, more should be given to owners and operators of media houses as reporters move on and the knowledge and training leaves with them,” proffered a program officer in Guyana.

### **Acknowledging challenges to journalists and need for media buy-in**

Both groups recognized the efforts of many journalists and acknowledged the challenges they face in convincing editors and/or getting resources to cover better stories. Reporters commonly blame editors for turning down an HIV/AIDS story. “For them, it is not a burning issue; it’s an invisible virus,” said a media trainer and journalist from Pakistan. The issue is complex, and this kind of vicious cycle must be addressed by a holistic approach. Even if the reporter produces an accurate story, the editor may not be sensitive to the issue. As a result, only a limited number of PLHIV are ready to be open and share their feelings. And this, in turn, hinders the reporter from “bringing in their voices,” a program manager in Nepal said.

Both groups also cited a need for

media management buy-in to support quality and in-depth reporting, and called for specialist health reporters. They identified a specific need for more resources including equipment and funding to support quality HIV reporting. Generally, in-depth human

**“Getting the message into the media is so expensive that many organizations and groups can’t afford to use it as they should or would want to.”**

— PROGRAM MANAGER,  
NIGERIA

interest stories require time and focus for investigative reporting, which creates a financial burden within a news generating office. For this type of content to be possible, improved coverage needs to be financially supported by management. Individual journalists can spearhead such reporting for a time, but there is good evidence that this is not sustainable without financial support.

One respondent said that when they ask for media participation in

activities, the response would be, “we don’t have transport to cover you.” In another case, “They were very interested in my story but the boss sent the camera to a competing story. If they had designated resources or equipment, they could follow up on stories like treatment. But now they only go to what is hitting headlines.”

### **“Checkbook” journalism**

Paying for media coverage appears to be common among HIV/AIDS program managers, with 75% stating that they purchase editorial, feature and insert space in newspapers and airtime on radio or television. At the same time, many PLHIV said they are often compensated financially to appear in news broadcasts and in print publications. In Côte d’Ivoire, focus group participants say it is common knowledge among PLHIV what the standard fees are for appearing in print and on radio with the highest fee (around \$150) for television appearances. This dominant model of paying — or being paid for — airtime and editorial space is a cause of concern for community-based organizations, which have limited finances, and they argue that it undermines the sustainability of coverage.

**“The majority of NGOs normally do these volunteer services without money, and most media in Kenya need to have money to advertise their events or work. We are faced with a lot of challenges.”**

— PROGRAM MANAGER, KENYA

**Topics that PLHIV would like to see covered more frequently include: accessibility and distribution of AIDS funds; the role of religion in HIV/AIDS; and information on co-infection.**



OLEG DMITRIEV/INTERNEWS NETWORK

## ROOM FOR IMPROVEMENT — STRATEGIES AND RECOMMENDATIONS

Recognizing the improvements to date, both groups view further steps to be crucial. They cite as highest priority a different kind of reporting that includes 'more voices and perspectives of people living with and affected by HIV/AIDS,' 'greater coverage of treatment and care issues' and increased in-depth and investigative coverage.

### Need for specialist health reporters

As participants in the Côte d'Ivoire focus group noted, there is an acute need for specialist health reporters at most media houses in developing countries. Dedicated HIV/AIDS reporters are even more of a rarity, and yet also a vital resource. Trained journalists with a specialty in HIV coverage are able to upgrade reporting at their station or paper, and can also share their skills internally with other journalists.

### Better collaboration between PLHIV and media

Ninety percent of PLHIV believe that the key to improved AIDS

coverage and PLHIV portrayal is closer collaboration with the media to reduce the stigmatizing portrayals of PLHIV and to do more in-depth reporting.

Focus group participants and interviewed PLHIV leaders also emphasized the need for effective strategies to support the local news media in improving its coverage and portrayal of PLHIV. Suggested strategies include the following:

#### Working with the media effectively

- PLHIV and local media learning and understanding more about each other
- Working together in production — more PLHIV in the news media
- Building partnerships with media — for effective productions
- New financial models — less charging for airtime / ad space

#### Improving access to information and learning

- PLHIV responding to media information needs
- PLHIV promoting ongoing media learning about HIV and AIDS

### Improved media training and capacity development

- Specific journalistic training on HIV reporting
- The need for internal lobbying for training within all media houses

### AREAS FOR IMPROVEMENT: PROGRAM MANAGER SURVEY

- More voices/perspectives of people living with/affected by HIV/AIDS – identified as a priority by 93 of 200 respondents
- More coverage about treatment and care issues – identified as a priority by 70 respondents
- More in-depth and investigative coverage – identified as a priority by 69 respondents.
- More coverage about national policy on HIV and AIDS – identified as a priority by 65 respondents
- More interaction between journalists and HIV/AIDS managers – identified as a priority by 49 respondents
- More coverage of statistics – identified as a priority by 34 respondents





More training should be given to owners and operators of media houses as reporters move on and the knowledge and training leaves with them.”

