A STUDY OF SOUTH AFRICAN NEWSPAPERS' COVERAGE OF HIV AND AIDS PANDEMIC AND AUDIENCE ATTITUDES IN LIMPOPO PROVINCE

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BY

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UNIVERSITY OF LIMPOPO

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2014

DECLARATION

I, the undersigned hereby declare that the thesis hereby submitted to	the University of Limpopo for the
degree of Doctor of Philosophy in Humanities – has not previously bee	n submitted by me for a degree at
this or any other University; that it is my work in design and in executi	on, and that all material contained
herein has been duly acknowledged.	
Mbajiorgu M. C. (Mr)	Date

DEDICATION

This thesis is dedicated to the Almighty God for His unfailing love, all sufficient grace and everlasting faithfulness that enabled me to accomplish this academic task.

Indeed, you have shown me that if I commit my ways unto you, and trust also in you, you will surely order my steps to prosperity (Proverbs 3:5-6), and that your thought for me is of good and not of evil, to give me hope and a glorious future (Jeremiah 29:11).

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SUMMARY

INTRODUCTION

The South African mass media have been actively involved in the efforts to address the country's HIV and AIDS pandemic. Their news contents are well received by the general public, who greatly depend on them for their information and educational needs concerning the disease. Though substantial progress has been made towards reducing the spread of HIV and AIDS in the society, South Africa is still impacted adversely on different aspects of the society's wellbeing. Sustaining the gains in expanded treatment access and reversing the pandemic in South Africa require greater progress in reducing the rate of new HIV infection. Therefore, collective, consistent and concerted effort of the media, Government, civil society and other stakeholders can stop it on its track, and reduce the incidence rate (new infections) to zero level, while the country and the world wait in hope for vaccine and cure for the disease. Since education has been recognised as a powerful weapon against HIV transmission, consistent and regularly updated public education on all aspects of the pandemic by the media are still necessary. The quality, quantity and frequency of media efforts and readiness to be effectively involved in the whole effort for its success cannot be over emphasised. The present study is a content analysis of South African mass media output on HIV and AIDS covering 12 months (366 days), and public perception and attitude towards their coverage of the pandemic.

MATERIALS AND METHODS

A mixed method research approach and design, incorporating quantitative and qualitative research methodologies was employed in this research. Quantitative research method was used to collect data (desk research with content analysis) from twelve months editions of five national newspapers stratified as tabloid and broadsheet newspapers. A random sampling technique was used to select a study sample (5 national newspapers) out of the two categories as classified above. A total of 366 days or editions of the sampled mass media were therefore studied. The analyses of data (content analysis) on each of the main headings and topics, variables and sub-variables were presented on quarterly and year basis. The data obtained were coded based on the research variables, sub-variables and analysed. The public perception and attitude of South African media coverage of HIV and AIDS was studied using questionnaire and analysed quantitatively, and qualitatively where necessary.

RESULTS

South African mass media communicated high quality HIV and AIDS news stories to the public in the year 2010. In the analysis of the quality of media content, the six variables that were used to assess the media HIV and AIDS news reports, in both analyses (simple descriptive statistics and one-way ANOVA analyses), showed that the media reports were technically competent (99%) (see operational definition of terms), and characterized by high number of high confidential reporting (93%), with good combination of journalistic styles and creativity in HIV and AIDS reporting (99%). There were also good level of research (96%), objectivity (96%) and use of journalistic skills (99%). However, HIV and AIDS news reports were mainly in straight news format (73%) without adequate mixture of the various news types that would have further enhanced the media success in increasing public awareness and knowledge of the disease, and thereby helped further to mitigate and manage the pandemic.

Though South African media depended heavily on outside sources (79%) (for examples, Government, CSOs, private organizations) for HIV and AIDS news, (an unhealthy condition for media effectiveness), they seem to have skilfully managed this situation through the use of further news research and investigation (73%), and probably edited out possible publicity contents, capable of blurring the objective of their HIV and AIDS news reports.

Furthermore, HIV and AIDS prevention (27%), testing (18%) and treatment (11%) dominated media HIV and AIDS news subjects (56% in total) following Government's HIV and AIDS Testing and Counselling campaign (HTC) along the same line throughout the period studied, resulting in the success of the campaign and against the pandemic.

The results also indicated that South African media appropriately used "constructive and informative" language (99%) in communicating HIV and AIDS news stories, though with some fluctuations between "very constructive and informative" (58%) and "constructive and informative" HIV and AIDS new stories (41%). However, their "tone" in the reports were consistently positive (good) and supportive of the nation's efforts against HIV and AIDS (94%). The media used mostly professional or appropriate HIV and AIDS news reporting words and language (99%) without such sensational and stigmatizing words as "killer disease", 'dead sentence", "victim of HIV", "HIV/AIDS suffer", and "killed by AIDS". Their news reports also showed low percentage of blame on HIV and AIDS infection attributed to "Reckless lifestyle" (8%) and "Blame on husband" (2%). These percentages (although low) were the highest from the analysis of blame for HIV and AIDS infection.

Additionally, the South African media generally reported on domestic HIV and AIDS matters (77%) with direct bearing on the life of the populace, and mixed with very limited foreign HIV and AIDS news items (23%). This approach enabled the people to identify with the news stories on HIV and AIDS, but at the same time enriched their knowledge with interesting new developments on HIV and AIDS from international news scene. Equally, the media rightly reported HIV and AIDS as development (84%) and health issue (12%).

Generally, the content analysis result revealed that South African media accorded some importance to the pandemic, but not at the expense of other news items that were equally of national interest. Hence, the high percentage location of HIV and AIDS news stories on "Other page numbers" (93%), very limited placement of HIV and AIDS reports on important pages (7%), and limited editorial space allocation to HIV and AIDS in the period of study (5111 column width inches or 0.9% of the newspaper editorial space available in the year). However, HIV and AIDS items of special importance were featured prominently on newspaper pages (51%). This management pattern points to a special skill with which the media sustained the public awareness of the pandemic amongst other competing news items of national interest. Though, there was low coverage (quantity) of HIV and AIDS news by the media (a total of 345 HIV and AIDS news stories in a year), the result showed gradual increase in media coverage of HIV and AIDS stories from 1st to the 4th quarters in the period (19%, 17%, 26% and 38% respectively), indicating gradual increase in the response of the media to the pandemic within the study period.

Public Perception and Attitude to South African Media Coverage of HIV and AIDS

The media (TV, radio and newspaper) (75%) were the main source of regular HIV and AIDS news information in Limpopo Province of South Africa, followed by health officers (69%), indicating that a large segment of the people depends on the media for their HIV and AIDS information and updates.

The public seems to have accepted, and has high level of trust on the media as an authentic source of HIV and AIDS information and as a role player on issues of national interest such as HIV and AIDS pandemic. However, the media are not held as the most trustworthy source of HIV and AIDS information. "Doctors and other health care givers" was the most trusted source of HIV and AIDS in Limpopo Province (South Africa) (73%) followed by the media. Television was the most trusted source of HIV and AIDS information among the media (71%), followed by radio (53%) and then, newspaper (45%).

There is adequate HIV and AIDS coverage (87%) and knowledge level of HIV and AIDS in the Province (79%), but the public are still interested in accessing and consuming more HIV and AIDS news

information. South Africans in Limpopo Province love media information and entertainment (TV 97%, radio 96%, newspaper 94%) and there is high media penetration in the province (TV 100%, radio 93%, newspaper 83%), with high exposure and access to media contents both on weekdays (TV 100%, radio 98%) and weekends (TV 83%, radio 63%, newspaper 75%). Television is exceptionally loved by South Africans among the media, with the entire audience members owning the medium (100%), followed by radio (93%), and newspaper (83%).

The media have greatly improved their coverage of HIV and AIDS by adequately informing and educating the public on all aspects of the disease (89%); discouraging stigma and discrimination against people living with HIV and AIDS (85%), not stereotyping the disease as disease of the poor and immoral (89%), and have greatly improved their language use (85%) to the benefit of the people. The media coverage have been significant in promoting HIV and AIDS prevention (95%), testing (97%), caregiving (92%), HIV and AIDS free generation (91%) and other related issues in South Africa.

All stakeholders in the fight against the pandemic must seriously address the various catalyst or drivers of HIV and AIDS pandemic such as fear of discrimination against HIV and IDS positive individuals (51%), poverty (67%), alcoholism and drugs (62%), STIs (63%), multiple sexual partnership (79%), rape (65%), and reckless lifestyle which largely to some extent still exist in the society. Other drivers of the pandemic were increasing HIV and AIDS infection (42%), and the commonly accepted unplanned teenage pregnancy (53%). There is therefore, a strong link between people's socio-cultural behavior as drivers of HIV and AIDS in Limpopo Province, South Africa and attitudinal change towards the pandemic. The media must address them thoroughly for tangible positive effects to be recorded at both the individual and societal levels.

There is presently easy access to HIV and AIDS testing (68%), counselling and treatment (68%) contrary to the early days of the pandemic due to the easily accessible Government's HIV and AIDS prevention, treatment, counselling and care programme. however, more improvement is needed in the frequency of the teams' visit to those localities that don't yet have easy access to medical clinics or hospitals. Overall, the result indicated that multiple sexual partnership ranked the highest HIV and AIDS problem of concern in the society, followed by poverty, rape, STIs, alcohol and drugs, and unplanned teenage pregnancy.

KEY WORDS

HIV and AIDS news coverage, HIV and AIDS news reporting, HIV and AIDS news reports, HIV and AIDS news stories, media and HIV and AIDS pandemic, content analysis of HIV and AIDS news stories, impacts of HIV and AIDS, HIV and AIDS media discourse, South Africa and HIV and AIDS pandemic, HIV and AIDS prevalence rate, HIV and AIDS incidence rate, Expanded access to HIV and AIDS treatment, HIV and AIDS Prevention, Treatment and Care (HTC) programme, public perception of media HIV and AIDS coverage, public attitude to media HIV and AIDS coverage.

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ABBREVIATIONS

% Percentage

AIBD Asia- Pacific Institute for Broadcasting Development

AIDS Acquired Immune Deficiency Syndrome

ANOVA Analysis of Variance

ART Antiretroviral Treatment

ARV Antiretroviral (drug)

CDC United States Centres for Disease Control and Prevention

CP City Press (Newspaper)

CSO Civil Society Organization

HAART Highly Active Antiretroviral Therapy

HCT HIV Counselling and Testing

HEARD Health, Economic and HIV/AIDS Research Division, University pf Kwazulu-Natal

HIV Human Immune Deficiency Virus

HSRC Human Sciences Research Council

IIEP International Institute for Education Planning

IMF International Monetary Fund

LED Life Expectancy at Birth

M & G Mail and Guardian (Newspaper)

MARP Most-At-Risk-Population

NACC National AIDS Control Council, Kenya

NASCOP National AIDS and STI Control Programme, Kenya

NGO Non-Governmental Organization

Non-profit Not-for-Profit Organizations

PLHIV People Living With HIV and AIDS

PMTCT Prevention of Mother to Child Transmission

SADC Southern African Development Community

SANAC South African National AIDS Council

SEM Standard Error of Mean

STI Sexual Transmitted Infection

SW Sowetan (Newspaper)

TS The Citizen (Newspaper)

TS The Star (Newspaper)

TV Television

UNAIDS Joint United Nations Programme on HIV and AIDS

UNDP United Nations Development Programme

UNESCO United Nations Education and Scientific and Cultural Organization

WHO World Health Organisation

OPERATIONAL DEFINITION OF TERMS

Mass Media: They are large and powerful channels of mass communication in the society and includes television, radio, magazines, newspapers, internet, bill boards and other widely circulating print vehicles.

Publicity: It means to gain media coverage. It is newsworthy (public interest) information that concerns a person, group, event, or product (in this instance, HIV and AIDS) and that is disseminated freely through various media (radio, television, magazines, and newspapers) to attract public notice.

HIV: It is a retrovirus which destroys the immune system of the body by infecting CD4 lymphocytes (a key part of the immune system) and makes it ineffective in fighting infections (Houghton, 2005). The body then becomes vulnerable to different types of (opportunistic) infections.

AIDS: The acronym means Acquired Immune Deficiency Syndrome. After a period of time, the immune system of the body that is infected by HIV becomes weakened and broken down by the virus. At this stage, it can no longer be able to protect the body from diseases, causing the rise of serious infections and cancers generally known as "opportunistic infections".

HIV Infected: A person who has contracted HIV virus, and therefore is said to be HIV positive. This later develops to AIDS. HIV virus are acquired through any of these: sexual relation with an infected individual; any object with fresh blood of the infected person piercing into a body and coming in contact with the person's blood; given birth when the mother is infected or drinking the breast milk of an infected mother; sharing of needle with an infected individual.

The HIV Affected: Those individuals whose lives are affected (often negatively) in any measure by HIV due to the general impact of the pandemic (ILO, 2003:1).

Epidemic: The occurrence in a population of a case of an illness (or an outbreak) with a frequency clearly in excess of normal expectancy (Giesecke, 2002:19).

Sero-prevalence Rate: The proportion of people living with HIV in a given population within a geographical area.

HIV Incidence Rate: The proportion of new HIV infections in a given population within a geographical area.

Discrimination: This is defined by UNAIDS Protocol for the Identification of Discrimination against People Living with HIV (PLHIV) as "any form of arbitrary distinction, exclusion or restriction affecting people because of their confirmed or suspected HIV-positive status" (UNAIDS, 2000). HIV-related discrimination involves any action, decision or word that arbitrarily distinguishes people based on their confirmed or suspected HIV sero-status or health conditions.

Stigma: Classified as being an attribute that is significantly discrediting. Stigma is socially contracted and partly arises from cultural norms about what a person should be and what people think about those who deviate from the norm.

Behavioural change: This refers to any change in, transformation or modification of human behaviour.

HIV Mitigation: This refers to efforts to alleviate, lessen or ease the impact of HIV and AIDS. (UNAIDS and WHO, 2006:179).

Perception: Views and opinions of members of the public based on their observation of, and sensitivity to HIV and AIDS media output within a particular period.

Attitude: This refers to the position or stance of members of the public on HIV and AIDS media output based on their feelings or mind-set on the issue. For the media – it means how the media covers HIV and AIDS based on the extent of their perceived newsworthiness of the pandemic.

Social Acceptance of the PLHIV: Social consideration of People Living with HIV and AIDS (PLHIV) as ordinary members of the society who the community accord mutual respect, equality and compassion.

Dose-Response Theory

This theory suggests that "if a campaign causes changes in an outcome, then higher "level of campaign exposure should yield larger changes" (Bertrand, and Anhang, 2006:235).

Edutainment

It refers to the combination of education and entertainment as a proven effective method of successfully communicating health messages to large audiences. The messages are incorporated into popular entertainment formats designed for prime time. Such "approach is known as "edutainment" because it aims to educate and entertain the target audiences simultaneously (UNAIDS, 2005:8), in order to increase knowledge about educational issue (Singhal, Cody, Rogers and Sabido, 2004).

Mass Media Interventions

These include any mass media bases planned programmes or other time-limited efforts that are clearly focused on knowledge, attitudes and behaviours changes that are associated with "preventing the transmission of HIV and that disseminate messages among an intended population through channels that reach a broad audience" (Bertrand and Anhang, 2006:206).

Representative Sample

This means that the research sample, though small in number, is a miniature image, or likeness of the research or total population because it "has the exact properties in the exact same proportions as the population from which it was drawn" (Wilman and Kruger, 2004:47).

Coping Strategies

These refer to a set of actions aimed at managing the cost implications of an event (for example, a shock) or process that impacts negatively on the welfare of some or the entire household members (Russell 2003:28). The concept of coping normally relates to costs of illness and the short-term or long-term economic threats it imposes on the household (McIntyre and Thiede, 2003).

Life Expectancy

It is defined as "the mean age to which a fifteen-year old could expect to live if subjected to the full pattern of age specific mortality rates observed for a population over a particular period of time" (Bor, et al., 2013).

OPERATIONALIZED CONTENT CATEGORIES AND VARIABLES OF MEASUREMENT

The content analysis results are analysed on the basis of the following variables:

Quality of Media HIV and AIDS News Reports

The quality of HIV and AIDS news stories is the study of the value, worth or excellence of the news stories, which may be of high or low quality. The variables for measurement of quality of news reports include types of HIV and AIDS news media output, confidentiality level of the news reports, technical competence of the reports, combination of journalistic skills and creativity in HIV and AIDS news reporting; objectivity of the reports, and use of research in HIV and AIDS news reporting. These characteristically and traditionally determine the value of media output on a news issue or item: These variables are further operationalized below.

Types of Media HIV and AIDS News Output

This refers to kinds, varieties or styles of writing HIV and AIDS news stories. There are two distinct groups or categories of types of HIV and AIDS news output. One of the groups is news stories or outputs that require less research, no analysis or interpretation, and is easier to write. It consists of straight news, photo news, newsbreak, book review, and letter to the editor. The second group of types of HIV and AIDS news stories or output consists of news analysis, editorial, feature article, investigative news, opinion article, Vox pop, and Interview, and requires research, analysis or interpretation, and gives indepth information on the news topic.

Straight news type (without much research) is easy to write, and is used to communicate the gravity of HIV and AIDS pandemic to the public in no ambiguous manner. Straight news type; commonly used for writing hard news, is associated with emotional issues such as life threatening occurrences, sudden and untimely death and disasters among others. Straight news format (using the traditional news writing 5Ws and H model) may have limited number of words, and lack in-depth factual information needed for HIV and AIDS education and awareness creation purposes.

Confidentiality of HIV and AIDS News Reports

The privacy and identity of the HIV and AIDS positive and affected individuals in a news story should be ensured unless where such individuals are willing to reveal their identity. This adds to the quality of HIV and AIDS news stories or media output. HIV and AIDS news reporting requires some level of carefulness in revealing such individuals because of the various kinds of stigma and discrimination that are still attached to the disease. The disease should not be sensationalized by the media but requires human

angle in its news coverage, because it is still a sensitive health challenge and there is yet no cure for the disease.

The "neutral confidential" HIV and AIDS news stories as sub-variable of the "Confidentiality of HIV and AIDS news stories' refers to HIV and AIDS news stories that are not on or sourced from the HIV and AIDS infected and affected individuals but from other news sources. Such stories focus on any HIV and AIDS related issue.

"Confidential HIV and AIDS reporting" refers to the HIV and AIDS infected or affected telling their stories but still prefers to be unidentified, or sourcing news stories from them and not revealing their identity in the story. In other words, it refers to HIV and AIDS news reports that are silent on the identity of the HIV and AIDS positive sources.

"Breaking of Silence" news stories refer to people living with HIV and AIDS (PLHIV) who speak out openly on their HIV and AIDS status. There is still a degree of shame, self pity and fear attached to being infected with HIV and AIDS. This may be due to the social stigma and discrimination still attached to the disease despite the availability of free ARV treatment in the country.

Technical Competence of HIVAIDS News Reports

HIV and IADS news stories are technically competent when they are journalistically well written, factual and capable of positively influencing the public towards HIV and AIDS. They are competent enough to improve the educational and knowledge levels of South Africans on this pandemic, and possibly encourage them to take actions based on informed background. Such stories follow skilful journalistic procedure for news writing and are of high news quality.

They are sensitive to the feelings of the HIV and AIDS infected and affected individuals, and are presented in such a way that they are practically and methodically capable of eliciting the desired outcome or responses from their consumers or the public. They also contain high level of confidential reporting, research, good presentation of issues around HIV and AIDS, and objectivity, and are written in good journalistic writing styles. They are pro-active in the efforts against HIV and AIDS and positively fight against stereotypes, stigma and segregation. The sub-variables for the study of technical competence of HIV and AIDS outputs are "very "competent, "competent", and "incompetent" HIV and AIDS news stories.

Combination of Journalistic Skills and Creativity in HIV and AIDS news reporting

Combination of journalistic skills and creativity HIV and AIDS news stories refer to HIV and AIDS news stories that are well written journalistically, and creative enough to encourage media audience acceptance, consumption and absorption of their contents. The sub-variables for this study are: "good" combination of journalistic styles and creativity in HIV and AIDS reporting; "fair' combination of journalistic styles and creativity in HIV and AIDS reporting; and "poor" combination of journalistic skills and creativity in HIV and AIDS reporting.

Objectivity in media HIV and AIDS news reporting

Objectivity in media HIV and AIDS news reporting refers to the impartiality of such stories. Such news stories are impartially written, balanced, and high quality HIV and AIDS news stories. The inclusion of the views of all the necessary parties in the media HIV and AIDS news stories attests to the accuracy and objectivity of the stories. Objective HIV and AIDS news stories are objectively reported without favour to any particular stakeholder

Objective or balanced HIV and AIDS news reporting is critically important in the media gaining the trust and confidence of their audiences, and getting them to believe and accept media account of daily happenings as true. This variable is studied under two sub-variables: 'Balanced' HIV and AIDS news reports (when the views of all the sides or parties involved in the news event are included), and 'biased' HIV and AIDS news reports (when the views of some of the sides or parties to the news events are unduly excluded).

Use of Research in HIV and AIDS News Reporting

HIV and AIDS news stories that contain evidence of researched news facts or information updates are interesting to the media audience. Such stories have information on new developments in different areas and aspects of the pandemic and may be local or international HIV and AIDS related occurrences. It underlines the extent of the priority given to HIV and AIDS news coverage by the media, and helps the media communicate factual information on different aspects of the pandemic to the public. This has the tendency of raising the public's HIV and AIDS knowledge (knowledge update). Researching the news enables the journalists to access such relevant news information; it helps to enrich the stories with factual updates, and may contain interpretation of relevant statistical figures. The extent of the use of research in HIV and AIDS news coverage are measured as "well researched", "fairly researched", and "not researched".

"Not researched" HIV and AIDS news reports without any knowledge update, or effort to unearth such) create the impression that there is nothing new and interesting to report about the pandemic.

The Sources of Media HIV and AIDS News Stories

The sources of media HIV and AIDS news stories refer to the channels or means through which the public receive HIV and AIDS news stories and knowledge updates. It deals with the origin of such news stories. The media source their HIV and AIDS news stories internally and externally; internally - when their HIV and AIDS news stories are internally written or produced by their own internal journalists or externally from sources such as Government departments, freelance writers, donor agencies, research centres, wire service or press agencies. Dependency on outside sources by the media may tilt the framing and patterning of the coverage to favour such sources, and consequently impact negatively on the quality of media HIV and AIDS news reporting.

Main Subjects of Media HIV and AIDS News Reports

This refers to the main HIV and AIDS topics, themes or issues covered by the media in their (HIV and AIDS) news stories. Such subjects include the origin of HIV and AIDS; HIV and AIDS prevalence; HIV and AIDS prevention, HIV and AIDS testing; HIV and AIDS awareness and education; vaccine development; economic impact of HIV and AIDS; medical costs of HIV and AIDS; politics of AIDS; AIDS treatment; cure of AIDS; scientific discovery; social behavioural pattern; sexual transmission rate, and HIV and AIDS funding.

Constructiveness and Information Richness of Media HIV and AIDS News Stories

"Constructiveness and Information richness" of HIV and AIDS story deals with the use of good grammar or sentence structure, use of appropriate words and terminologies in communicating the disease, as well as containing factual and beneficial information that are of interest to the public. Since HIV and AIDS is a special and peculiar disease, reporting about the disease goes beyond mere use of 5Ws and H in news reporting, to include the use of clear and concise sentences, appropriate use of words, and avoidance of grammatical ambiguity. Misleading grammatical construction and misuse of words will negatively impact on the effectiveness of the news story in the fight against the pandemic. Additionally, the story lead or 'intro' should be very clear, and interesting enough to lure the readers to not only read the first few lines of the story but to also read the rest of the story. The "body' of HIV and AIDS story should equally be interesting and should be full of interesting facts that will be of benefit to further inform and educate the readers on the pandemic. Relevant statistical figures should be used (where necessary) and adequately interpreted for the media audiences.

Constructiveness and Information richness of media HIV and AIDS news stories was studied under "Very Constructive and Informative" HIV and AIDS news stories, "Constructive and Informative HIV and AIDS news stories", and "Not Constructive and Informative" HIV and AIDS news stories.

Professionalism in Media Use of Language in HIV and AIDS Reporting

Professional use of words refers to media use of appropriate, simple and easily understood words that are not ambiguous and that can not be easily misinterpreted. Such words address the issue instead of the individuals involved (the HIV and AIDS infected and affected) and name calling is completely out of the picture. Good knowledge and use of relevant and appropriate words in HIV and AIDS reporting can be acquired through training in specialized reporting on news coverage of the pandemic. It refers to use of professional or appropriate language to communicate HIV and AIDS news stories. Such use of language in HIV and AIDS communication will not contribute to public fear of the disease, and not stigmatizing, discriminating and stereotyping those infected and affected by the pandemic.

Unprofessional Language Use

Language used in the media HIV and AIDS news reporting are negative and stereotyped when words and phrases such as "victims", "death sentence", "AIDS sufferers", "gay disease", 'AIDS patients", "killer disease', "AIDS patients", "died of HIV and AIDS' as used. Sensationalism is commonly seen in this kind of language use.

Language Tone of Media HIV and AIDS News Story

The media use different voices and tones in their news communications including positive, neutral, and negative tones, or high, neutral or low tones depending on how the journalist or the media presents the news story. This is often not conspicuously stated, but clearly detectable in any media news story. The tone is neutral if the media is detached from the issue, and low if they are in support of it (as when the issue is not socially popular but of interest to the media). Media tone is high or positive if they are interested in the issue and see it as important and deserving serious attention. It is negative and critical if they are completely not in support of the issue at stake. Media tone can also be negative and high or positive and high.

The "positive" toned HIV and AIDS news stories are supportive of the efforts against HIV and AIDS. This supportive reporting assists in overcoming public fear of the disease and reducing stigmatization of the people living with the disease.

Blame Attribution of HIV and AIDS Infection in Media HIV and AIDS News Reports

Sometimes, media HIV and AIDS news stories contain blame on the channel/s or route/s of the infection. This can come from the media, organizations or individuals. People living positively with the disease, who have access to the media, may point fingers at the source/s of their infection, as well as tell stories on how they contracted the disease. Blame for HIV and AIDS infection in media news stories has been attributed to prostitution; lesbian and gay; reckless lifestyle; truck drivers; polygamy; husband; wife; government; poverty. Some HIV and AIDS news stories do not contain blame for infection and are grouped under the "no blame" HIV and AIDS news story category.

Geographical Location or Setting of HIV and AIDS News Reports in the Media

This refers to the geographical origin or setting of HIV and AIDS news stories communicated by the media. This was analysed using the following sub-variables: local HIV and AIDS news stories, national HIV and AIDS news stories, and foreign or international HIV and AIDS news stories. The national and local HIV and AIDS news studies have direct bearing on the people within a country, and contained issues they can identify with. "Foreign or international" HIV and AIDS news stories refer to international developments on HIV and AIDS.

The Nature of HIV and AIDS Presented to the Public by the Media

The nature of HIV and AIDS presented to the public in media HIV and AIDS news reports looks at what (issue/s or challenge/s) the media presented HIV and AIDS as. The media HIV and AIDS may communicate HIV and AIDS as developmental, health, social or religious issue. If HIV and AIDS is accurately presented by the media (what it really is), it can help the public and policy makers have the accurate picture of the disease and its related issues, and be able to influence decisions at all those levels.

News Relevance of HIV and AIDS Pandemic to the Mass Media

The relevance or importance of a news item to a media outlet is determined by the value the media attach to such a news item. Such value(s) are measured by the prominence of the news item in the media, editorial page location, news space dedicated by the media to the news item, and the quantity of the news item communicated by the media in a given time frame. This (news relevance) also draws related importance from media audience concerning the event, topic or issue. This deals with time slot, duration, and frequency of broadcast for the broadcast media.

Prominence of HIV and AIDS News Reports in the News Media

This refers to the positions HIV and AIDS news stories occupy on the newspaper news pages. Newspaper news report is prominent when it is prominently positioned on the newspaper page and such is called "prominent news report". Such news stories have much importance attached to them by the media and command headline attention. It is "less prominent" when less importance is attached to the news story or issue. In such instance the media did not consider it necessary to accord a special attention to it.

The media characteristically assign different values to HIV and AIDS news events and issues by emphasizing them to different degrees in their news reports. A news item is prominent on a news page if the news item is the main headline on the news page, and with the biggest font size on the page, conspicuously positioned on the news page to attract readers' attention, and or occupies the biggest news space (measured in column and inch). The news item may also be printed in reverse print to prominently present it on the same news page with other news items and stories. For broadcast media, it is time slot and duration of such broadcast item.

Editorial Page Location of HIV and AIDS News Reports

Editorial page are the newspaper or magazines pages that contains editorial (news contents) matters and items published by the newspaper or magazine. Print media industry practitioners attach much importance to some newspaper pages than others. This is because some newspaper pages attract readers more than other pages because of the positions they occupy. The most important newspaper pages are the front page, pages 2 and 3, editorial page, opposite editorial page or Op.ed., second to the last page and the back page.

Editorial Space Dedicated to HIV and AIDS by the Media (In Inches)

The print media deal with allocation of editorial space (measured in millimetre or inches) to editorial matter or news story on their perceived importance of such news item. This is based on their editorial judgement which assists them to categorize news stories and assign values to them. The bigger the editorial space allocated to a news story or illustration (e.g. cartoon), the higher the relevance of such editorial item to the media practitioners. On the other hand, the smaller the editorial space allocated to such editorial item, the less the relevance of such editorial item to the media.

Quantity of HIV and AIDS Coverage by the Media

The quantity of HIV and AIDS coverage by the media refers to the extent, amount, number, or magnitude of HIV and AIDS related news stories delivered to the public through media outputs. It can be analysed through the frequency of media news output. This also helps to analyse media attitude (output frequency) to HIV and AIDS news communication. The analysis of the quantity of media HIV and AIDS news stories equally enables the calculation of the coverage level of HIV and AIDS in different media (newspaper) outlets.

CHAPTER ONE

1. INTRODUCTION

"South Africa has been especially hard hit (by HIV and AIDS). Every day in South Africa, an estimated 1700 people are newly infected with HIV. In the face of the grave threat posed by HIV and AIDS we have to rise above our difference and combine our efforts to save our people. The experience in a number of countries has taught that HIV infection can be prevented through investing in information ---. We need to break the silence, banish stigma and discrimination, and ensure inclusiveness within the struggle against AIDS ---. There is need for us to -- mobilize all of our resources and alliance, and to sustain the effort until this war is won. For this we all need to be well informed ---. I hope and trust that you will hear the call to action."

- Nelson Mandela's "Forward" to Abdoul-Karim and Abdoul-Karim (2008).

This statement and call for action against HIV and AIDS by the former President of South Africa adequately underscores the severity of the pandemic, the necessity of, and the needed urgency and strategy for addressing it, not only in South Africa but in all nations where HIV and AIDS has been detected. Indeed, no one country or region can be able to curtail the spread of this pandemic alone, nor reverse or stop it entirely due to its peculiar characteristics. The statement also acknowledged the strategic position and role of the mass media in the whole effort in South Africa, and in all other countries being ravaged by this pandemic. "Tens of millions of people have died of AIDS-related causes since the beginning of the epidemic" (Kaiser Family Foundation, 2013. See also UNAIDS 2013; 2012b; 2011b).

Since its official establishment on 5 June 1981, when the United States Centers for Disease Control and Prevention (CDC) reported the 'unusual sickness' (CDC, 1981:1-3), Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (HIV and AIDS) has grown "into a global pandemic affecting tens of millions of men, women and children" (Kaiser Family Foundation, 2007:2). The impact of this pandemic on all spheres of the society and people has received much attention. The use of the mass media and the application of their functions of information dissemination and education in the processes of preventing, managing and mitigating the impact of the disease on the society have also received much attention.

In the history of HIV and AIDS the pandemic has hit Sub-Sahara Africa harder than any other region in the world. The region which constituted about 10% of the world population in 2006 accounted for more than two-thirds (68% or 24.7 million) of all adults and children living with HIV in the world, and over three quarters of deaths from the pandemic in that year (UNAIDS, 2007). Globally, an estimated 39.5 million

people lived with HIV worldwide and approximately 4.3 million people were newly infected with the virus in 2006, with 2.8 million (65.1%) from the sub-Saharan Africa. There were 2.9 million AIDS-related deaths in 2006 (UNAIDS, 2007:7), with 2.1 million (72.4%) of this number coming from the region (Odiaka and Muanya, 2006:14).

In 2009, 1.8 people died from HIV and AIDS, 1.3 million of whom were living in sub-Sahara Africa, and another 2.6 million people became infected with the virus globally. In the year, 4,900 were dying from HIV and AIDS and 7,100 people newly infected with the AIDS virus every day (UNAIDS, 2010). Globally, 15 million people were in need of HIV and AIDS treatment, with 10.6 million of this number living in Africa in 2011 (ONE, 2011:1584). The pandemic mostly affects people in their most productive age - between 15 - 45 years, thereby justifying the emphasis on the prevention and management of the disease (UNAIDS, 2013c).

This scenario has continued over the years. In 2012, the region now with a total of 12% of the world population hosts 71% (25.0 million) of all adults living with HIV/AIDS, and 1.6 million of all new infections in the year. The global total of all people living with HIV in the year was 35.3 million, and Sub-Sahara Africa continues to be the most severely affected area with nearly 1 in every 20 adults diagnosed with HIV (UNAIDS, 2013). Coupled to this is that HIV knowledge including its transmission and prevention, that is necessary for appropriate reduction in behavioural risk practices has remained low in Sub-Sahara Africa (UNAIDS, 2013). The result of this is that an estimated number of 2,000,000 AIDS-related deaths, with or without antiretroviral therapy occurred in Sub-Sahara Africa in the year (ibid:49).

The South African National HIV and AIDS Strategic Plan 2007-2011 and that of 2012-2016 clearly recognize the position of the media for effective efforts against this pandemic. The Strategic Plan is based upon a number of key guiding principles which include: "supportive leadership; effective communication; effective partnerships; promoting social change and cohesion"; and sustaining programmes and funding, with two primary goals of reducing the HIV incidence rate (rate of new HIV infection) by 50%, and of expanding the access to antiretroviral treatment (ART) to 80% of people in need of it. (SANAC, 2007:12). Among other communication measures, the 2012-2016 Strategic Plan sees active communication with the mass media as very imperative, and recommends that "a strategy needs to be developed" for this purpose (SANAC, 2011:24, 49, 58). It further plans to use the media extensively in the Government's forthcoming scale up HIV and AIDS social and behavioural change communication programme (ibid). In all these, the South African Government equally recognised that the mass media are

effective tools for social mobilization and, that if used appropriately, they can help realize the objectives set out in the country's HIV and AIDS prevention and management programmes.

Limpopo Province consists of five (5) districts, namely, Capricorn, Mopani, Sekhukhune, Vhembe, and Waterberg districts. HIV and AIDS is impacting heavily on all the districts in Limpopo Province. According to a research report by the Provincial Government, there is still high degree of stigma associated with HIV and AIDS among communities in Limpopo Province in spite of the numerous government initiatives through public-private partnerships to educate communities on issues concerning HIV and AIDS (Limpopo Provincial Department of Health and Social Development, 2006:i). The AIDS epidemic became "one of the most dangerous threats to human and socioeconomic development for Limpopo Province" (ibid:2).

The HIV prevalence in the Province was "projected to increase in the future with accompanying demographic consequence" in the next six years (Actuarial Society of South Africa, 2005: 63–73). The 2006 estimated number of adults who are HIV positive in the Province was put at 13.7% of the adult population (aged 20 - 64). The 2015 projection for this figure is 14.5% of the adult population, and 8.3% of the total population. The projected annual new cases of HIV infection in the Province range from 46,000 in 2006 to more than 49,000 individuals by 2015" (Limpopo Provincial Department of Health and Social Development, 2006:45); Actuarial Society of South Africa, 2005:63-73). This situation "needs to be acted upon if the existing policies and programmes around HIVAIDS are to be successful" (Limpopo Provincial Department of Health and Social Development, 2006:ii). "There is still much work to be done to stop 'this pandemic' that has claimed the lives of more than half a million persons in the United States, and more than 25 million persons worldwide" (CDC, 2011:1; AVERT, 2014) This is a time for all "to reflect, learn and recommit to ending this pandemic" (CDC, ibid).

1.2 BACKGROUND TO THE STUDY

"AIDS remains one of the central impediments to national health, development and well-being. AIDS has lowered life expectancy, deepened poverty ---, reduced economic growth, exacerbated hunger, and worsened basic health indicators" (NACC and NASCOP, 2012:2). Although the world has made some progress against HIV and AIDS due to improvement in treatment, it is evident that HIV and AIDS is placing a heavy burden on human lives, adversely affecting the socio-economic wellbeing of the people all over the world. Despite the global efforts so far in the fight against HIV and AIDS, the impact of the disease is still devastating to the economy of the nations with high prevalent rate of the disease, and their social existence. Overall, the world economy is impacted as well. This is clearly understood when the long-term impact of the disease is taken into consideration (Bell, 2003; Whiteside, 2002; UNAIDS, 2006:80). The disease is still impacting heavily on South Africa's economic, educational, medical, social, and cultural sector existence (Centre for Actuarial Research, (2006, November); South African Medical Research Council and Actuarial Society of South Africa, (2006, November); UNAIDS and WHO, 2006:11, 82).

The Republic of South Africa (SA) is located in the Southern Africa sub-region, which "is home to nearly two thirds of those living with HIV and AIDS globally" (Panos, 2006:1). HIV prevalence estimation for South Africa in 2002 was between 4.5 million and 6.5 million people, and the 2006 national prevalence rate was estimated at 10.8%. This means that one-and-half million people lived with HIV and AIDS in South Africa in 2006. Adult prevalence rate was estimated at 18.8% (UNAIDS, 2006: 6-7; UNAIDS, 2006 Annex 2: 508; Pembrey, 2008:1), with women having a higher prevalence (13.3%) than men (8.2%) and almost 1000 AIDS deaths recorded every day (Nelson Mandela and HSRC, 2005:33). "An estimated six million South Africans were expected to die of AIDS-related diseases over the next 10 years" from 2005 (International Marketing Council of South Africa, 2005:1). Provincially, KwaZulu-Natal (16.5%), Mpumalanga (15.2%) and followed by Free State (12.6%) had the highest HIV prevalence in South Africa. Limpopo Province had 8.0% HIV prevalence (HSRC, 2006:1). These three provinces had also the highest prevalence in 2012 (Shisana, Rehle, Simbayi, et at., 2014)

In 2003, the Human Sciences Research Council (HSRC) of South Africa released preliminary findings of their study "on the prevalence of HIV among health workers and patients in four" South African provinces. According to the report the overall public sector HIV prevalence among the patients was 28%. Clinic attendees have a prevalence of 26% and it was 46% for inpatients. As generally established, more women patients (31%) were HIV positive than men (22%) (Colvin, 2008:338).

The number of people infected with HIV in Limpopo Province was estimated to be about 400,000 in 2006. It was projected that this number will rise to more than half a million (540, 554) by 2015. About 39 474 people were suffering from AIDS in 2006 in the Province. This figure is projected to rise to more than 64,000 by 2015" (Limpopo Provincial Department of Health and Social Development, 2006:46). There were increased HIV prevalence in all the Provinces in South Africa in 2012, with Limpopo Province having overall HIV prevalence of 9.4% in the year, and the lowest level of knowledge of sexual transmission of HIV (19.3%) (Shisana, et al., 2014:39, 94). The 2008 South African national HIV household survey (two others were done in 2002 and 2005) shows a national HIV and AIDS prevalence of about 5.3 million people, "representing a quarter of the burden of HIV infection in sub-Saharan Africa", and leaving South Africa still with the "highest number of HIV infected individuals" worldwide. (Rehle, Hallet, Shisana, et al., 2010:11094; Stove, Johnson, Zaba, et al., 2008). This number rose to 6.4 million people (12.2% of the population) living with HIV in South Africa according to the 2012 national survey, and the country ranked first in HIV incidence in the world with over 469,000 new infections in the year (Shisana et al., 2014:35, 58). In absolute numbers, additional 1.2 million people are living in South Africa in 2012 compared to the total number in 2008 (ibid).

The 2008 (following the visible effects of national ART roll out) prevalence among men and women aged 15-19 years was 16.9%. The estimated excess prevalence due to antiretroviral treatment in the same age group was 1.75%, and prevalence in the same year in the absence of treatment was estimated at 15.2%. The same year's HIV and AIDS prevalence among women 30-34 years was 29.1%, with ART accounting for an excess prevalence of 3.6%. Therefore the adjusted value of HIV prevalence in the absence of ART was 25.5% (Rehle, et al., 2010). The authors of the new South African HIV incidence estimates have however warned that:

"There is no room to become complacent. 1.3% of all uninfected South African adults, including 2.2% of uninfected young women aged 15-24 years, became newly infected in the last year (2009). These incidence levels in the general population need to be halved in order to meet the 2011 target of the National Strategic Plan" (ibid.).

However, much success has not been achieved in reducing the HIV and AIDS incidence rate in the country and the national overall HIV prevalence is estimated at approximately 10% of the population in 2012 (Statistics SA, 2013:2), but Shisana et al, (2014) estimated it at 12.3%, with increased number of new HIV infection. Within the same year, the total number of people living with HIV is estimated at approximately 5.26 million in 2012 (it was 4 million in 2002) (Statistics SA 2013).

Before the AIDS pandemic, South African mortality rate was dropping. By the end of 1990, life expectancy in South Africa rose up to 63 years. This was long reversed by HIV and AIDS pandemic. According to Muhwava, Herbst and Newell, (2013), in 2000, 30% of the deaths in the year were due to HIV and AIDS for both sexes. At the peak of the pandemic, potential years of life at birth lost by the country were 16 years for females and 10 years for males – as low as 47 years for females and 41 years for males. However, adult life expectancy at birth (LEB) for males increased from 41 years to 49 years between 2003 and 2010, and for females, from 47 to 59 years. Moreover, sustained declines in death rates were only noticed after 2006, when the life expectances at birth started to increase above 55 years for both sexes (Muhwava, Herbst and Newell, ibid.). Other studies are also confirming that the South African introduction of antiretroviral (ART) therapy is reversing the decline in life expectancy in the country, signifying the social value and other related implications of the therapy. According to Bor, Herbst, Newell, and Barnighausen, (2013), adult life expectancy in South Africa rose from 49.2 years in 2003 partly due to ART becoming available in the public health system that year "to 60.5 years in 2011 – an 11.3 year gain". The report suggests that "scale up of ART therapy will raise adult life expectancy in populations with high HIV prevalence" (ibid.; see also Shisana, 2014; CDC, December 2013; Statistics SA, 2013:5; UNAIDS, 2012; Johnson, Mossong, Darrington et al., 2013, Mayosi et al., 2012). According to Statistics South Africa, life expectancy in South Africa was 50.0 and 55.2 years for male and female respectively in 2002, but has since increased to 57.7 and 61.4 years in 2013 for both sexes respectively (Statistic SA 2013:5). The statistical agency projects that this increase in life expectancy will continue.

Maternal mortality ratio from South African Government rose annually from 117 per 100 00 in 1998 to 147 in 2004. However, the United Nations estimates and other national data such as census in 2001 suggested that the ratio ranged from 230 per 100 000 to 575 per 100 000 within the period. South Africa is one of the 12 countries with increased, instead of falling child mortality rate since the 1990 Millennium Development Goals (MDGs) baseline came into effect. In 2005, four of the five estimated national mortality rates in children under the age of 5 years were between 69 per 1,000 and 76 per 1,000. "Most of the increase in maternal and mortality in children younger than 5 years (was) accounted for by HIV and AIDS" (Pattison, Stephen, Bradshaw et al., 2008:1294-1304). However, the infant mortality rate for South Africa was 41.7 per 1,000 live births in 2013 (Statistics SA, 2013:2). ART programme is generally impacting positively on mortality in South Africa by reducing children and adult mortality by 43% and 20% respectively, and increasing life expectancy by six years (Mayosi, et al., 2012).

Approximately 17% of South Africans in their reproductive ages in 2013 are living with HIV (Statistic SA, 2013:4). South Africa bears the greatest burden of mother-to-child transmission of HIV and AIDS among

all countries of the world, despite its launching of a national prevention programme in 2000 that made single-dose nevirapine available to HIV-infected women in labour, and to their infants post-natally. In Kwazulu-Natal Province, 7.2% of all 6-week-old infants attending immunisation for the first time were already HIV infected. Although increasing number of children are receiving the needed HIV and AIDS treatment at the moment in South Africa, "nearly a third of pregnant women 'in 2008' were HIV-infected ranging from 15% in Western Cape Province to 39% in Kwazulu-Natal". (Chopra, Daviaud, Pattison et al., 2009:842; UNAIDS, 2008; Rollins, Little, Mzolo, et al., 2007:1341-47). Nationally, an estimated 300 000 HIV-positive women need health services for themselves and to prevent the transmission of the virus to their unborn or born children (Pattison, Stephen, Bradshaw, et al., 2008:1294-1304).

South African HIV and AIDS pandemic is characterised by two features: (1) continuous spread among all age brackets (Shisana, Rehle, Simbayi et al., 2005:135) with the incidence rate beating Government's prevention efforts (News 24, August 25, 2011; HSRC, 2008:63-64; Shisana, Rehle, Simbayi et al., 2014), and (2) the maturation of the pandemic moving from dormant HIV infection to the increased AIDS-related morbidity and mortality, with this manifesting in overwhelming burden on the health care system to increase number of orphaned children and child-headed homes (De Vos and Baim-Lance 2002:73). Though South African Government reports of stabilizing the prevalence rate of the pandemic in the country through free ARV treatment, the incidence rate is still very high and beating Government prevention efforts. This is manifesting in increasing burden on the Government's expanded treatment access programme, the economy and some other sectors of the society.

All these necessitate that the populace be well informed, educated and therefore knowledgeable about the epidemic through exposure to HIV and AIDS information and education by the media, with a view to drastically reduce the highly negative impact. In 2004, the then United Nations Secretary-General, Mr Kofi Annan advised all stakeholders in the global effort against HIV and AIDS that:

"When you are working to combat a disastrous and growing emergency, you should use every tool at your disposal. HIV and AIDS is the worst epidemic humanity has ever faced. Broadcast media have tremendous reach and influence ... We must seek to engage these powerful organizations as full partners in the fight to halt HIV and AIDS through awareness, prevention, and education" (UNAIDS, 2004:3).

With this background, the South African government has since taken the lead in the fight against HIV and AIDS in the country through media campaigns and other avenues of fighting the spread of the disease. The South African mass media (radio, television and newspaper) have been reporting on this pandemic

(in their different ways), and contributing to the public information and knowledge of HIV and AIDS and its different aspects. About two-third of young South Africans watch TV and/or listen to the radio just about every day and nearly three quarter (74%) of them have a TV and or listen to the radio just about every day. In the rural areas of South Africa, more than half of young people (ages 15-24) have a TV at home and more than eight in ten of them have a radio (Kaiser and SABC, 2007). Since this age group are mostly dependent on their parents, it shows that TV and radio are widely available in most South African homes, and that greater number of adult South African are equally exposed to the media. Although South African newspapers have fewer audience (compared to those of radio and TV), they are mostly influential adults. It has a long shell life and can influence opinion leaders and opinion makers positively towards the success of the efforts against HIV and AIDS. The decisions and actions of this group of people have trickling down effects on the larger society (ibid.).

In South Africa, the media have been used in such areas as: The Lovelife campaign, launched in 1999; The Soul City Project (an edutainment through multi-media); The 'Khomanani' ('Coming together') campaign; The 'Beyond Awareness Campaign' (1998 – 2000). In addition, there are several localized campaign efforts by government and civil society groups to reinforce these efforts (Pembrey, 2008:1). The Department of Health contracted a new consortium, the AIDS Action Team (ACT) to implement the then next phase of government HIV and AIDS communication. There were varying reach and impact of these media campaigns with eight in ten young South Africans having the view that there should be more HIV and AIDS messaging and programming in the media, and 24% of all the young South Africans saying they learnt a lot about HIV and AIDS from Generations. Shows with a more direct focus on HIV and AIDS and sexual health are popular among all viewers, and overwhelming majority of young people say they are learning a lot about HIV and AIDS and related sexual behaviours from such shows, which include Soul City (65%) and Soul Buddys (64%) (Kaiser and SABC, 2007:1).

In spite of these efforts, the infection continues to increase (particularly the incidence rate) (Shisana et al., 2002:85; Shisana et al., 2008:63-64, Shisana et al., 2014) suggesting either that the message is not reaching the people or that the message is getting to them but they are not taking the desired actions (ibid:4). This may also be due to the implementation of poor strategies or that their campaigns alone cannot bring the desired behavioural changes (The Guardian, 2003:12). It may also be that the involvement of the media is not effective so that the desired results are not realized. However, through these campaigns, some sections of the population have come to understand the mode, transmission, prevention and treatment of this disease.

Despite the efforts to inform and educate the people on issues relating to HIV and AIDS, there is still a prevalence of misinformation about the disease in South Africa, mixed understanding of its mode of prevention and treatment, while basic knowledge about HIV and AIDS is still not common. Its impact is not clearly understood by the public and the level of prejudice towards people living with HIV is still high (Inter Press Services, 2000:1-2; Peltzer, Mngqundaniso and Petros, 2006; Joint United Nations Programme on HIV and AIDS, 2008 (March):22, Shisana et al., 2009, 2014).

Having good knowledge of various aspects of HIV and AIDS enables appropriate prevention, management, treatment actions, and other efforts to be taken against the pandemic (HSRC, 2008:50). The 2008 HSRC HIV and AIDS national survey on prevalence, incidence, behaviour and communication finds decline in the knowledge of HIV transmission, particularly in the areas of use of condom, and risks of having multiple partners (Shisana, Rehle, Simbayi et al., 2009). These findings are collaborated by Kincaid, Parker, Schierhout, Connolly and Pham (2008:2) in a national HIV communication survey, as well as UNAIDS (2008). The 2008 HSRC survey compared 2005 and 2008 reach of HIV and AIDS communication programmes and the result shows that programme reach in the two years are still poor in some categories of the population: The overall reach of the national Government's Khomanani 'Coming Together' programme was low, even lower than any other national programme in South Africa. The reach of Soul City among the men at risk population (MARP) of males aged 50+ was low (43.3%). The reach of all national communication programmes was low among people with disabilities and males aged 50 and older, and this finding correlates "with lower HIV and AIDS knowledge in the older age groups as well as lower levels of adoption of prevention behaviours" (Shisana, Rehle, Simbayi et al., 2009:68-69). In fact, accurate knowledge about HIV was found decreased in the overall population of South Africa in both the 2008 and 2012 South African national surveys, resulting in the population being "now generally less knowledgeable about sexual transmission and prevention of HIV" (Shisana, Rehle, Simbayi et al., 2014). The national average of knowledge of HIV transmission and prevention in 2012 was just 28.0%. These therefore suggest "that promoting HIV-related knowledge and awareness remains to be an area of focus" for success against HIV and AIDS (Shisana, Rehle, Simbayi et al., 2009, 2014:4, 97, 117.).

The South African media sector is well developed and free from strict government control. They are, therefore, well positioned to help make a success of the fight against HIV and AIDS in the country by their active involvement. However, the extent of involvement of the South African mass media in HIV and AIDS prevention and management is not clear. The analysis of the media content on HIV and AIDS as it relates to the infection's prevention, control and treatment helped determine the extent of the South

African mass media's involvement in the fight against HIV and AIDS. This is the purpose of the present study.

1.3 STATEMENT OF THE PROBLEM

Currently, the AIDS epidemic in South Africa is still one of the most severe among all the nations of the world (UNAIDS and WHO, 2006:505; UNAIDS, 2012, Shisana et al., 2013), despite the freely available ARV treatment. The impact of this epidemic goes beyond the life of each individual living with it and extends to their families, friends, the wider community, and the society in general. Equally, its impact on South Africa's overall social and economic development, including health, educational sectors, life expectancy, and Human Development Index is quite substantial (Statistics South Africa, 2006; Medical Research Council, 2005; Department of Health, 2006; UNAIDS, 2006:11). Furthermore, according to Frohlich (2008:368), the disease is also achieving a sweeping reversal of the advances made in the social upliftment and development of South Africa, as well as in other developing countries (Pillay, 2012). The pandemic is still undermining access to education and health care services in South Africa, and threatening the fabric of the society "as AIDS orphans mature in the absence of 'their' parents and family support" structure (Frohlich 2008:ibid.). There were 2,100,000 orphans in South Africa in 2011 (AIDS Foundation South Africa, 2014). The increase in the number of orphans will continue over the decades even if HIV prevalence is successfully reduced or reversed This is not just a demographic and social problem, but an economic issue as well (Casale, 2005; Corrigan, Gerhard, and Mendez, 2005).

Although the potential reach of the South African mass media is widely recognized, there is still some level of misinformation about the disease in the country. There is still mixed understanding of its mode of prevention and treatment. Basic knowledge about HIV and AIDS is as yet not common, and its impact is not clearly understood by the public (Pembrey, 2008:1). The level of prejudice towards people living with HIV is also high and HIV is often regarded as a disease of the poor and immoral (Inter Press Services, 2000:1-2; Shisana, Rehle, Simbayi et al., 2008; 2014). People were often reluctant to go for HIV testing despite the significant increase in the number of Voluntary Counselling and Testing (VCT) sites in South Africa (IRIN Plus News 2005:1). However, the Government 2010 – 2011 Nationals HIV and AIDS Prevention, Testing and Care (HTC) campaign succeeded in increasing the willingness for HIV and AIDS testing and treatment in South Africa.

Studies have shown that achieving a common consensus on their role and duties in HIV and AIDS reporting is still a challenge for the media (Cullen, 2008:10; Panos, 2004; and Brodie, et al., 2004). Probably the media have not been effectively utilized in the fight against HIV and AIDS. Therefore, there

is need to carry out an in-depth analysis of the HIV and AIDS content of both national and local mass media as a means of assessing the quantity and quality of HIV and AIDS information available to the people through the media, the HIV and AIDS reporting competence of journalists in the country, as well as investigate the audience perception of the media role in the fight against HIV and AIDS.

1.4 RESEARCH QUESTIONS

This study responded to the following questions:

- Was the quality of media HIV and AIDS information outputs in the study period high or low?
- What quantity of HIV and AIDS information was delivered to the public through the different media outlets (output frequency)?
- What were the main HIV and AIDS news subjects covered by the media within the study period?
- How were ethical issues relating to HIV and AIDS, including stigmatization, discrimination, confidentiality, and stereotyping handled by the mass media?
- Was there improvement in the quality of language used by the media in their HIV and AIDS news reporting?
- Was the geographical location or setting of HIV and AIDS news reports in the media mainly local, national or international?
- What was the dominant nature of HIV and AIDS presented to the public through media news reports?
- To what extent is HIV and AIDS news coverage relevant or important to the South African media?
- What is the attitude of the public towards HIV and AIDS news coverage by the media?

1.5 AIM OF THE STUDY

The aim of this study is to investigate the role and attitude of the mass media to the coverage of HIV and AIDS pandemic in South Africa, and Limpopo province public perception and attitude towards the coverage.

1.6 OBJECTIVES OF THE STUDY

The objectives of the study include:

- 1. To determine the quantity of HIV and AIDS information delivered to the public through the mass media within the period covered by the study.
- 2. To determine the quality of HIV and AIDS information delivered to the public through the mass media

within the period covered by the study.

- 3. To determine the sources of media HIV and AIDS news stories within the study period.
- 4. To determine the main HIV and AIDS news subjects covered by the media within the study period
- 5. To examine the extent of media coverage of ethical issues (including stigmatization, discrimination, confidentiality, and stereotyping) on HIV and AIDS.
- 6. To examine the attitude of the public towards HIV and AIDS media coverage.
- 7. To determine the geographical location or setting of HIV and AIDS news reports in the media.
- 8. To determine the dominant nature of HIV and AIDS presented to the public through media news Reports.
- 9. To find out the extent of relevance of HIV and AIDS news coverage to the South African media.

1.7 RESEARCH HYPOTHESES

Research hypothesis (plural, hypotheses) refers to "a tentative assumption or a preliminary statement about the relationship between two or more 'variables or' things that need to be studied. It can also be seen as "a tentative solution or explanation of a research problem" that needs to be investigated through research (Welman and Kruger, 2004:11).

The hypotheses for this research are that:

- 1. There is low quantity of information about HIV related issues in the South African mass media.
- 2. There is low quality of information about HIV related issues in South African mass media.
- 3. The media sourced most of their HIV and AIDS news stories externally (outside the media organizations themselves) within the study period.
- 4. The media focused on relevant HIV and AIDS news subjects within the study period.
- 5. Ethical issues on HIV and AIDS were not appropriately handled by media reporting.
- 6. Public attitude towards South African mass media HIV and AIDS coverage is not positive.
- 7. Most of the media HIV and AIDS news outputs were national HIV and AIDS news stories.
- 8. The media predominantly presented HIV and AIDS as a development issue through their news reporting.
- 9. HIV and AIDS news coverage is not relevance or important to the South African news media.

1.8 SIGNIFICANCE OF THE STUDY

The South African mass media have the potential to effectively impact positively on the efforts to check the spread of HIV and AIDS. South African media took a strong advocacy stance against President Thabo Mbaki administration's denialism of HIV and AIDS (Malan, 2006; Finlay, 2003). However, the

media have been accused of being casual in its coverage of HIV and AIDS prevention and management since the end of Mr Mbeki's presidency. The emergence of President Jacob Zuma brought hope to AIDS treatment, but also less media coverage of the pandemic particularly from 2002. The South African media coverage of the pandemic was "inconsistent and uneven" between 2002 and 2003 (Finlay, 2004). HIV and AIDS also received less than 1% coverage in leading South African print and electronic from January 2003 and August 2005 (Media Tenor, 2005). Though presently, there is improvement in the quality of media coverage of the pandemic, the media (particularly, the high circulating "and prestigious national press") no longer give priority coverage to HIV and AIDS, but had integrated the pandemic into other stories of the day "as opposed to it being a stand-alone issue" (Rehbock 2009). More still needs to be done to improve the coverage (ibid.). Moreover, a recent study reveals that the frequency of HIV and AIDS coverage by South African media has fallen by around 63% due to drop in news value of HIV and AIDS, and that the number of experienced health journalists covering the pandemic has declined considerably (Duncan, 2009; Finlay, 2006). This study will clarify the situation and proffer solutions that will assist policy makers in their responsibilities, and encourage the media to improve their coverage of HIV and AIDS going forward.

The media are important and indispensable machine for social change within the society. Credible mass media are responsible to the people in all its activities for the well being of all. The extent South African mass media are involved in disseminating HIV and AIDS information and educating the public within the country is of great importance to the society. The knowledge, control, prevention and treatment of HIV and AIDS are crucial to the society in general.

The knowledge of the level of mass media involvement, their capacity and factors that may militate against their being effectively utilized in fighting this pandemic will greatly contribute towards improved media service delivery to the people and, therefore, bring about effective mass education and mobilization in the fight against HIV and AIDS.

Also, the attitude of the public to media coverage of HIV and AIDS in terms of their reliability and credibility as a source for quality HIV and AIDS news information communication, and the media public's use of such information were investigated. The findings could be utilized in planning strategies for adequate and effective media involvement in the fight against HIV and AIDS in South Africa. In addition, this study is expected to be a reference point for future studies in this, and related areas, and also add to the available literature in this study area.

1.9 THE SCOPE OF THE STUDY

This study involved the content analysis of the HIV and AIDS output of the mass media sampled for this study. It assessed the extent of mass media involvement in HIV and AIDS mitigation and management efforts within South Africa. It also endeavoured to establish the capability of the media in South Africa to effectively inform, educate and motivate the public on HIV and AIDS and its related issues. The media output on HIV and AIDS issues in the country were investigated. This study equally tried to unravel the attitude of South Africans to the media news information on the pandemic.

This retrogressive media study covered a twelve (12) months period (January – December 2010), and the whole of South Africa geographically generally. All the print (newspapers) and broadcast media available to the public in Limpopo Province were included in the media population for this study. However, radio broadcast materials were not analysed because only SABC Thobela FM was able to provide their archived broadcast materials for this study, and there was none from Capricorn FM. Consumers of media news products in Limpopo Province were also sampled randomly for their perceptions and attitudes to the media output on HIV and AIDS.

1.10 RATIONALE FOR THE STUDY

"The mass media has the potential to influence, control and stimulate progress and changes in society" (Nel, 2005:5). The media provide us with identities and social realities, and have become an arena where critical local, national and international matters are played out. Moreover, the media is generally accepted as the source of an ordered and public meaning system that proffers generally acceptable standards for what is normal and acceptable in the society. They also "make comparison and draw attention to deviations from the public version of normality" (Nel, 2005:5-6). Based on all these, it is evident that the media can help make success of the efforts to prevent and manage HIV and AIDS pandemic, towards its eradication. However, there are very few studies that systematically assess the role and value of the media and journalists in HIV and AIDS reporting, as well as the public perception of media coverage of HIV and AIDS pandemic.

So far, the prevalence rate is still high and new infections are being recorded by the Department of Health and other relevant government research agencies. Therefore there is need to carry out a study to understand media efforts against HIV and AIDS in the country, as well as investigate the public perception on media involvement in these efforts, with the intention of maximizing the use of the mass media in this effort against HIV and AIDS pandemic. The study will also contribute to making media HIV and AIDS communication more effective in leading to positive audience attitudinal change.

1.11 AREA OF STUDY

This study was located in Limpopo Province of South Africa, and has two components: the study of all South African national media coverage of HIV and AIDS, and Limpopo Province audience perception and attitude to South African media coverage of HIV and AIDS. The Province is made up of five districts comprising Capricorn, Vhembe, Waterberg, Mopani and Sekhukhune districts. The four selected communities from Limpopo Province for the media audience perception study are Bochum in Capricorn District, Thohoyandou in Vhembe district, Phalaborwa in Mopani district, and Jane-Furse in Sekhukhune district. These communities were chosen by cluster sampling method.

1.12 DIFFERENT SOUTH AFRICAN MEDIA PROGRAMMES TARGETED AT HIV AND AIDS

There are differences in each of the South African HIV and AIDS national programmes or campaigns ran on radio, TV newspaper. Their focus and strategies differ as well.

1.12.1 LoveLife:

This is a comprehensive national HIV prevention programme focussing on South African youth. It combined a "sustained multi-media education and awareness campaign with comprehensive youth-friendly sexual health services in public health clinics nationwide, and countrywide outreach and support programmes" (Kaiser and SABC, 2007:2).

1.12.2 Soul City:

Soul City, a multi-media health promotion and social project was launched in 1994. It reached "South African youth mainly through two television series, Soul City and Soul Buddyz" (Kaiser and SABC, 2007:2). The drama was original targeted at the "disadvantaged South Africans", which means mainly black South Africans. However, the drama attracts vast and diverse audience because it flights on prime time TV. Soul Buddys, a multimedia drama for children between the ages of eight and twelve years was launched in 1999. The idea behind the initiative is to "deal with a range of health and development issues over an extended period and in a realistic context". To actualize this idea, initiator of the drama chose soap opera for TV and radio, to be supported by print material. It "has since become a global model of 'edutainment" (UNAIDS, 2005:8).

The television drama is the centrepiece of a multimedia 'programme' that includes in each series 13 hour-long television programmes and 60 15'-minutes radio drama. Three 36-page colour illustrated booklets address in greater detail the issues raised in the dramas and are serialized in national newspapers and then distributed as booklets through the newspapers, clinics and nongovernmental organisations. In addition, there is a wide range of outreach materials and services" (UNAIDS, 2005:18).

1.12.3 Community Health Media Trust (CHMT): Giving Voice to People Living With HIV:

The company was started in 1998 by Zachie Achmat; a major founder of Treatment Action Campaign (TAC) and Jack Lewis owner of a video production company called Idol Pictures. CHMT is a not-for-profit company specifically created to give voice to people living with HIV through addressing issues of concern to them, including their rights, service quality, and access to treatment (UNAIDS 2005:9). The original target audience are the widest and most representative group of people living with HIV and AIDS in South Africa, which includes the poorest of the poor, those living in the informal settlements, and working class people. eTV broadcast two series of the company's drama creation; "Beat It" in 1999 and 2000 for free. Subsequent broadcasts from 2003 were by SABC (UNAIDS, 2005:26-27).

1.12.4 Takalani Sesame: Big Issues for Small Children

USAID provided Sesame Workshop (the not-for-profit US-based creator of Sesame Street) with a grant in 1997 to develop South Africa's local version of the programme. This was due to wide local acceptance of Sesame Street, a U.S television programme that intended to foster the intellectual, cultural and emotional development of pre-school children in South Africa, and the keen interest of the South African Department of Education to have the programme created and produced in the country, The Department of Education, Sesame Workshop and USAID resolved partnership issues around decision making, editorial control of content and treatment, copyright, and development of local Muppet characters, leading to the launching of Takalani Sesame on television in July 2000. The programme combined television and radio with printed materials, videos, tapes, and web-based information to deepen its educational impact (UNAIDS, 2005:35).

1.12.5 Khomanani:

This is the South African government's HIV and AIDS communication campaign, mainly targeting the youth. The campaign communicates its messages through television, radio, and newspapers as part of its outreach to young people (Kaiser and SABC, 2007:2).

1.13 STRUCTURAL ORGANIZATION OF THE THESIS

This study was organized into chapters representing the different aspects of the entire study. The list of references cited in this study is located at the end of the thesis.

Chapter one contains the general introduction of the study, comprising the background of the study, aims and objectives, statement of the problems, research questions, significant of the problem, scope of the study, rationale for the study, area of study, and various South African media programmes targeted at

HIV and AIDS. Chapter two presents an overview of the impact of HIV and AIDS pandemic on different sectors of South Africa, including the family, general society, micro and macro level economy, education, business and investment, health, and labour force.

Chapter three reviews the general literature for all aspects of this study, and presents the theoretical framework for this study. Chapter four details the methodology used in this study, comprising the research design, sampling techniques, sample size, data collection methods, limitation of study, and the statistical methods and package used for the study.

Chapter five presents the results of the study, including the percentage contributions of the different media to the coverage of the variables and ANOVA analysis (comparison) of the media coverage of the pandemic in South Africa on quarterly and full year basis. The results of public perception and attitude of South African media coverage of the pandemic are also included in this chapter.

Chapter six contains the discussion for each aspect of the study - the media coverage of the pandemic and the public perception and attitude to the media coverage. This chapter also contains the conclusion of the study. Chapter seven presents the conclusions and recommendations for the study.

1.14 SUMMARY OF CHAPTER

The South African mass media have been used, and have by themselves been actively contributing to the efforts to address the country's HIV and AIDS pandemic. Their news contents are well received by the general public, who greatly depend on them for their information and educational needs concerning the disease. Though the prevalence rate of the disease are showing signs of stabilizing due to freely available ARV treatment in the country, the disease continues to claim new hosts (increase in incidence rate), outwitting the efforts put in place to control and reverse it. Moreover, South Africa is still being impacted on different aspects and sectors; economic, social, agriculture, health, education, family, life expectancy level (though increasing), labour and business by this pandemic.

Free ARV treatment has serious implications on South African economy and public attitude towards the disease, and is therefore not a fool proof solution to this pandemic. Sustaining the gains in expanding treatment access and reversing the pandemic in South Africa require greater progress in reducing the rate of new HIV infection. Hence, collective, consistent and concerted effort of the media, Government, civil society and other stakeholders can stop it on its track, and reduce the incidence rate (new infections)

to zero level, while the country and the world wait in hope for vaccine and cure for the disease. All stakeholders (including the mass media) should therefore not relax their contributions towards eliminating HIV and AIDS in the society.

The general public needs to be reasonably knowledgeable about the disease and be persuaded to make necessary changes in their attitudes and behaviours to drastically reduce or even eliminate their levels of exposure to HIV and AIDS infection. The media should therefore understand there relevance in this collective effort and adequately contribute to the success of the efforts against HIV and AIDS. Since education has been recognised as a powerful weapon against HIV transmission, the media consistently and regularly updating the public on all their educational needs on the pandemic is still necessary. The quality, quantity and frequency of media efforts and their readiness to be effectively involved in the success of the whole effort need to be ascertained. The present study is a content analysis of South African mass media output on HIV and AIDS covering a period of 12 months or 366 days, and audience perception and attitude towards media efforts against HIV and AIDS in South Africa.

CHAPTER TWO: THE IMPACT OF HIV AND AIDS ON SOUTH AFRICA

2. INTRODUCTION

HIV and AIDS is a complex disease with wide scope of consequences. The disease is not only a major health issue but has become a social and development issue. The HIV and AIDS pandemic has extensive impacts across all segments of the society. The pandemic poses a great threat to the present and future of the African people, the family structure, the advancement of education, the ability of the leaders of the affected nations to fight poverty and inequality, the sustainability of the agricultural sector and provision of food security, the stability of labour supply, and the improvement and sustainability of the health sector in the affected nations (AVERT, 2007; UNAIDS, 2013).

HIV also impacts enormously on individuals and on community structures such as the family. Traditionally, family is, and has remained the foundational unit and the centre of life of any society, and exerts tremendous influence on the communities and individuals within the society. The family structure has been the primary and reliable source of provision of care, nurture and spiritual security to its members but HIV and AIDS is undermining this role particularly in the Sub-Sahara Africa which is the epicentre of the pandemic (Frohlich, 2008:351).

Writing on the impact of this disease, Nelson Mandela sums it up thus:

"There is no question that the AIDS epidemic has had a devastating impact on Africa, and particularly in South Africa. So far, the AIDS epidemic in Africa has created 14 million orphans. Today, AIDS in Africa is claiming more lives than the sum total of all wars, famines and floods, and the ravages of such deadly diseases as malaria. It is devastating families and communities, overwhelming and depleting health care services; and robbing schools of both students and teachers. Business has suffered, or will suffer, losses of personnel, productivity and profit; economic growth is being undermined and scarce development resources have to be diverted to deal with the consequences of the pandemic. Decades have been chopped from life expectancy and young child mortality is expected to more than double in the most severely affected countries of Africa. AIDS is clearly a disaster, effectively wiping out the development gains of the past decades and threatening the future."

- Nelson Mandela's Forward to "HIV/AIDS in South Africa", 2008, pp.25. S.S, Abdool Karim and Q, Abdool Karim (Ed.).

There is no African country that this pandemic has not impacted upon, though on varying degrees. Worse still, after six years of the above statement, the extent of the impact of the disease is still visible and worse in mostly affected African countries like South Africa, with treatment helping to reduce HIV and AIDS related death. However, the cost of treatment is increasing, and impacting on Government expenditure, and availability of fund to finance development of other sectors of the economy.

2.1 THE BREAKDOWN OF FAMILY STRUCTURES

The African community has always been anchored on the fulcrum of kinship relationships. The traditional African family structure was very organized before the inception of AIDS pandemic, and the various generations within the family were assigned various roles. The family structure is today transiting and beginning to breakup as the pandemic aggravates. Today, AIDS has distorted the family structure, weakened family bonds, and is forcing children to take parental responsibilities. This is the situation in South Africa (Frohlich, 2008:351).

In South Africa, a new generation of children is growing up without their parents' and social leaders' role modelling because AIDS has taken a lot of them away, and causing inter-generational breakdown in the family structure (Skolnik, 2004; Mohga, 2002). There is also a widespread breakdown of the family structure causing consistent increase in the number of single parent, child-headed homes and orphans (Mohga, 2002) in South Africa. The extended family structures are giving way to nuclear family patterns, thereby weakening kin support available to families rendered susceptible by HIV and AIDS (Frohlich, 2008: ibid.).

2.3 THE EROSION OF SOCIAL STRUCTURE

The continuing of HIV and AIDS pandemic since its appearance in South African communities in the late 1990s became a great concern to community members as it led to increasing high death rate, and funeral expenses, a rising orphaned children population (known as 'generation of orphans') ((UNAIDS, 2004; Casale, 2005), withdrawal of children, particularly, girl children or the eldest child in the family from school to care for ill family members (Corrigan, et al., 2005) and decreasing household incomes as older women increasingly bear the brunt of the pandemic due to the death of their children (Frohlich, 2008:ibid.; Jefferis et al., 2006; Steinberg, et al., 2002; Gilbert et al., 2010).

Traditionally, women bear the responsibility of caring for family members. Those of them living with AIDS in need of special care and treatment therefore place extra burden on women. They are also the most vulnerable to the pandemic and its impact, and "no gains would be made without" empowering women

against HIV/AIDS (UN General Assembly, 2011; UNAIDS, 2013:79; DSD 2010-2015:16, 65-69; Shisana, Rehle, Simbayi et al., 2014:35-49). Presently, unemployment is high in South Africa with 25% of the economically active population unemployed (AIDS Foundation, South Africa, 2014), and even far higher among women than men. Women headed household are therefore faced with less reserve and "more dependent heavy" (Schatz, Madhawan, and Williams, 2011), are inclined to be poorer than those headed by men, with the need for various forms of intervention (Chant, 2003; Schatz et al., 2011). They are characterized with low socio-economic status (Chant, 2007). The intergenerational effects of HIV/AIDS include the diversion of household resources from long-term assets to short term need, negatively affecting "household savings and investment decisions" (Greener, 2004; ILO, 2004), and the loss of human capital as the remaining few available household resources – time, care, money, equipment/tools, property etc. – are channeled towards children's overall wellbeing (Casale, 2005).

2.4 THE GROWING ORPHAN POPULATION AND BURDEN

Already many South African children have been orphaned due to increase in adult mortality, and they in turn need government support. The large numbers of AIDS orphans due to high adult mortality is putting pressure also on already stretched families (Whiteside, 2008:411), and may strain the social support networks (WHO 2001:39). The growing number of AIDS orphans is increasingly placing child care responsibility on single women – mainly female grandparents, and AIDS widows (because the male partners may have died of AIDS related illnesses, and in some instances, surviving male grandparents shoulder this responsibility). The elderly are facing ever-larger demands on their pensions as they take in grandchildren orphaned by HIV and AIDS (Whiteside, 2008:ibid.; Ardington and Leibbrandt, 2010).

Another development known as "skipped generation" household, usually headed by the single grandmother (because of AIDS-related death of the parent generation) has also become common in South Africa. The country's number of orphans under the age of 18 without one or both parents due to AIDS is expected to peak around 2014 at an estimated level of 5.7 million (Frohlich, 2008:353). This is a huge responsibility for women in particular, and the society at large. According to the 2012 South African HIV and AIDS, TB, STI national survey, there were an overall total of 3, 032,000 orphans (16.8%) in South Africa in 2008 and 3,132,041 (16.9%) in 2012 (Shisana, Rehle, Simbayi et al., 2014:105; 2008). Though this is a slight increase of 100, 041 orphans within the period, nevertheless, it indicates increasing orphan burden. Moreover, there is increasing HIV prevalence among orphans in South Africa (Shisana, Rehle, Simbayi et al., 2014). Women are responsible for subsistence farming in most rural communities, but the responsibility of looking after their orphaned children drastically cuts the time they devote to this role. Similarly, "traditional norms and customs often see widows being severed from the

extended family and denied access to land and housing", thereby worsening food supply in such communities (Frohlich, ibid.).

AIDS is undermining social cooperation. Worsening economic and social conditions are increasing the vulnerability of communities and individuals to risky behaviours and HIV infection. Traditionally, the extended families and communities absorb orphans but this is no longer possible as the cumulative brunt of HIV and AIDS weakens their capacity to cope, nurture, and care for their members, including large number of AIDS orphans (Frohlich, 2008:351; United Nations, 2004:5). This may result in the negligence of the health, development and right upbringing of the orphaned children. The orphan challenge is one of the worst consequences of AIDS causing erosion of family structures and will continue for many years even if HIV infection rate drops. As parents and household heads continue to die of AIDS-related deaths, the number of orphans will continue to rise (Frohlich, 2008:353) in South Africa, may be, not as previously projected due to the availability of free ARV treatment in the country. However, HIV and AIDS is continuing to make orphans visible in South African streets.

2.5 THE CHILD-HEADED HOUSEHOLD

HIV and AIDS has taken away the parents from their children. In some families, the grandparents are either not available or able to care for the orphaned grandchildren, leaving the siblings in the care of the eldest child, and creating child-headed homes. This family pattern is a serious phenomenon in the country. The sudden premature parenting role caused by HIV and AIDS deprives young adolescents of their own childhood and forcing on them the responsibility of caregiving and guidance (Frohlich, 2008:353, 361).

2.6 THE STIGMA AND DISCRIMINATION ON THE HIV AND AIDS INFECTED AND THE AFFECTED

HIV and AIDS was initially identified with male homosexuals and intravenous drug users (HRSA, 2014; KFF, 2014). This initial link with the socially ostracised groups contributed to the stigma associated with the disease right from its inception. AIDS stigma has since become a persistent predicament and very difficult to eradicate due to this linkage (Link and Phelan, 2001; Castro and Fisher, 2005:53), and this pattern has remained the same from the 1980s in America and Europe, and in South Africa from the early 1990s. Though the disease has spread to large number of heterosexual individuals, the ostracism and stigma persists for whosoever gets infected with HIV and AIDS. AIDS intensified the already existing stigma which in turn causes discrimination (Frohlich, 2008:351; Castro and Farmer, 2005).

"Stigma and discrimination are part of complex systems of beliefs about illness and disease that are often grounded in social inequalities", and seen by many as human rights violations requiring urgent attention (Castro and Farmer, 2005). Social factors such as poverty, racism, tribalism, sexism due to high gender inequality in several HIV and AIDS prevalent nations including South Africa collectively determine both the risk of HIV infection and risk of AIDS-related stigma (ibid.).

The Joint United Nations Programme on HIV and AIDS (UNAIDS) insists that there is strong need to fight stigma and discrimination in order to effectively combat HIV and AIDS (Piot, 2005). In South Africa stigmatization Government provided social support they are qualified for (ETU, 2013). Further more, it reduces the ability of families and communities to cope with the infection, and prevents those infected by the disease from accepting their HIV and AIDS positive diagnosis openly. Denial of HIV and AIDS positive status obstructs disease prevention and treatment, and makes it quite difficult for both the infected and the affected individuals to come up with effective coping strategies (Frohlich, 2008:ibid). The caged in feelings manifest in fear, anger, and depression. Discrimination in the areas of housing, employment, own family rejection, marriage, life insurance policy and education has been documented in South Africa, the Caribbean and in other parts of the world and discrimination of HIV infected persons and affected individuals worsen the burdens of the pandemic on such people (Frohlich, 2008:354), and prevents them from accessing some of the (Castro and Farmer, 2005; Frohlich, 2008:455). The stigma attached to HIV and AIDS has become "a major barrier to families, friends and communities being able to speak freely about the multitudes of feelings, fears and concerns the disease provokes" (Frohlich, 2008:366, Shisana, Rehle, Simbayi, et al., 2014).

2.7 HIV AND AIDS AND HOUSEHOLD POVERTY AND HEALTH

AIDS is depleting household savings, reducing household saving rates, and leading to the reduction of the rate of social capital accumulation. "Even the direct time and expense of the -- vigils and funerals may have a significant adverse effect on the local economy" (WHO, 2001:39; Naidu and Harris, 2005). Income and health status are positively correlated both at individual (microeconomic) and national (macroeconomic) levels (Young, 2007; Acemoglu and Johnson, 2007) Income is a strong factor in determining health status. Inversely, health also affects income positively because distribution of income depends on the level and distribution of health and any action (for example, policies) that directly affect health are likely to have effects on income as well (Deaton, 2003:133).