— PROGRAM MANAGER IN GUYANA

## CONCLUSION

This summary presents good news and bad news. Most respondents report improvements over the past decade in the accuracy, depth and sensitivity of local media coverage of HIV/AIDS. However, PLHIV still struggle with stigmatizing media coverage and program managers see too few stories on HIV/AIDS being told with accuracy, depth, local relevance and insufficient frequency. All respondents urge the news media to expand its coverage of HIV/AIDS to include more participatory media formats (such as live call-in programs and talk shows) as well as news stories that accurately highlight the voices of PLHIV.

Survey respondents acknowledge that the most well-intentioned journalists face their own challenges in the form of a lack of resources and lack of sufficient interest by their editors and owners. In developing countries, a lack of resources is of particular concern and negatively affects the quality of reporting evidenced in the poor survey ratings for local media's coverage of HIV/AIDS.

To bring about change, more attention and resources need to go toward developing mutual skills and

building understanding and trust between news media professionals and those working in and affected by HIV/AIDS. With coordinated programming between the PLHIV, NGOs, HIV/AIDS program managers and the media, the news coverage of the pandemic can move toward more accurate, informative and empowering reporting.

## FOOTNOTES

<sup>1</sup> “Local” was defined for this study as pertaining to one country – national, provincial and community –including all forms of media ownership – state/public, commercial/private, community – and all media (television, radio, newspapers, and magazines).

<sup>2</sup> HIV and AIDS Gender Baseline Study – Media Monitoring Project (MAP), 2006.

## ORGANIZATION PROFILES



### GNP+

The Global Network of People Living with HIV/AIDS (GNP+) is a global network for and by people living with HIV. The overall aim of GNP+ ([www.gnpplus.net](http://www.gnpplus.net)) is to improve the quality of life of people living with HIV/AIDS. The work of GNP+ is based on the Global Advocacy Agenda: promoting universal access to care, treatment and support, ending stigma and discrimination and promoting the greater and more meaningful involvement of people living with HIV in the decisions that affect their lives and the lives of their communities.

GNP+ is a network of networks and works closely with six regional networks of people living with HIV in Africa, Asia, the Caribbean, Europe, Latin America and North America. As a global partnership GNP+ provides a powerful voice on the global stage for PLHIV around the world, many of who are voiceless and marginalized.

People living with HIV have a sensitive relationship with the media. Every day people living with HIV face challenges in their lives caused by stigma and discrimination, sometimes even amounting to human rights violations. Often it is the media in

local communities that strengthen the stigma inside these communities.

It is in the interest of people living with HIV, their families as well as the public in general that media report accurately about HIV, AIDS and life with the virus.

Below standard reporting on HIV and AIDS and stigma and discrimination of people living with HIV, is detrimental to efforts towards providing treatment, care and prevention in many developing countries, and can limit the quality of life of people living with HIV and their families.

The news media can fulfill an essential role in informing its public about HIV and the epidemic, meanwhile doing honor to the pillars of good journalism: thoroughness, accuracy, fairness and transparency.

It is unique that media can have such a large impact on the AIDS pandemic, by just fulfilling the commitment which they already made to their trade. GNP+ hopes that for many journalists this survey will reaffirm their commitment to their profession.



### ICASO

Founded in 1991, the International Council of AIDS Service Organizations (ICASO) mobilizes and supports diverse community organizations to build an effective

global response to HIV and AIDS. ICASO ([www.icaso.org](http://www.icaso.org)) operates from its International Secretariat in Canada and through Regional Secretariats based in five continents. Through its work, ICASO seeks to build community sector capacity to directly advocate for its own needs, to mobilize and strengthen community sector partnerships and networks, and to advocate for the effective implementation of universal access to comprehensive HIV and AIDS services.

ICASO recognizes the critical importance of building stronger and more diverse partnerships in the response to HIV and AIDS. The results of this survey remind us of the powerful role that the media plays in both supporting and hindering the response. The findings in this report make it clear we need to find more and better ways to build the capacity of journalists, editors and those that influence the media to better inform the public on HIV. Of most importance is ensuring that the media portrays people living with HIV in a positive way to help reduce the stigma and discrimination that many face each and every day. Involving people living with HIV in identifying and developing stories that reflect their realities can make a difference.