Ill-health limits individual abilities of the poor to access necessary and available opportunities. Poor households therefore become disadvantaged and cannot afford the cost of illness, which often causes

reduction in income by making individuals less productive or, in some cases, totally incapable of being part of the 'labour' force (Jones, 2007:13). Study has shown "that healthier populations live longer, are more productive, and have incentive to invest 'and contribute' to a greater level of human capital with which to earn higher income" level (Bandura, 2005; Goklany 2004:4-5). Moreover, increased life expectancy spurs the need for retirement saving and increases the number of individuals who can work and remain in the labour force (Bloom, Canning and Fink, 2011:27). HIV and AIDS, being a health burden, slows the pace of economic growth, impairs life quality, and limits the ability of the society to attain overall general health and prevent the occurrence of other diseases (Lovasz and Schipp 2009; Deaton, 2003:133). There is therefore a correlation between health and individual output since improvement in health positively affects economic outcome at the individual level (Miguel and Kremer, 2004).

2.8 HIV AND AIDS AND HOUSEHOLD INCOME AND POVERTY: THE MICROECONOMIC LEVEL IMPACT ON SOUTH AFRICA

Like any other serious pandemic, households will ultimately bear the full impact of HIV and AIDS. At the South African microeconomic level, HIV and AIDS impact on households will be even more severe as illness and death stretched further the already strained family finances (Whiteside, 2008:408). HIV and AIDS impoverishes people, their households, communities and enterprises, and poverty is distinctly related with pandemics such as HIV and AIDS. Put differently, HIV and AIDS like other pandemic diseases has the potential to increase poverty, and poverty in turn, makes people very susceptible to HIV and AIDS infection. (Whiteside, 2002:316). It has been shown that HIV prevalence correlates with falling calorie and protein consumption, unequal distribution of income and other variables usually associated with vulnerability to infection disease irrespective of the mode of transmission (Poku, 2002, Drimie and Casale, 2009).

HIV and AIDS has immense socioeconomic implications for development because of its infection of people at their prime working age (KFF, 2013) and its fatality (if not well managed). The working-age adult mortality means loss of family or household income which can adversely impact on the welfare of surviving members of the family, including children school attendance (Yamano and Jayne 2005). This is particularly severe when the deceased is the family's main bread winner (ibid.). In fact, the poorer the households, communities, and individuals, the worse the impact of the disease on the household. The low income families will experience worse impact because their low income level and purchasing power will not enable them to cope with the medical care and other related expenses associated with the illness. Hence, HIV and AIDS (as a pandemic) increases mortality and the misery of the poor, and extends

income inequality because poverty related conditions increases vulnerability to HIV and AIDS (Parker and Kazel, 2005).

The generally known feature of HIV is that it spreads among, and affects mostly individuals at the societal margins, the poor and dispossessed in the society (Whiteside, 2002:314, Shisana, Rehle, Simbayi et al., 2008; 2014). The disease is quite an extremely costly one and impacts on the household income from two fronts; it increases unavoidable household expenditures (e.g. consumer spending on health care products and services), reduces household disposable "income due to diminished productivity, morbidity, and/or mortality", and thereby lowers household consumption expenditure. (Salinas and Haacker, 2006:1-19; Whiteside, 2002:321-322; Casale et al. 2007; Oldewage-Theron, Dicks and Napier, 2006).

Due to HIV and AIDS, South African households' disposable income will be reduced by 13%, and "Governments and businesses will have less money to save and reinvest in their economy" (PRC 2001:5). "Living with few physical and financial assets, limited income and poor access to services (Drimie and Casale, 2009), the ensued household poverty renders individual more susceptible to contracting the virus and also decreases individual's ability to tackle the consequences of the infection (Haacker, 2004; Drimie and Casale, ibid). According to Whiteside (2002:320), HIV and AIDS affects household resources and income because whosoever is ill will need care, medicines, treatment and possibly a special diet. Their illness and death will deprive the household of labour, income and care for the family. The funeral will further drain the resources of the household.

HIV and AIDS is indeed exacerbating inequality in the society as well as increasing family inequality in the society by "selectively" impoverishing some families and leaving others (Timaeus, 2008; Richter, Foster and Sheer, 2006). Even, there are differences in the level of severity of the disease among the HIV and AIDS impoverishing group of families in the society due to differences in family income, financial strength, accumulated assets, and wealth generally. In comparison, the cost of the pandemic relative to household income is twice greater in the rural than in urban areas, placing disproportionately larger expenses on the poor (Salinas and Haacker, 2006:4) because most rural population in South Africa are economically poor. A study by Carter, Michael, May et al., (2007) states that the biggest and most persistent effects of HIV and AIDS on households in South Africa are generally felt by large number of households slightly above the poverty line – the middle ranges of income distribution. Poor households remain poor, but those households just above poverty line though seem less severely affected, are most at risk of falling into poverty (libid.).

Studies have shown that HIV and AIDS pandemic also has the tendency to increase the national income dependency ratio by enshrining poverty at the household level (Epstein, 2004:31-33). In a case study in the Free State Province of South Africa - with one of the highest regional prevalence rates in the world, Booysen (2004) set to find out the experience of households in terms of chronic poverty and income mobility, basically, whether HIV and AIDS infected households experience chronic poverty more frequently than non-infected households do. The sampled population for the study were both infected households and a control group of HIV and AIDS free households in the province. In the longitudinal study, the "chronically poor" households were classified as those whose average per capita income falls below R250.00 (approximately \$40) within the study period, while the "transient poor" households' incomes place them on the poverty line but are not really poor by national standards.

The findings of the study are that HIV-infected households experience significant level of chronic poverty more than non-infectious households (25% against 10%), and that the transient poor households have similar outcome but with much smaller effect. It also showed that the role of HIV and AIDS determinants – "mortality, morbidity, and orphan crisis" – explain why some households are consistently poor while other households are upwardly mobile and can escape poverty (Booysen, 2004:54; Jones, 2007:21).

A report of 2002 Kaiser Family Foundation (KFF) funded survey of South African households affected by HIV and AIDS clearly indicates the impoverishing nature of the pandemic. The study surveys more than 700 households that have at least one person already sick with AIDS, and covered four South African provinces: KwaZulu-Natal Mpumalanga, Free State and Gauteng. According to the survey, two thirds of the households studied reported loss of income due to HIV and AIDS, and almost half the household do not have enough food with their children going hungry. Children from 12% of the households were sent away to live elsewhere with a grandparent or another relative. Most of the caregivers (68%) were women or girls, in 23% of households, caregivers were over 60 years old while in 7%, children under 18 were the primary caregivers. Less than 16% of households in the survey were receiving some kind of government grants, despite all the households qualifying for some form of assistance. Of the households affected by AIDS, 55% "paid for a funeral in the last year and 'averagely' spent four times their total monthly income on" this (Steinberg, Jonathan, Schierhout et.al., 2002:13-30; Whiteside, 2008:416-417).

2.9 HIV AND AIDS AND HOUSEHOLD COPING STRATEGIES

Household has endeavoured to cope with HIV and AIDS through application of different survival and alleviation strategies. South African Government is providing free access to health services to its citizens, particularly, the poor, and social grants like foster care, child, disable and old age grants, and these play an important role in poverty alleviation in the affected households (Booysen, 2004:46-47, 54). However, these efforts can not reverse the impact at the family level overnight because of its magnitude, and limited resources at the family's disposal. Apart from government support, there are also social support network, and the affected family support.

AIDS-related illness and death affect the family experiencing them directly, causing reduction in the resources, labour and welfare of their family members due to the loss of the individual's earning capacity (Maunder and Wiggins, 2006). Studies show that "households with low income or few assets may be in a worse position to cope with the income and expenditure shocks associated with HIV and AIDS" (Drimie and Casale, 2009). There are also differences in family or household coping strategies. Before the introduction of Government's expanded treatment access programme, the family members readjust themselves to confront the situation in different ways. At first, the individuals work less when they become ill, and seek medical care. The lost income due to reduced working hour, the increased medical expenses, and nutritional need mean reduction in the resources available to meet the needs of the rest of the family (Bachmann and Booysen, 2003; Johnson, et al., 2002). Other family members may pull children permanently out of school to start work, which affects their education at school, and lowers their future earning power. Others borrow money from informal credit sources such as relatives, or moneylenders, normally, with high interest, to come out of their situation. They also borrow from cooperatives or local revolving funds with lower interest. In some cases, the interest charged on the borrowed money raise the household's burden. Some families sell assets (e.g. livestock, farming equipment, vehicles and land) (Ngaluba et al., 2002) to pay for medical care and living cost, which often worsen their future income capability.

The death of the sick individual adds funeral costs on the AIDS-affected household budget with funeral expenses being on average, equivalent to four months salary (Steinberg et al. 2002; Naidu 2003). Collectively, the burdens "lead to further, immediate, degradation in the household economic status, adversely affecting the living standard and quality of life of all surviving members" (Haacker 2004:87). At this time, such families normally reorganize their labour supply, reallocation their time, as well as expenditure pattern to meet the persisting demands cause by the disease (Steinberg et al. 2002; Haacker 2004:45; Lule and Haacker, 2012:119). Normally, this comes at the expense of other family and personal

objectives (Lule and Haacker, 2012:ibid). Those families with few or no resources may reduce their current household consumption costs, which may negatively affect the nutrition of their members (Haacker 2005:ibid; Ivers, Cullen, Freedberg, Black, Coates and Webb, 2009). Many other families are also affected indirectly by AIDS-related illness and death. The extended families may render help by transferring resources to those directly affected, orphaned children may be sent to live with relatives (Richter, Manegold, and Pather 2004: 13, 15-20), and elderly parents may go back to work, be supported by the families of other adult children, or depend on their pension (if it exists) to take care of themselves and their children, and/or their orphaned grand children. These clearly support the assertion that "the high increase in foster care of children due to the spread of HIV/AIDS epidemic is exerting significant additional strain on social networks" (Drimie and Casale, 2009) by producing "a large number of "overburdened and, in some cases, disintegrating family support systems" (Van-Blerk and Ansell, 2007).

2.10 THE MACRO-LEVEL ECONOMIC IMPACT OF AIDS ON SOUTH AFRICA

Pandemic diseases such as HIV and AIDS impose costs on society, business and Government above the costs to individuals and families directly affected by the disease. For example, a high HIV and AIDS burden or incidence causes a high labour force turnover, reduced productivity, increased training costs, and absenteeism, and reduction in enterprise profitability above any direct effects on individual worker productivity or individual disease incidents (WHO, 2001:38; Dickinson, 2004). AIDS is capable of pushing economies into perpetual decline if not stopped and reversed. The overall economic impact of AIDS in South Africa "will be to reverse the hard-won development gains in the country and make all its people worse off (AIDS Brief, 2013).

AIDS declines the total national income and its growth. Countries with at least 20% HIV-positive population (example, South Africa), may experience GDP decline of up to 2% a year. AIDS will reduce South African economic growth by 0.3 – 0.4% annually, making its GDP 17% lower than it would be without AIDS (Population Research Centre, 2002:5). The pandemic will affect the South African economy by slowing growth and changing the economic structure. This may worsen the pandemic in the country because economy has been shown to be a strong driver of the pandemic. For example, "economic hardship can change people's behaviour in a way that will make them susceptible to infection" (Whiteside, 2008:405, see also Shisana, Rehle, Simbayi et al., 2009; 2014).

HIV and AIDS mostly affects individuals in the most productive, young and economically active ages of 15-49 leading to fewer people of working age (KFF, 2013; UNAIDS, 2013b). For South Africa, 16% of its

population aged 15-49 in 2011 was HIV positive (SAIRR, 2010 and 2011:1). At the macroeconomic level, the impact of AIDS is determined by the demographics of the working age group and the micro and macroeconomic costs of combating the disease (Haacker, 2004; Whiteside, 2008:405). As a pandemic, HIV and AIDS is a greater threat to development than common diseases due to its present incurable nature (Jones, 2007:16; Whiteside, 2008:ibid.).

The disease decimated the labour force and caused decline in life expectancy. In South Africa as in other 34 highly affected African countries, life expectancy at birth was estimated at 48.3 years from 1995-2000, 6.5 years less than it would have been without AIDS. The labour force of all these 35 countries (including South Africa) is projected to be 10-30% less in 2020 than it would have been in the absence of AIDS (UNDP, 2001:620). According to Breidlid (2009:21), the UN Development Programme and the US Bureaus of Census life expectancy at birth (LEB) projections for South Africa without AIDS in 2010 was 68.3 years and with AIDS, 35.5 years. For 2011, LEB was 54.9 years for male and 59.1 for female (SAIRR, 2010 and 2011:1). It was estimated at 50.34 years for male and 48.45 years for females for 2012 (CIA, 2012). These figures signal a bleak future if interventions fail to make a difference. South African population and size of its labour force were to be reduced by 18% and 21% respectively, though the decline in economic production, employment and incomes is expected to be substantially less due to high unemployed labour force (BER, 2001:2).

Some of the ways the pandemic impacts on the economy include hiring and retraining of labour, reduction in labour force, labour quality and productivity (there was low morale among workers, and many were sick and still working), raised operational and production costs for companies, reduction in individual's saving, and companies' profits, and increased demand and high cost for social, welfare and medical services from both the private and public sectors (Rosen, et al. 2007; PRC 2001:5; Jefferis, Nannyonjo, Byamugisha and Sebastian 2007). The impact on productivity would go beyond the ill individual, lowering the productivity of the entire team (Whiteside, 2008:414). When a member of a work group is sick or dead, other members of the group will have to execute the tasks done by the sick or deceased member in addition to their own (ibid.).

The greater share of AIDS-related deaths among the South African workforce was born by the unskilled and the semi-skilled, though the skilled and the highly skilled were also overwhelmingly affected by the pandemic. The country is already faced with skilled labour shortage, which is being worsened by HIV and AIDS, "raising remuneration and replacement costs of companies' (Connelly and Rosen, 2005). However, South African situation is peculiar. Migration of skilled, semi-skilled and unskilled labour into the country

from neighbouring countries (Zambia, Gambia, Zimbabwe, Botswana), and from other African countries, in addition to unemployed local population is helping to replenish its labour force and cushion the effects of skills shortage.

South African unemployment level is in excess of 30%. The surplus labour situation, particularly at the unskilled and semi-skilled levels, means in theory, that employees who died of AIDS-related illnesses can easily be replaced with the available labour. However, the replacement of highly skilled labour is difficult and expensive to firms because of its expected highly negative impact on potential output (ibid:36). The resultant reduction in labour force is affecting the rural areas and agricultural sector of Sub-Saharan African nations, including South Africa. South African economy that was predominantly agrarian has experienced fundamental structural shifts. The contributions of the primary (agriculture, mining and forestry) and secondary (water, electricity, construction, gas and manufacturing) sectors to GDP are decreasing, while the tertiary sector (all services – insurance, trade, tourism and banking) is growing (Whiteside, 2002:319). This is causing decline in formal employment and increasing informal employment, with direct implications for the spread of HIV (ibid.).

The South African Bureau for Economic Research report estimates that between 2002 and 2015 HIV and AIDS could cause the GDP to grow between 0.3% and 0.6% lower than it would have been in the absence of the disease. It states that though the overall impact on GDP will be negative, its manifestation will however be gradual, and that the economy could keep growing by 3% average real GDP growth up to 2015 (BER, 2001:4-5). "Inflation could still average around 7% which is in line with the past few years in South Africa" (Whiteside, 2008:409).

The real GDP growth bottomed at 0.6 in 1998, but accelerated through 1.2% in 1999 to 3.3 in 2000 which was attributed to improvement in terms of trade (Quabbek, 2000:53). It went down to -1.7% in 2009 and rose again to 2.8% in 2010. The country's economy (GDP) was expected to grow at the rate of 3.6% in 2011, and the GDP for 2012 was estimated at 4.3% (SAIIA, 2011; AfDB, OECD, et.al., 2011). The SAIIA 2011 report, attributed the improvement in GDP to a steady recovery in consumer spending, partially due to the 2010 Fifa World Cup, but stated that "this rate of GDP growth remained clearly below trend, estimated around 4% per annum for South Africa". The report however states that HIV and AIDS remains a problem to South African with the world largest population of people living with the virus, estimated at 5.6 million people.

Indeed, societies with a heavy burden of disease (for example, HIV and AIDS) have many severe impediments to economic development. A 2002 Standard bank (South Africa) workshop on the implications of AIDS reports that HIV and AIDS lowers worker efficiency, raise costs, and reduces individual savings and firms' profits" (Whiteside, 2008: 410). Studies have shown that increase in life expectancy at birth (LEB) leads to higher economic growth or increase in per capita, with other growth factors remaining constant (Lorentzen et al. 2008). The WHO's Commission on Macroeconomics and Health reports that "each 10% improvement in life expectancy at birth (LEB) is associated with a rise in economic growth of at least 0.3% to 0.4% points per year", other growth factors being constant (WHO, 2001:24). The report puts life expectancy at birth (LEB) in high income countries at 75 years for men and 81 for women (and rising). In sub-Saharan Africa it is 40 years for men and 52 for women (and falling). (WHO, 2001:ibid.; Whiteside, 2008:415-416). Furthermore, it has been shown that high prevalence of HIV and AIDS or any other disease decreases the number of years of healthy life expectancy, reduces individual enthusiasm to save and invest in an education, impacts negatively on business and infrastructural profitability, limits the use of both physical and human capital (Bell, et al., 2003), as well as their accumulation. Additionally, it can weaken social cooperation, and political and macroeconomic stability.

2.11 HIV AND AIDS IMPACT ON THE EDUCATION SECTOR

The existence of good quality education is needed for success against HIV and AIDS. However, the pandemic is threatening "the development of education through the sickness' and sometimes, death of policy makers, administrators and teachers (IIEP/UNESCO 2002:11). On the part of the teachers, sharp rise in absenteeism due to illness, funeral attendance, care of those with AIDS-related illnesses at home, psychological trauma and (low morale) is affecting both the quantitative and qualitative quality of the education sector, and increasing the sector's costs (IIEP/UNESCO 2002:11; Grassly, Desai, Pegurri, et al. 2003, Louw, et al., 2009, Phaswana-Mafuya and Peltzer, 2005). Such costs include:

"The incremental teacher costs for training additional teachers to replace those lost to AIDS and for payment of death benefits; the costs of training and paying temporary teachers to replace those on extended periods of sick leave; and the incremental school and education programme costs for mainstreaming HIV/AIDS preventive education on curricular and other areas of school life" (IIEP/UNESCO 2002:11).

AIDS reduced the school attendance and teachers supply, making it even more challenging for children to attend school because of declined family budget, and increased "the number of children growing up without (vital) parental support they need to stay in school" (PRC, 2001:5). The South African education and training system are suffering as teachers and students succumb to AIDS related diseases and death, declining the standard of the education system (Whiteside, 2008:411). HIV prevalence among South African teachers in 2009 was estimated at 12.7% (Louw, et al., 2009).

Like in other heavily affected countries of Africa, HIV and AIDS has taken a high toll on the South African education sector. In 2000, an estimated 1 million children in sub-Saharan Africa lost a teacher to AIDS, causing a major disruption in their learning process. High teacher's turnover impact negatively on the quality of education learners are receiving, and on the nation's economy (Jones, 2007:17). "If AIDS continues to kill teachers and prevent children from attending school due to illness, the circumstances of orphanhood, or simply because they are kept out 'of school because of AIDS imposed poverty on the household, the' previous gains in educational attainment will, ultimately, decline", and constrain national development (Freedman and Poku, 2005:669).

Results of the 2010 Higher Education HIV and AIDS Programme (HEAIDS) survey conducted on 21 of the 23 higher institutions (Universities) in South Africa shows that the HIV prevalence rate among administrative staff stands at 4.4%, 9.9% of service workers are HIV positive, and the national prevalence rate among students is 3.4% (GCIS, 2010). According to the Higher Education Minister, Blade Nzimande, the survey showed the urgent need to strengthen workplace HIV and AIDS programmes at higher institutions, and that the importance of implementing a co-ordinated, comprehensive and integral response to HIV and AIDS among all subsectors of higher education institutions in the country can not be over-emphasised (ibid.). The results revealed that age, race, sex and socioeconomic brackets are some of the demographic factors strongly associated with HIV among students (Health-e, March 29, 2010).

More than 500 teachers in Mpumalanga Province of South Africa booked off sick in 2008 and 2009 financial year because of HIV and AIDS related illnesses, resulting in interruption of learning and teaching, culminating in the Province achieving a matric pass rate of just 47.9% in the previous year (News 24, 2010). Worse still, HIV and AIDS-related ill-health among South African teachers lead to high teachers' absenteeism from school, much strain on the principals who are expected to perform well. It creates financial difficulties for the teachers due to their state of health, resulting in stress and underperformance at work, and the healthy teachers are forced to deal with heavy workload due to backlogs caused by the absence of their ill colleagues (News 24, 2010). Moreover, "increased mortality

and morbidity among teachers due to HIV and AIDS demands training of larger number of new teachers and this circle will limit the possibility of correcting the "existing human resource imbalances" (Louw et al., 2009:122)

2.12 HIV AND AIDS AND THE HEALTH CARE SECTOR

HIV and AIDS exerted heavy burden on the South African health sector. Shell (2000:7-8) wrote in his metaphorical description of HIV and AIDS pandemic situation in South Africa that:

"If the HIV and AIDS pandemic was war, South Africa might have to consider surrender. The enemy has targeted women and children after first devastating the nation's small homosexual community. By 2000 the enemy has decimated the entire population - - in the strict Roman military sense of losing one in ten - -. The health system and especially the hospitals have been compromised to the point of not being able to cope withal the casualties. Some hospitals are reporting that 60% of their beds are AIDS-related."

As the leading cause of illness and death in South Africa before now, AIDS was causing annually about 200 000 excess adult deaths (Whiteside, 2008:410) but the numbers are stabilizing. South African population would have been over 4.4 million more than the current census figure of 50.6 million people without HIV and AIDS (SAIIA, 2011:1; SAIRR, 23 January 2012). In 2009, there were 310 000 HIV and AIDS-related deaths in South Africa (CIA, 2012). 32% of all deaths in 2010 were AIDS-related, and this proportion was projected to rise to 33% in 2015 (SAIRR, 2010 and 2011:1). Studies have shown that HIV-positive children have more contacts with health care services than HIV-negative children, and also have consistent higher mortality than HIV-negative children (Colvin, 2008:336). The pandemic "has become an added burden on already strained health care systems" (ibid.:337). The demand for health care is rising but there is scarcity of the capacity needed for its provision. Yet, AIDS is unfortunately making even health workers fall ill and die, while some of them are either leaving the public sector to work in the private sector or emigrating (Whiteside, 2008:414). This leaves the community, enterprises and Government without the necessary technical or entrepreneurial leadership.

A preliminary study published in 2004 on the impact of HIV and AIDS on the South African health sector tried to determine HIV prevalence among South African health workers employed in the public and private sectors at primary health care centres, district, and private hospitals. The study conducted to assist the Department of Health to plan health services has a stratified cluster sample drawn of 5% of health facilities in South Africa (N = 222). A representative subsample of 721 comprising medical

professionals and non-professional health workers in four provinces - Free State, KwaZulu-Natal, Mpumalanga, and North West - was tested for HIV status. The study found that "an estimated 15.7% of health workers in four South African provinces were living with HIV and AIDS in 2002". Among younger health workers (aged 18 - 35 years), the risk is much higher with an estimated HIV prevalence of 20%. "Non-professionals had an HIV prevalence of 20.3%, while professionals had a prevalence of 13.7%". The conclusion was that there is high HIV prevalence among health workers in South Africa. It calls therefore for the introduction of antiretroviral programmes for health workers, and the review of Infection control procedures in health facilities in the country (Shisana, Hall, Maluleke, et al., 2004:850).

The medical Aids schemes and insurance cater for the well-to-do individuals in South Africa but medical costs of the poor AIDS patients are financed by the Government. Many of the HIV and AIDS affected individuals – both children and adults- are vulnerable and unable to care for their own basic needs or family and these provisions are guaranteed for them by the constitution (section 7 of the South African Constitution, 1996a) They therefore depend on the state for provision of care and support such as hospital services, grants (income) and shelter, and at times on NGOs for some of these provisions (Greener, 2004:179; Norman, Chopra and Yala, 2007; ETU, 2013). A high disease burden disrupts the national budget the same way as the family budget. The South African health care system (like other high HIV and AIDS prevalence nations) is therefore strained, and requires more resources, including possibly donor resources that may be used to strengthen the sector by improving access to, and quality of services. Government expenditures on social welfare and on women and children's health have increased significantly in real terms particularly, within the past ten years ((Streak, 2005: 11-16). "Child support, care dependency, and foster-care grants have been introduced and are reaching 84% of target families" (Chopra, Daviaud, Pattison et al., 2009:835; Whiteside, 2008:414; Brand South Africa, 2014).

The coverage of South African social grant system increased from 2,5 million beneficiaries in 1998 to over 12.3 million in 2008, constituting 3.1% of GDP. Within the same year, child grant alone reached more than 8 million children each month, together with automatic free education and free health entitlements (The Presidency, 2008:4-11, The Presidency, 2009:41). The increasing cost of HIV and AIDS treatment in the country may not be sustainable due to financial constraints in the public and private sectors. The implication is that there may be some rationing to reconcile needs with available resources, and this seems to be happening already particularly, in the public sector (Resen, Sanne, Collier and Simon, 2005). The enhanced antiretroviral therapy in the country is postponing some of the increases in HIV and AIDS morbidity, mortality and other consequences. However, this also has cost implications. "Resources used for antiretroviral, be they financial, staff or infrastructure, cannot be used for other

things" (Whiteside 2008:411). In general term, HIV and AIDS weakens the capacity of Governments to deliver basic social services by causing loss of human resources, reduction of revenues and diverting budgets towards coping with its impact (Kevany, Benatar and Fleischer 2013).

South Africa is still the epicenter of HIV and AIDS pandemic. There is however, a growing trend in the allocation of health budgets at the national level. The country is scaling up HIV treatment and prevention services through its revised guidelines. This strong policy aims to treat 80% of people who require treatment and to reduce new infections by 50% by 2011 (SANAC, 2011). Though these aims have not been actualized, and the incidence rate is outpacing Government efforts against HIV and AIDS (News 24, 2011; Shisana, Rehle, Simbayi et al. 2014), they provided useful guide in the direction of efforts in addressing HIV and AIDS in the country. The country currently has the biggest ARV treatment programme in the world, with over 1.3 million enrolled in 2011 (The Presidency and GCIS, 25 August 2011) and more than 2.15 million people receiving treatment in 2012. "This represents 83% coverage under the 2010 WHO HIV treatment guidelines and a 27% increase over 2011 (UNAIDS, 2013:67). An estimated total number of 6,422,000 million people living with HIV and AIDS in South Africa are eligible for treatment in 2012, indicating that the number is still far below the number of the people in need of treatment who are not able to access it (WHO/UNAIDS/UNICEF, 2013; Shisana, Rehle, Simbayi et al., 2014:56). The Government reviewed its 2011 HIV and AIDS National Strategic Plan for HIV and AIDS and STIs to enable it improve on the outcome of its efforts against the pandemic. The Government's National Strategic Plan on HIV, STIs and TB 2012 - 2016 targets to reduce HIV and AIDS incidence rate in the country by at least 50% (SANAC, 2011) may not be realized with the increasing number of new HIV and AIDS infection in the country (see Shisana, Rehle, and Simbayi et al., 2014).

Like other African countries reeling under the scourge of HIV and AIDS, South Africa continues to redirect its scarce resources amid competing priorities (The Presidency and Motlanthe, 2011). The nation's health HIV and AIDS conditional grant funded a massive enrollment of a cumulative number of more than 920 000 patients on the ARV treatment (ART) programme at the end of September 2009, marking a 91% increase of patients enrolled on the programme from the 483 084 patients enrolled by April 2008. There was addition of new funds in 2010 budget (R3 billion) to support the president's new HIV and AIDS policy, sustain existing HIV programmes and projects in the 2010 and 2011 - 2012 and 2013 medium term, and to increase the number of AIDS patients on ART programme to 2.1 million by 2012 and 2013 (Ndlovu, Sithole, Vilakazi et.al., 2010:1; National Treasury and ENE, 2010:263). The general national health budget grew from R18.4 billion in 2009 and 10 to R21.5 billion in 2010 and 2011 (10.39%). It further increased to R23.7 billion (3.85%) in 2011 and 12 and R25.5 billion in 2012 and 2013 (2.94%). In

addition to these figures, there is the larger allocations from provincial equitable share budgets (Ndlovu, et.al. ibid.; National Treasury and ENE, 2010:ibid.).

Another allocation - the health HIV and AIDS conditional grant - increased in financial terms by R1.7 billion, R2.8 billion and R3.9 billion for 2010 and 2011, 2011 and 2012 and 2012 and 2013 respectively to expand the AIDS treatment programme. There was also a real growth rate of 36.1% in the total health HIV and AIDS budget (including the conditional grants to provinces) in 2009 and 2010. This allocation grew further by 25.9% in 2010 and 2011, 15.2 per cent in 2011 and 2012, and by 10.7 per cent in 2012 and 2013 ((Ndlovu, et al., (ibid.); National Treasury and ENE, 2010:275-276, 287, 370).

A study on the impact of the pandemic on the health care sector was conducted on the Hlabisa district hospital, near Mtubatuba, South Africa from 1991 to 1998. According to the study report, total hospital admissions within this period increased by 81% but the number of hospital beds remained constant. Ward admissions for tuberculosis increased by 360% while the HIV and AIDS prevalent rate among TB patients rose from 35% in 1993 to 68% in 1997. The HIV prevalence among pregnant women went from 4% to 29% over the same period (Colvin, 2008:337). Equally, a 2001 study report on Hlabisa District Hospital (and on many hospitals in other parts of South Africa), estimated that 75-80% of the medical patients are HIV positive, with half of them having full-blown AIDS. The acute shortage of beds made the wards to run at 140% occupancy. Each bed had one or two patients in it and sometimes another on the floor beneath during overnight and severe weather (SAMJ, 2001:366; Colvin, 2008:337).

In some instances, HIV-negative patients were even denied hospital admission. In KwaZulu Natal (KZN), arguably the South African province with the highest HIV prevalence rate (36% in 2000) and consistently overtime (Shisana, Rehle, Simbayi et al., 2009, 2014), "medical beds at hospitals such as Northdale and Edendale in Pietermaritzburg and in several rural hospitals were running at 120% over capacity because of AIDS" (SAMJ, 2001:364-365; Colvin, 2008:339). According to the report, people were dying prematurely because the hospital were over stretched and can't cope. HIV and AIDS-free medical patients were being severely compromised by discharging them prematurely. Even medical beds in HIV and AIDS wards got filled and patients were farmed out to other wards, and there was evidence that 50% of patients were HIV positive (SAMJ, 2001:365). Nationally, "between a quarter and half of maternal, neonatal, and child deaths in South Africa's national audits have an avoidable health-system factor contributing to the death" (Chapra, Daviaud, Pattison et al., 2009:835). HIV-related diseases such as diarrhoea, fungal infections, tuberculosis, and pneumonia are becoming more common and increasing

hospital admission in greater proportion. The mortality rate of hospitalised patients was increasing but this was attributed to higher mortality rates among the HIV infected (Colvin, 2008:340).

2.13 SUMMARY OF CHAPTER

HIV and AIDS is still impacting on all sectors of South African nation. The traditional family structure is giving way to single parenthood. The family bond is being weakened and children are forced by the circumstance to take parental responsibility, including taking care of the sick family members, thus increasing child-headed homes. AIDS has taken the parents, and leaving the grand parents to cater for their grand children. Retired grand parents are going back to work or dependent on their meagre pension for daily sustenance.

Household income has decreased due to death and funeral costs, and children dropped out of school. Generation of orphans has sprung up and the large numbers are exerting increasing burden on the family, society, and Government. Household poverty is worsening making it difficult for families to access opportunities due to illness. Individual affected families are devising various ways to cope with the disease impact and some of these strategies (such as borrowing money with interest, selling off family capitals) at times worsen their poverty situation.

The life expectancy level, Gross Domestic Product (GDP), the health care, education, and business sectors are also experiencing the impact of this pandemic. HIV and AIDS is plummeting the labour force but the impact is cushioned by constant labour supply from the unemployed population. Government is budgeting heavily to alleviate and curtail the impact of this pandemic, and to reduce AIDS-related death through increasing the enrolment of HIV and AIDS patients on its antiretroviral treatment (ART) programme. All these are also depriving other priority areas of the needed scarce resources for development.

CHAPTER THREE: LITERATURE REVIEW

3.1 INTRODUCTION

HIV and AIDS infects and affects all age groups; children, young people (15-24) and adults (25 and above), and the prevalence and incidence rates of the disease are still high in South Africa. Warning, informing and educating the general public on this disease is still critically important. Therefore, Government and all stakeholders have resorted to the mass media as a means of informing and enlightening their people, and positively influencing and shaping norms and behaviour associated with HIV transmission (Bertrand and Anhang, 2006:205).

The media affect the society by bringing health and socio-economic issues such as HIV and AIDS, poverty, and crime to the attention of Government. They also identify problems in our society and serve as a medium for deliberation. They achieve these by constituting themselves as a 'common market of ideas' in the society, and a channel for transmission of relevant information and the day's events to all members of the society to enable them make right decisions on such critical life issues (Lawrence, 2004:64). The media frame and reframe health problems (for example, HIV and AIDS) over a period of time in the course of their coverage of the issue. This builds the direction of public discourse and the issue at hand such as HIV and AIDS (ibid.:69).

Therefore, their role in the efforts to address HIV and AIDS is very important. The media have been used in different ways as change agents towards controlling the disease: the media report on the development of the pandemic and its related issues themselves, and present themselves as channels of various campaign efforts and formats against HIV and AIDS. In these they aim to inform, educate and enable the general public to be well aware of the pandemic, and to take necessary actions to secure themselves from the infection. According to Baxen and Breidlid (2009:3), "providing people with sufficient knowledge of HIV and AIDS may serve to enable them to make informed decisions about their sexuality practices and behaviours", and the effect of this education effort "may persist to entire lifespan of the individuals".

However, achieving the expected outcomes from all these efforts has not been easy because awareness does not necessary translate to behavioural change. On the other hand, the ability to influence the general public's beliefs, opinion and perception can go a long way in making this possible. It has therefore been suggested that for HIV and AIDS prevention education to be effective, it must be responsive to culture. This will involve having good understanding of the community and its people (Cohen, 2002). It will equally touch on the 'how and what' of the information and education efforts.

Therefore, how the media report on this disease and channel its related information is important for the success of the whole efforts. The media audiences are also scrutinizing the media on the ways they are involved in this whole process, particularly, its coverage of the pandemic because media' serious and long term attention to the pandemic will place it high in the social agenda. Otherwise, the public may not see the disease as requiring serious attention, and may not necessarily respond positively to any needed behavioural modification stimulus.

This literature review therefore focuses on the role and use of the media in the efforts against HIV and AIDS, media coverage of the pandemic, and audience perception of the coverage.

3.2 THE MEDIA ROLE IN THE EFFORTS TO ADDRESS HV AND AIDS

Due to their central position in the life of people, "the mass media have unrivalled potential to inform and educate the general public" (UNAIDS, 2005:13) on HIV and AIDS and other diseases. They have therefore been recognized as indispensable in the fight against this pandemic, and have become invaluable channel to all their readers, listeners and viewers for enriching or deepening of their knowledge and understanding of the nature and causes of HIV and AIDS disease (Mathebe, 2005:xii). According to Jyoti (2006:1), the mass media have become one of the instrumentalities that facilitate and guide the global efforts against this pandemic, and have the capability to prevent it with the main goal of curing it through its ability "to impart education through entertainment" (ibid.). Additionally, the significance of increasing media use in the fight against HIV and AIDS has been due to its tremendous power to reach and deliver information to the intended mass audience (including children, youths and adults around the world), which will lead to changes in knowledge, attitude, behaviour and practices (AIBD, 2014; Abhijit, 2012). In other words, they are relevant due to their reach, persuasive abilities, and significant impact on public opinion (Abhijit, 2012).

At the turn of this millennium (2000), the international community (UN and WHO) set among others, the sixth millennium goal of halting the spread of HIV and AIDS, and to begin reversing it by 2015 (UNAIDS and WHO, 2004; Hogan, Baltussen, Hayashi et al., 2005:1431). A general public with good knowledge of the disease is very vital if this goal can be achieved. It has therefore been recognized and accepted globally that education is a key and powerful deterrent against HIV transmission (Gallant and Maticka-Tyndale, 2004; Baxen, 2009). This is because it enables the transmission of potential messages that can lead to positive sexual behavioural changes (Kirby, Laris and Rolleri, 2007). Moreover, education has been described as a virtual vaccine in the absence of preventive vaccine due to its effectiveness, and "as a leading primary preventive – teaching people how to reduce or eliminate HIV exposure" (Stine,

2009:224; UNAIDS, 2004:8). Its effectiveness necessitates clear understanding of the challenges to widespread and effective HIV prevention education by both the sources and channels of such efforts (UNAIDS ibid.). Education has already recorded some successes in the effort against HIV and AIDS. For example, education prevention efforts helped in reversing HIV and AIDS pandemic in Uganda and Zambia, "contained emerging HIV and AIDS pandemic in Thailand and Brazil, and altogether avoided HIV and AIDS pandemic in Senegal" (Stine, 2009:227). Therefore, UNAIDS and other international stakeholders have in recent years, "been urging mass media organizations to put their considerable energy into the effort" (UNAIDS, 2005:13) against this pandemic.

For the possibility of stemming the spread of HIV and AIDS, the media therefore should understand that they "have an important role to play in creating an informed public, sensitive to the cause, spread and prevention of HIV and AIDS" (Chanda et al., 2008:191). This role is obligatory on the media. In addition, as the 'Fourth Estate of the Realm' and 'watchdog' for the society, the media should ensure their reporting of the pandemic remains substantial, and maintain constant pressure on the government and the powerful in the society (Cullinan, 2004:2).

The mass media act as necessary sources and transmitters of information which people need to enable them make informed judgment about their health situations, and a host of other subjects that affect people's everyday lives (Macrander, 2011:1078 -1079) within the environment they live in. The media also offer the public domain for society members to come together, debate and discuss relevant issues to them. They provide the highly needed check on government and the political class to guide against "the abuse of political power and ensure that decision and decision making machinery are open to critical public scrutiny" (Beetham, Byrne, Ngan and Weir, 2002:192; Shukla, 2014; Dunu, 2013). A good example is the highly media publicized Treatment Action Campaign's (TAC) civil and legal tussle with South African Government on the Government's position not to purchase and distribute antiretroviral (ARV) drugs to people living with HIV and AIDS because the drugs are expensive and dangerous (Wigston, 2002:91; Ali, Jones, Klopp and Nabi, 2006; Patterson, 2006). TAC had to revert to court action and civil disobedience (they imported and distributed the drug by themselves) to force the government to make concessions on certain matters regarding AIDS (Wasserman and De Beer, 2004:95). President Mbeki's questioning of the causal link between HIV and AIDS, and his view that AIDS is not an emergency in South Africa caused the media to chastise him (Wigston, ibid.; Ali et al., ibid.).

The Mbeki Government intensified the already existing hostility between it, activists, community leaders and the South African mass media by accusing the media of undue criticism (Cullinan, 2001; Beresford,

Schneider and Sember, 2014:204). However, the South African government announced a reversal of this policy towards the end of 2003, largely due to continuous pressure by the media and activist groups such as Treatment Action Campaign (TAC) (Wasserman and De Beer, 2004:95). Equally, in 2010, South African media partnered with TAC to press on President Jacob Zuma's Government the need to review the tender for ARV supply (TAC, 2010). The Government obliged in 2010 and 2011 fiscal year and saved R4.7 billion (53.1% less than its previous payment (8.8 billion) through this exercise (Government of South Africa, 2010). Since 2011, the Government runs the biggest ARV programme in the world, reaching a total of 1.5 million HIV and AIDS positive people at greatly reduced cost, up from 1 million people by the end of 2009 (AVERT, 2011).

In their efforts to report on HIV and AIDS, the media also endeavour to convince their audiences that their own views are valid, and thereby try to influence them. They do these by their news reporting and commentary on topical issues such as those within HIV and AIDS pandemic sphere (SparkNotes Editor, 2014). Thus, they "are seen as primary instruments of (guidance or) education" and development on HIV and AIDS pandemic (Beresford, Schneider and Sember, 2014:72). These are the correlation function of the media. The guidance or education function is in the form of provision of quality information, practical helps, training, and services, and enables the media to play the role of "a specialist advisor" to the society (Nel, 2005:9). They equally tap and transmit society's cultural resources and diversity (ibid,) including their influences on HIV and AIDS pandemic. This is referred to as cultural transmission function (i.e. socialization and education). These functions primarily help in the development of general knowledge on HIV and AIDS. Others are entertainment (for example, edutainment which has been very useful in HIV and AIDS campaign efforts) and service deliverance. Here, they have to extend their watchdog role to HIV and AIDS pandemic related developments, ensuring that they drive the efforts and see that stakeholders including government are held responsible and accountable to the citizens as in ideal democratic governance. The media therefore, positively influence the society through the provision of information, education and entertainment (even in HIV and AIDS communication) (APS, 2013:1), and thereby affect the nature of such society.

The public depend on the newspaper, radio and television for most of its health and medical knowledge (including HIV and AIDS) (Tanner, 2004). In the medical sector, "the mass media are considered an important vehicle of health education (including HIV and AIDS) to promote health and prevent illness" (Mercado-Martinez, Robles-Silva et al., 2001:235). The media also facilitate the dissemination of information and knowledge of new medical and clinical developments (including in HIV and AIDS) to health practitioners and doctors, and the general audience, as well as frame health and medical

professional concerns on the disease (Tanner, ibid.; Mercado-Martinez, et al.,:ibid.). This role is critical because medical news reports can have dramatic effects: they can alter medical consumer behaviour, put pressure on Government, drug supply and subsidy programmes, and affect company shares (Lawton, Rose et.al., 2003:845-846; Finlay and Faulkner, 2005; Wilson, Code and Dornan., 2004:1-9). Besides, the media can contribute to the process of decision making by medical authorities and clinicians concerning HIV and AIDS (Mercado-Martinez, et al., 2001:ibid.).

3.3 USES OF THE MASS MEDIA IN THE EFFORTS TO ADDRESS HIV AND AIDS

Often, the mass media are "a reflection of the prevailing views and values of the society in which it is produced" (Wallis, 2008:57). As agent of transformation, the media have consistently been used for social mobilization and nation building. In this era of HIV and AIDS pandemic, they have been used, and are being used to make the negative trends existing in the society and their consequences known to its members, to awaken their social consciousness and exhort them to embrace new social values "and to rebuild any collapsed or collapsing community structures for social well-being" (ibid.). The media have achieved success in these through their news and information production and presentation activities in the society.

The wide range and potential reach of the South African mass media is widely recognized. The country's constitution guarantees freedom of expression and media freedom, and it is estimated in 2002 that 99% of South Africans have access to radio, 75% have access to television and 7% to newspapers, while 69% of the young people watch TV five or more days a week (Coulson, 2002:1). According to UNAIDS, in South Africa, some 99% of people have access to radio and 70% to television, while just over half read newspapers in 2005 (UNAIDS, 2005:13). However, TV access is substantially reduced in rural areas. Additionally, though the print media have limited reach, they are quite influential because their audience tend to be decision and policy–makers in the society (Cullinan, 2004:1).

The media affect large-scale changes through direct and social mediated pathways. In the first pathway, they promote changes by informing, enabling, motivating and guiding the public, while in the second, their influences are used to link people to social networks and community setting for continuous provision of personalized guidance, natural incentives and social supports for actualizing the desired changes (Bandura, 2001:285). Due to the popularity of the mass media, they can, and do reach many people with positive health information. Its ability to change the course of the pandemic is recognized to be totally unparalleled (AIDS Media Centre, 2005:1; Noar, 2009:343-353; LoveLife, 2004). Even, for greater result, media messages can be culturally targeted (also population segment targeted) to a particular audience,

and such audience have been shown to "respond favourably to mass media messages designed to address their specific interests" and less favourably to messages that are culturally neutral (Romer, Sznitman, DiClemente et al., 2009:2150; Fishbein and Cappella, (2006); Kreuter and Haughton, (2006). Ordinarily, a study by Cohen (2002) suggests that "cultural aspects (besides socioeconomic circumstances) present serious constraints in the attempt to fight the pandemic". This is because people are very sensitive to their culture. Therefore focusing HIV and AIDS efforts (for instance, news information, campaign message, and general prevention education) through people's culture enables acceptance of such information, education or knowledge by the people.

Culture-centred media campaigns to promote sexual risk reduction has been used to overcome barriers to sexual risk reduction by modeling realistic arguments for sexual risk reduction in HIV prevention messages; focusing on counter arguments for overcoming such barriers; emphasizing on respect; and the argument that condom reduces feelings of stress and worry (Homer, Romer, Vanable, et al., 2008:309). A 2009 American study on the use of culturally sensitive media messages (designed to produce a continuum of effects) to reduce HIV-associated sexual behaviour among African American adolescents used dramatic formats to represent sexual behavioural conflicts. The effort modeled individual decision-making processes and behaviour in situations relevant to high-risk audience members. This was intended to encourage the audience to adopt the role of the media characters and thereby "use the media message as a template for their own decisions and behaviours." (Romer, Sznitman, DiClemente et al., 2009:2157).

The result of the study shows that the media messages had a continuum of effects, ranging from improved outcome expectancies about floor effects (a situation that occurs when there is limited opportunity for the media campaigns to achieve further change in the audience because they are already in agreement with the particular research variable), condoms use among all youth, to reduced unprotected sexual contacts among the already infected individuals. The authors note that although media messages might have effects that are presently difficult to detect because of floor effect, such may become more evident in the people's lives in the future. In other words, media messages can reinforce or make already acquired but latent skills and behaviour salient that might otherwise lose relevance to the individual overtime. The media have also been successfully used in the recruitment of subjects for HIV and AIDS research (Romer, et al., 2009:2152-2153).

3.3.1 The Media As a Source of HIV and AIDS Information and Education

In any society, the extent of the differences in the public and in the individual views on any topical issue depends on how the media frame the issue (Scheufele and Tewksbury, 2007). In other words, the media engender social debates on socially relevant issues. The ability of the media to effectively realize their potential in setting agenda of the day (including HIV and AIDS related issues), and help the people to take accurate and informed health decisions is inherent in them. They can make good use of this potential in their efforts against HIV and AIDS if they are willing.

The media have indeed been a primary and great source of HIV and AIDS information and knowledge. In several countries of the world such as USA, UK, and India, the mass media have been shown as the main source of HIV and AIDS information. For example, the UNAIDS (2004) Global report shows that in the national survey carried out in the United States "72% of Americans identify TV, radio, and newspapers as the primary source of information about HIV and AIDS". Similar statistics were also reported in several other countries (UNAIDS and Kaiser Family Foundation, 2004:8). Panos (2004:48) study of eight Southern African countries found the media as the major source of HIV and AIDS information in the sub-region.

The mass media have, therefore, become the primary source for how people view the world. They "make sense of the world for us" through information giving and explanation of the day's issues and occurrences including HIV and AIDS and its associated issues (O'Shaughnessy and Stadler, 2005:34). According to Pungente (2006:1), the mass media "construct" people's reality of life in one way or the other. People do not even have to access specific media information first hand for it to enter their lives. For instance, "we often learn about new health scares or healthy living strategies in discussion with friends, partners and colleagues where media accounts are frequently taken up" (Hodgetts and Chamberlain, 2006:318). Most media scholars agree that the media indeed do have an indirect effect on the public agenda by telling people what to think about, "through their day-day selection and display of the news" (McCombs, 2004:1). In doing this, the media and media professionals "focus our attention and influence our perceptions of what are the most important issues of the day" (ibid.). This means that the more the media cover issues related to HIV and AIDS, the more the public might be expected to think and talk about such topics. It is therefore correct to state that media involvement in health education will ensure that HIV and AIDS topical issues are permanently positioned at the top of the day's news agenda. Moreover, "mainstreaming the HIV issues across a number of programmes and news outputs ensures that the message permeates a diverse range of output, not just outlets and public services messages dedicated specifically to the issue" (UNAIDS, 2004;19). This will subtly reinforce the fact that no section of the society, and walk of life

is excepted from the virus infection, and many of those who may not be interested in watching the traditional AID campaigns or programmes would however be exposed to HIV- related education message (ibid.:21).

Egbochukwu (2002:14) describes the media as the conscience of any nation. According to him, "they sustain struggles, diffuse tension, improve the level of interaction between the government and the governed, enhances exchange, create public awareness and elicit reaction". Eyiah (2004:2) summarizes the functions of the mass media as those of providing "information and education, personal identity, entertainment and most importantly integration and social interaction by giving insight into the circumstances of social empathy". The media should of necessity therefore be socially responsible. This requires an affirmative role for the media in building positive images in both their informational, educational and entertainment content. They should take responsibility for presenting and clarifying the goals and values of the society (Day, 2003:39), even as HIV and AIDS is concerned. In other words, they should "empower the public to make informed and educated (health in general and HIV and AIDS in particular) decisions about their lives on daily basis" (Ngan, 2007:11) through consistent accurate and balanced coverage of HIV and AIDS and other public health concerns.

Educational information (including on HIV and AIDS) is vital to the general public, and it is the media' role to report, analyse and interpret these information to the public on how the disease impacts their lives, and ways they can manage or eliminate such impacts. This dictates that they be accountable to the society they serve through accurate, unbiased, balance, fair and simplified news reports to ensure the plurality and diversity of (HIV and AIDS knowledge and understanding) at all times (Ngan, 2007:13).

As gateway (channel) to social discourse, the media set societal agendas and eventually shape our decisions on all issues of life through presenting "only their version of reality and thereby manipulate the readers' mind" (Schechter, 2002:140). This begs the question of what media news information is all about. For Nel (2005:64), no matter how news is looked at, "news is in the eyes of the beholder: reporters, editors and audiences". They are the determinants of what is, and what is not news. To him therefore, news is actually "what is on a society's mind" (ibid). Though South African journalists cherish the journalistic norms of balance and objectivity in their professional activities, and the Press Ombudsman is hard on the heels of any deviant media house, together with South African National Editors' Forum (SANEF) and Broadcasting Complaint Commission of South Africa (BCCSA), studies have revealed that news stories (for example on health including HIV and AIDS issues) are actually constructed accounts, emanating from the journalist's assumption about such health issues (Hodgetts,

Chamberlain, Scammell et al., 2008:44; Rupar, 2006:127). This raises some credibility questions on the factual and objective nature of media reported HIV and AIDS stories which are supposed to exist in the society instead of being constructed by journalists.

Despite these, the media role in interfacing between science and policy regarding diseases through framing disease risks is significant and has direct impact on government policy responses on diseases (Hodgetts et al., 2008:44). Media attention on HIV and AIDS will lead to changes in government policies on HIV and AIDS when the coverage leads to other media and policy makers taking "up the matter in such a way that it becomes a public issue that leads to the involvement of communities, the government and ultimately the changing of laws and attitudes" (Faure, 2008:386; Faure, 2005:154; Davidson, Hunt and Kitzinger, 2003; Tompsett, Toro, Guzicki, et al., 2003:242). Research suggests that the media can generate public pressure for change on health issues such as HIV and AIDS through advocacy journalism (Faure, 2005:157-170). But it is critical that for the media to successfully play a stronger advocacy role on issues surrounding HIV and AIDS, they should be more aware of the implications of any statement that they choose to make (Wallis, 2008:40) in the course of their coverage of this pandemic.

The media workers (journalists and editors) create messages (including on HIV and AIDS) in specific circumstances (e.g. within the limits of the media organization, the law of the country or their own understanding and judgment of the news beat (Hodgetts, et al., 2008:49), and supply these messages to a target group (e.g. an audience the mass medium aims to reach). These audiences (readers, viewers or listeners of the media) understand and interpret these messages in their unique circumstances (i.e. social, political, cultural, economic and health circumstances (Oosthuizen, 1997:4). However, journalists should not just produce HIV and AIDS news and information but should approach their role with sensitivity and sense of commitment by equally interpreting and analyzing "the news reports for better understanding by both the urban and rural communities" (Ngam, 2007:24). Since the public rely so much on the media for its information, this should extend to the coverage of all HIV and AIDS issues including social, political, economic, personal, medical and scientific aspects (Kruger, 2001). Though this kind of comprehensive media coverage of the disease may not be easily achieved in a short time, it will certainly be actualized in a long term (Ngam, 2007:24) if the media have the will to make it happen. This means that the media may have failed in some instances to carry out this role creditably.

In their study of the Mexican print media coverage of chronic diseases (including HIV and AIDS and cancer), Mercado-Maetinez, et al. (2001:240) find that in the greater majority of news reports, health care professionals continued to be the main source of information about the diseases, with only a few sources

from other sectors of the society including the media. However, besides channelling public health (for example, HIV and AIDS) information and message to the general public, UNAIDS has highlighted several ways the media can make an impact on the HIV and AIDS pandemic. Such ways include: stimulating and leading open and frank discussion of HIV and AIDS; providing a platform for people affected by the pandemic to be able to air their concerns and views, particularly, those living with the virus; challenging stigma and discrimination through provision of accurate information about the disease, "and positive images and role models of affected and infected" individuals; encouraging leaders to take action, and ensure policy-makers and service providers remain on their toes; helping to create an enabling environment for HIV prevention, and a supporting environment for those living with the virus; endeavouring to give the pandemic its deserved attention on the news agenda, and to prevent AIDS fatigue" or complacency from slipping into their efforts (UNAIDS, 2004:22; UNAIDS, 2005:13-14).

3.3.2 The Use of the Mass Media in HIV and AIDS Campaigns

Mass media interventions have become an important part of effective HIV prevention and management approach (Hogan, Baltussen, Hayashi et al., 2005:1431), offering a cost-efficient way to reach large numbers of heterogeneous people. These include people who are not easily accessible through interpersonal approaches, such as migrants and people living in distant areas (USAID AIDSTAR-One, 2011:1). According to USAID, actualizing this requires development of a mass media communication campaign that is "strategic and aligned to the achievement of specific and measurable outcomes, 'and such' programmes should be implemented through multiple channels with mutually reinforcing messages" (USAID AIDSTAR-One, 2011:1).

Most developing countries used some form of mass communication to address HIV and AIDS issues in the early days of the pandemic (Bertrand, O'Reilly, Denison et al., 2006). Initial efforts were focused on raising awareness on the existence of the virus and the disease, the modes of its transmission, and the means of prevention. These efforts succeeded in raising HIV and AIDS awareness in most of the countries experiencing HIV and AIDS pandemic (Measure DHS+ 20011). The late 1980s and throughout the 1990s witnessed the second generation of communication programmes in those countries. This time, the efforts centred on behavioural change connected to abstinence, limiting one's number of sexual partners, and using condoms. From 2000 to the present, efforts at addressing HIV and AIDS through communication programmes have incorporated all aspects of the efforts including prevention, testing, counselling, treatment, care and support (McKee, Bertrand, and Becker-Benton, 2004).

Several studies indicate the effectiveness of mass media HIV and AIDS interventions on several variables such as increasing HIV transmission knowledge, improving self-efficacy in condom use, influencing some social norms, increasing the amount of interpersonal communication, and condom use, and boosting HIV and AIDS awareness of health providers (Bertrand and Anhang, 2006:205; Magnani R. J et al., 2001; Fonseca-Becker et al., 2003; UnderWood C et al., 2006; Babalola, Quedraogo, and Vondrasek, 2006; Pettitor et al., 2005; Peltzer and Seoka, 2005). However, a systematic review of the effectiveness of 24 published mass media interventions in various developing countries (from 1990-2004) on changing HIV-related knowledge, attitudes and behaviours produced mixed outcomes, and where changes occurred, the extent was small to moderate effects. On two of the seven outcomes of the review, at least half of the studies indicated a positive impact of the mass media on knowledge of HIV transmission, and on reduction in high-risk sexual behaviour (Bertrand, O'Reilly, Denison et al., 2006:567).

In China, two studies report mass media as an important source of HIV and AIDS information, with a reach of 92% in one of the studies (Li, Zunyou, Chunqing et al., 2009; Huang, Bova, Fennie et al., 2005). In South Africa, much investment has been made in HIV prevention, awareness and education in recent years through the country's mass media (Kaiser and SABC, 2007:1). Television, radio and print media (newspaper) have particularly been used for national HIV and AIDS campaigns for HIV and AIDS prevention programmes such as Soul City – a weekly media drama that covers a range of health issues, and disseminates basic information about the pandemic and its consequences (Coulson, 2002:10; Peltzer and Promtussananon, 2003:826), Takalane Sesame, the Community Health Media Trust (CHMT), LoveLife, and the Beyond Awareness 11. An evaluation of these campaigns shows that they achieved various levels of success in attaining their objectives (Coulson, 2002:10). Such initiatives use "Edutainment," a combination of education and entertainment to model and demonstrate behavioural patterns that affect people's risk of HIV infection, and they are capable of influencing social norms, and stimulating fruitful discourse at the population level (USAID AIDSTAR, 2011:2).

An assessment of Soul City school and mass media life skills education among junior secondary school learners (age 14-18) in South Africa, using a sample size of 3,150 learners shows that exposure to the media programme was "positively associated with puberty and body knowledge, HIV knowledge, HIV risk perception, condom use at last sex" and attitude towards people living with HIV and AIDS (Peltzer and Promtussananon, 2003:825). This media based programme developed in partnership with the Department of Health and Education was in response to research finding that adolescents in several countries including South Africa are experiencing significant gaps in their knowledge of HIV, particularly

concerning misconceptions about transmission and prevention (Stewart, McCauley, Baker et al., 2001; ibid:826).

An evaluation of the three South African major communication initiatives intended to reduce the spread of HIV and AIDS infection – Soul City, LoveLife, and Khomanani during the period 1999-2004 reveals a growing trend over the five years studied, "of "the expansion of face-to-face communication which is used in combination with mass media initiatives"; the existence of "a greater degree of openness about HIV and AIDS and growth in acceptance of those living with the virus; and condom use as a method of safe sex has increased significantly in the country (Collinge, 2005:202). Impact studies of each of the three initiatives show that each of them is in varying degrees associated with positive changes "in: knowledge, attitudes and safe sex behaviours which are conducive to curtailing HIV infection; increasing knowledge, attitudes and supportive activities that assist in reducing the stigma attached to HIV and AIDS, which helps in promoting health seeking behaviour (ibid.). Equally, mass media campaigns have been used to increase public demand for HIV testing and counselling (HTC) services, and mass media messages explicitly addressing HIV have shown to have greater impact" (Marum, Morgan, Hightower, et al., 2008:2019) whenever applied in addressing the pandemic. For instance, phase one of Kenyan HTC media campaign increased attendance by 28.5% and phase four by 42.5%, with a significant increase in HTC acceptance among young people under age 25, particularly in urban areas (ibid).

It is generally accepted that achieving meaningful success against HIV and AIDS requires sustained attention of all sectors of the society including the media, government, civil society, non-profits, opinion leaders, and other stakeholders. South African HIV Prevention, Treatment and Care (HTC) campaign employed massive treatment literacy campaign that encouraged 'people to take the HIV test, go onto ARVs should they need them and adhere to their treatment regimen" (Cullinan, 2004:4). This same strategy was employed in the just concluded HTC national campaign with great success. On 15 April, 2010, President Zuma's Government launched a national HIV Testing and Counselling (HTC) campaign (used the mass media massively, in combination with other campaign initiatives) which aimed to test and counsel 15 million people by the end of June 2011 (South African Government Information, 2012:1). According to Government, the campaign will help the infected to know their status early because if they are not aware of their positive HIV status, it will deprive them of early and appropriate lifestyle and healthcare intervention At the end of this world's largest HTC campaign, over 14 million people tested for their HIV status, of which 2 million were found to be HIV positive (The Presidency, SA 2011). South Africa has thereby established the largest antiretroviral programme in the world from close to 1 million people in ART by the end of 2009, to a total of 1.4 million by 2011 (AVERT, 2011: 7; The Presidency, 2011).

An impact evaluation of Soul City Regional HIV and AIDS communication project in Malawi, Lesotho, Namibia, Botswana, Zambia, Mozambique, Zimbabwe, and Swaziland between 2002 and 2007 reveals that "the project achieved and often surpassed regional objectives such as reaching 40% of the population with their campaigns and 15% of those exposed to project material adopting positive behaviour changes" (Soul City, 2008:1). The concise summary of each country's findings shows that among those exposed to the communication campaigns in the region, there were reasonable increase in the number going for HIV testing and persuading a partner to get tested; and there were positive effects on condom use, partner reduction, and stigma reduction in the different countries (ibid.). HIV and AIDS media campaigns have also been used to influence people to start talking to someone about HIV in different countries – Brazil, Senegal and Nepal, and have also been significantly associated with positive beliefs about HIV prevention behaviours in those countries (Gary, Burke, and Castelnauet, 2007:51). There is therefore strong evidence for one to state that "a global mass media campaign can indeed change social norms" (ibid.) particularly those relating to HIV and AIDS pandemic.

The *Makgabaneng* radio drama in Botswana used radio models - both fictional and real-life to help listeners protect themselves from HIV and support people with HIV through modelling and reinforcement (Sebert-Kuhlmann, Kraft et al., 2008:260). Exposure to the drama which informed listeners about preventing mother to child transmission (PMTCT) was high among the sampled population of 500 pregnant and postpartum women, with 79% reporting ever listening to the programme, and 53% listening at least once a week. The report indicates that those pregnant women, who identified with characters in the drama, were more likely to be tested for HIV (ibid.).

Another study interviewed regular listeners of the Makgabaneng radio drama in Botswana to understand why people identified with the positive, negative, and transitional role models in this series which included characters dealing with pregnancy and HIV testing. The report shows that the positive role model was uniformly admired by the listeners and many of them aspired to be like such. The negative role model was not admired and no one desired to act as she did (Lovell, Pappas-Deluca, Serbert-Kuhlmann et al., :2007-2008:181).

The 2005 evaluation of the key national media campaigns and programmes shows relatively high exposure to the efforts, but also indicates existence of gaps (Shisana, Rehle, Simbayi et al., 2005:xxxxiv). A major HSRC evaluation in 2008 indicates that this figure increased to over four-fifths of the country's population, up from three-quarter in 2005. Many of the campaigns were targeted at the 15-24 age group

who best received the awareness message with 90% coverage, though other age groups were also exposed to them. However, "just over 60% of those aged 50 and above had seen or heard at least one of the four campaign messages" (AVERT, 2011:3; Shisana, Rehle, Simbayi et al., 2009:68-76). According to the finding, though they have tremendously helped to raise awareness and knowledge of HIV and AIDS in most segments and age groups in South Africa, accurate knowledge of HIV and AIDS has significantly decreased in recent years in some South African age groups, and still low among some others. For instance, "across all age groups and sexes less than half of all people surveyed knew both the preventive effect of condoms and that having fewer sexual partners could reduce the risk of" contracting HIV and AIDS (AVERT, 2011:3; Shisana, et al., 2009:74-76; Kaiser and SABC, 2007:1).

Despites the documented successes in the use of mass media in addressing the pandemic, research suggests that mass media are far more effective in social engineering efforts when used in combination with entertainment, in addition to the application of the right communication media mix to a particular situation or circumstance (Zaire Population Services International, 2001:1; UNAIDS AIDSTAR-One, :2011:1). In other words, "to be effective, media messaging about HIV and AIDS must be educational and entertaining and the two goals should not be mutually exclusive" (UNAIDS, 2004:8). Moreover, well researched media "content can create public awareness abut HIV prevention, treatment, care and support, and can potentially influence the development and implementation of relevant policies" (Madhu, Mia, Nanna et al., 2009). Additionally, research shows that using a mix of media enables media campaigns to maximize impact, and enabling the general public to interact with a mass media project or campaign have been effective in promoting awareness, engenders debate and individuals identifying with the issues (UNAIDS, 2005:11). More so, the most effective media HIV initiatives have proved to be those with many outlets, and "a coordinated, multifaceted campaign has greater impact than single programme" (UNAIDS, 2004:21)

The media target audience has been most impacted when or where radio, television and print media are strategically and appropriately applied in combination with other media such as sports, drama, dance, folk theatre, printed materials where appropriate (Zaire Population Services International, 2001:1). Studies support this assertion. In South Africa, the LoveLife programme monitoring team stated in its 2004 report "that mass media in combination with a face-to-face intervention was associated with decreased risk of HIV infection, decreased number of partners, and increased use of condoms" (Romer, Sznitman, DiClemente et al., 2009:2150; LoveLife, 2004:22). Other studies are consistent with this finding (LoveLife, 2005:6; Pettifor, Rees, Kleinschmidt et al., 2005:1532). In another study, combined exposure to mass media campaign and interpersonal source (service providers' messages) contributed maximally to the

process of engaging and retaining people living with HIV and AIDS (PLHIV) in HIV primary care (Mallinson, Rajabiun, and Coleman, 2007:77-84).

A review of 15 mass media programmes (between 1990-2004) from different countries on HIV and AIDS-related behavioural change reveals varying effect levels for different types of media interventions. Radio only intervention shows significant improvement in awareness of an AIDS hotline but no improvement in social norms, interpersonal communication about HIV and AIDS, and different measures of condom use. Radio with supporting media interventions, and radio and television with supporting media interventions indicate overall improvement in knowledge gain, condom use, positive effects on skills related to HIV and AIDS, a positive effect on HIV and AIDS based interpersonal communication, knowledge about health services and social norms. Overall, there were no effect on variables such as abstinence or delay of sexual debut, and reduction in the number of sexual partners (Bertrand and Anhang, 2006:232-235). This ineffectiveness of the media to impact some human variables shows that depending on the quality of the media outputs "and co-existence of other determinants, media influence may be subordinate to, equal to, or outweigh nonmedia influences" (Bandura, 2001:284).

Myers (2002) shows that television and radio dramas are successful in educating people in Sub-Saharan Africa on issues of HIV. The measurable impact of such educational dramas is mainly due to their being able to contextualize issues over time, presenting ideal situations and depicting possible solutions that the listeners or viewers can apply to their own real life situations (Ridgard and Struthers, 2010:46). Abroms and Maibach (2008:219) concur with this assertion. According to them, mass media interventions that strive to influence people indirectly – by crafting the desired changes "in the places (or environments) in which people live and work – have equal if not greater potential to promote beneficial changes in peoples' health behaviour". Another study indicates that creating the image of healthy lifestyle choices through the mass media "can exert a significant influence on risk awareness, self-efficacy and other behavioural predictors" (Agha 2003:749). Meanwhile, other studies show that "mass media that simply lecture the audience about the benefits of safer behaviour are less effective than dramatic formats" (Romer, Sznitman, DiClemente et al., 2009:2151).

The findings on the ineffectiveness of the media and media programmes on some variable and that media effectiveness depends on the application of the right mix of media to a particular situation tend to contradict the assumption that information about something as serious as HIV and AIDS will translate into behavioural change and that access to quality information on the disease will result in rational decision making (Crewe, 2002:452). In this context, the media is no longer 'the all powerful media' but is

presented as mediator and mere deliverer of knowledge, which is seen as "uncontested content that is easily connected to a captive audience" (Baxen and Breidlid, 2009:15). Moreover, the concept of 'captive audience' has become a contentious idea.

It presupposes therefore that there are some mediating factors that can influence the success or not of HIV and AIDS mass media campaign or any other media message. In other words, media news information or campaign messages encounter some internalized factors or variables in the audiences (for example, belief system, level of risk awareness, and individual's life expectations) that can influence their effectiveness or not of achieving the desired results. A study in North India that sought to understand the effects of mediating factors on behaviour changes and changes in condom use assessed the television components of an HIV prevention communication campaign, comprising a youth-focused TV reality show, a TV drama and TV spots (Sood and Nambiar, 2006:143). HIV and AIDS knowledge, gender attitudes, interpersonal communication skills and perceived risk of HIV and AIDS were some of the mediating variables used in the study. The study indicates that better recall of the TV components was due to the positive mediating variables and results in higher levels of condom use. The mediating variables were found to be significantly associated with frequency and level of condom use (libid.).

A study on the impact of mass media exposure on a group of mediating factors known as predictors of behaviour change such as belief that one could convince one's spouse to use condoms; that condoms can effectively prevent HIV infection; and that HIV prevention is the reason for one's condom use, shows a positive relationship between exposure to the mass media and predictors of behaviour change (Agha, 2003:749).

However, the Centres for Disease Control and Prevention (CDC) (2007:1) reports that the mass media alone cannot bring the overall desired behavioural change and states that the only way effective communication can significantly enable and contribute to change is to ensure that plans for creating sustained behavioural change include information communication in combination with other prevention strategies. The CDC explains that the purpose of health communication is to generate general support for safe behaviour; support personal risk reduction; inform persons at risk about infection and how to obtain specific services, encourage volunteerism; and decrease prejudice against persons with HIV and AIDS. In this regard, the CDC concludes that public information activities alone do not represent a sufficient HIV prevention strategy but that successful HIV and AIDS prevention efforts should involve planning and implementing effective and efficient public information programmes that will influence the knowledge, attitude, belief, and behaviour of individuals and communities ((CDC, 2007:2).

3.3.3 Use of Media in Addressing HIV and AIDS Stigma and Discrimination

People living with HIV and AIDS (PLHIV) may be stigmatized either directly by the media – when the media are less concerned about the plight of the PLHIV and are sensational and profit driven in their coverage of the pandemic - or indirectly by the media – when they are ignorant of their role and responsibility or lack the technical knowledge and expertise to report on HIV and AIDS, or by the society members. Any of the above instances hinders efforts to control the pandemic by worsening existing forms of marginalization, discouraging individuals from testing for HIV and AIDS, and engendering complacency in yet untargeted groups at risk of HIV infection (ACA, 2001:1; Wallis, 2008:50). "The marginalized PLHIV shy away from interaction with the community being weary of discrimination. This lack of mutual understanding further nurtures non acceptance towards the PLHIV" (ACA, 2001:4). Due to the stigma that comes with HIV infection, people may reject those living with HIV and AIDS, gossip about them, openly or secretly discriminate against them or their family, or even threaten them. The infected people who are bound by fear, shame and distrust may lie about their status (Stine, 2009:253) as a means of keeping safe.

HIV and AIDS was an instant attraction to the media from the onset of the pandemic due to their desire for the bizarre, saga, oddity and sensationalism, coupled with HIV and AIDS being associated with images of human skeleton, deadly and incurable disease, sex, promiscuity, rape, infidelity, and violence among others (Mathebe, 2005:xii). In addition, the initial characteristics of the disease as unclear biological and physical disorders that brought pains, suffering and ultimately, death to people infected with it, as well as media's taste for drama and spectacle made HIV and AIDS interesting to the media, and made HIV and AIDS a household vocabulary, with the media focused on reminding people about the good and evil, and the right and wrong within their communities (ibid.).

In effect, sensational reporting was the order of the day. This initial pattern of reporting on the disease, coupled with the fact that little was known of the disease then, and that there was no treatment available for the disease then helped to heighten the fear of infection by the virus and contributed to establishing stigma and discrimination. Through this they polarized the society into "the good" and "the bad or evil", and people have continued with this anomaly up to today (though to a less degree in some communities) despite media and other stakeholders' efforts in addressing it.

Indeed, the infected and the affected people need comfort, compassion and support to help them live with the disease that still has no cure, rather than stigma and discrimination which further serve to propagate it. As stated in the review of historical trends of the disease in this literature review, the media

have since tried to give HIV and AIDS a human face by improving their vocabularies in HIV and AIDS reporting, and mobilizing the general public to create a caring and responsible society to show concern to the plight of the infected and the affected by the pandemic.

The Hong Kong Committee on promotion of acceptance of people living with HIV and AIDS identified the mass media as key contributor towards promoting understanding and acceptance of the PLHIV because of their significant impact on public opinion. They averred that beyond the media's role of reflectors of public attitude, they are powerful stakeholders in public education, and can be allies in the shaping of a new culture of accepting the PLHIV (ACA, 2001:31-32). Their strategy paper proposed among others, the use of the media in a "three-prong strategy of networking, education and persuasion to inculcate a sense of social responsibility" in their country (ibid.). This strategy can be easily and successfully adopted in any society in tackling HIV and AIDS stigma and discrimination.

Although HIV and AIDS stigma is strongly associated with ignorance, just getting the people informed about HIV virus and their infection risk through the mass media and any other communication channels is not enough to eradicate it. Effective HIV and AIDS preventive education must include serious education about discrimination and stigmatization (Frohlich, 2008:366). Achieving success in this will involve firstly understanding this phenomenon, while reducing its impact will involve broadly challenging the "deep-seated cultural values and social attitudes" in the society, creating and raising community awareness, empowering and mobilizing the community to stand up and confront HIV and AIDS stigma and discrimination, and the media addressing stereotypes against the PLHIV in an effort to demystify the disease and "to give it a human face" (ibid.).

The media are absolutely relevant in making these possible due to their nature:

They are human communication systems that use processes of industrialized technology to produce messages, generally aimed to reach large, heterogeneous audiences, and hence sometimes referred to as "mass media" operating through "mass production". The media usually aim to allow communication across distance (and or time) between people (sender and receiver of messages), or to allow communication in which the sender does not need to be present as the communication is both recorded and then transmitted or produced and then published. They are called 'media' (which means 'middle' in Latin) because they are literally in the middle, or are the middle chain of the communication.

- O'Shaughnessy and Stadler (2006:3-4)

In addition, the success of the media in this kind of issue is due to their popularity with all segments of the society.

3.3.4 Media Representation and Meaning Construction of HIV and AIDS

Media personnel responsible for news selection or for making critical decisions on news contents considered "AIDS a major and significant object of representation and reporting especially when such news are seen as visible, interesting, informative, of terrifying nature or strange implications" (Mathebe, 2005:xii). AIDS has since its beginning therefore become synonymous with news. Through AIDS news reporting, the media "as an authoritative and authentic voice", made available the needed information and education on the biological features and microbial causes of the disease, x-rayed the community's social life, mainly to terrify the people, inform, raise or sustain public awareness of the disease, and persuade their audiences to make some adjustments in their lifestyle (ibid.).

It has been noted that "the social representation of HIV and AIDS is rooted in the broader discourse of the 'other' in Third World Context" (Baxen and Breidlid, 2009:19). In a study on the representation of HIV and AIDS in the South African media, it was found that HIV and AIDS is being rooted in Otherness – representing it as an illness that affects only black South Africans, the females the most, and is being kept distant from the "Self" (Wallis, 2008:30). AIDS is often equated with death by both activists and journalists. People Living with HIV and AIDS (PLHIV) are framed as not actively living but passive and dying, gaunt, defeated, poor and in need of assistance, and often female (ibid.). Though these representations may be far from the truth, the disease has however been shown to be "most prevalent among the black population of the country. Worse still, there is steady increase in the prevalent rate among black people, in a context of decline among other population groups" (Chirambo, 2008:144).

The above representation study analysed a total of 293 articles from the Sunday Independent and the Mail and Guardian. According to the findings, language used in the media in few instances is positive, but most often is still negative and stereotyped. The use of the word "victim" to describe PLHIV was persistent in the media, and this concept of PLHIV "is established and maintained through the terms 'AIDS victims", "AIDS sufferers", and "AIDS patients", "died of HIV and AIDS" instead of AIDS-related illness, and through associated images that frame a PLHIV as passive and helpless" (Wallis, 2008:30).

Such words and images connote fear and have been proved defeatist in the efforts against HIV and AIDS. It has been noted severally that the use of fear or scare tactics, or blame tactics in the campaign

against HIV and AIDS, and media coverage of HIV and AIDS do not work instead it tends to drive the disease under (Lupton, 1994:109). In addition to fear and blame, hate, shame, secret and lies have been identified as the factors that sustain HIV transmission, and skewing HIV and AIDS data by the media whether by ignorance or lack of education results in fear (Stine, 2009:193). The photographs of bonny and dying people with AIDS stage patients "bear testimony to the poverty, anguish and sheer loneliness of dying alone" (Kukard, 2004:12), and no one wants to associate with such experiences.

Therefore, "failure to give an accurate representation of a disease (HIV and ADS), from both the medical and social vantage points, can cause a great deal of harm – in ways that most of us would not begin to contemplate" (Stine, 2009:177). Hence, misrepresentation of HIV and AIDS and its various aspects is dangerous to the general society. The societal knowledge or understanding of the disease has been strongly related to the type of representations presented by the media over time. The media gave the disease gay identity from the beginning by initially portraying it as intravenous drug users' and homosexual disease, and many AIDS reports in the media supported the then predominant belief that gay lifestyle is health risk and basically immoral or sinful. In this, "HIV and AIDS stories created a social divide of who is good and who is bad, the assumed good stigmatizing the assumed bad" (Mathebe, 2005 xii, xvii). Equally, the personification of HIV and AIDS as a 'killer' results in social stigma by giving additional meaning to the disease and "casting some particular people and behaviour as allies of the enemy" (Connelly and Macleod, 2003:6). These scapegoating, stereotyping and stigmatizing have continued up to today to whosoever contracts the disease whether homosexual or heterosexual despite the global efforts to eradicate it.

The media add to the "ordering" of HIV and AIDS by regularly highlighting the high-risk groups and behaviour in their HIVAIDS news reporting, and thereby channelling public thinking towards a social division of "us" and "them". This is known as "othering", and it entails the practice of positioning oneself outside the risk of HIV and AIDS and classifying others as HIV infection risks. It leads to stigmatization and misrepresentation of various groups, and can weaken the effectiveness of efforts against HIV and AIDS because people will not see any convincing reason and s to change their behaviour and lifestyle (Chanda, Mchobu and Nengoshama, 2008:191). However, the fact remains that HIV and AIDS is non-discriminatory and does not select any particular individuals or groups of people to infect. Thinking and believing that one can not contract HIV virus is in the least an illusion. Such attitude lowers the guard (personal precautionary measures) against the disease and therefore renders such people vulnerable to contracting the virus.

Some stereotypical terminologies (such as AIDS victim, and AIDS is dead sentence) filtered through the media to the public heightening the fear of the disease, and hopelessness of those who contracted the disease. Many of those with full-blown AIDS (AIDS is by this term represented as bomb, and therefore PLHIV as bomb carriers) were killed by people, and some committed suicide due to their unbearable conditions (Wallis, 2008:23). Regrettably, the media have from the beginning of this disease, set and sustain the image of those living with HIV and AIDS as perilous to the society (ibid.), and this "conception of danger in the media served to add to the stigmatizing of AIDS" (both stigma enacted by others and self-stigma) (Lupton, 1994:109). Self-stigma occurs when individual stigmatizes himself and herself due to internalized real or perceived external stigmatization, and this is a powerful one against the overall wellness of the individual. As Chapman (2002:174) states, "People with HIV can be aware of the virus actually coursing through their veins, and they live with the knowledge that other people are fearful of coming into contact with their blood or body fluids".

However, the same media have equally been useful in the efforts to eradicate HIV and AIDS stereotypes, stigma and discriminations. The media also present HIV and AIDS as a disease that infects arbitrarily irrespective of the person's gender, sexual orientation, or social background. In addition, "the AIDS story in the media proved key to an understanding of the multiple ways in which the media talk to their readers not only about disease, but also about the 'negative' constants of sexuality, promiscuity, loose morals, sin and identity" (Mathebe, 2005 xx).

3.3.5 HIV and AIDS War Discourse by the Mass Media

A discourse contains subjects, constructs objects, and presents a coherent system of meanings attached to how "truth" is formulated (Parker, 1992). The statements in a discourse cluster around culturally available understandings as to what constitutes a topic (Connelly and Maclead, 2003:2). As a process, discourse synthesis involves combining two concepts such as "information literacy" or "information poverty" and the outcome of such combination is the creation of two new concepts with different meaning. (Pawley, 2005; Haider and Bawden, 2007). Discourse therefore frames and gives meaning to important issues of the day such as HIV and AIDS, and enables the general public to gain good knowledge of, and understand such issues.