ICASO hopes that the recommendations from this report will be used to build a better partnership with the media in our joint efforts to respond to HIV and AIDS. ICASO's mission is to: mobilize communities and their organizations to participate in the

response to HIV/AIDS; articulate and advocate the needs and concerns of communities and their organizations; ensure that community-based organizations, particularly those with fewer resources and within affected communities, are strengthened in their work to prevent HIV infection, and to provide treatment, care and support for people living with and affected by HIV/AIDS; promote the greater involvement of people living with, and affected by, HIV/AIDS in all aspects of prevention, treatment, care and support, and research; and promote human rights in the development and implementation of policies and programs responding to all aspects of HIV/AIDS.



### INTERNEWS NETWORK

Internews Network ([www.internews.org](http://www.internews.org)) is an international non-profit organization that works to improve access to information for people around the world by fostering independent media and promoting open communications policies in the public interest.

Formed in 1982, Internews Network has worked in 70 countries, and currently has offices in 23 countries in Africa, Asia, Europe, the Middle East, and North America. Internews Network is a founding member of Internews International, an umbrella organization, based in Paris, made up of 12 media development NGOs.

Internews launched its HIV/AIDS-focused Local Voices project in 2002, in Nigeria and Kenya, with support from the US Agency for International Development (USAID) and continuing support from the President's Emergency Plan for AIDS Relief (PEPFAR), to train and support local radio journalists, talk show hosts and DJs to improve reporting and programming on issues related to HIV/AIDS. Since then, Local Voices projects have expanded to Ethiopia, India, and Côte d'Ivoire, and with funding from the UK's Department for International Development (DFID), Internews Europe's "Turnaround Time" project focuses on improving HIV-focused journalism in Thailand, Cambodia, Burma, and Vietnam. Each of these country-based projects are meeting diverse needs, often expanding in scope to provide support for print journalists, television journalists, photojournalists, and media owners.

The information gathered in this survey will build Internews work with journalists, media owners, people living with HIV/AIDS and HIV/AIDS program managers, to find new and creative ways at strengthening quality local news coverage on HIV/AIDS.

Internews' HIV/AIDS-focused programs encourage journalists to incorporate the views and voices of those personally affected by HIV/AIDS into news and feature reporting. Local Voices does not produce its own programs, but builds the capacity of local media professionals to report on the pandemic. Our work is to: Enlist the support of radio station owners and managers to expand coverage

of HIV/AIDS; Train and mentor journalists, talk show hosts, and DJs to produce their own material on HIV/AIDS; Provide travel grants to allow reporters to research HIV/AIDS stories outside of capital cities; Provide small equipment grants for journalists to build their professional capacity to produce stories; Offer media resource centers on HIV/AIDS, including production studios, where trainees receive follow-up assistance with story research and production, assistance in writing accurate/quality stories, feedback on aired stories, tools to measure the impact of their reports; Train local NGOs and associations of people living with HIV/AIDS on effective media relations and communications, thus adding their voices to the public dialogue; and, Create relationships between journalists, PLHIV and local HIV/AIDS leaders.

## ACKNOWLEDGEMENTS

First and foremost, we are very grateful to the individuals who responded to our web-based surveys, and to those who agreed to participate in focus group discussions. The fact that they shared their perspectives made this possible.

This report is dedicated to the memory of *Omololu Falobi*, a journalist and activist from Nigeria who was a champion of the journalists' role in HIV/AIDS prevention, care and treatment.

**Editor:** *Ron MacInnis*

**Survey Design:** *Jackie Davies, Liz Gold, Ron MacInnis*

**Writers:** *Sara Friedman, Jackie Davies*

**Additional support/editing:** *Kieran Daly, ICASO; MaryAnn Torres, ICASO; Kevin Moody, GNP+; Martin Stolk, GNP+; Marjorie Rouse, Internews; Anamika Nelson, Internews; Jacqueline Gayle, Internews; Annette Makino, Internews*

**Design:** *Cory Deibert*

**Photos:** courtesy Internews Network. These photos represent media development projects around the world but do not all represent HIV-related projects.

© INTERNEWS NETWORK 2006

### For more information, contact:

#### **Local Voices Project**

Internews Network  
1640 Rhode Island Avenue, NW 7F  
Washington, DC 20036  
Tel: 202-833-5740  
[www.internews.org](http://www.internews.org)

#### **International Council of AIDS Service Organisations (ICASO)**

International Secretariat  
65 Wellesley Street E., Suite 403  
Toronto, Ontario  
Canada M4Y 1G7  
[www.icaso.org](http://www.icaso.org)

#### **Global Network of People Living with HIV/AIDS (GNP+)**

PO Box 11726, 1001 GS  
Amsterdam, The Netherlands  
[www.gnpplus.net](http://www.gnpplus.net)