News presents specific socially constructed representations of reality based upon news values of interest to the media (Lau, 2004). Therefore, the media guide the society in determining what is a significant occurrence, and go on to provide powerful explanations of such occurrences. It is worthy of note that the initial context or frame in which the society understand an event or topic often determines how such will

be understood going forward. The war discourse presented HIV and AIDS as an invasion – a disease that infiltrates the society, hide for years, while getting itself deep-rooted into the society before launching its attack on such society (Connelly and Maclead, 2003:64).

The South African media personified HIV and AIDS by according agency and enemy status to the virus. This reproduces discourse on the disease, which in turn generates "othering" discourses, that label different groups of people with "the diseased bodies" as polluters and infectors, and as dark and threatening; reinforce government's commander position on HIV and AIDS - who directs the war through policy and intervention strategies (Connelly and Macleod, 2003:63). It equally silenced alternative voices, particularly, people living with HIV and AIDS; raise opposition groups like Treatment Action Campaign (TAC) to deploy struggle tactics against the government; fronts the medical and scientific discourse of the disease as the most important, and the investigative practices in the war; and make the ordinary citizens with "responsible bodies" the war victims or people at risk, and cajoling them to take on prevention and caring responsibilities that are unfairly tilted towards the women folk (ibid.).

Wallis (2008:25-28) notes that the media have in the discourse of HIV and AIDS (and other illness generally), utilized metaphor as a key tool to frame and represent HIV and AIDS to their audiences; translating what is strange into familiar terms, and these (metaphors) massively contribute to how we think about and understand illness (including HIV and AIDS). The centrality of metaphor in our understanding of our environment has been proved by many research works (Reisfield and Wilson, 2004; Robins and Mayer, 2000).

According to Wallis (2008:26), the use of war metaphor is pervasive and unrelenting in medical discourse (On illness, and particularly HIV and AIDS), and such metaphors, have "had particular, and often negative implications", because both the mass media and the society use and misuse them. To him, martial metaphors such as "'fight' against HIV and AIDS or must 'combat' the virus, the virus 'invades' our body and our immune system must try to 'fight back'," make the illness the foe, the body becomes the friend, and the immune system and the external treatments (for example, ARVs), the weapon. This representation create stigmatizing links between patient and treatment since the PLHIV are represented as active failures because there is no cure yet for the disease and a PLHIV "could still fall ill with an AID-related illness if the virus adapts to the various drug therapies available" (ibid.).

Citing Brown et al. (1996), Connelly and Macleod (2003:2), state that HIV and AIDS has been positioned as the "enemy" and "adversary" that must be fought with organized campaigns, with the weapons of

choice in the battle being information, education and prevention. The medical science is centrally pushing towards identifying and controlling the "invader", resulting "in a 'detective' discourse in which rational strategies of deduction and detection are adopted to locate the 'villains' responsible for the 'crime' and then to 'punish' them". The goal in all these is to particularly eliminate or terminate their existence from their "occupied territories" – the human bodies.

In her study on mass media representation of HIV and AIDS in Australia, Lupton (1998) states that the discourse of militarism which has become a dominant theme in the representations of AIDS in both the popular and medical media was also explicit in the news of the mid and late 1990s. "The combination of words such as 'hope' and 'win' with this militaristic discourse suggests that medical science is 'winning the war' against HIV and AIDS" (Lupton, 1998:40). Other terms used by the media include "a battle", "a struggle" with HIV and AIDS', something that must be "combated", "struggled against" and/or "beaten" and "defeated", and this pattern of representation helps to "reinforce the paradigms of innocence and guilt", (as good and bad, friend and foe) that polarizes the world and therefore reinforces the Self and Other dichotomy (Wallis, 2008:26). Moreover, "a metaphor of war will always depict PLHIV as the 'Other' - either victim, enemy or agent of disease" (Wallis, 2008: 27, 39). Studies in media framing of specific diseases (for example, Clarke and Everest, 2006; Wallis and Nerlich, 2005) show media news portrayal of HIV and AIDS "as entities to be combated through the use of biomedical technologies" (Hodgetts, et al., 2008:44), and this idea has since remained with the stakeholders in the effort against the disease.

The media have also described HIV and AIDS as a plague and a scourge, due particularly to its beginning among the homosexual, and it has also been framed sometimes as a form of divine judgment on the supposedly morally unbalanced individuals. According to Wallis and Nerlich (2005:2637), "AIDS as sin was employed to describe cause (divine judgment), attitude to sufferer (sinner), and individual and public policy responses (repentance, abstinence, moral education)".

Several studies on the media representation of those living with HIV and AIDS in South Africa, have shown that black (often female) South Africans are consistently represented as the vectors for HIV and AIDS (Ngam, 2007:50; Wallis, 2008:25, 28-30; Robins, 2005; Hamlyn, 2004:24-26; Shefer, 2004; Jack, 2004), thereby heightening social divide. Meanwhile the media is expected to dutifully and equally represent all social groups in the society and reflect the society's diversity by enabling people to access a variety of viewpoints on various issues, as well as the right to react to such viewpoints. The quality of media coverage of HIV and AIDS in South Africa therefore needs to be improved (GMBSR, 2006:2). Since the media is in the society and the society reflects itself in the media, the South African media

sector with its peculiar ownership, economic and social situations mirrors this same pattern to its audiences. These influences on the media if left unchecked for too long will seriously hamper their credibility as socially trusted purveyors of the day's reality.

3.3.6 Historical Trend in the Media Coverage of HIV and AIDS

Mass media representations of public health issues (including those related to HIV and AIDS) for public consumption create prevailing discourses and give meaning to such issues (Lupton, 1998:33; Malone, Boyd and Bero, 2000:713). Since the beginning of the HIV and AIDS pandemic in the early 1980s, the mass media have continued to play a vital role in shaping and defining its meaning for the public. HIV and AIDS public health policy-makers and activists have always been influenced in their decisions and actions by news media representations, which also report on their activities. In HIV and AIDS news reporting, the discourse that give meaning to the pandemic have constantly changed since the beginning of the pandemic (Lupton, 1998:ibid.).

In the early 1980s to mid 1990s the attention of the media in different nations was concentrated "on the causes and effects of the 'strange' illness, particularly as it was first diagnosed among the homosexuals and intravenous drug users" (Wallis, 2008:36). The media during this period of the pandemic sensationalized and distorted HIV and AIDS information, presented those living with AIDS as isolated and hopeless (Baker, 1986:179-194), and were full of metaphors labelling HIV and AIDS as a gay disease, as punishment for sin, as a mysterious ailment, and a death sentence. However, HIV and AIDS representations changed drastically from HIV and AIDS as a "gay plague" in the early 1980s to HIV and AIDS as a disease affecting everyone in the late 1980s. At the end of the 1980s and into the early 1990s, HIV and AIDS became portrayed in the media as more of a "routine" issue than as a human catastrophe due to reduction in the panic caused by threat of HIV and AIDS to heterosexuals in news reports in United States, Australia, Britain and other industrialized nations (Lupton, 1998:34).

This was largely due to the progress recorded in biomedical research relating to the disease which helped alleviate social fear concerning the pandemic in those societies. Just as in the present day South Africa, the readily available and free antiretroviral treatment is helping the Government achieve several successes in the fight against HIV and AIDS by abolishing the notion of the disease as a 'death sentence', encouraging and giving hope to the infected, the affected, and the none affected, as well as drastically reducing stigma and discrimination both in the society and in the workplace.

The initial media reports labeling AIDS as the disease that affects "outsider" group of people, specifically the homosexuals, intravenous (IV) drug users and the immoral brought moral dimensions to the disease (Pickle, Quinn and Brown, 2002:428; Connelly and Macleod, 2003:5). The media further propagated this "outcast" status by grouping people with HIV and AIDS as "victims", referring to innocence and good behaviour, (e.g. in children), and as "at-risk-groups" referring to blame and guilt due to deviant behaviour among adults (Albert, 1986:163-178).

From 1985, the South Africa media also cast HIV and AIDS in medical terms as a pandemic of infectious disease, particularly a "gay plague" as in many other countries. The medical discourse continued through 1990, 1995 and 2000, with some adjustments to include descriptions of the virus and AIDS. (Connelly and Macleod 2003:6). Personification of HIV and AIDS became common during the period, "ascribing agency to the disease, and presenting it as an enemy, 'a killer', 'a predator' a 'formidable foe' that 'matches', 'threatens', 'claims lives', 'striking' people down as it 'reaches' into the far corners of the world" (ibid.).

According to Lupton (1998:33, 40), in the period 1994, 1995 and 1996 the media mainly reported HIV and AIDS research findings among industrialized world's medical scientists focused on prevention of the multiplication of HIV with body cells or on strengthening the immune system of people infected with HIV. Additionally, within this period, HIV and AIDS became increasingly portrayed in the media as a biomedical (Gwyn, 2002) rather than a public health problem, and again portrayed as affecting gay men rather than the general population.

Between 1994 and 1996 three major archetypes of people with HIV and AIDS dominated media reports in the Australian Press – the "AIDS victim, "the "AIDS survivor" and the "AIDS carriers". There was a move towards the "regaying" of AIDS in Britain in the early 1990s, and in 1995 in media reports in Australia as response to "second wave" or new rise of HIV infection among gay men (Lupton, 1998:34, 37). According to Lupton, the media ceased from this period to assign blame for HIV and AIDS infection to ensure that the public become respectful and sympathetic to the victims of the disease, and stopped seeing those living with the infection as right thinking and independent individuals who got contaminated by AIDS due to their sinfulness and moral weakness.

Generally, HIV and AIDS news report progressed gradually and included more reporting on medical research and public health measures following activists' entry into the AIDS discourse and as celebrities with AIDS started going public (Pickle, Quinn and Brown, 2002:429; Kaizer Family Foundation, 1996).

Soon, the media began to rely heavily for their AIDS reports on expert prescriptions from leading institutions of biomedicine. The thought patterns of these experts became legitimized - defining what should be studied concerning AIDS, the relevant study questions to ask, and the applicable scientific methodologies for interpreting medical test results and results of clinical and vaccine trials (Mathebe, 2005:18). "The scientific experts made AIDS through the language of biomedicine and working journalists sold it as news – as both a spectacle and a major biomedical chronicle pillaging the homesteads and villages of the poor" (ibid.). However, Wallis (2003:36) is strongly convinced that for the science of HIV and AIDS to be really understood by the general society (including media audiences), "any language that is used to describe how people die as a result of it must be clear, accurate and unambiguous". This will entail that journalists should be able to understand and interpret the scientific prescriptions in the language, words, imageries and pictures the society will clearly comprehend. Training of journalists in the science of HIV and AIDS reporting is therefore paramount in their successful discharge of this responsibility.

According to Hodgetts, Chamberlain, Scammell et al. (2008:50, 55) the popularity of the biomedical news pattern with journalists is due to its simplicity since it centres on causes, consequences and solutions, and depends on readily available news sources such as doctors and nurses. This news hand-out has a high propensity to negatively impact on the quality of media health (for example, HIV and AIDS) reporting. They argued that explanation of health or medical issues is highly interpretative in nature and this fact can be obscured by merely referencing Ministry of Health, hospitals, Medical Association, doctors and nurses in health (e.g. HIV and AIDS) reporting. Moreover, media dependence on 'official' primary sources greatly influence "the framing and patterning of coverage" on any health issue towards favouring such sources (ibid.; Kwansah-Aidoo, 2001).

Beginning from the late 1990s, AIDS treatment, counselling and testing became part of AIDS representations in the media in several countries. From this period, the way HIV and AIDS is represented in the media portrayed the media as a kind of social movement that is specifically engaged in social mobilization against AIDS as a social problem (Mathebe, 2005:xxii). They articulated specific set of beliefs about the disease and worked towards optimizing the collective interests and resources, while focusing on clarifying the authenticity and believability of this disease. In this manner, the mass media give legitimacy to issues through presentation and influence their audiences to easily believe media arguments and stands on such issues (ibid.).

From mid 1990s to 2000, the South African media mobilized the people for the setting up of a type of society with collective values and moral sentiments. This has continued up to the present time. The media reports on AIDS no longer blame the individual for HIV and AIDS infection. "Rather, media personnel took up the responsibility of integrating the society, and positioned themselves as catalysts for nation building, and as the repositories of a 'caring society'" (Mathebe, 2005:344). From this time, the media and other stakeholders began to emphasize on building mutual relationships and social partnership against AIDS. This was driven by a strong commitment to build a "caring society" and extend human respect to HIV and AIDS infected individuals, and towards increasing the institutional capabilities of local communities being devastated by AIDS. The focus fell on collective responsibility for health care, AIDS counselling, care for children born with HIV, alleviation of poverty, and AIDS orphans (ibid.).

3.4 MEDIA HIV AND AIDS NEWS SELECTION, FRAMING AND CONSTRUCTION

The mass media have become a place where the values of the society are displayed, constructed and communicated, and they at times ignore issues or emphasize others and by so doing could steer debate on such issues to directions of interest to them (NeI, 2005:5-6). Media HIV and AIDS news reporting in different countries have in one way or the other been influenced by this media behaviour as can be seen from the coverage over the years.

This therefore means that mass media traditions and values influence their choice of news contents. Usually, their editorial policies sway their sympathy to different segments of the society including the government, racial groups, gender, political ideologies, and the business community. The media therefore present selected images, symbols, myths, world views, truth claims, values and visions to their audiences (McCombs, 2004:1). It means therefore that in actual sense, news is artificially shaped. Media organizations and practitioners always claim to give society objective, accurate and balanced, and indepth news coverage. However, studies show that in reality, the society is getting highly selected and interpreted news occurrences and that the media are actually inclined to shaping reality, constructing and framing a world for society to dwell in. In turn, the society takes what it gets from the media as legitimate and the day's reality (ibid.). There is however a symbiotic relationship in this issue. Although the media endeavour to influence how their readers, listeners and viewers could think and the extent to which they could think, the media rely on the public or audience interest, or human angle to a story to determine what they present as news to the society. The media therefore reflect the society and the society also reflects the media and their contents.

News "stories are therefore strongly shaped by journalists' considerations of their target audience, the sources they draw on, their professional norms, and institutional practices" (Hodgetts, et al., 2008:43). The media assign different values to HIV and AIDS news events by emphasizing them to different degrees. For example, a news report with a large heading in a newspaper or magazine placed at the top of the page with an uneven number (e.g. pages 1, 3 and 5) carries more weight than a report with a small heading placed at the bottom of a page with an even number (e.g. pages 2, 4 and 6). Equally, commonly known is that the selection of news (i.e. the newspaper's decision on what to publish, where to publish it and what to leave out) persuasively affects how the media audiences estimate or perceive the news item or issue (Jeong, 2007). These are equally applicable to the broadcast media news production, in addition to time allocated to, and placement of the news item in the news bulletin.

Mercado-Maetinez, et al. (2001:241) shows in their study that reporting on health conditions including HIV and AIDS and diabetes by the media is often selective. For example news articles' discussions on the complications of diabetes centred on organic damage, including cardiac, ocular, renal, and sexual problems, but ignored the social, economic, and emotional effects of living with a chronic condition. Importantly, there was scarcity of articles regarding prevention and rehabilitation. This same reporting pattern was also applied to HIV and AIDS.

The media frame and reframe public health problems (such as HIV and AIDS) over a period of time in the course of their coverage of such issues, and thereby build the direction of public discourse and of the issue at hand (Lawrence, 2004:69). Media frames are in two main categories, namely systemic or macro and "individualizing" or micro frames. Specifically, systemic frames are shaped in terms of involuntary risk, universal risk (risk to everyone), environmental risk, and knowingly created risk, while "Individualizing" frames limit the causes of a problem to a particular group of individuals, often those who are afflicted with the problem, and place the blame squarely on their individual behaviour. Study shows that health problems become responsive to broad policy solutions when they are framed or reframed in systemic terms or frames because such framing broadens the focus of public discourse on the issue, and assign responsibility to government, business, and larger social forces (Lawrence, 2004:56-57). There is a strong indication that media framing of health problem (such as HIV and AIDS) is based on the degree of risk posed by the health problems to the general public. This type of framing usually attracts and influences public policy responses.

3.5 MEDIA COVERAGE OF HIV AND AIDS

Issues relating to media coverage of HIV and AIDS have drawn the attention of researchers for some time now. One of such research is a comprehensive study of media coverage of HIV and AIDS in 2004 covering a 22-year time period from the first news reports of HIV and AIDS in 1981 through December 2002 (Brodie, Hamel, Brady, et al., 2004:1). Quantitative research approach was used in conducting the research. The study titled *AIDS at 21: Media Coverage of HIV Epidemic 1981-2002* has a total of more than 9,000 news stories from major U.S. print and broadcast media.

The analysis indicates that the total coverage of HIV and AIDS increase in the early 1980's, peaked at about 5,000 news stories in 1987, and steadily declined to less than 1,000 news stories in 2000. There were intermittent significant rise in the number of HIV and AIDS stories resulting in minor peaks in coverage due to some major developments in the epidemic. From 2000, there was gradual decrease in media coverage on the USA population and, according to the study, this could be linked to press "fatique" in covering the disease within the country (Brodie, Hamel, Brady, at el., 2004:7).

The most frequently portrayed population in the broadcast news was health care professional (20% of broadcast stories), while gay men received only 3% of the broadcast stories. Teenagers and young adults (3 per cent), minorities (1 per cent), and women (1 per cent) were other groups rarely portrayed in the media coverage. Stories with focus on government funding for HIV and AIDS and philanthropic fundraising efforts increased in the course of time but those about HIV transmission and social issues such as discrimination and housing declined. Furthermore, a decreasing number of stories have educational components (e.g., information about HIV transmission).

A research on press coverage of HIV and AIDS covering the period of 1987-1999 was conducted in Papua New Guinea (PNG) by Collen (2000). Two popular and widely circulated PNG's daily newspapers, *The National and the Post Courier* were sampled for this study, and their HIV stories within the period of study were quantitatively analysed. The research findings revealed that while the newspapers covered HIV and AIDS stories, their editors and journalists preferred to report official figures for HIV together with news items on budgets, workshops and international donations. There were no educational messages on HIV prevention (Cullen, 2000:233). The *National* recorded 13 news items in the first three months of 1999. On the scope and focus of press coverage, news items on HIV workshops, the latest infection figures and "harm" categories received the largest number of stories (Cullen, 2000:166). The category "harm" refers to a news story that describes the consequences of contracting HIV, namely stigma, sickness and death. News item on HIV and AIDS prevention and protection appeared only once in the

first three months of 2000. This last finding was repeated in another study (Cullen, 2005:144), thus showing that media coverage of HIV in PNG is event driven. The study noted that the language and tone of stories covered did not show serious sensitivity to people living with HIV (PLHIV), and that achieving a common consensus on the role and duties of the press regarding HIV and AIDS reporting is still problematic.

The findings point to the media characteristic love for the bizarre or out-of-ordinary as what defines news. It is worth stating here that media reliance on HIV and AIDS events for wide coverage of the pandemic deprives the public of much needed in-depth reporting of the disease. It therefore means that the frequency of the reports will be low – signaling to the public that HIV and AIDS is not to be taken seriously. Inversely, in-depth and consistent coverage will make the general public see it as real and serious issue. In addition, lack of serious sensitivity to those living with HIV and AIDS will mainly lead to sensationalizing of HIV stories. This is usually manifest in the kind of language used, and tone of such stories. Such has the tendency of promoting stigma and discrimination, has led to committing of suicide by, and murder of the infected, and can prolong the pandemic by driving the infected and the infection underground.

Another study on media coverage of HIV and AIDS was carried out by Panos Institute (2004), titled *Lesson for today and tomorrow: An analysis of HIV and AIDS reporting in Southern Africa.* The Southern African regional content analytical study focused on newspaper HIV and AIDS story outputs from 1985-2003. The sample population for the study was eight South African countries including South Africa, Namibia, Botswana, Lesotho, Zimbabwe, Swaziland, Malawi and Zambia. Qualitative and quantitative research methods were applied in this study to determine the quality and quantity of HIV stories. The researchers applied random sampling technique to select newspaper articles for analysis (Panos, 2004:16). The study finds that press coverage of HIV and AIDS in the eight countries in the late 1980s showed understanding of the disease and improvement in the quality of HIV and AIDS stories. Unlike this period, there was a lack of understanding of HIV and AIDS, media sensationalism of the disease, and insensitivity to the disease sufferers in the early 1980s. The 1990s witnessed a transformation of the descriptions of the disease and language used in its communication. However, stories on HIV and AIDS were still largely personality and event-driven and there were few adequately trained staff to report on this pandemic (Cullen 2007:3).

The study revealed that the press in all the sampled eight Southern African countries did not have inhouse policies on HIV and AIDS, which translates to low organizational attention and seriousness to

coverage of the disease. Moreover, HIV and AIDS is treated as a health issue, and not as a social and developmental issue. On the quantity and quality of coverage, the study reports that the media "remained a major source of information on HIV in the region, but failed to decode technical jargons and avoided a pro-active and investigative approach to the problem" (Panos, 2004:48). The study calls for adequate and formal training of journalist, particularly editors on HIV and AIDS reporting, and the amplification of the voices of those infected and affected by the disease.

This call is quite justifiable and needs to be taken seriously by the appropriate authorities. Adequate and formal training of journalists on HIV and AIDS education and reporting is necessary to enable them know: what to report and what not to report in their coverage of the pandemic since the coverage deals with individual lives (the infected and the affected), and how to report on the pandemic (including interpretation of the statistics – prevalence and incidence rates. It equally deals with presentation and interpretation of the pandemic's impact on the society and the nation – including individuals and families, social, economic, cultural, educational, agricultural, health, and Governance sectors of the country, and how to be pro-active and apply investigative approaches in their coverage of the disease. They should be able to positively fight against stereotypes, stigma and segregation instead of "knowingly or unknowingly" perpetuating these through their coverage of the pandemic and their use of words and grammar construction.

Specialized training will equip media practitioners with the skill of interpreting scientific research findings and developments (education) for their readers, listeners and viewers and not just being a channel for the transmission of such findings and developments to the public. It will help guide against any media fatigue that may develop over time in the coverage of the pandemic because journalists (particularly the editors) will quite understand the need for continuous coverage of this pandemic until at least the incidence rate is brought down to zero and the prevalent rate starts to recede or cure found for the infection. Journalists will be able to continue to find new angles to the story of HIV and AIDS and thereby keep it interesting and attractive to themselves and their audiences. Equally, the amplification of the voice of the infected and the affected will introduce the perspective of these people to the HIV and AIDS reports. This will give human face to the disease and debunk the understanding of HIV and AIDS as a 'dead sentence' through the elimination of fear of the disease, and will strategically fight against the social stigma and discrimination against people living with the disease.

In a content analysis of South African Daily Dispatch newspaper published from 1985 to 2000, the researchers found the coverage of HIV and AIDS by the newspaper event based. There was more than

20% decrease in total HIV and AIDS articles in each successive year from 1985 to 1995, and 30% increase from 1995 to 2000 in total HIV and AIDS coverage (Connelly and Macleod, 2003:3). The increase in the newspaper's 2000 HIV and AIDS output was attributed to the hosting of 13th International Conference on AIDS in Durban, South Africa in July 2000, President Mbeki's questioning of the link between HIV and AIDS during that period, as well as the local government election which held on December 5th, 2000 (ibid.).

The reduction in the media coverage of HIV and AIDS in South Africa as at the above study period calls for concern because HIV and AIDS is still active in the society and spreading even up to this present moment. If this is the general picture with the South African media the future may be quite bleak. Decrease in the quantity of media coverage of the pandemic irrespective of the reasons (worse when it is consistent over a long period) will trivialize this issue and push the pandemic to the background both at the media and the audience levels. Thoughts about this are scaring because we may as well be starting afresh from the beginning of HIV and AIDS in this country, as in the early 1980s.

Additionally, a content analysis of Press coverage of HIV and AIDS conducted in Papua New Guinea (PNG) by Cullen (2005) tried to find out the trend of the coverage since the previous study by Cullen (2000). Specifically, the comparative study sets out to know whether reporting of the disease in the Papua New Guinea (PNG) press increased or decreased over time and whether certain major news topics - HIV figures, workshops, budgets, and donations- continued to dominate coverage or if this now includes stories on prevention and people living with HIV (PLHIV). The sample population was *the National* and *the Post Courier*. Data for the three months study was collected from the websites of the two newspapers and this included all news items on HIV and AIDS within the period.

The study shows increased news coverage of the disease in both newspapers during the period of study (Cullen 2005:145). However, the scope and focus of press coverage remained constant. Just like Cullen previous research outcomes, HIV workshops, the latest infection figures and "harm" news items scored the largest number of stories (Cullen, 2000:166).

The media made efforts to humanize the story and be sensitive to people infected and affected by the disease. A significant finding of this study is that no news items on prevention and protection (educational messages) appeared in the press within the study period, and that only one such news item was published in the corresponding period in the first three months of 2000 (Cullen, 2005:144). It recommended that editors and journalists in PNG should widen coverage of the disease and report HIV

as a story with medical, social, cultural, political, economic, relationship and religious aspects. This will widen the scope of coverage of the disease and make the needed adequate information available to the general public.

It has however been shown that media coverage of health conditions can vary over extended period of time. In a detailed content analysis of more than 2,100 randomly selected U.S print and broadcast media stories of managed health care over the period 1 January 1990 to 30 June 1997, there were obvious changes in coverage over the seven and a half year period (Brodie, Brady, and Altman, 1998:10). According to the study, the early year's media focus was on managed health care as a business story, and later year's focus was more on patient care and public concerns about backlash. In addition, media source caused substantial difference in coverage, but the large majority of all the media coverage was neutral in tone. However, the tone of the coverage became more critical over time and differs intensely by media sources.

3.5.1 Quality of Media Coverage: Accurate and Balanced HIV and AIDS News Reporting

Health news reporting (including HIV and AIDS) should ideally be accurate, balanced, and complete so that the people should be properly informed and ready to participate in decision making about their health (Schwitzer, 2008:0700) and general wellbeing. In contrary situation, the people may be incapacitated to actively participate in this crucial process.

In a 207 newspaper and television stories studied by Moynihan, Bero, Rose-Degnan et al., (2000:1645), the media was found to give incomplete health information. Schwitzer (2008) study on health news stories collaborates this finding. The 22 months evaluation of 500 U.S newspaper and television health news stories shows that "between 62% - 77% of stories failed to adequately address costs, harms, benefits, the quality of the evidence, and the existence of other options when covering health care products and procedures" (Moynihan, Bero, Rose-Degnan et al., (2000:0701). Public opinion depends on frame of reference of the media. Therefore such high rate of inadequate reporting raises some doubt on the quality (and of course quantity) of information people receive from the media on health news topics including HIV and AIDS issues.

Accurate and balanced reporting is equally critical in medical news reporting including HIV and AIDS. It will enable people to make right decisions and choices concerning their health, enabling them to avoid uninformed decisions and action that will likely have high cost and health implications. Moynihan et al (2000:1645) research on medical news report in the United States found the media dishonest in their

attribution of medical reports. The research indicates that the media did not report financial ties between study groups or experts and pharmaceutical manufacturers in most of their articles about pharmaceutical products and failed to include complete information on other areas relevant to their audiences such as benefits, harms or side effects and costs of treatment. A survey in Canada finds similar results about the media (Cassel, Hughes, Cole, et al., 2003:1133-1137). Another study by Schwartz and Woloshins, (2004:226-228) collaborates these findings but calls for more direct and honest medical news reporting, and suggests that this should include the research results on the side effects of medical drugs

An ongoing analytical research on the quality of Australian medical news reporting analysed a total of 104 news articles from five Australian online news and eight print media. The study shows that the Australian media outlets often do a poor job in conveying important information on new medical treatments to the public. The study identified the main areas of the media weakness as inadequate presentation of evidence on benefits and harms of the medical interventions, failure to mention the costs of treatment (when relevant), and failure to obtain independent expert commentary (Smith et al., 2005).

In the light of all these, there is the possibility of journalists miscommunicating health (e.g. HIV and AIDS) knowledge due to its technical and specialized nature. Some of the reasons research has given on why journalists may find it difficult to write accurate and balanced health news articles (for examples, on new medical advances in HIV and AIDS, and in other health areas requiring specialized reporting) include lack of policy decision on the specific health area (e.g. HIV and AIDS) by the media, lack of time or space for the journalists, problems accessing independent expert opinion, pressure from editors, commercialization, and their general lack of scientific and medical knowledge (Larsson et al., 2003). This last point greatly contributes to problems in journalist's use of scientific and medical terminologies and "reporting of specific findings from medical research (Hodgetts, et al., 2008:45). Lack of technical training among journalists therefore hampers accurate reporting of health research (Pettersen, 2005:5). However, the Australian study by Smith et al. (2005) suggests that journals and researchers should be more active in communicating with the media and the public in other to improve the situation. In other words, both editorial staff, authors of journal articles, and researchers should take responsibility for improving the overall health communication situation (Pettersen, 2005:5).

Mercado-Maetinez, et al. (2001) tried to ascertain specific messages that the Mexican print media provide to their readers about chronic diseases in their comprehensive review and content analysis of secondary source media reporting in the Bolletin (Bulletin) – a publication of the Mexican Department of Education and Health. The study covered 12 national daily newspapers and 3 magazines. The results

indicate that at times the media disseminate an incomplete and often biased picture of prevalent chronic diseases in Mexico - specifically, they gave more coverage to AIDS than to other major chronic conditions; they reproduce the biomedical model of disease and do not address topics important to certain segments of the population, including the patient, and the media at times exaggerate the competence of health services (Mercado-Maetinez et al., 2001:235). Significantly, the perspectives of the people suffering from the diseases are hardly represented in the news articles. For instance, only 5 "letters to the editor" articles represented the viewpoints of those who suffer from diabetes. There was none from people suffering from HIV and AIDS (ibid.:240).

The media have obviously become a conduit for airing public concerns as well as providing accurate information to challenge HIV and AIDS stigma and discrimination (UNAIDS, 2005). In their reporting of HIV and AIDS, the minimum expectation from the media is that they report accurately and comprehensively on how the pandemic is unfolding in South Africa, and in other countries. Yet, according to Cullinan (2004:2), the South African media have not substantially examined issues such as the reasons behind HIV and AIDS stigma and denial, despite stigma being a major barrier to dealing with the pandemic, and have not considerably covered the issues around the consistent high prevalent and incident rates in the country, and what all the different stakeholders are doing to curtail it; they have generally failed to adequately engage with, seek out, and represent the views of PLHIV in their reporting of the pandemic; they have politicized the pandemic; and failed to scrutinize the "big picture" context of HIV and AIDS (including all the risk factors, and related issues around the pandemic).

In the media coverage of TAC and President Mbeki Government conflict, the media showed their strengths through consistent reporting, provision of a voice to HIV civil society, and highlighting the lot of under-privileged South Africans. However, there were two major weaknesses of the reports; while other parties were interviewed on the issues of contention, President Mbeki and his Health Minister (Dr. Mantombazana Tshabalala Msimang) were merely reported to have said nothing, and the media did not mention that provincial governments have the authority to override any national government delay in scaling up HAART (Muula, 2008:118). This portrayed the media as obviously biased against the Government though they seemed completely unapologetic about this throughout the duration of the conflict, possibly convinced that they were fighting a good cause against "insensitive and unyielding" Government on behalf of the general public (ibid.).

This pattern of media coverage of health conditions and issues seems not to be a new development and may be the same in several countries. According to Mercado-Maetinez, et al. (2001:242), the general

picture of chronic disease (including HIV and AIDS) that the media presented in the mid-1990s was mostly incomplete, at times inconsistent, and biased towards the voices of experts and government officials. The voices of patients and their families were conspicuously absent, and their expressed concerns were not included in the journalistic coverage of the diseases. Thus, there was no informative and educative discussion of the extent, nature and types of chronic diseases (including HIV and AIDS) in the Mexican general press they studied. Their conclusion was therefore that Mexican media audiences may not be receiving a comprehensive reporting of medical conditions that accurately mirrors the extent of health problems for all the population, the economic impacts on individuals, families, and society, or the importance of preventive measures because, media reports on health conditions are not based on the extent of the significance of the issue reported but on selectivity and media interest (ibid.:243).

Although the assumptions that the media are informing and educating the society on health matters including HIV and AIDS is commonly accepted, however, some scholars have different views concerning them, probably due to findings such as the above. Some researchers have noted contradictions in the views of scientists and journalists on specific health issues (Ciesielski, Marianos, Schochetman et al., 1994). Due to the influence of economic interests and pressure, the media at times fail to provide an all-inclusive and detailed picture of the disease or any other issue in the society (Picard, 2002:02).

3.5.2 Frequency of, and Exposure to HIV and AIDS Media Output

Intensive and wide media news focus on health issues has often been shown to influence their audience behaviour. This is because heavy exposure to media content presents the issue as authentic (Bandura, 2001:281). For examples, extensive and consistent media coverage of HIV and AIDS in Uganda greatly contributed to the decline of the prevalent rate of the disease in that country, In South Africa, widespread coverage of the National HIV and AIDS Testing and Counselling Campaign saw a very high turn out of people for the programme, and also, extensive negative reporting of the adverse effects of hormone replacement therapy in America resulted in tremendous decrease in demand for the therapy (Lawton, Rose, McLead et al., 2003:845; Haas, Kaplan, Gerstenberger et al., 2004:184; Majumdar, Almasi and Stafford, 2004:1983). In addition, research has equally revealed that even brief news media exposure on health issues and conditions can influence people's health-related decisions (LI, Chapman, et al., 2008:543).

In South Africa the mass media have been used for national HIV and AIDS campaigns for HIV and AIDS prevention, awareness and education programmes such as Soul City and LoveLife. The success of the campaigns lies in the use of "large scale and intensive countrywide publicity campaigns using out-door

media, television, radios and print" (Coulson, 2002:10). This strategy was employed because the effects of mass media may be short term, thus, making message reinforcement critical for sustaining attitudinal and behavioural changes that may have been achieved through the campaign efforts. Moreover, study has revealed "a dose-response effect to mass media messages, meaning that higher exposure to mass media has a greater probability of resulting in increase in positive behavioural change" (USAID and AIDSTAR, 2011:2).

An assessment of the effect of mass media campaigns on condom use in Zambia using the nationwide 2001-2002 Zambian Demographic and Health Survey shows an overall positive effect of media exposure to condom use. The study indicates that unlike women, men exposed to the messages were 50% more likely to have ever used condoms, and that "men with the most exposure to messages were twice as likely to have ever used condoms than those with the least exposure". This confirms the study's assertion that the more exposure to media campaign, the greater the likelihood of people imbibing the positive health behaviours (Van Rossem and Meekers, 2007:352).

In their study of the Mexican print media coverage of chronic diseases, Mercado-Maetinez, et al. 2001:239-240) find the media interested in recent and topical issues and this is shown by their placing AIDS first on the list (1,986 articles) of all the chronic health conditions covered within the 5-year period studied (1992-1996), with 6 out of every 10 articles covering HIV and AIDS in the print media. The remaining 4 out of every 10 articles dealt with other chronic conditions, comprising arthritis, tuberculosis, diabetes, chronic respiratory disease, cancer, cardiovascular disease, cirrhosis of the liver, epilepsy, and other diseases. These ratios remained consistent over time but, the total number of news articles published within the study period varied, and increased generally. Moreover, the reports portrayed HIV and AIDS as a disease requiring urgent and serious consideration by all.

These findings seem to indicate that people need to be regularly presented with information on a particular issue for them to be influenced, and their thinking swayed towards accepting such information and live by it. Large-scale, consistent, and persuasive messages and news information dissemination presents such issue as important to the people. Where the media and other stakeholders are not taking HIV and AIDS information and education seriously in terms of consistency and reach, the society will not be motivated to see the need to start making the necessary changes in their lifestyles required to address the pandemic despite its widely known high prevalence and incidence rates and high level of HIV and AIDS related death. South African Government states in its 2011 census report that the country has lost

4.4 million people to HIV and AIDS since its identification in the country, and 31% of all deaths in 2011 were AIDS-related, and the figure is expected to rise to 33% in 2015 (SAIRR, 2012).

3.6 AUDIENCE PERCEPTION AND ATTITUDE ON MEDIA COVERAGE OF HIV AND AIDS

As an important tool in the fight against HIV and AIDS, "media portrayals of HIV and AIDS and those affected by the disease can strongly influence public perception of the disease and risk' because 'it's a relatively quick and inexpensive channel of disseminating important news" information (Pickle, Quinn and Brown, 2002:429). This can bring about the reversal of the already widely held stereotypes and prejudices about HIV and AIDS disease, influence the acceptance of the necessary attitudinal and behavioural changes, and ultimately contribute to the reversal of the pandemic.

The media are actively involved in the construction of public understanding of HIV and AIDS, and individual's and public's beliefs about health and illness are formed from the discourses and constructions they are exposed to (McCombs, 2004:1) mainly through the media, and to a lesser extent through other channels. Studies and media reports have shown that audiences are not passive recipients but actively interpret messages they receive and attach their own meanings to them (Chanda., Mchombu, and Nengomasha, 2008:191). Thus, they are quite able to make up their own views or opinions on the quality of, and extent of mass media HIV and AIDS news reporting. As consumers of the media items, such outcomes will also influence their responses to HIV and AIDS media contents and programmes (ibid.).

In Zambia, women who were educated about HIV virus have been reported by *Mail and Guardian*, (1-7 November, 2002) to have even exposed themselves the more to HIV and AIDS infection by offering sex for money; specifically, two Zambian dollars for condom protected sex, and double if the client prefers not to use a condom, during a famine because they preferred to die of AIDS than of hunger (Nattrass, 2002:5). In South Africa, studies have shown that despite the high level of knowledge of HIV and AIDS among the youth, they contribute more to the current high incidence rate in the country by still not regarding themselves as vulnerable to the disease. Their attitudes and behaviour have generally remained unchanged with consistent high-risk behaviour despite several media campaigns executed by the Government and non-governmental agencies to halt further spread of the pandemic (Matsoso-Makhate and Wangenge-Ouma, 2009:76; Nupen and Wangenge-Ouma, 2009:87; Simbayi, Kalichman, Jooste et al., 2005).

A study by Khoza (2011:2) on young adult's perception of the effectiveness of HIV and AIDS awareness campaigns in reducing risky sexual behaviour among them, finds that although young people regarded

HIV and AIDS campaigns as comprehensive because they convey simple and clear HIV and AIDS messages, and they have all the valuable information regarding HIV and AIDS, yet young people are convinced that nothing could be done to modify their sexual behaviour because human beings are ignorant by nature. Factors limiting the effectiveness of HIV and AIDS media campaigns among them were stated as their cynical attitudes, poor socio-economic factors, alcohol, drug abuse, peer pressure, and the love of money and material things.

Despite their high level of HIV and AIDS education and awareness, a newspaper (*Capricorn Voice*) reports that more than 9000 students of the University of Venda, South Africa, declined to undergo voluntary HIV testing, an initiative launched by the Limpopo MEC for health, Dikeledi Magadzi, for fear of testing positive - due to their lifestyle, and the accompanying stigma. The partnership initiative between her department and the University of Venda was decided following the discovery of a foetus in a dustbin at the University which brought to the forefront the issues of teen pregnancy, HIV prevalence and other sexual transmitted diseases (Mandiwana, 2012:1)

In addition, an evaluation of USAID initiated three year mass media campaign; VISION Project in Nigeria that focused on reproductive health and HIV and AIDS awareness and prevention, and aimed to increase use of HIV and AIDS services, child survival and family planning, shows that the campaign reached a large portion of the population, but despite the relatively high percentage of respondents that believe consistent condom use can reduce the risk of HIV infection, and the high percentage of those that have discussed HIV and AIDS with a partner, the number of respondents who are reported to have used a condom at last sex is relatively low. The study found a relationship between education and HIV and AIDS awareness and perceptions on the use of condom to reduce the risk of HIV transmission (Keating, Meekers and Adewuyi, 2006:132). However, the study suggests that people's exposure to HIV and AIDS media programmes is increasing their willingness to discuss HIV and AIDS with their partners, and also increasing people's knowledge about the benefits of consistent condom use for reduction of HIV and AIDS risk (Keating, et al., 2006:133).

Exposure to biased or negative HIV and AIDS media reports has serious implications. In a qualitative analysis on the agenda setting role of the media concerning HIV and AIDS in South Africa, Ngan (2007:53) finds the media alarmist in HIV and AIDS reporting by focusing on the prevalent rates and impacts of the disease on the society. He argues that such reports represent a crisis without providing some solutions for people to live better and positively with the disease, or give hope of living longer to the infected and affected individuals.

A study on the African Americans found the media to be effective in transmitting clinical health information from outside sources, including the health industry, scientists and medical communities, but rarely make such information directly relevant to their target audience (Pickle, Quinn, and Brown 2002:440). The media were found to have neglected political, socioeconomic, and policy information that can contextualize their audience's health issues and empower them to act as informed citizens in their coverage (ibid). According to the report, any serious effort against HIV and AIDS needs to firstly, address inequities perpetuated by the existing larger economic, political and social setting, and secondly, embrace education as a major strategy for prevention and treatment issues (Pickle, Quinn, and Brown 2002:440).

De Wet's (2004:105) study of the South African media HIV and AIDS news agenda shows that politicians were the most prominent in HIV and AIDS communication during the period of the study due to President Mbeki's stance on HIV and AIDS. The study also indicates that out of the sampled newspaper, English newspapers (*Sunday Times, Star and Sowetan*) published quite a higher number of HIV and AIDS output than the Afrikaans newspaper (*Beeld and Rapport*), possibly because the pandemic is not a very serious issue on the Afrikaans news agenda. This could be an instance of the public interest determining the media agenda for the day (Hafez, 2007; Clausen, 2006; Lee et al., 2002). There was also virtually absence of the voice of those living with HIV and AIDS and their affected relatives in the news reports, possibly, due to fear of the social stigma against them.

Citing Murdock (1998:206), De Wet (2004:110) states that "the media is the main source of information and explanations of social and political processes for most people", but the study provides a different representation on the sources of HIV and AIDS information and knowledge in South Africa to the public. While there were little information about the clinical, economic, human interest, community and cultural aspects of the disease, the political agenda was high above any other issue (due to the standing out of political news sources), and this could possibly create insecurity and confusion among media audiences. Such a situation, he concurs with (Callaghan and Schnell, 2001), could influence the media to communicate unedited messages to their consumers, with resultant serious implications.

A media evaluative study by Swanepoel, Fourie, and Froneman (2007:74) titled "HIV and AIDS Reporting in Three South African Newspapers" found that the South African media – *Sunday Times, Rapport and the Sunday Sun* - partially follow the interest group guideline for HIV and AIDS reporting; their HIV and AIDS awareness raising efforts are satisfactory but their agenda setting needs improvement. They lack

critical in-depth reporting of the pandemic despite comprehensively covering the related issues. Additionally, they tend towards sensational reporting and are unable to bring alternative angles to their coverage. The media emphasize the victim image often and are inconsistent in the use of HIV and AIDS sensitive language. Their use of news sources is poor thereby negatively impacting on their news accuracy. This type of reporting will leave the public with shallow and inaccurate knowledge of the disease and its various aspects, and issues around it. This will heighten public fear and anxiety about the disease. On the other hand, accurate and comprehensive knowledge of the disease will give understanding of the disease and hope to the general public, and help improve the success against the pandemic.

A decade study by Kimberly (2006:43), addressing among others, "the shifting focus of concerns about the media, and ultimately, variation in problems for health promotion", shows that the popular media alone are not likely to facilitate understandings helpful to individuals coping with health challenges through its coverage of such health issues, but is likely to perpetuate social and political power differentials concerning health-related issues. According to the research, competing groups are making claims on the media system and popular media marginalize certain interest. This may impact on the extent of media effect on such marginalized individuals or interests. The study called for urgent media-community partnership for effective community interventions against the HIV and AIDS. Other studies by Hoffman-Goetz, Friedman and Clark (2005:75), and Wallace & Ballard (2003:80) found "media health issues poorly covered and information often ambitious or incomplete".

However, a survey of nearly 4,000 young South Africans on their attitudes towards the media role in HIV prevention and education shows that an overwhelming number of them (96%) think that the media are doing a good job communicating with the people about HIV and AIDS, and many of them (89%) reported personally taking action (including making positive choices about sexual behaviour) due to what they have learnt from the media (Kaiser Family Foundation and SABC, 2007:1). Eighty three percent of the respondents think that South African national HIV and AIDS prevention and education campaigns have been very effective in teaching people about HIV and AIDS. Each of them (Soul City, LoveLife, and Khomanani) has been very important personally to young people in learning about HIV and AIDS and helping them make choices about sexual behaviour (ibid:2).

3.7 THEORETICAL FRAMEWORK

A theory is a statement, or a group of logical, related statements (hypotheses) presented as an explanation of a phenomenon, or that stipulate the relationships between variables in order to explain phenomena such as human behaviour in some or general population. It therefore comprises one or more hypotheses (Welman and Kruger, 2004:11, 17). This research is theoretically based on five cognitive theories of mass communication, namely, the agenda setting, meaning construction, functional approach to mass communication, accumulation, and social responsibility theories. The knowledge of these theories is the key for understanding the capability of the media in social engineering and their ability to positively impact on the national HIV and AIDS mitigation and management efforts.

3.7.1 Agenda Setting theory

News content in the media is influenced in various ways (Swanepoel, Fourie and Froneman, 2007:76). The basic tenet of the agenda-setting theory is that the media consciously or unconsciously, create a particular image of reality in public mind (Fourie, 2004:304). The media do this by daily exposing us to events that they deem important (Iyengar and Kinder, 1987; McCombs, 1981). By omitting certain events and issues, and emphasizing some above others (priming), the media "establish a particular way for media users to think about reality" (Fourie, 2004:304).

In their original explanation of this theory, McCombs and Shaw (1972:176), state that:

"In choosing and displaying news, editors, newsroom staff, and broadcasters play an important part in shaping political reality. Readers learn not only about a given issue, but also how much importance to attach to that issue from the amount of information in a news story and its position. In reflecting what candidates are saying during a campaign, the mass media may well determine the important issues – that is, the media may set the "agenda" of the campaign".

This ability of shaping the day's realities for the public applies not only to politics but is applicable to all spheres and issues of social life including HIV and AIDS. Thus, the mass media have the capacity to form and direct people's perceptions and interpretation of reality (Fourie, 2010:141). The extent of the news coverage given to an item or issue in the society, "influences the rank order of public awareness and attributes to the significance of an issue" (McQuail, 2000:426). Put differently, the degree of importance placed on an issue on the media agenda has a direct determinant effect on the public agenda (Dearing and Rogers, 1996:8). Conversely, public interest and interest groups could equally influence the media agenda (ibid.:3), including of course, the media agenda on HIV and AIDS.

The theory relates to the direction of news coverage. This involves the range of viewpoints, representations and subjects selected for construction of the news 'and how they are ranked or accorded legitimacy and priority' (O'Sullivan, Hartley, Saunders, et al., 1994:8). The media is able to pick and choose from the rhetoric of the news makers, and could in most extreme case, "abandon all message inputs by other players and create a purely media-generated version of the debate" (Callaghan and Schnell, 2001:188) – a sort of assertion of its power. Though journalists and editors argue that they merely focus on truth, accuracy, objectivity, and balance in their news reporting, research suggests that they "exert considerable power over the media's construction of reality" (ibid), due to the influence of their individual values and ideologies. The agenda setting theory relates to the role of the media in the efforts against HIV and AIDS as reviewed in the literature.

3.7.2 Functional Approach to Mass Communication Theory

This theory explains that the mass media serve many functions in society. According to this theory, the audience's uses of the media are surveillance of the environment, correlation of the environment, cultural transmission, entertainment, and mobilization of the people. It is known that "the provision of popular and popularized knowledge" by the general media through supply of information, entertainment and education "is an important constituting and formative element of the public sphere" (Fourie, 2010:139; Fourie, 2001:277-288; Thomass, 2003:33).

Surveillance means the media observe social phenomena or their indicators, and supply news and information (from such) to the public, correlation is that the media relays the information to the public after they have selected, interpreted, and criticized it, while cultural transmission refers to the media's reflection of the public's own beliefs, values and norms. Entertainment refers to the media function of entertaining its audience in their free time, thereby providing them with an escape from everyday life, while mobilization means that the media promotes society's interest especially "in the sphere of politics, war, economic development, work and sometimes religion" (McQuail, 2000:79-80), as well as in all health areas including HIV and AIDS. In all these, the quality and value of the information and knowledge from the media is expected to be above board, in order for them to adequately present the day's occurrences, expose and mobilize their audiences for active involvement in social endeavours (McNair and Hibberd, 2003:272-283; Fourie, 2010:139).

Despite the critical importance of the media as one of the major social instruments expected to contribute to the harmonious and cohesive functioning of society, the media is known to rely heavily on news

agencies, and "on major sources of news such as governments (and their parastatals), who manipulate news in their favour", instead of the media independently gathering, writing and distributing news (Fourie, 2010:138). This theory deals with the extent of media coverage of the pandemic as reviewed in the literature.

3.7.3 Meaning Construction Theory

Many theories emphasize that media users act and understand something and that their behaviour is based on and described by what they know, and/or what they believe. These theories focus on how the media condition the audience to attach certain meanings to words, concepts and objects. The theories explain that the audiences acquire their knowledge and that the meaning attached to something comes from the meaning the media ascribe to that something (Fourie, 2004:302).

The media expose members of the society to both the known, and new but unknown "developments, concepts and ideas to which the media apply certain meaning which" they adopt" (Fourie, 2010:242). Examples of such concepts relating to HIV and AIDS disease are HIV and AIDS, stigma, discrimination, mass media, HIV and AIDS sero-prevalent rate, ARV, opportunistic diseases, CD4+ count, gay, lesbian (homosexuals), heterosexuals, HIV infection risk behaviours, STD, and multiple sex partnership. Concerning these concepts, most members of the society know and can relate with them by their often simplified meaning from the media (Fourie, 2010:242). This theory relates to the media role and audience perception of media coverage of HIV and AIDS in this study.

3.7.4 Accumulation Theory

The proponents of this theory believe that if the media repeatedly focus on an issue(s), and in a consistent way over a long period of time, people's attitude and behaviour can be changed. The various forms of the media can collectively cause significant changes to occur in people's beliefs, attitudes and behaviour; if they cooperate with each other by presenting the same interpretation of the public issue and s (Fourie, 2004:302; Fourie, 2010:238).

This theory clearly explains the role of the media in changing people's attitudes about issues and topics such as sex, HIV and AIDS infected and affected individuals, status testing, counselling, and politics over a period of time (Fourie, 2010:239). This therefore, means that if all the mass media in South Africa report in the same way (either positively or negatively) about HIV and AIDS and its related issues, over a lengthy period of time, such reporting can have an impact on people's perception of the pandemic and

the people it affects. According to Pratt, Ha, and Pratt (2002), for HIV and AIDS to be placed high in the public agenda, particularly in Africa, it must be heavily covered by the media.

De Fleur and Dennis (1994:579) gave four basic component of this theory as: The mass media begin to focus their attention on a specific topic problem, situation or issue such as race, discrimination, crime, health, producing messages about such matter; and the mass media continue to collectively, consistently and persistently focus their attention on the matter, ensuring that their presentations collaborate with each other; individual members of the public will increasingly become aware of the messages, and there will develop a growing comprehension of the interpretation of the topic presented by the media. Then, the ensuing increasing comprehension of the message on the topic from the media begins to form the meanings, beliefs, and attitudes that serve as yardstick or benchmark for the audience members. Thus, minor individual-to-individual changes will accumulate, leading to the emergence (albeit slowly) of new beliefs and attitudes that will cause significant changes in the norms relating to the appropriate behaviour concerning the topic (See also Fourie, 2010:238). This theory also relates to the role of the media, and their coverage of the pandemic as reviewed in the literature.

3.7.5 Social Responsibility Theory

This theory endeavours to reconcile the ideas of independence and freedom with responsibility towards society (Roelofes, 1996:53-54). It is based on the premises that: the media are under an obligation to fulfill their social functions, especially with regard to information transmission and the creation of a forum for divergent viewpoints; media independence should be emphasized in relation to their responsibility towards society; and the media should meet certain standards in its operations (ibid.).

According to McQuail, the basic principles of this theory are that the media should accept certain responsibilities towards society; they should fulfill their responsibilities mainly by setting professional standards with regard to the supply of information and the truth, accuracy, objectivity and balance of their reporting; collectively, the media should represent all social groups and reflect the diversity of society by giving people access to a variety of viewpoints and the right to react to these viewpoints (McQuail, 1987:116-118). The mass media is morally responsible for (and accountable to) the public knowledge about HIV and AIDS, and should appropriately apply their critical, analytical (and advocacy) power in dealing with the disease (Stein, 2002:80). Addison (1993), cited in De Wet (2004:101), sees the media performing its social responsibility when it is airing all points of view, constituting itself a forum for debate, and can campaign, educate or propagate a certain viewpoint (on behalf of the society). This is related to the watchdog function of the media as the 'Fourth Estate of the Realm'.

All levels of Government, the society and media professionals are in consensus that the mass media should be actively involved in the efforts against HIV and AIDS in order to ensure the success of the endeavour. In this regard, they are therefore required to be truthful, fair, accurate, objective and relevant (McQuail, 1994:124) in carrying out this responsibility, and as a mark of its interest in the social effort. As a sign of social obligation, they should effectively communicate the various issues around HIV and AIDS and educate the public through adequate reporting, presentation and clarification of the goals and values of the social effort against the disease. This will justify media ownership as a public trust (McQuail, 1994:ibid).

According to Ajibola (2009:55), the media should offer a true picture of social realities and place issues at the centre of debates since most members of the society rely on the media for their daily information need (including HIV and AIDS). Therefore, "It will be a disservice to the society if HIV and AIDS is not put on the media agenda as regularly as it ought to be" (Ajibola, ibid). This service will include among others, adequate information on the mode of transmission and in-depth knowledge of the virus, its transmission prevention methods, available care giving, counselling, testing and treatment services, as well as the strategies for managing and coping with the disease. Ajibola (2009:83) further argues that:

"by adopting a social responsibility approach, the media would have taken an ethical stand, which is a duty to ensure that members of the society consistently receive a truthful and comprehensive account of all aspects of HIV and AIDS. By so doing, the media are able to generate the type of necessary messages that will make people think more carefully about the behaviours that may put them at risks".

This theory deals with the role of the media, extent of its coverage of the pandemic, as well as the audience perception of their role in the efforts against HIV and AIDS prevention, management and control.

3.8 SUMMARY OF CHAPTER

Greater progress in reducing the rate of new HIV infection must be achieved in order to start reversing the global HIV pandemic, and sustain the gains recorded so far in expanding HIV and AIDS treatment. This applies to South Africa, as well as to all other HIV and AIDS pandemic threatening countries. The public depend on the newspaper, radio and television for most of their health and medical knowledge (including HIV and AIDS). The mass media are therefore needed in reducing the incidence rate (new infections) and sustaining gains in expanding treatment access and reversing the pandemic. According to

South African Government, the country's HIV and AIDS incidence rate is still high, and outpacing prevention efforts. This may be the same in most countries experiencing HIV and AIDS pandemic.

Prevention is generally known to be the only hope short of a vaccine for slowing the spread of HIV and saving the general public from new HIV infection (Stine, 2009:221). Provision of HIV and AIDS preventive information, education and awareness through the media has been helpful in this area. It is therefore, evident that the media have a critical role to play in HIV and AIDS mitigation and management, and are capable of carrying out their role creditably if employed effectively. Thus far, they are playing an increasingly important role in public discourse and education on critical health matters, and in the dissemination of critical information on health issues, including HIV and AIDS to the general public. It is critical that the general public should be equipped with good knowledge of the disease, and education as a powerful weapon against HIV transmission enables the transmission of potential messages that can lead to sexual behavioural changes, and reversal of the pandemic. Successes in these areas have been recorded in Uganda, Zambia, Thailand, Brazil, and Senegal.

Apart from the media being a channel for HIV and AIDS information and campaign messages, they can be a voice for the infected and the affected, can mobilize the society to show care to these people, and help to adequately address stigma and discrimination. The media contributed tremendously to the success of HIV Prevention, Treatment and Care (HTC) campaign in South Africa, Kenya and other countries.

The media are expected to adequately and accurately report on the HIV and AIDS pandemic to enable the general society to take well-informed health decision and be protected from the consequences of irrational health actions. However, the media have been shown to sometimes present biased and incomplete coverage of HIV and AIDS and its related aspects. They have been used successfully in several HIV and AIDS campaigns in different countries and in achieving HIV and AIDS campaign objectives. The use of "Edutainment"; a combination of education and entertainment, to model and demonstrate behavioural patterns that contribute to people's risk of HIV infection, in combination with the right communication media mix have proved capable of influencing social norms, and stimulating fruitful discourse in the society.

However, in some instances, media campaigns have shown to have mixed outcomes; some campaign variables have proved difficult to achieve particularly relating to some behavioural modifications due to some intervening factors internalizes by such audiences. Thus, media messages encounter mediating

factors that influence their success or not in achieving their intended objectives. Though mediating variables have effects on result, research has however shown that the more the audiences are exposed to media messages, the more likely they will respond positively to the information or message, in other words, the greater the possibility of actualizing the expected outcome or objective.

Reports have shown that people can be well informed of, and educated on HIV and AIDS, yet they can carelessly expose themselves to risks of HIV and AIDS infection; meaning that HIV and AIDS knowledge does not automatically translate to the desired audience responses. This is because media audiences have been shown not to be intellectually captives but rational enough, and can have their own views and opinions about media news information and message. In addition, they expect the media to be actively involved in developing the society, and can praise the media when they are socially responsible or criticize the media when they shun this critical role

The media initiated and sustained war discourse of the disease through their earlier coverage of the disease by using such terms as "HIV victims", "war or fight against HIV and AIDS", "full-blown AIDS (as a bomb)", and "killer disease", "hope", "win", "a battle", "a struggle" with HIV and AIDS, something that must be "combated", and "struggled against". 'They also socially propagated some stereotypical, stigmatizing and discriminating terminologies such as "scourge" and "plague" in their coverage of the pandemic.

Initially, the media portrayed HIV and AIDS as the disease of the 'other' particularly, the homosexuals, the intravenous drug users, blacks and females. In effect, sensational reporting was the order of the day. This type of presentation changed with time to disease that affects everyone, so also were their vocabularies on HIV and AIDS reporting. Later, the media started mobilizing the society to care for the HIV and AIDS infected and affected, and to recognize their right to life. Their news reports started to socially document the deeper problems and challenges arising from HIV infection, as well as endeavouring to resolve them by committing themselves to establishing and restoring the virtue, human dignity and innocence of the HIV and AIDS infected and the affected.

Through framing and reframing of HIV and AIDS and health risks in particular ways, the media have helped to change public opinion and policy making environment, and reframing has certainly become crucial in changing the opinion environment for policy change considerations. Defining a health problem in 'individualizing' or 'micro' frame limits government responsibility for addressing it, while 'systemic' or 'macro' frames burden powerful groups and hold political institutions (the Government for example)

responsible for addressing the problem. Such framing invites governmental action particularly in the areas of public policy formulation and action (Lawrence, 2004:56-57).

Though the media are recognized by many scientists as important source of medical information for the ordinary members of the society, and as a positive influence on the health care professionals and the Government (Mercado-Maetinez, et al., 2001:235), studies have found the quality and type of information from the media at times discouraging, with the potential of having adverse effect on people's health decision making.

The media HIV and AIDS news is heavily driven by news hand-out from medical scientists, Health department, medical doctors, nurses, and event based instead of the media developing HIV and AIDS stories by themselves. To avoid media fatigue on HIV and AIDS, they have been encouraged to find new angles in reporting HIV and AIDS, and develop new programmes on new issues in HIV and AIDS pandemic. Through these, both their interest and those of their audiences will be sustained concerning HIV and AIDS. However, for more impact the media can stimulate and lead open and frank discussion of HIV and AIDS, provide a platform for people infected and affected by the pandemic to be able to express their views and concerns, and challenge stigma and discrimination through provision of accurate information about this pandemic.

The theoretical framework is linked with the literature review in the sense that the media have critically recognized functions (correlation of the environment, surveillance of the environment, information dissemination, education, and entertainment of the society) to execute in the society. The society recognizes the power and ability of the media to properly executive these functions, and, therefore, expects the media to represent the people, and fulfill these responsibilities to the society. The society will either approve or disapprove the extent of media involvement in fulfilling these functions.

4.1 INTRODUCTION

Quantitative and qualitative research methodologies were employed in this research. This chapter involves the research process, sampling procedures, research and sample populations, and the data collection methods or techniques, and method of data analysis and interpretation used in this study.

4.2 RESEARCH DESIGN

Research design is the strategy for obtaining research participants (subjects) and for collecting information from them. It involves the description of what is done or going to be done with the participants (subjects) for the purpose of reaching conclusion about the research problem, hypothesis or question (Welman and Kruger, 2004:46).

This research is a retrospective and prospective analysis of the HIV and AIDS output of the mass media for 12 months; January to December 2010. Retrospective study poses a question and looks back in time to examine, for example, exposures to media HIV and AIDS reports or media efforts against HIV and AIDS in relation to the outcomes that are established at the initiation of this study (IWH, 2011). This is because "the outcome of interest has already occurred by the time the study" started (IWH, 2011). As a retrospective study, it used data that have already been recorded for other reasons except research purposes (Dean, 2004:1171; IWH, 2011), such as HIV and AIDS-related media outputs or news reports. Other examples are medical records, financial and administrative data. "The retrospective study can help to focus the study question, clarify the hypothesis (which can be tested further), determine an appropriate sample size, and identify feasibility issues for a prospective study" (Dean, 2004:1171).

In retrospective design, the criterion groups; individuals, participants, or subjects (media genres) are clearly understood, and the study focused on determining the possible "predictor variables in which they have differed in the past". As with retrogressive design, its use in this study was based on the observation that the different known criterion groups may have differences in one or more variable that could possibly be used as predictor variables in the current study. In addition, since the supposed cause of the phenomenon studied (for instance, the media reporting of HIV and AIDS and its impact in mitigating the pandemic) has previously occurred, it can not be controlled "in the sense of exposing some individuals to it and withholding it from others". (Welman and Kruger, 2004:89-90).

Prospective study asks a question and looks forward in time, watching for outcomes such as the development of HIV and AIDS pandemic and contributions of the media in controlling and stopping the pandemic, as well as the perceptions of media consumers on media reports of the pandemic. A prospective study is usually slow, time consuming and expensive to design and carry out because of the long period required to sit around and watch the selected group of subjects (IWH, 2010). Alternatively, live subjects make for a more informative interview. They are designed before data collection. Study subjects were identified (media practitioners specialized skills in HIV and AIDS reporting and media audiences or consumers) and followed forward to see whether the outcome of interest to the researcher happens over time (IWH, 2010). "In a prospective study, the baseline state of the subjects is determined, the controlled intervention is applied, and then the outcome is measured" (Dean, 2004:1172). In prospective design, units of analysis are initially measured in terms of the supposed predictor variables before their criterion group membership is checked (Welman and Kruger, 2004:91).

4.2.1 Quantitative Research Design

The study used mix method research approach and design. Quantitative and qualitative data collection methods were applied in this research. Quantitative research design was applied to both the content analytical study of the media contents, as well as the study of public perception of media coverage of HIV and AIDS. It deals with numbers or numerical data. The design focused on establishing relationships (if -- then) and on explaining reasons for changes in measured social facts. It often has a hypothesis in which the relationship between the dependent and independent variables is clarified, and tries to establish universal, context-free generalizations or results which "should be valid anywhere, irrespective of time and place" (White, Malan and Dekock, 2005:81, 82). Quantitative approach assists in numerical measurement (Sarantakos, 2000:92)

Quantitative design significantly contributed to the analysis of the quantitative information or data collected in the research process, and enhanced inference to the universe of the study. In addition, its use is justified because it follows strict rules and procedures which diminish the possibility of the researcher being biased in the study (Chanda, Mchombu and Nengomasha, 2008:192). Only the media content analysis aspect of this study was designed to cover a twelve month period. This means that a total of 366 days or editions of the sampled mass media (newspapers) were studied. The findings were compared between the media (newspaper) genres.

4.2.2 Qualitative Research Design

Qualitative research design was applied to the qualitative aspects of, or open-ended questions included in the research questionnaire. The qualitative approach assists with the meaning, experience and understanding of the participants (Collins, De Plooy, Grobbelaar, et al., 2000). It helps to "interpret and construct the quality aspects of communication experiences" (Du Plooy, 2007:29). In other words, it is used when the researcher intends to explore the meaning or describe and promote understanding of human experiences (Brink, 2000:119). It is holistic in nature and mainly endeavours to understand social life and the meaning people attach to everyday life (De Vos, Strydom, Fouche and Delport, 2005:74), by discovering, capturing and interpreting the meaning held by respondents (Chanda, Mchombu and Nengomasha, 2008:192).

Qualitative design enabled the researcher to gather in-depth information from respondents, its ability to generate descriptive non-numerical information from the analysis of the public and individual social actions, thoughts and perceptions (Miles and Huberman, 1994:6) also necessitated its use in this research. The qualitative research technique provides a medium for the sampled population to freely express its views on the research topic at any time. This makes for proper and adequate evaluation of its perceptions (ibid.:6).

4.3 POPULATION, SAMPLE POPULATION AND SAMPLING PROCEDURE

4.3.1 Population

Population or research population refers to the total population for the research, and they should meet the criteria of interest to the research (Brink, 2006). It "is the totality of persons, events, organization units, case records or other sampling units with which the research problem is concerned" (Strydom and Venters, 2004:199). Population or universe is the object of the research which may be individuals, groups, organizations, events, human products, or the conditions to which these (objects) are exposed, and the size of population is indicated by "N" (Welman and Kruger, 2004:46). For instance, N=2500, if the population size is 2500. This is the unit of analysis for any research.

The population for this study consists of all the national print and broadcast mass media available in Limpopo Province. They include national newspapers (dailies, weeklies, tabloids, broadsheets) circulating in the Province and radio stations broadcasting from the Province. Unfortunately, the researcher could not obtain the archived broadcast contents of the sampled radio stations for this study. For now, there is no television station broadcasting from the Province. Another component of this

research population is the entire people resident in all communities within the five districts of Limpopo Province.

4.3.2 Sample Population

It is usually not feasible and economical to include all the members of the population in a research project. Therefore, researchers depend on the data obtained from the sampled participants (subjects) and population out of the total or general population. (Welman and Kruger, 2004:46-47). It is a subset of measurements drawn from a population of interest to the researcher (Strydom and Venter, 2004:199). The sample size is indicated as n, and is the representative sample, or small size, image or likeness of the total population. Therefore, it should have the same proportions of the characteristics or elements of the general population or (ideally) sampling frame from which it was drawn (Welman and Kruger, 2004:46-47). However, the elements or members of the total population often differ "due to practical problems relating to the availability of information" (ibid:48).

The sample sizes for this research therefore comprise the following:

- 1. Five national newspapers with wide circulation within the province *Sowetan, The Citizen, Mail & Guardian, City Press,* and *The Star* were selected. A total of 345 issues of the selected newspapers were analysed. *The Citizen* contributed a total of 84 issues (24%) to this number, *Sowetan 107 (31%), Mail & Guardian* 37 (11%), *City Press* 88 (26%), and *The Star* 29 (8%). The period of study was January December, 2010.
- 2. Four selected communities from four out of the five districts in Limpopo Province: Bochum in Capricorn District, Thohoyandou in Vhembe district, Jane-Furse in Sekhukhune district, and Phalaborwa in Mopani. These communities were chosen by cluster sampling and thus, enabling the audience perception and attitude part of the study to be concentrated in specific sections of the greater geographical area covered by the study (i.e. the entire Limpopo Province). These communities are socially, economically and developmentally homogeneous with one another.
- 3. Next, a total sample size of one hundred and twenty people from the selected four (4) communities in Limpopo Province was sampled for this study by simple random sampling.

4.4 SAMPLING PROCEDURE

Sampling is the process of selecting a portion of the entire or total population for representation in a study (Jooste, 2010). Probability and quasi-probability sampling procedures were applied to obtain a

representative group from the media population frame which consists of the entire national newspapers that are circulating widely in Limpopo Province. They were grouped into daily, weekly and twice a week newspapers, and further classified into tabloid and broadsheet newspapers. These characteristics were represented in the sampled population for the study.

For the audience perception of media coverage of HIV and AIDS study, probability sampling procedures were used to sample representative size (120) of literate mass media consumers from the entire population of the Province. Only the literate mass media consumers were selection for this study because most of the mass media circulating and broadcasting in the Province communicate in English language. There was therefore the need for members of the sampled population to have access to the media, have the ability to personally read and or listen to them, understand and adequately interpret their contents, and be able to adequately respond to the questions contained in the questionnaire.

4.4.1 Probability Sampling

Probability sampling is based on randomization of sample selection process (Strydom and Venter, 2004:203). It enables researchers to determine the probability that any element or members of the population will be included in the sample or sampled population. It also enables the indication of the extent of deviation of the sample results from the corresponding population values, as well as the estimation of sampling error (Wilman and Kruger, 2004:47). Probability samples are characteristically more representative than other types of samples because sampling biases are eliminated (Babbie, Mouton et al., 2010:173). Moreover, "careful probability sampling provides a group of respondents whose characteristics may be taken to reflect those of the larger population" (ibid.,:232).

In this study, probability sampling comprising multi-stage sampling technique involving stratified and simple random sampling methods was used to select the sample media population for the study.

4.4.2 Stratified Random Sampling

The target media population was first stratified into different specialty groups or strata; namely, mass media comprising radio, television and newspapers. Stratified random sampling was used because the population was "composed of various recognizable, non-overlapping subpopulations (strata) that differ from one another mutually in terms of the variables" (Welman and Kruger, 2004:55). One reason and advantage of using stratified random sampling in this study is that members of each stratum are more homogeneous or alike than the total population, and where there is difference, it is equally smaller. This sampling is not cumbersome to use, saves time and money, and ensures that all the important strata are

represented in the sampled population, since the sample size is small. The study population was narrowed down to newspaper because of the challenges in accessing radio and television archived broadcast programme contents from the selected stations.

All the newspapers in South Africa were initially stratified into national and community newspapers, and national newspapers selected for this study. The national newspapers were stratified into daily, twice a week and weekly publications. Two newspapers each were randomly selected from the first and second stratum, but one from the third stratum. This sampled population also represents the tabloid and broadsheet publication.

Stratified sampling procedure puts into consideration the structure of the target population as in this study where the population embraces a number of distinct categories. The two main reasons for using a stratified sampling design in this research are (1) to ensure that particular groups within the target population are adequately represented in the sample, and (2) to improve efficiency by gaining greater control on the composition of the study sample (Trochim, 2006:2). "It ensures that appropriate numbers of elements are drawn from homogeneous subsets (with homogeneity between subsets) of" the total population organized through the application of this sampling method (Babbie, Mouton et al., 2010:191).

4.4.3 Simple Random Sampling

Simple random sampling technique was used to select a study sample from each of the stratum as indicated above. This technique enabled each element or member of the total population to have the same chance of being included in the sample and each members of the stratum had the same probability of being chosen. Simple random sample ensures representative of the population and "does not favour one unit of analysis over another" (Welman and Kruger, 2004:55). It is agreed that "random sampling is the only technique available that will ensure an optimal chance of drawing a sample that is representative of the population from which it was drawn" (Strydom and Venter, 2004:201).

4.4.4 Cluster Sampling

The population elements for the audience perception of media HIV and AIDS coverage were clustered into the existing five districts of Limpopo Province. Four districts were systematically sampled from the five districts, and one community or town randomly selected from each of them, making a total of four communities for this study. The communities or towns selected for this study are culturally, socially, economically, academically, and developmentally similar.

One hundred and twenty resident adult members of the sampled communities were selected using simple random procedure. Thirty respondents were selected from each of the four districts.

Cluster sampling was used because the sample design for this aspect of the study was "much more complex". It involved "the initial sampling of groups of elements - clusters – followed by the selection of elements within each of the selected clusters" (Babbie, Mouton et al., 2010:194).

4.5 DATA COLLECTION PROCEDURE

Two methods of data collection were used in this research: desk research and questionnaire.

4.5.1 Desk Research

Desk research method, using content analysis (referring to sifting of data from media contents) was used to collect data from each media outlet (print) to uncover frequency, prominence, themes, key ideas, output location, message type, output quality, and importance of HIV and AIDS reports. This method has the advantage of being unobtrusive by removing emotional attachment (Trochim, 2006:2), and entails "detailed, objective and systematic observation of verbal or symbolic communication" (Agnew and Pyke, 1987:85, cited in Chanda, Mchombu, and Nengomasha, 2008:192). Quantitative research design was applied in the analysis segment of the research. The media used in this study were Sowetan, The Citizen, Mail & Guardian, City Press, and The Star (national print media -newspaper).

Print Media (newspaper): Key words such as HIV, AIDS, Sero-prevalence rate, incidence rate, HIV and AIDS treatment, HIV and AIDS stigma and discrimination were assigned to HIV and AIDS contents of print media information at the start of the study. In the initial analysis, all sampled media outputs within the study period were scanned for these key words. The media outputs with the key words were referred to as "keyword outputs". This initial analysis helped the researcher to determine output rates per sampled mass medium, per month. This further determined the location of output within each newspaper edition and average article size. These key word outputs were then categorized according to the variables for this research and analysed in depth.

The variables studied under the media coverage of HIV and AIDS are:

- The quality of HIV and AIDS news reports by the South African mass media
- The sources of HIV and AIDS news stories in South African media
- The quantity or extent of South African media HIV and AIDS news reports in the study period
- The main HIV and AIDS news subjects covered by the media within the study period

- The media use of language in their HIV and AIDS news communication
- The extent of blame attribution of HIV and AIDS infection in media HIV and AIDS news reports
- The geographical location or setting of HIV and AIDS news reports in the media
- The nature of HIV and AIDS reported by the media
- The news relevance and importance of HIV and AIDS to the media

Each of the above study variables or content categories has sub-variables which were used in their study. The sub-variables were further studied using their appropriate attributes or indicators. They were studied in each of the print media included in this study and outputs from each media genre (tabloid and broadsheet publications) were compared. This helped to find out whether choices of output differ between one genre and another, and whether genre differentiation impacted on what each one covered.

The variables for audience perception of media HIV and AIDS coverage are:

- Audience' media access, use and sources of HIV and AIDS information
- Trustworthiness of the sources of HIV and AIDS information
- Public perception of media coverage of HIV and AIDS ethical issues
- Public attitude to media HIV and AIDS information communication
- Effects of media HIV and AIDS information communication on the media audience

These variables were studied with questionnaire containing open and close ended questions, and analysed.

4.5.2 Survey Research

Survey research is seen as probably the best method available for "collecting original data for describing a population too large to observe directly" (Babbie, Mouton, et.al., 2010:232). Survey was used to obtain data for the public perception of media coverage of HIV and AIDS components of this research. The characteristics of a large population are best identified and described through survey. "A carefully selected probability sample combined with a standardized questionnaire has the probability of making refined descriptive assertions" (Babbie, et at., 2010:263). This can be said concerning the variables studied in this research.

A survey is typically conducted on a relatively small sample from the total population and it requires less time and financial expenses to conduct. Few interviews are therefore required, and may result in better trained interviewers, and better control of their effectiveness. Consequently, high quality (more accurate) data (information) may be obtained through survey. The confidential nature of survey helps in realizing

this due to the greater co-operation and frankness that may be exhibited by people willing to participate (Wilman and Kruger, 2004:98). "Surveys are often of a more quantitative nature, requiring questionnaires as a data collection method. Respondents are ideally selected by means of randomized sampling methods" (Fouche and De Vos, 2003:142). All these were applied in this study.

Questionnaire

Based on the design for this study, "carefully constructed standardized questionnaire was used to provide data in the same form from all respondents" (Babbie, et al., 2010:232). A questionnaire was administered to a total number of 120 community members from four selected communities in Limpopo Province. This sought to capture the public views on media contributions to the national HIV and AIDS mitigation efforts, as well as public attitude towards HIV and AIDS media outputs within the period of this study. This segment of the study endeavoured to establish the effectiveness or ineffectiveness of the media coverage by ascertaining the public attitude towards media HIV and AIDS outputs, and any differentiation in media genre was also investigated. The questionnaire was first thoroughly pilot-tested and necessary modifications made before being utilized in this study. This is necessary because "no matter how effective the sampling or analysis of the result is, ambiguous questions lead to non-comparable responses, leading questions lead to biased responses, and vague questions lead to vague answers" (Delport, 2004:177).

Effort was made to ensure that the items (questions) in the questionnaire were relevant to the respondents, covered the topic thoroughly, followed a logical sequence, unambiguous, unbiased and short. In addition, both questions and statements were used in the questionnaire to give more flexibility in the design of items and to make them more interesting as well (Babbie, Mouton et.al., 2010:233). The audience perception respondents appropriately completed the questionnaire themselves and these were collected by the researcher together with the four research field assistants.

Each of the measurement instrument (questionnaire) has a mix of open-ended and close-ended questions. Closed-ended questions make for a greater uniformity of responses and are more easily processed. These responses or data can easily and often be transferred directly into computer format (Babbie, et al., 2010:234). The contents of the open-ended questions were analysed qualitatively, while the essence or contents of the close-ended questions were analysed quantitatively.

4.5.3 Survey Co-ordination and Control

Four interviewers were hired, appropriately trained and paid for data collection on the public perception of the media coverage of the pandemic. The training was "a good opportunity to ensure that both the researcher and the interviewer(s) have the same understanding of (all) the questions" (Babbie, et al., 2010:254) contained n the questionnaire. Each of the four interviewers were specifically assigned to each of the four districts covered in this study as a control measure and were adequately supervised by the researcher. Effort was made to ensure that only those from the selected districts and close to the selected towns and visiting points were recruited for this study.

The questionnaire was administered at selected households, government and private establishments including residential homes, Police stations, schools and business offices. The questionnaire was administered to only the selected respondents. Some were completed immediately by respondents, other respondents completed their copies and they were later collected by the researcher and research field workers and checked for completeness. The response rate for the questionnaire was one hundred percent.

4.6 VALIDITY OF CONCLUSION AND RELIABILITY

The chosen research design is suitable for this research because it helped to answer the research questions, and therefore served the purpose for which the research was undertaken. The research plan also provided response concerning the formulated research hypothesis (Wilman and Kruger, 2004:97). The measurement instruments for this research actually measured the research variables and concepts (the degree to which an instrument is doing what it is intended to do), and they were measured accurately (Delport, 2003:166). Pilot study was done on each small sample of the three different populations of this study with their respective measurement instruments to test if they will measure what they are supposed to measure. They were then modified where necessary before being used in the main study. This helped to ensure validity and reliability of this study. Efforts were made to ensure that the measurements adequately covered the range of meanings included within the different concepts in this study (content validity) (Babbie, et al., 2010:123). There is therefore content validity for this study. There is also logical relationships among the study variables (tests of construct validity) (Babbie, et al., 2010:ibid).

4.6.1 Internal Validity and Threats

The research conclusion ascribes changes in the dependent variable (mitigation of South African HIV and AIDS pandemic, attitude towards media HIV and AIDS reports, perception of HIV and AIDS media coverage, change in attitude towards HIV and AIDS) to the independent variable (South African mass

media HIV and AIDS coverage, the public, and the media personnel knowledge of HIV and AIDS) as operationalised rather than to any irrelevant factor to this research. It is therefore internally valid to the extent or degree that Y (dependent variable) is unequivocally (correctly) attributed to X (independent variable) rather than to other factors such as P, Q or R. (Wilman and Kruger, 2004:98).

According to Babbie, et al. (2010:217), the problem of internal invalidity arises when the conclusions drawn from experimental or research results do not accurately reflect what has gone on in the experiment or research itself. Apart from the independent variable, there are normally, a host of other factors which may bring about changes in the dependent variable and may therefore adversely affect internal validity of any research (Babbie, et al., 2010:217; Wilman and kruger, 2004:98-99). To promote internal validity, it is essential to eliminate such threats to it. If we allow such factors to operate unchecked, we cannot unequivocally interpret observed changes in the dependent variable as the effect of the independent variable, and such will render the internal validity of the research conclusion doubtful. In other words, if after these threats have been successfully controlled and there still exist changes "in respect of the dependent variable, we may attribute the difference with greater confidence to the independent variables rather than to any other factors" (Wilman and Kruger, 2004:ibid.).

Third or fourth variables are therefore eliminated in this research, and this helped to build confidence in the knowledge of, and explain the relationship between the independent and dependent variable in this research. This research design helped to eliminate most of the possible threats to internal validity of this research. For instance, standardized, same measurements (e,g. questionnaires, interview schedule, content analysis tool) were used for each of the different dependent variables (aspects) of this study (Babbie, et al., 2010:217). Selection biases were eliminated and the selection of the subjects (samples) for each aspect of the study was done in a way that they are comparable (ibid:218).

4.6.2 External Validity and Threat

4.6.2.1 Population Validity

Research hypotheses are concerned with postulated relationship (between variables) in the research population and s. "Population validity refers to the degree to which the findings obtained for a sample may be generalized to the total population to which the research hypothesis applies" (Wilman and Kruger, 2004:118). Due to the size of each of the population of this research, the researcher relied on the samples from the target populations. The sample sizes for this research are large enough and the findings obtained for each of the samples can be generalized to the different total populations. Each of

the randomly selected samples contain members who are representatives (have relevant criteria) of the respective total populations. This helped to increase the population validity of this study (as part of external validity), and eliminates any external threat to generalization of the research findings (Wilman and Kruger, 2004:122).

4.6.3 Reliability

Generally, reliability deals with the extent to which "independent administration of the same instrument (or highly similar instruments) considerably yields the same (or similar) results under comparable conditions" (Delport, 2004:168). It is about whether a particular technique or instrument, applied repeatedly to the same research object or sample would yield the same result each time such application is done (Babbie, et al., 2010:119). Reliability is not about what is being measured, but primarily concerned with how well it is being measured. The more reliable our instruments and observations, the more consistent and dependable our results should be (Delport, 2004:168).

The instruments of measurement used in this research are such that comparable measurements were obtained for all the constructs and variables in this research and the measurements are replicable irrespective of when and where the instruments are administered, and who may be applying it. Only the things known to the respondents were asked in the survey, they are relevant to them, and the questions and ideas were proved clear to the respondents (Babbie, et al., 2010:121). To guide against interviewer unreliability, the researcher called a subsample of the respondents on the telephone and verified selected pieces of information from the measurement instrument (ibid.:122).

4.6.3.2 Test-re-test Reliability

The use of the measurement tools (content analysis tool and questionnaire) in the pre-study test and in the study provided opportunity for them to be tested for reliability. This test-retest reliability helped to determine whether they will produce the same results if repeated under the same conditions. The reliability of the research measurements enabled their generalization to the total population. "Reliability refers to the extent to which the obtained scores may be generalized to different measuring occasions" (Wilman and Kruger, 2004:139). All the measurement instruments used in this research contain unambiguous items and clear instructions which helped to avoid misinterpretation by the research participants and subjects. There is therefore no adverse effect on reliability of this research.

4.6.4 Internal Consistency

There was high internal consistency in the measurements used in this research because of the existence of a high degree of generalization across the items within the measurement. All the research assistants and respondents faired well in all the items (interpreted the items well) in this research measurements.

4.7 LIMITATION TO THE STUDY

Though content analysis was useful for discovering patterns in media content (HIV and AIDS in this instance), it only provided insight into the media product, not the media production processes. Media production processes, editorial vision, editorial policy, and other pressure on the media, shape their ability to operate as sources of HIV and AIDS information, education and awareness. Further limitation is that the research examined only news and editorial content, and therefore, excluded advertising and other non-editorial forms of HIV and AIDS communication.

The study set to use newspaper, radio and television but was only able to access newspaper contents. Archived programme contents of one of the radio stations selected (Thobela FM – SABC owned) were collected but those of the second radio stations (Capricorn FM) were not available because they claim not to have archived their broadcast contents. Therefore, the radio stations sampled for this study were dropped and their HIV and AIDS coverage could also not be compared with that of print media as originally planned. Television stations were not included in this study as one of the media genres for this study because there is no television station in Limpopo Province. This research was mainly funded by the researcher and this limited the ability of the researcher to increase the size of the samples and the number of province used in this study. The use of qualitative analysis was limited to the suggestions for improvement from the respondents.

4.8 ETHICAL CONSIDERATIONS

This research was approved by the Central Degree Committee of University of Limpopo. Permission to conduct research was requested from, and granted by respondents. Survey participants from the selected communities were from households and government establishments in those locations. Management of the establishments and household heads also gave their consents for the survey.

From the onset, interested participants received explanation of what the research is all about, its non-personal, confidential and anonymous nature (risk-free), what is required of them in terms of participation, and that they have the right to decline participation if they decide accordingly. In addition, they were informed that they can withdraw from participating at any point without fear of retribution. This enabled

them to take informed decisions on their participation in the research. Since the study is on the media (no personal information required) and the respondents are literate adult members of the society, their verbal consents and understanding of the explanations given to them sufficed for their participation in the interview, and filling the research questionnaire. There was therefore no need to sign informed consent form by the respondents.

4.9 DATA ANALYSIS AND INTERPRETATION

The data obtained from content analysis were analysed under various topics, variables and sub-variables. All the quantitative data were analysed using simple descriptive statistics (percentage analysis) for simple comparative analysis of the various variables and sub-variables that were specially coded for easy of analysis.

Further analysis of the data on the contributions of the media genre (media output on the variables and sub-variables) were analysed by one-way analysis of variance using the general linear model (SAS, 2008). Where there was a significant F-test (P<0.05), the Duncan test for multiple comparisons was used to test the significance of differences between performance indices means (SAS, 2008).

In the public perception of South African media coverage of HIV and AIDS, a total of 120 questionnaire copies were received and analysed quantitatively (close ended questions) using descriptive statistics, and qualitatively (open ended questions) to determine the public opinion of the media newspaper coverage of the pandemic. The qualitative data were analysed through interpretative analysis. They were organised into themes for the purpose of finding patterns and trends. The researcher also used some statements made by the respondents as quotes for further clarity of analysis.

4.10 PROFILE OF SAMPLED MASS MEDIA AND AREAS OF STUDY

Limpopo Province of South Africa has five districts, namely, Capricorn, Sekhukhune, Mopani, Vhembe, and Waterberg districts. The inclusion of the profiles of the areas sampled for this study will enable the readers to be reasonably informed about the geographical location of this study.

4.10.1 Bochum

Bochum is an urban settlement, with a population 8,947 based on the last national census (Statistics South Africa 2003, Census, 2001: 60). The town is capital of Blouberg Municipality. It is situated in the district of Capricorn. It is 110 km, West of Polokwane city, the Provincial capital of Limpopo Province. The major business in the area is agriculture.

Bochum is bordered in the East by Broekman (7 km), in the West by Teverition (18km), at the North by Schoengatzig (30 km) and Mareisi (8 km) in the South. The people of Bochum are predominantly semiliterate. They have regular access to newspapers, radio and television. They run several small businesses especially in a taxi rank.

4.10.2 Jane-Furse

Jane-Furse is a rural town, with a population of about 9, 132 people based on the 2001 South African national census (Wikipedia 2012). The village is in Makhuduthamaga Municipality. It is situated in the district of Greater Sekhukhune.

It is the capital of Makhudu thamaga Municipality. The major business in the area is mining. Jane-Furse is bordered in the North East by Groblersdal (64.7 km), in the South West by Bugersfort (70 km) and in the South East by Polokwane (189 km). The people of Jane-Furse are predominantly semi-literates. They do have regular access to newspapers, radio and television.

4.10.3 Phalaborwa

Phalaborwa is an urban area, with a total population of 12, 938 people based on the 2001 South African national census. The town is in Ba-Phalaborwa Municipality. It is situated in the district of Mopani. It is the capital of Ba-Phalaborwa Municipality. It is about 217 km, North, from Polokwane city, the provincial capital of Limpopo Province. The major businesses in the area are trading and mining. Phalaborwa is bordered in the East by Hoedspruit (47 km), in the West by Kruger National Park (4km), at the South by Gravelotte (50km) and Bushbuckridge (114km) in the North. The people of Phalaborwa are predominantly educated and working class individuals. They have regular access to newspapers, radio and television.

Phalaborwa was established in the late1950s following the discovery of huge mineral depots in the area. Today, the town supports a thriving mining industry which supplies vital minerals to the country. It boasts one of the world's largest open-cast mines which is now a unique tourist attraction. What makes the mine particularly interesting is that what is now a big hole, was once a noteworthy saddle-backed hill called Loolekop (Afrikaans) (Limpopo Tourism Agency, South Africa, 2014). It is the home of the famous African Marula tree and the internationally known "Amarula Cream Liqueur", made from the fruit of Marula tree.

4.10.4 Thohoyandou

Thohoyandou is an urban area, with a population of 44,046 people based on the 2001 South African national census and the GeoNames Geographical Database, Google Earth. The town is in Thulamela Municipality. It is situated in the district of Vhembe.

It is the capital of Thulamela Municipality and situated about 149km, South, from Polokwane city, the provincial capital of Limpopo Province. The major business in the area is trading. Thohoyandou is bordered in the East by Punda Maria (64km), in the West by Loius Trichardt (46km), at the North by Musina (76km) and Elim (62km) in the South. The people of Thohoyandou are predominantly educated, working class individuals, with regular access to newspapers, radio and television.

In addition, Thohoyandou is the capital city of the Venda region. It has a museum, lush plantations, a Baobab of 3000 years old, Museum of the Drum and Dzata Ruins, Levubu Tree Park, Mphaphuli Cycad Reserve, Tshakhuma Traditional Village, Thathe Vondo Forest, Tshimbupfe archaeological site, Nwanedi National Park, Tshatshingo Potholes, and Thulamela ruins. It is in quite close to the Kruger National Park.

4.11 SAMPLED NEWSPAPERS' PROFILE

4.11.1 Mail & Guardian (Newspaper)

The Mail & Guardian is a South African weekly broadsheet newspaper, published by M & G Media at its Headquarters in Rosebank, Johannesburg, and has smaller bureaux in Durban and Cape Town. It has a strong focus on politics, government, business, civil society and the environment. Initially, the newspaper started as an alternative newspaper by a group of retrenched journalists in 1985 after the closures of two leading liberal newspapers called The Rand Daily Mail and Sunday Express. Its official website is www.mg.co.za.

The newspaper, originally called the Weekly Mail, was launched on a tight budget of R50 000 (about \$7 000), and its existence depended on a small number of staff and part-time volunteers who were often not remunerated. The early shareholders were academics, business leaders and liberal professionals. Each of these contributed a few thousand rands in their effort to ensure the continuous existence of a tradition of critical journalism within an increasingly harsh apartheid political climate (Wikipedia, July, 10, 2012; The Mail and Guardian Newspaper, South Africa).

At this early stage, the newspaper was produced entirely on personal computers because its publishers could not raise enough funds to buy mainstream technology. This made the paper one of the world's earliest examples of Apple Macintosh-based desktop publishing. The Weekly Mail had a number of clashes with the government during the eighties due to its vocal criticism of apartheid leading to its suspension in 1988. It was the first paper to present ANC leaders as humane and responsible and provides balanced accounts of their activities and policies. Thus, the paper became important to people interested in South African politics ranging from the then jailed Nelson Mandela and the exiled African National Congress (ANC) leadership to key foreign policy decision-makers in Washington, London and Bonn (ibid).

The Guardian (London) later bought a large share in the Weekly Mail and helped stabilize the small paper's unhealthy finances for the first time. The Guardian became the paper's majority shareholder In 1995 and its name was changed to the Mail & Guardian. Mail & Guardian has continued to adapt to its purpose and voice since the arrival of democracy in 1994 against the expectations of many observers. According to SAARF AMPS (July 2010 - June 2011) the newspaper has a readership figure of 383, 000 readers.

The newspaper has proved its capability of being no less critical of the new dispensation than the old, and holding on strongly to its humanist philosophy. It focuses on investigative reporting, political analysis, Southern African news, comprehensive coverage of South African music, arts and popular culture. Presently, the paper is mostly well known for its investigative reporting, particularly on corruption. Its Monitor section focuses on good governance and social development. Its other sections include international and Africa news. It has equally achieved international credibility, winning the British IPD Best International Newspaper Award in 1995, and the Missouri Medal for Distinguished Journalism in 1996. In 2002, The Guardian (London) reduced its shareholding to 10% by selling 87,5% majority share of the paper to Newtrust Company Botswana Limited, owned by Zimbabwean publisher and entrepreneur Trevor Ncube, who took over in Johannesburg as the company's CEO. The Mail & Guardian newspaper and Mail & Guardian Online position themselves in the South African media market as the country's quality read, aimed at the intelligentsia, including the professionals, academics, diplomats, lobbyists, and non-governmental groups.

Mail & Guardian Online

The Mail & Guardian Online was launched in 1994, in conjunction with Media24 (a subsidiary of the Naspers group). It is administered from the Mail & Guardian offices in Rosebank, Johannesburg and

reputed internationally for high quality content. It is the first internet based news publication in Africa, and has since become one of South Africa's top five biggest news sites.

The website began as an e-mail subscription service known as the Electronic Mail & Guardian, and soon entered into partnership with Sangonet, the country's oldest internet service provider. This added a website which grew from producing a weekly mirror of the printed newspaper (M&G) to generating its own daily news - breaking news, analysis, multimedia and more, through its own dedicated editorial staff. Their innovation with digital apps enables their readers to consume their offers on the mobile web and through apps for iPad and Kindle. According to the papers' Print & Online publisher, Anastacia Martin, this is helping the newspaper "to grow as they draw new print and electronic audiences from the continent and abroad". The M&G Online has received numerous national and international accolades and awards. In 2001, the site was voted one of the world's top 175 websites by Forbes.com. It won three Bookmark awards in 2010 and 2011, one of which was a gold award for its Nelson Mandela tribute site, and received three Webby Honourable mentions in 2008 for its Thought Leader platform and News in Photos site.

4.11.2 The Star (South Africa)

The Star is a daily tabloid newspaper based in Johannesburg, Gauteng, South Africa, established on 6 January 1887. It has a readership of 1081,000 in 2008 (AMPS 2008A). Its official website is http://news.newspaper-based in Johannesburg, Gauteng, South Africa, established on 6 January 1887. It has a readership of 1081,000 in 2008 (AMPS 2008A). Its official website is http://news.newspaper-based in Johannesburg, Gauteng, South Africa, established on 6 January 1887. It has a readership of 1081,000 in 2008 (AMPS 2008A). Its official website is http://news.newspaper-based in Johannesburg, Gauteng, South Africa, established on 6 January 1887. It has a readership of 1081,000 in 2008 (AMPS 2008A). Its official website is http://news.newspaper-based in Johannesburg, Gauteng, South Africa, established on 6 January 1887. It has a readership of 1081,000 in 2008 (AMPS 2008A). Its official website is <a href="http://news.newspaper-based-ba

The Star is owned by Independent News & Media (INM), which additionally produces 30 national and regional newspapers, among which are - Pretoria News, Cape Argus, Mercury, Cape Times, Daily News, Post, Tribune, Isolezwe, TIOS, Sunday Independent, Saturday Star, and Sunday Tribute. Most of these are South Africa's best-known titles. They are constantly reviewed to strategically position them to serve the needs of their readers and advertisers in clearly defined key markets. In a variety of newspaper websites, IOL (online division of INM) brings to their audiences the best of everything that's published in the group's papers, including their entire classified advertising databases. Currently, the group reach 63% of English newspaper readers in three Provinces of South Africa, namely, Gauteng, KwaZulu-Natal and the Western Cape. This translates to aggregate weekly sales of 2,8 million copies in these Provinces. They receive 48% of the total advertising spend in the paid newspaper market in these area (Independent Newspapers. 2012). According to the editor, South Africa is in a state of instability,

"desperately seeking to invent a new national culture, one that unites our rainbow nation while allowing vibrant individual cultures to flourish" (Moegsien, 2012).

Throughout the pages of the paper, it tries to promote the positive aspects of the society, give guidance on all issues, show consistent high quality journalism, stick to the truth at all costs, involve readers, debate the country's leaders, extract the best thinking from academics, stimulate the thoughts of people on the streets, offices and homes in the country, and guide itself and others towards a better nation established on fundamental human rights (Moegsien, ibid.).

As one of South Africa's most influential daily newspapers, "The Star covers the heart of the nation with unequalled reporting of local, national and international news and sport. It favours a tolerant democratic society and is highly proactive in its reporting" (Moegsien ibid.).

4.11.3 Sowetan

The Sowetan is a South African English language, daily tabloid newspaper, established on 2 February 1981 as a liberation struggle newspaper and was distributed freely to households in the then apartheid-segregated township of Sowetan and Johannesburg, in Gauteng Province. Its headquarters is in Johannesburg, and its website address is http://www.sowetanlive.co.za/. Currently, the paper is one of the largest national newspapers in South Africa. Considered as having a left-leaning editorial tone, it had a readership of 2,097,000 in 2008 (AMPS, 2008A). However, according to SAARF AMPS (July 2010 - June 2011), The Sowetan total readership is now 1,618,000.

Presently, the tabloid is published by Avusa Media Group, who bought it from one Dr. Nthato Motlana, a prominent South African businessman, physician and anti-apartheid activist. He was actively involved in the formation of the New African Investments Limited (NAIL), which bought over The Sowetan after the end of the apartheid era in the country (Sparks, 2009:201).

The Sowetan replaced the Post Transvaal newspaper, whose editorial staff migrated from The World newspaper. The total strike at the Post (for improved remuneration) then, lasted so long that the newspaper almost went bankrupt and consequently sold its property and printing presses (Argus publishing and printing) to Caxtons. The printing of The Post was then contracted to Caxtons, but the government banned the Post two days before it was published. The Post had more newspaper names registered and after some deliberation 'The Sowetan' was adopted as the new name. It started as a weekly, Saturday and Sunday newspaper. The Sunday edition was later closed due to non viability

(Wikipedia, 2012). Other Avusa group publications include The Times, Sunday Times, Business Day, Sowetan, The Herald, SundayWorld, Weekend Post, Daily Dispatch, and Saturday Dispatch among others.

Avusa Media Live

This is the name of the digital division of Avusa Media Group which represents the digital brands and publishing concerns of the media group, and includes Sowetan LIVE, Times LIVE, Sunday World and SportLIVE. It has the vision of providing trusted, digital services that inform and entertain their readers; and of providing innovative, measureable opportunities for their advertisers and users to connect.

4.11.4 The Citizen (South Africa)

The Citizen is a compact tabloid national daily South African newspaper. The newspaper was bought by CTP and Caxton group in 1998, who are the present publishers. In 2001, its circulation figure was 73, 008 (AMP, 2001), but It has 379, 000 readership in 2011 (SAARF AMPS, (July 2010 - June 2011)). The Citizen's operational head office is in Johannesburg, South Africa, and its website address is http: and and www.citizen.co.za and .

The Citizen was founded in 1976 during the time of apartheid by Louis Luyt and was then the only major English language newspaper favorable to the ruling National Party. It has dedicated staffs that provide their in-depth news coverage, bringing to their daily readers quality news, opinion, sports, competitions, and offering a unique range of supplements including:

CitiSport covers daily sport and provides full results and a TV guide; CitiBusiness covers daily financial news; CitiVibe is for daily entertainment, providing news information on who's who and what's new in CDs, books, theatres, movies, gaming and TV; Racing Express is about Horse racing special with highs and lows, tips, trainer reports and all the intrigue on and off the track; CitiMotoring appears every Monday and Saturday with full throttle motoring section, and with an extensive pull-out every Wednesday; CitiSportZ covers club sport on a Tuesday including latest varsity rugby results and club cricket news; CitiBike comes out every Wednesday with motorbike racing, tests, and all the biker lifestyle information within the motoring supplement; Citi Transport and Trucking covers transport and trucking industry supplement, includes truck tests and all the latest in transporting equipment every Wednesday; CitiHealth provides information, news and informed guidance for a healthy lifestyle on the last Tuesday of every month; CitiGaming comes out every Thursday with news, views and tips on responsible gambling, poker and the casino environment, including restaurant and show reviews; and Hammer and Gavel appears every Friday with auction news from around the world and locally.

The Citizen's Opinion pages cover the full spectrum of political opinion in the country. The weekly Super Saturday Citizen provides in-depth coverage of the week's sporting events for their readers. It also features articles on motoring, horse racing tips, pets, business and gardening, in-depth news reporting, as well as entertainment news and the Johannesburg CitiGuide.

4.11.5 City Press (South Africa)

City Press is a Sunday newspaper, mainly targeted at black readers. The paper published by Naspers Group, is the third biggest selling South African newspaper. It is distributed nationally and in neighbouring countries including Lesotho, Namibia, Swaziland, and Botswana. Its readership figure in 2001 was about 2.5 million (AMPS, 2001A), but came to 1604, 000 readers in 2011 (SAARF AMPS, July 2010 - June 2011). Its head office is in Johannesburg, South Africa, and the web address is http: and www.citypress.co.za and . The news source is published in English language.

The newspaper was established by Jim Bailey and the South African Associated Newspapers (SAAN) group in 1982 as the Golden City Press, but the word "Golden" was dropped from the newspaper's name in its second year of existence (1983). SAAN Group later pulled out of its partnership with Jim Bailey, making the paper to run into financial difficulties. Consequently, on 1 April 1984, Nasionale Pers took over the publication of City Press and its sister publications, Drum and True Love & Family (Wikipedia, 2012).

CHAPTER FIVE

INTRODUCTION

This chapter contains the presentation of the results of the content analysis of media (newspaper) HIV/AIDS coverage in the study period – January to December 2010, analysed with simple descriptive statistics (percentages) and one-way ANOVA analyses which was used to compare the coverage among the individual media sampled used in this study. The variable and sub-variables used in this study are defined or operationalized under the "definition of terms". It also contains results of the analyses of the audience perception of South African media coverage of HIV/AIDS done with simple descriptive statistics (percentages) only. These results are presented in statistical tables and graphs.

5. RESULTS

The content analysis results are analysed on the basis of the following headings:

- the quality of HIV and AIDS news reports by the South African mass media;
- the sources of HIV and AIDS news stories in South African media;
- the main HIV and AIDS news subjects covered by the media within the study period;
- the media language use in HIV and AIDS news reports communication;
- the extent of blame attribution of HIV and AIDS infection in media HIV and AIDS news reports;
- geographical location or setting of HIV and AIDS news reports in the media;
- the nature of HIV and AIDS presented to the public by the media;
- the news relevance of HIV and AIDS to the media; and
- the quantity or extent of South African media HIV and AIDS news reports in the study period;

The analyses of data on each of the above main headings are presented on quarterly and yearly basis.

5. 1 THE QUALITY OF HIV AND AIDS NEWS REPORTS BY THE SOUTH AFRICAN MASS MEDIA

The quality of HIV and AIDS media news reports was determined using the following variables:

- 5.1.1 Types of Media HIV and AIDS news output
- 5.1.2 Confidentiality level of the HIV and AIDS news reports
- 5.1.3 Technical competence of HIV and AIDS news reports
- 5.1.4 Combination of Journalistic skills and creativity in HIV and AIDS news reporting
- 5.1.5 Objectivity in media HIV and AIDS news reporting
- 5.1.6 Use of research in HIV and AIDS news reporting.

Under each of these variables above are some sub-variables which were used to analyse the contribution of the variables as used by the media in the education of the society about HIV and AIDS. The results were also presented quarterly and yearly.

5.1.1 Types of Media HIV and AIDS News Output

The types of media output from the various newspapers evaluated in the present study was determined using the following sub-variables –

- HIV and AIDS Photo news,
- News break (News scoop),
- News analysis,
- Editorial,
- HIV and AIDS Feature stories,
- Column articles,
- Investigative news,
- Straight news report,
- Opinion articles,
- Vox pop,
- Interview news report,
- Book review, and
- Letter to the editor on HIV and AIDS.

The results of the analysis on these sub-variables, presented on quarterly and yearly basis, are as shown in Fig. 1 A - O.

HIV and AIDS Photo News: There was only 1 (0.76%) HIV and AIDS photo news in the 4th quarter by *The Citizen*, giving a total of 1 (1.29%) photo news in the whole year (Fig. 1 A).

HIV and AIDS News Break: *The Star* carried 1 (1.11%) HIV and AIDS news break in the third quarter, contributing only 1 (0.29%) HIV and AIDS news break in the year (Fig 1 B).

News Analysis: The M & G reported 1 (1.67%) HIV and AIDS News analysis in the 2nd quarter, 1 (1.11%) in the 3rd quarter and 1 (0.76%) in the 4th quarter, making a total of 3 (0.87%) in the year, while *City Press* reported the remaining 1 (0.76%) in the 3rd quarter. The year's cumulative total stood at 4 (1.16%) by all the media (Fig 1 C).

Editorial: 'Cumulatively, all the media covered a total of 5 (1.45%) Editorials on HIV and AIDS in the period under study. This is distributed as follows: *The Citizen*, 2 (3.33%) and 1 (0.76%) Editorials on HIV and AIDS in the 2nd and 4th quarter respectively, while *Sowetan* and *City Press* contributed 1 (0.76%) HIV and AIDS Editorial each in the 4th quarter. The year's analysis showed *The Citizen* made a total of 3 (0.87%) HIV and AIDS Editorials in the year, while *Sowetan* and *City Press* contributed a total of 1 (0.29%) editorial each at the end of the year (Fig. 1 D).

HIV and AIDS Feature Story: The media collectively covered a total of 31 (8.99%) HIV and AIDS feature stories in the year, making this the 3rd largest type of media output on HIV and AIDS. Out of this, *The Citizen* communicated a total of 2 (0.58%) HIV and AIDS feature stories in the year, *The Star* 10 (2.90%), *Sowetan* 5 (1.45%), *M* & *G* 10 (2.90%), and *City Press* 4 (1.16%). The overall quarterly media contributions were 1 (1.56%), 8 (13.33%), another 8 (8.89%), and 14 (10.69%) HIV and AIDS feature stories in the 1st to 4th quarters respectively.

The micro quarterly analysis indicated that *The Citizen* communicated 1 (1.11%) HIV and AIDS feature news story in the 3^{rd} quarter and 1 (0.76%) in the 4^{th} quarter, *The Star* reported 1 (1.56%) in the 1^{st} quarter, 1 (1.67%) in the 2^{nd} quarter, 3 (3.33%) in the 3^{rd} , and 5 (3.82%) in the 4^{th} quarter. *Sowetan* had a total of 2 (3.33%) HIV and AIDS feature stories in the 2^{nd} quarter, 2 (2.22%) in the 3^{rd} and 1 (0.76%) in the 4^{th} quarter. *M & G* reported 4 (6.67%) in the 2^{nd} quarter, 1 (1.11%) in the 3^{rd} , and 5 (3.82%) in the 4^{th} quarter. The *City Press* had 1 (1.67%) story in this category in the 2^{nd} quarter, another 1 (1.11%) in the 3^{rd} , and 2 (1.53%) such stories in the 4^{th} quarter (Fig. 1 E).

Column Articles: No Column article on HIV and AIDS was written by any of the media through out the year (Fig. 1 F).

Investigative News: *City Press* communicated only 1 (1.56%) HIV and AIDS Investigative news in the 1st quarter, which incidentally is the only 1 (0.29%) in the year for all the media (Fig. 1 I).

Straight News Report: The media communicated a cumulative total of 252 (73.04%) HIV and AIDS 'Straight news' stories in the year, with *The Citizen* contributing 73 (21.16%), *Sowetan* 76 (22.03%) (becoming the highest contributor to this sub-variable), *M & G* 18 (5.22%), making them the least contributor to this sub-variable, *The Star* 70 (20.29%), and *City Press* 15 (4.35%) to the news stories. The overall quarterly distribution of these stories were a total of 49 (76.56%), 38 (63.33%), 68 (75.56%), and 97 (74.05%) in the 1st to 4th quarters respectively.

The micro quarterly analysis indicated that *The Citizen* reported a total of 17 (26.56%) HIV and AIDS Straight news stories in the 1st quarter, 12 (20%), 14 (15.56%), and 30 (22.90%) such stories in the 2nd to 4th quarters. The *Sowetan* carried 15 (23.44%) in the 1st quarter, 16 (26.67%) in the 2nd quarter, 17 (18.89%) in the 3rd quarter and 28 (21.37%) in the 4th quarter. The M & G (which boast themselves as the flagship of journalism in South Africa and in the SADC region generally), contributed 1 (1.56%) Straight news story in the 1st quarter, 5 (8.33%) in the 2nd, 11 (12.22%) in the 3rd, but 1 (0.76%) in the 4th quarter.

The Star communicated a total of 12 (18.75%) HIV and AIDS Straight news stories in the 1st quarter, 5 (8.33%) in the 2nd quarter, 21 (23.33%) in the 3rd, and 32 (24.43%) in the 4th quarter. *City Press* had a total of 4 (6.25%) Straight news stories in the 1st quarter, 5 (5.56%) in 3rd and 6 (4.58%) in the 4th quarter (Fig.1 J).

Opinion Article: All the media contributed a total of 36 (10.43%) Opinion articles on HIV and AIDS in the period under study, out of which *The Citizen* reported a total of 3 (0.87%), *Sowetan* 20 (5.80%), *M & G*, 6 (1.74%), *The Star* 3 (0.87%), and 4 (1.16%) HIV and AIDS Opinion articles. The overall quarterly distribution was 9 (14.06%), 7 (11.67%), 11 (12.22%) and 9 (6.87%) in the 1st, 2nd, 3rd and 4th quarters respectively.

The micro-quarterly analysis showed *The Citizen* carried 2 (2.22%) and 1 (0.76%) Opinion articles only in the 3rd and 4th quarters respectively. *Sowetan* did 4 (6.25%) in the 1st quarter, 5 (8.33%) in the 2nd, 5 (5.56%) in the 3rd and 6 (4.58%) in the 4th quarter There were 3 (4.69%) Opinion articles from *M* & *G* in the 1st quarter, 2 (3.33%) in the 2nd quarter, and 1 (1.11%) in the 3rd. *The Star* had 2 (3.13%) Opinion articles in the 1st quarter, and 1 (1.11%) in the 3rd quarter. The *City Press* reported 2 (2.22%) in the 3rd quarter and another 2 (1.53%) in the 4th quarter (Fig. 1 k).

Vox Pop: The cumulative total of HIV and AIDS Vox Pop news stories covered by the media at the end of the year was just 2 (0.58%). These came from *City Press* only. The 1st quarter had a total of 1 (1.56%) and there was another 1 (0.76%) in the 4th quarter (Fig.1 L).

Interview: There was only 1 (0.29%) HIV and AIDS interview article in the year contributed by *City Press* in the 1st quarter – (1.56%) (Fig.1 M).

Book Review: The year's total for this sub-variable was 2 (0.58%) HIV and AIDS Book reviews, communicated mainly in the 4th quarter by *The Citizen* 1 (0.76%) and *The Star* 1 (0.76%). The total for 4th quarter was therefore 2 (1.53%) (Fig.1 N).

Letter to the Editor: There was a total of 9 (2.61%) "Letter to the editor" in the period under study, with *Sowetan* contributing 5 (1.45%), *M & G* 1 (0.29%), *The Star* 2 (0.58), and *City Press* 1 (0.29%) of the letters. The overall quarterly distribution was a total of 2 (3.13%) *Letter to the editor*" in the 1st quarter, 4 (6.67%) in the 2nd quarter, 1 (1.11%) in the 3rd, and 2 (1.53%) in the 4th quarter.

The micro quarterly distribution is as follows: *Sowetan* received 3 (5%) "'Letter to the editor" in the 2nd quarter, 1 (1.67%) in the 3rd, and another 1 (0.76%) in the 4th. *M & G* communicated just 1 (1.67%) in the 2nd quarter, and *The Star* had 1 (1.56%) "Letter to the editor" in the 1st quarter and another 1 (0.76%) in the 4th. *City Press* received only 1 (1.56%) "Letter to the editor" in the 1st quarter (Fig.1 O).

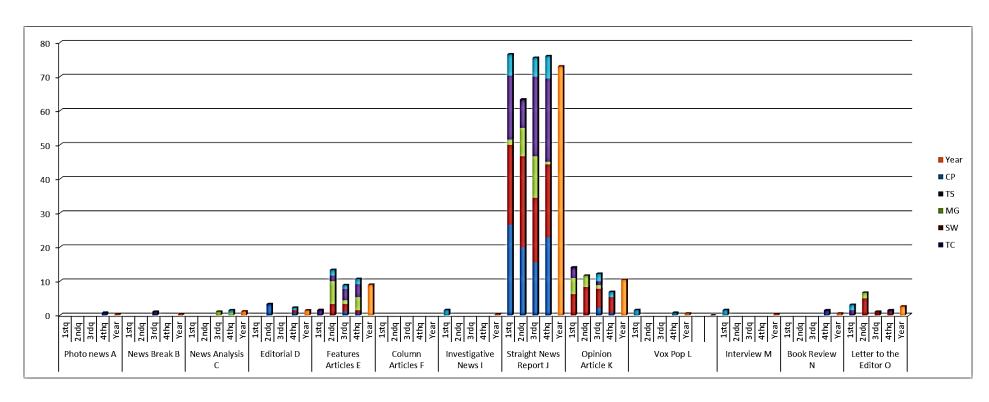


Figure 1.1 Types of media HIV and AIDS news reports (%) presented and analysed on quarterly and full year basis, covered by five national newspapers.

5.1.2 Confidentiality Level of HIV and AIDS News Reports

This variable was studied looking at three sub-variables as follows:

- Confidential news report,
- Breaking of silence, and
- Neutral Confidential report (news reports that are silent on the identity of the HIV and AIDS positive source or their sources are not PLHIV). The results are as shown in Figure 2.

Confidential Reporting: The total "Confidential reports" by the media was 9 (2.61%), distributed among the media thus: *The Citizen* 2 (0.58%), *Sowetan* 3 (0.87%), *M & G* 3 (0.87%), and *The Star* 1 (0.29%). The media reported a total of 2 (3.13%) of such stories in the 1st quarter, 2 (3.33%) in the 2nd, 1 (1.11%) in the 3rd guarter, and 4 (3.05%) in the 4th guarter (Fig. 2 A).

Quarterly contribution by each of the media was as follows - *The Citizen* communicated 1 (1.67%) in the 2^{nd} quarter, another 1 (1.11%) in the 3^{rd} quarter. *Sowetan* had 1 (1.56%) HIV and AIDS "Confidential report" in the 1^{st} quarter, 1 (1.67%) in the 2^{nd} quarter, and 1 (0.77%) in the 4^{th} quarter. The *M & G* had 3 (2.29%%) in the 4^{th} quarter. *The Star* carried 1 (1.56%) such report only in the 1^{st} quarter.

Breaking of Silence Stories: The total media HIV and AIDS news reports under this sub-variable was 17 (4.93%), with *The Citizen* contributing a total of 7 (2.03%), *Sowetan* 4 (1.16%), *The Star* 4 (1.16%), and *City Press* 2 (0.58%). The overall quarterly contributions were 2 (3.13%) such stories in the 1st quarter, 5 (8.33%) in the 2nd quarter, and 10 (7.63%) in the 4th quarter.

The micro quarterly analysis showed that *The Citizen* covered 1 (1.67%) HIV and AIDS "Breaking of Silence" story in the 2nd quarter, and 6 (4.58%) in the 4th quarter. *Sowetan* reported 2 (3.13%) in the 1st quarter, 1 (1.67%) in the 2nd, and another 1 (0.77%) in the 4th quarter. *The Star* had a total of 2 (3.33%) HIV and AIDS "Breaking of Silence" stories in the 2nd quarter, and another 2 (1.54%) in the 4th. *City Press* communicated 1 (1.67%) "Breaking of Silence" in the 2nd quarter, and another 1 (0.77%) in the 4th quarter (Fig. 2 B).

Neutral Confidential Reports (Not related to any infected or affected individual): The total "Neutral Confidential" HIV and AIDS reports in the period under study was 319 (92.46%) out of 345 HIV and AIDS news coverage in the year. *The Citizen*'s contributed a total of 75 (21.74%) "Neutral Confidential" HIV and AIDS news stories, *Sowetan* 100 (29.99%), *M & G* 34 (9.86%), *The Star* 83 (24.96%), and *City Press* 27 (7.83%) such stories in the period under study. The overall quarterly breakdown showed that all the

media communicated 60 (93.75%) "Neutral confidential" HIV and AIDS news stories in the 1st quarter, 58 (96.67%) in the 2nd, 89 (98.89%) in the 3rd quarter and 117 (89.31%) in the 4th quarter.

The micro quarterly and yearly analysis is shown in Fig. 5.1.2C. In the 1st and 2nd quarters, *The Star* contributed 1 HIV and AIDS news story in each quarter (1.56% & 1.67%) that were "Stigmatizing and Stereotyping". *The Citizen* covered a total of 17 (26.56%) "Neutral Confidential" HIV and AIDS news reports in the 1st quarter, 13 (21.67%) in the 2nd, 16 (17.78%) in the 3rd, and 29 (22.14%) in 4th quarter. *Sowetan* reported 16 (25%) such stories in the 1st quarter, 24 (40%) and 25 (27.78%) in the 2nd and 3rd quarters respectively, but 35 (26.72%) in the 4th. *M* & *G* communicated a total of 4 (6.25%), 12 (20%), 14 (15.56%), and 4 (3.05%) such news stories in the 1st, 2nd, 3rd, and 4th quarters respectively. *The Star*, contributed 16 (25%), 4 (6.67%), 26 (28.89%), and 37 (28.24%) "Neutral Confidential" HIV and AIDS news stories in the 1st to 4th quarters respectively. The *City Press* communicated 7 (10.94%), 8 (8.89%), and 12 (9.16%) "Neutral Confidential" HIV and AIDS stories in the 1st, 3rd, and 4th quarters respectively. (Fig. 2 C).

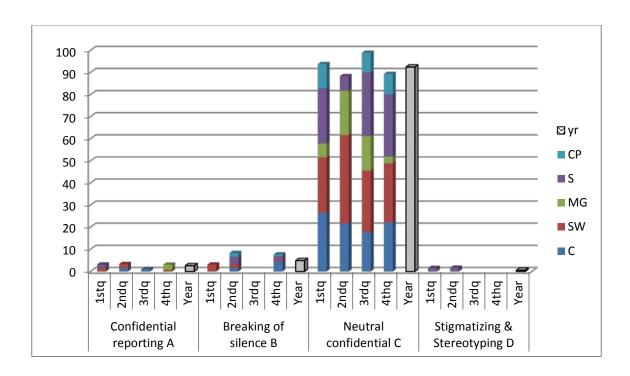


Figure 2: Level of Confidentiality in media HIV and AIDS news reports (%) by five national newspapers analysed on quarterly and full year basis.

5.1.3 Technical Competence of HIV and AIDS News Reports

The sub-variables used in the study of Technical Competence of HIV and AIDS outputs are Very Competent, Competent, and Incompetent in HIV and AIDS reporting. The results are shown in figure 3.

Very Competent HIV and AIDS News Story: All the media communicated a cumulative total of 197 (57.01%) 'Very Competent' HIV and AIDS stories, out of which *The Citizen* contributed 50 (14.49%), *Sowetan* 40 (11.59%), *M & G* 26 (7.54%), *The Star* 60 (17.30%), and 21 (6.09%) such stories came from *City Press*. On overall quarterly analysis, the media contributed a total of 35 (54.69%) Very Competent HIV and AIDS stories in the 1st quarter, 27 (45.05%) in the 2nd quarter, 35 (38.89%) in the 3rd, and 100 (76.34%) such stories in the 4th quarter.

The micro-quarterly analysis (analysis of the contribution of individual newspaper per quarter) showed *The Citizen* reported 9 (14.06%) 'Very Competent' stories in the 1st quarter, another 9 (15%) in the 2nd quarter, 7 (7.78%) and 25 (19.08%) in the 3rd and 4th quarters accordingly, with a year total of 50 (55.98%). The *Sowetan* contributed 8 (12.5%), 5 (8.33%), another 5 (5.56%) and 22 (16.79%) such stories in the 1st to 4th quarters respectively. *M & G* covered 2(3.13) HIV and AIDS news stories, 7 (11.67%), 10 (11.11%), and 7 (5.34%) such stories in the 1st to 4th quarters respectively. *The Star* covered a total of 12 (18.75%), 5 (8.33%), 9 (10%), and 34 (25.95%) such stories in the 1st to 4th quarters respectively. *City Press* recorded 4 (6.25%), 1 (1.67%), 4 (4.44%) and 12 (9.10%) such stories in the 1st to 4th quarters respectively (Fig. 3 A).

Competent HIV and AIDS News Stories: The cumulative total of media output on "Competent" HIV and AIDS stories in the year was 145 (42.03%), and was contributed as follows: *The Citizen* 38 (9.89%), *Sowetan* 64 (18.55%), *M* & *G* 11 (3.19), *The Star* 28 (8.12%), and *City Press* had 8 (2.32%). Overall quarterly distribution showed the media covered a total of 29 (45.31%), 33 (55%), 55 (61.11%), and 28 (21.37%) in the 1st, 2nd, 3rd, and 4th quarter respectively.

In the micro-quarterly analysis *The Citizen* communicated a total of 8 (12.5%), 6 (10%), 10 (11.11%), 10 (7.63%) "Competent HIV and AIDS stories" in the 1st to 4th quarters respectively. *Sowetan* reported 11 (17.19%), 21 (35%), 20 (22.22%) and 12 (9.16%) such stories in the 1st to 4th quarters respectively. The *M & G* had 2 (3.13%) 'Competent' HIV and AIDS news stories, 5 (8.33%) and 4 (4.44%) such stories in the 1st to 3rd quarters respectively and no such story in the 4th quarter. *The Star* had 5(7.81%), 1(1.67%), 17 (18.89%), and 5 (3.82%) such stories in the 1st to 4th quarters respectively. *City Press* accounted for 3 (4.69%), 4 (4.44%), and 1 (0.76%) such stories only in the 1st, 2nd and 4th quarters (Fig. 3 B).

Incompetent HIV and AIDS News Stories: There were only 3 (2.29%) "Incompetent" HIV and AIDS stories in the 4th quarter, contributed by *Sowetan* (Fig. 3 C).

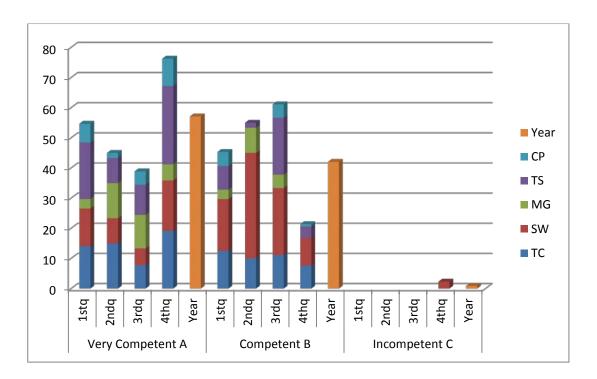


Figure 3: Technical competence of the media in HIV and AIDS news reporting (%) by five national newspapers analysed on quarterly and full year basis.

5.1.4 Combination of Journalistic Skills and Creativity

The sub-variables for this study are: "Good" Combination of Journalistic Styles and Creativity in HIV and AIDS Reporting; "Fair' Combination of Journalistic Styles and Creativity in HIV and AIDS Reporting; and "Poor" Combination of Journalistic Styles and Creativity in HIV and AIDS Reporting. The results are as presented in figure 4.

Good Combination of Journalistic Styles and Creativity in HIV and AIDS Reporting:

Full year analysis of the media HIV and AIDS news stories shows that the media recorded a total of 259 (75.07%) "Good Combination of Journalistic Skills and Creativity" stories, out of a total of 345 (100%) news stories. The breakdown showed that *The Citizen* presented a total of 69 (20%), *Sowetan* 62 (17.97%), *M & G* 35 (10.14%), The Star 69 (20%), and *City Press* 24 (6.96%) of HIV and AIDS stories in this category in the year.

On the overall analysis, the media covered a total of 49 (76.56%) such stories in the 1st quarter, 50 (83.33%), 54 (60%), and 106 (80.92%) "Good Combination of Journalistic Skills and creativity" stories in the 2nd to 4th quarter respectively.

The micro quarterly analysis for each of the media shows *The Citizen* reported a total of 14 (21.88%) HIV and AIDS stories with "Good combination of Journalistic skills and creativity" in the 1st quarter, 13 (21.67%), 12 (13.33%), 30 (22.90%) such stories in the 2nd to 4th quarter respectively. The *Sowetan* presented a total of 12 (18.75%), 19 (31.67%), 7 (7.78%), and 24 (18.32%) of "Good Combination of Journalistic Skills and creativity" HIV and AIDS stories in the 1st to 4th quarter respectively.

The *M & G* used "Good Combination of Journalistic Skills and creativity" in 3 (4.69%) of their stories in the 1st quarter, 12 (20%), 14 (15.56%), and 6 (4.58%) such stories in the 2nd to 4th quarter respectively. Also, *The Star* had 14 (21.88%), 5 (8.33%), 16 (17.78%), and 34 (25.95%) such stories in the 1st to 4th quarter respectively. The *City Press* contributed 6 (9.38%), 1 (1.67%), 5 (5.56%), and 12 (9.16%) HIV and AIDS news stories with "Good Combination of Journalistic Skills and creativity" in the 1st, 2nd, 3rd, and 4th quarter respectively (Fig. 4 A).

Fair Combination of Journalistic Styles and Creativity in HIV and AIDS Reporting:

Full year analysis of the media HIV and AIDS stories shows that the media recorded a total of 84 (24.35%) "Fair Combination of Journalistic Skills and Creativity" news stories out of a total of 345 HIV and AIDS stories in the year. The total contribution is distributed amongst the individual media as follows: "The Citizen" presented a total of 15 (4.35%), *Sowetan* 44 (12.75%), *M* & *G* had 2 (0.58%) stories, *The Star*, a total of 19 (5.51%), and *City Press* reported a total of 4 (1.16%) of such stories in the year.

The overall quarterly analysis shows that all the media contributed a total of 15 (23.44%), 10 (16.67%), 35 (38.89%), and 84 (24.35%) of such stories in the 1st to 4th quarter respectively.

The micro-quarterly analysis indicates that *The Citizen* reported a total of 3 (4.69%) "Fair Combination of Journalistic skills and Creativity" HIV and AIDS news stories in the 1st quarter, 2 (3.33%), 5 (5.56%), and another 5 (3.82%) such stories in the 2nd, 3rd and 4th quarter respectively. Also a total of 7 (10.94%) stories from the *Sowetan* were presented in "Fair Combination of Journalistic skills and Creativity" in the 1st quarter, 7 (11.67%), 17 (18.89%), and 13 (9.92%) such stories in the 2nd to 4th quarter respectively.

The *M & G* used only 1 (1.56%), and another 1 (0.76%) such story in the 1st and 4th quarter only, while *The Star* had 3 (4.69%), 1 (1.67%), 10 (11.11%), 5 (3.82%) HIV and AIDS stories in the "Fair Combination of Journalistic skills and Creativity" category in the 1st to 4th quarter respectively. This category received only 1 (1.56%) news story from the City Press in the 1st quarter but 3 (3.33%) in the 3rd quarter (Fig. 4 B).

Poor Combination of Journalistic Styles and Creativity in HIV and AIDS Reporting:

Sowetan and City Press reported 1 HIV and AIDS news story each (1.11% and 0.76% respectively) in the "Poor Combination of Journalistic Skills and Creativity" category in the 3rd and 4th quarter respectively. The full year contribution was 0.59% for both media (Fig. 4 C).

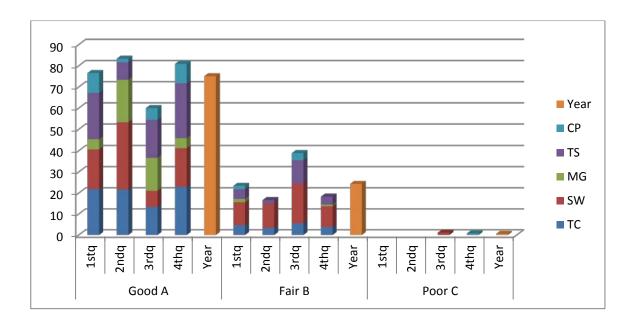


Figure 4: Combination of Journalistic skills and creativity in media HIV and AIDS news reporting (%) analysed on quarterly and full year basis, using five national newspapers.

5.1.5 Objectivity in media HIV and AIDS news reporting

This variable is studied under two sub-variables: 'Balanced' HIV and AIDS news reports, and 'biased' HIV and AIDS news reports. The results are presented in figure 5.

Balanced HIV and AIDS News Reports

At the end of the year, the media collectively reported a total of 331 (95.94%) "Balanced HIV and AIDS news stories", out of which *The Citizen* did a total of 83 (24.06%), *Sowetan* 99 (26.70%), *M & G* 37 (10.72%), *The Star* 85 (24.64%), and *City Press* 27 (7.83%), which is the least in this category. The overall quarterly analysis indicated that the media collectively produced 62 (96.88%), 59 (11.80%), 85 (94.44%), and 125 (95.42%) "Balanced" HIV and AIDS news stories from the 1st to 4th quarter respectively.

In the micro-quarterly analysis, *The Citizen* published 17 (26.56%), 15 (25%), 16 (17.78%), and 35 (26.72%) "Balanced" HIV and AIDS news stories in the 1st to 4th quarter respectively. But, *Sowetan* carried a total of 18 (28.13%), 25 (41.67%), 23 (25.59%), and 33 (25.19%) such stories in the 1st to 4th quarter respectively. *M & G* had 4 (6.25%) "Balanced" HIV and AIDS news stories in the 1st quarter, 12 (20%) in the 2nd quarter, 14 (15.56%) in the 3rd, and 7 (5.34%) in the 4th quarter. A total of 16 (25%) "Balanced" HIV and AIDS stories were supplied by *The Star'* in the 1st quarter, while 2nd, 3rd, and 4th quarters had 6 (10%), 25 (27.78%), and 38 (29.01%) such stories respectively. A total of 7 (10.94%) HIV and AIDS stories from the *City Press* in the 1st quarter were "Balanced" news reports, in addition to 1 (1.67%), 7 (7.78%), and 12 (9.16%) such stories in the 2nd to 4th quarter respectively (Fig. 5 A).

Biased News Reports

The end of the year analysis of "Biased" HIV and AIDS news stories showed the media communicated a total of 14 (4.06%) news stories in this category within the study period. *The Citizen* covered only 1 (0.29%) such story in the year, while *Sowetan* had 8 (2.32%), *The Star* 3 (0.87%) such stories, and none from M & G' in the year. The overall analysis shows that a total of 2 (3.13%) such stories by the media were in the 1st quarter, 1(1.11%) in the 2nd quarter, 5 (5.56%) in the 3rd, and 6 (4.58%) in the 4th quarter.

The micro quarterly analysis revealed that *The Citizen* produced 1 (1.11%) such story in the 3rd quarter only, and *Sowetan* had 1 (1.56%) biased stories in the 1st quarter, 1 (1.67%) in the 2nd, 2 (2.22%) in the 3rd, and 4 (3.05%) such stories in the 4th quarter. *The Star'* had 1 (1.56%), 1 (1.11%), and another 1 (0.76%) biased HIV and AIDS news story in the 1st, 3rd, and 4th quarter respectively ((Fig.5 B).

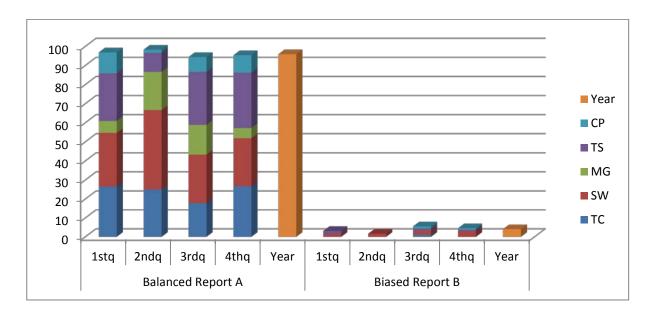


Figure 5: Objectivity in media HIV and AIDS news reporting (%) analysed on quarterly and full year basis, using five national newspapers.

5.1.6 Use of Research in HIV and AIDS News Reporting

The media use of research in HIV and AIDS communication was analysed by categorizing their HIV and AIDS news stories as "Well researched", "Fairly researched" and "Not researched" HIV and AIDS news stories. The results are presented in figure 6).

Well Researched HIV and AIDS Stories

The full year total media "Well researched" HIV and AIDS stories was 248 (71.89%), comprising 65 (18.84%) "Well researched' HIV and AIDS stories from *The Citizen*, 60 (17.39%) from *Sowetan*, and 32 (9.28%) from *M & G. The Star* contributed 68 (19.71%) and *City Press* 23 (6.67%) such stories. The overall quarterly analysis showed that the 1st, 2nd, 3rd, and 4th quarters had a total of 47 (73.44%), 49 (81.67%), 57 (63.33%), and 95 (72.52%) "Well researched" HIV and AIDS news stories respectively.

The micro quarterly analysis revealed that *The Citizens* reported 16 (25%) "Well researched" HIV and AIDS stories in the 1st quarter, 12 (20%) in the 2nd quarter, 11 (12.22%) in the 3rd, and a total of 26 (19.85%) such stories in the 4th quarter. There were 10 (15.63%) from *Sowetan* in the 1st quarter, 20 (33.33%) in the 2nd, 11 (12.22%) in the 3rd quarter, and 19 (14.50%) such stories in the 4th quarter. The M & G contributed a total of 4 (6.25%) "Well researched" HIV and AIDS stories in the 1st quarter, while their 2nd, 3rd, and 4th quarter totals in this category were 11 (18.33%), 10 (11.11%), and 7 (5.34%) stories.

The Star covered a total of 11 (17.19%) "Well researched" HIV and AIDS stories in the 1st quarter, 5 (8.33%) in the 2nd quarter, 20 (22.22%) in the 3rd, and 32 (24.43%) in the 4th quarter. *City Press* contributed a total of 6 (9.38%), 1 (1.67%), 5 (5.56%), and 11 (8.40%) 'Well researched' HIV and AIDS stories in the 1st, 2nd, 3rd, and 4h quarter respectively (Fig.6 A).

Fairly researched HIV and AIDS stories

The year's total of 'fairly researched' HIV and AIDS stories was 81 (23.48%). Out of this, *The Citizen'* has a full year total of 16 (4.64%) stories, *Sowetan* 40 (11.59%), 3 (0.87%) such stories came from *M & G*, 17 (4.93%) from *The Star*, and 5 (1.45%) from *City Press* at the end of the year. On overall quarterly basis, the media communicated a total of 14 (21.88%), 10 (16.67%), 24 (26.67%), and 33 (25.19%) such stories in the 1st, 2nd, 3rd, and 4th quarters respectively.

At the micro quarterly analysis level, *The Citizen* produced 1 (1.56%) "fairly researched" HIV and AIDS news story in the 1st, 2 (3.33%), 4 (4.44%), and 9 (6.87%) such stories in the 2nd, 3rd, and 4th quarter respectively. *The Citizen* covered only this category in the 4th quarter.

There were 8 (12.5%) 'fairly researched' HIV and AIDS stories communicated by *Sowetan* in the 1st quarter, 6 (10%) in the 2nd quarter, 10 (11.11%) in the 3rd, and 16 (12.21%) in the 4th quarter. *M & G* had 1 (1.67%), and 2 (2.22%) "fairly researched" HIV and AIDS stories in the 2nd and 3rd quarter respectively. They had none in the 1st and 4th quarters. *The Star* covered a total of 4 (6.25%), 1 (1.67%), 6 (6.67%), and another 6 (4.58%) such stories in the 1st to 4th quarter respectively. The *City Press* supplied 1 (1.56%), 2 (2.22%), and another 2 (1.53%) such HIV and AIDS stories in the 1st, 3rd, and 4th quarter respectively (Fig. 6 B).

Not researched HIV and AIDS stories

A total of 16 (4.64%) HIV and AIDS stories in the year were in the "Not researched" category distributed among the media thus: *The Citizen* 3 (0.87%), *Sowetan* 7 (2.03%), 'M & G' 2 (0.58%), *The Star* 3 (0.87%), and *City Press* 1 (0.29%). The overall quarterly analysis indicated that the media collectively produced a total of 3 (4.70%), 1 (1.67%), 9 (10%), and 3 (2.29%) "Not researched" HIV and AIDS stories in the 1st to 4th quarter respectively.

Micro quarterly analysis showed *The Citizen* contributed 1 (1.67%) and 2 (2.22%) *Not researched* HIV and AIDS news stories in the 2nd and 3rd quarters respectively. The *Sowetan* communicated 1 (1.56%), 4

(4.44%), and 2 (1.53%) such stories in the 1st, 3rd, and 4th quarters respectively. The *M* & *G* reported 2 (2.22%) in the 3rd quarter, *The Star* covered 2 (3.13%) such stories in the 1st quarter, and 1 (0.76%) in the 4th, while *City Press* had 1 (1.11%) in the 3rd quarter (Fig. 6 C).

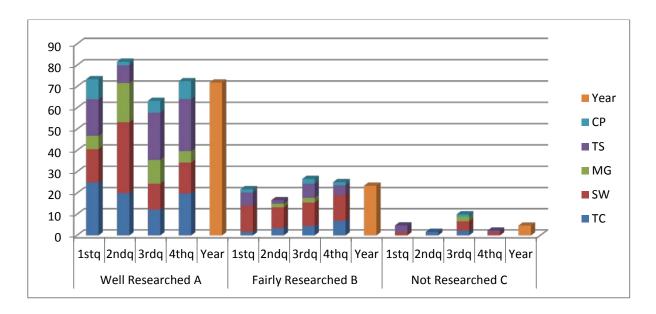


Figure 6: Use of research in media HIV and AIDS news reporting (%) analysed on quarterly and yearly basis using five national newspapers.

5.2 SOURCES OF HIV AND AIDS NEWS REPORTS

This variable was analysed based on different sources of media HIV and AIDS news reports in the study period. They include: Department of Health and Social Development; Government Minister; The Presidency; Private Organization; Government Opposition Party; Religious Organization; Donor Agency; Research Report; Research Centre; CSO; Journalists; Columnists; Letter to the editor; and Editorial (media house news comments). The results are shown in figure 7.

Department of Health and Social Development

For the year, the media sourced a cumulative total of 67 (19.42%) HIV and AIDS news stories from the "Department of Health and Social Development" (DHSD), with *The Citizen* contributing 21 (6.08%), *Sowetan* 18 (5.22%), *M & G* 2 (0.58%), *The Star* 24 (6.96%), and *City Press* 2 (0.58) news stories to this number. The overall quarterly breakdown was as follows: 12 (18.75%), 13 (21.67%), 17 (18.89%), and 25 (19.08%) HIV and AIDS news stories in the 1st, 2nd, 3rd, and 4th quarters respectively.

The micro quarterly analysis revealed that *The Citizen* communicated 4 (6.25%) HIV and AIDS news stories from the DHSD in the 1st quarter, 8 (13.33%) in the 2nd quarter, 3 (3.33%) in the 3rd, and 6 (4.58%) in the 4th quarter. The *Sowetan* sourced a total of 5 (7.81%), 3 (5.00%), 4 (4.44%), and 6 (4.85%) HIV and AIDS stories from the DHSD in the 1st, 2nd, 3rd, and 4th quarters respectively. The *M & G* reported just 1 (1.67%) and another 1 (1.11%) in the 2nd and 3rd quarters respectively. *The Star* sourced 3 (4.69%), 1 (167%), 9 (10.00%), and 11 (18.33%) HIV and AIDS news stories from the DHSD in the 1st to 4th quarter respectively, while a total of 2 (1.53%) such stories came from *City Press* in the 4th quarter (Fig. 7 A).

Government Minister

The media collectively sourced 20 (5.78%) HIV and AIDS stories from Government Ministers in the year, distributed thus: *The Citizen* and *Sowetan* 7 (2.03%) each, and *The Star* 6 (1.74%). There were no stories in *M & G* and *City Press* from this news source in the year. The overall quarterly analysis indicates that the media sourced 4 (6.25%), 3 (5.00%), 2 (2.22%), and 11 (8.40%) HIV and AIDS stories from "Government Minister" in the 1st, 2nd, 3rd, and 4th quarter respectively.

The quarterly and yearly analysis for each of the media showed that *The Citizen* sourced a total of 3 (4.69%) HIV and AIDS news stories from "Government Minister" in the 1st quarter, 2 (3.33%) in the 2nd quarter, 1 (1.11%) in the 3rd, and another 1 (0.76%) in the 4th quarter. The *Sowetan* received 1 (1.82%), another 1 (1.11%), and 5 (3.82%) in the 2nd, 3rd, and 4th quarters respectively. For *The Star*, 1 (1.56%) of their HIV and AIDS news stories was sourced from "Government Minister" in the 1st quarter, and 5 (3.52%) in the 4th, *City Press* did not have any news story in the year from this source (Fig. 7 B).

The Presidency

The Presidency supplied a total of 5 (1.45%) media reported HIV and AIDS stories in the year, carried by *The Citizen* 3 (0.87%), and 'The Star' 2 (0.58%). The overall quarterly analysis showed *The Citizen* carried 3 (4.68%), and *The Star* 2 (2.22%) of the stories in the 1st and 3rd quarters respectively.

The micro quarterly contributions of individual media were as follows: *The Citizen* reported 1 (1.56%) and 2 (2.22%) HIV and AIDS stories from "The Presidency" in the 1st and 3rd quarters respectively, while *The Star* had 2 (3.13%) in the 1st quarter (Fig. 7 C).

Private Organization

Private organizations supplied a cumulative total of 23 (6.67%) media communicated HIV and AIDS stories in the year, with a total of 3 (0.87%) such news stories from *The Citizen*, 10 (2.90%) from *Sowetan*, 5 (1.45%) from *M & G*, 3 (0.87%) from *The Star* and 2 (0.58%) from *City Press*. In the overall quarterly analysis, the media communicated a total of 2 (3.13%) stories from this source in the 1st quarter, 8 (13.33%) in the 2nd, 7 (7.78%) in the 3rd quarter, and 5 (3.82%) in the 4th.

The micro quarterly breakdown was thus: *The Citizen* 1 (1.56%), and 2 (1.53%) in the 1st and 2nd quarters respectively. The *Sowetan* reported 1 (1.56%), 6 (10%), 2 (2.22%), and 1 (0.76%) HIV and AIDS news stories from the same source in the 1st, 2nd, 3rd, and 4th quarters respectively. The *M & G* communicated 2 (3.33%) such stories in the 2nd quarter, 2 (2.22%) in the 3rd quarter, and 1 (0.76%) in the 4th quarter, while *The Star* had 1 (1.11%) and another 1 (0.76%) in the 3rd and 4th quarters respectively. The *City Press* had 2 (2.22%) such stories in the 3rd quarter (Fig. 7 D).

Government Opposition Party

The media cumulatively communicated a total of 6 (1.74%) HIV and AIDS news stories sourced from "Government Opposition party" in the year, with *The Citizen* contributing 3 (0.87%), *Sowetan* 2 (0.58%), and *The Star* 1 (0.26%) of such stories. The overall quarterly contributions of the media are 4 (6.25%) in the 1st quarter, 1 (1.67%) in the 2nd quarter, and another 1 (0.76%) in the 4th quarter.

The micro quarterly analysis indicated that *The Citizen* sourced 3 (4.69%) HIV and AIDS stories from this source in the 1st quarter, *Sowetan* 1 (1.67%), and another 1 (0.76%) in the 1st and 4th quarters respectively, while *The Star'* sourced 1 (1.56%) such story in the 1st quarter (Fig. 7 E).

Religious Organization

The year's total HIV and AIDS news stories sourced from "Religious organizations" was 10 (2.90%), with *The Citizen* covering 2 (0.58%), *Sowetan* 4 (1.16%), 'M & G' 1 (0.29%), and 3 (0.87%) of such stories in the year. The overall quarterly media coverage was a total of 2 (2.22%) in the 3rd quarter, and 8 (6.87%) in the 4th quarter.

The micro quarterly contributions are as follows: *The Citizen* had 2 (1.53%) in the 4^{th} quarter only, *Sowetan* 4 (3.05%) in the 4^{th} quarter, and 1 (1.11%) such story each from *M* & *G* and *The Star* in the 3^{rd} quarter. *The Star* had another 2 (1.59%) such stories in the 4^{th} quarter (Fig. 7 F).

Donor Agency

At the end of the year, the media communicated a total of 20 (5.78%) HIV and AIDS stories sourced from donor agencies. *The Citizen* reported 9 (2.61%), Sowetan 3 (0. 87%), *M & G* and *The Star* 4 (1.16%). Overall quarterly distributions are as follows: 3 (4.69%) in the 1st quarter, 8 (8.89%) in the 3rd, and 9 (6.87%) in the 4th quarter.

Quarterly analysis at individual media level showed that *The Citizen'* had 2 (3.13%), 4 (4.44%), and 3 (2.29%) HIV and AIDS news stories sourced from "Donor agency" in the 1st, 3rd, and 4th quarters respectively. *Sowetan* sourced 3 (2.29%) in the 4th quarter, *M* & *G* 4 (4.44%) in the 4th quarter, *The Star* reported 1 (1.56%) and 3 (2.29%) in the 1st and 4th quarter respectively (Fig. 7 G).

Research Report

A cumulative total of 18 (5.22%) HIV and AIDS research reports was communicated by the media in the year, out of which *The Citizen* reported 5 (1.45%), *Sowetan* 3 (0.87%), *M* & *G* 6 (1.74%), and 2 (0.58%) each by *The Star* and *City Press*. On overall quarterly analysis, 1st, 2nd, 3rd, and 4th quarter had 2 (3.13%), 3 (5.00%), 3 (3.33%), and 10 (7.63%) such stories respectively.

The micro quarterly analysis showed that *The Citizen* sourced a total of 1 (1.56%) and 4 (3.05%) such stories in the 1st and 4th quarters respectively. *Sowetan* carried 1 (1.56%) in the 1st quarter, another 1 (1.11%) in the 3rd, and another 1 (0.76%) in the 4th quarter. M & G reported 3 (5.00%) in the 2nd quarter, 2 (2.22%) in the 3rd, and 1 (0.76%) in the 4th quarter, but 'The Star' had 2 (1.53%) such stories in the 4th quarter of the year (Fig. 7 H).

Research Centre

The media sourced a cumulative total of 17 (4.93%) HIV and AIDS news stories from "Research centres" in the year. The total contribution is distributed amongst the individual media as follows: *The Citizen* 3 (0.87%), *Sowetan* 5 (1.45%), *M* & *G* 1 (0.29%), *The Star* 6 (1.84%), and *City Press* had 2 (0.58%) stories. On overall quarterly analysis for the 1st, 2nd, 3rd, and 4th quarters, the media sourced a total of 1 (1.56%), 3 (5.00%), 8 (8.89%), and 5 (3.82%) HIV and AIDS stories respectively from "Research centre".

The micro quarterly analysis for the individual media showed that *The Citizen* communicated 2 (3.33%) and 1 (0.76%) HIV and AIDS news stories from "Research centre" in the 2^{nd} and 4^{th} quarters respectively, while *Sowetan* reported 1 (1.56%) and 4 (4.344%) in the 1^{st} and 3^{rd} quarters respectively. The *M & G*

reported 1 (1.67%) in the 2nd quarter only, *The Star* 2 (2.22%) in the 2nd quarter and 4 (3.05%) in the 4th quarter respectively, while *City Press* had 2 (2.22%) in the 3rd quarter only (Fig. 7 I).

CS0

The media sourced a year's total of 64 (18.55%) HIV and AIDS news stories from "Civil Society Organization" (CSO), with *The Citizen* providing 15 (4.35%), *Sowetan* 23 (6.67%), *M & G* 4 (1.16%), *The Star* 17 (4.93%), and *City Press* 5 (1.45%) of such stories. The overall quarterly distribution is as follows: 9 (14.06%) in the 1st quarter, 12 (20.00%) in the 2nd, 21 (23.33%) in the 3rd, and 23 (17.56%) in the 4th quarter.

The micro quarterly analysis indicates that *The Citizen* communicated 2 (3.13%), 1 (1.67%), 3 (3.33%), and 9 (6.87%) such stories in the 1st, 2nd, 3rd and 4th quarters respectively from this source. The *Sowetan* had 5 (7.81%), another 5 (8.33%), 6 (6.67%), and 7 (5.34%) of such stories in the 1st, 2nd, 3rd, and 4th quarter respectively. The *M* & *G* reported 1 (1.56%) in the 1st quarter, 2 (2.22%) in the 3rd, and another 1 (0.76%) in the 4th quarter. *The Star* covered 1 (1.56%) such story in the 1st quarter, 5 (8.33%) in the 2nd, 9 (10.00%) in the 3rd, and 3 (2.29%) in the 4th quarter. The *City Press* had 1 (1.67%) in the 2nd quarter, another 1 (1.11%) in the 3rd, and 3 (2.29%) such stories in the 4th quarter (Fig. 7 J).

Journalists

The media journalists produced a cumulative total of 41 (11.88%) HIV and AIDS stories from in-house in the year, with *The Citizen'* contributing 5 (1.45%) HIV and AIDS stories from their journalists, *Sowetan* had 8 (2.32%), 'M & G' 9 (2.61%), and *The Star* 11 (3.19%). Quarterly contribution by each of the media was: 12 (18.75%) in the 1st quarter, 5 (8.33%) in the 2nd, 7 (7.78%) in the 3rd, and 17 (12.98%) in the 4th quarter.

The individual media quarterly analysis revealed that *The Citizen* depended on their journalists for 5 (3.82%) HIV and AIDS stories in the 4th quarter, while *Sowetan* had 2 (3.13%) such stories in the 1st quarter, 2 (5.00%) in the 2nd, 2 (2.22%) in the 3rd, and another 2 (1.53%) in the 4th quarter. *M & G* communicated 1 (1.56%) such story in the 1st quarter, 2 (2.22%) in the 3rd and 3 (2.29%) in the 4th quarter. *The Star* had 3 (4.69%) in the 1st quarter, 2 (2.22%) in the 3rd quarter, and 6 (4.58%) in the 4th quarter. For *City Press*, there were 6 (9.38%) such stories in the 1st quarter, 1 (1.11%) in the 3rd quarter, and another 1 (0.76%) in the 4th quarter (Fig. 7 K).

Columnist

At the end of the year, the media produced a cumulative total of 25 (7.25%) HIV and AIDS column articles through their Columnists, out of which *The Citizen* contributed 3 (0.87%), *Sowetan* 17 (4.93%), *The Star* 4 (1.16%), and *City Press* 1 (9.29%). The overall quarterly distribution are as follows: 1st, 2nd, 3rd, and 4th quarter had 6 (0.38%), 5 (8.33%), 8 (8.89%), and 6 (4.58%) Column articles respectively.

At he micro quarterly analysis level, *The Citizen'* communicated 2 (2.22%) HIV and AIDS Column articles in the 3rd quarter and 1 (0.76%) in the 4th quarter, *Sowetan* 4 (6.25%) in the 1st quarter, 5 (8.33%) in the 2nd, 3 (3.33%) in the 3rd, and 5 (3.82%) in the 4th quarter. *The Star* had 2 (3.13%) in the 1st quarter, and another 2 (2.22%) in the 3rd quarter, while *City Press* used 1 (1.11%) in the 3rd quarter (Fig. 7 L).

Readers (Letter to the Editor)

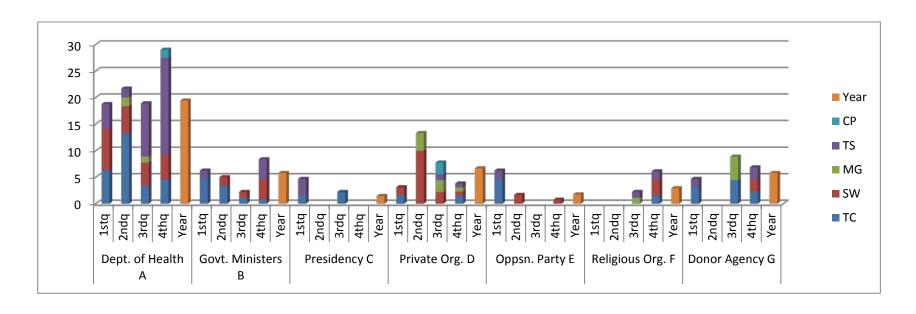
There were a cumulative total of 23 (6.67%) "Letter to the Editor" on HIV and AIDS in the year, with *The Citizen* communicating 3 (0.87%), *Sowetan* 6 (1.74%), 'M & G' 3 (0.87%), *The Star* 5 (1.45%) and *City Press* 6 (1.74%) such letters. The overall quarterly analysis showed that there were 6 (9.38%) such letters in the 1st quarter, 5 (8.33%) in the 2nd, 4 (4.44%) in the 3rd, and 8 (6.11%) in the 4th quarter.

The micro quarterly analysis distribution showed that *The Citize'* communicated 2 (3.33%) such letters in the 2nd quarter, and just 1 (1.11%) in the 3rd quarter. *Sowetan* had 3 (5.00%), 2 (2.22%), and 1 (0.76%) in the 2nd, 3rd and 4th quarter respectively, while *M & G* had 2 (3.13%) in the 1st quarter, and another 1 (0.76%) in the 4th quarter. *The Star* carried 3 (4.69%) "Letter to the editor" in the 1st quarter, and 2 (1.53%) in the 4th, while *City Press* had 1 (1.56%) in the 1st quarter, another 1 (1.11%) in the 3rd and 4 (3.05%) in the 4th quarter (Fig. 7 M).

Editorial (Media House Comments)

A cumulative total of 6 (1.74%) HIV and AIDS based editorials were done by the media in the year, with 2 (0.58%) editorials coming from *The Citizen*, 1 (0.29%) from *Sowetan*, 2 (0.58%) from *M & G*, and 1 (0.29%) from *City Press*. The overall quarterly breakdown was as follows: 2 (3.33%) HIV and AIDS editorials in the 2^{nd} quarter, 1 (1.11%) in the 3^{rd} , and 3 (2.29%) in the 4^{th} quarter.

The micro quarterly analysis indicated that *The Citizen* did 1 (1.11%) HIV and AIDS editorial in the 3^{rd} quarter, and another 1 (0.76%) in the 4^{th} quarter, and *Sowetan* had 1 (0.76%) in the 4^{th} quarter. The *M* & *G* communicated 2 (3.33%) in the 2^{nd} quarter, while *City Press* covered 1 (0.76%) in the 4^{th} quarter (Fig. 7 N).



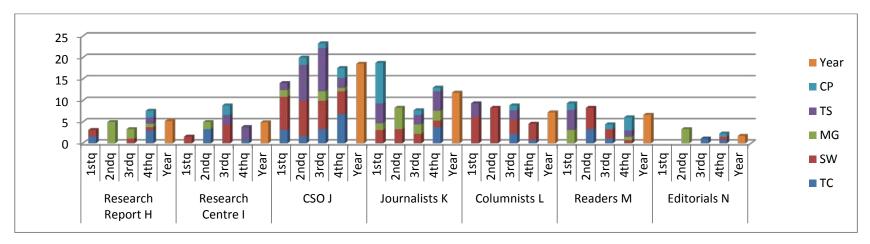


Figure 7a: Sources of media HIV and AIDS news stories (%) analysed on quarterly and full year basis using five national newspapers.

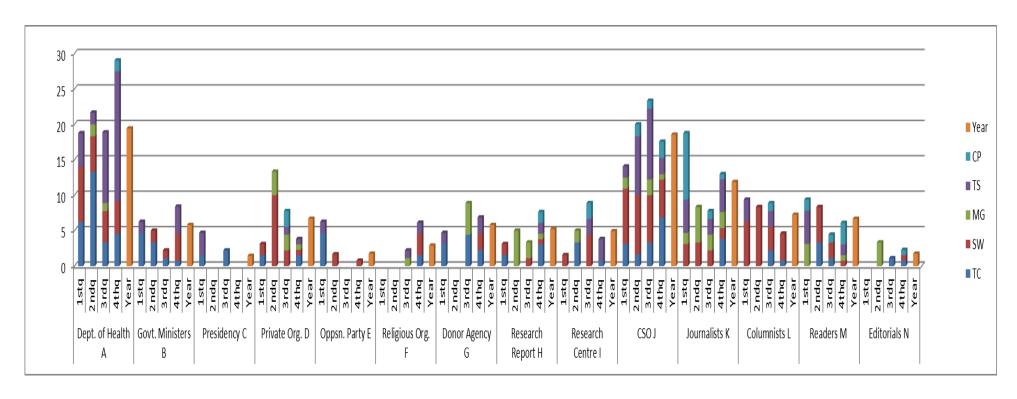


Figure 7b: Sources of media HIV and AIDS news stories analysed on quarterly and full year basis using five national newspapers.

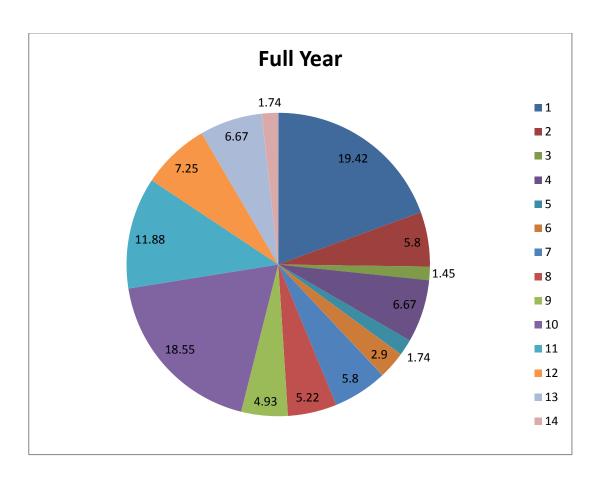


Figure 7c: Full year analysis (%) of sources of media HIV and AIDS news stories using five national newspapers.

The series numbered 1 to 14 represents (in ascending order) Department of Health (1), Government Ministers (2), Presidency (3), Private Organization (4), Opposition Party (5), Religious Organization (6), Donor Agency (7), Research Report (8), Research Centre (9), CSO (10), Journalists (11), Columnists (12), Readers (13), Editorials (14).

5.3 MAIN SUBJECTS OF HIV AND AIDS MEDIA NEWS REPORTS

The media covered different HIV and AIDS subjects in their news stories within the year. The subvariables for this study are - Origin Of HIV and AIDS; HIV and AIDS Prevalence; HIV and AIDS Prevention, HIV and AIDS Testing; HIV and AIDS Awareness and Education; Vaccine Development; Economic Impact of HIV and AIDS; Medical Costs of HIV and AIDS; Politics of AIDS; AIDS Treatment; Cure of AIDS; Scientific Discovery; Social Behavioural Pattern; Sexual Transmission Rate, HIV and AIDS

Social Costs; HIVAIDS Funding; HIV and AIDS Infection; and HIV and AIDS Vulnerable Group. The results are as shown in figure 8.

Origin of HIVAIDS

The year's cumulative total of HIV and AIDS news stories on the "Origin of HIV and AIDS" was 2 (0.58%) stories, contributed by *The Star* in the 1st quarter of the year (Fig. 8 A).

HIVAIDS Prevalence

The media cumulatively reported a total of 29 (8.41%) "HIV and AIDS Prevalence" news stories in the year, contributed by *The Citizen* 7 (2.03%), *Sowetan* 10 (2.90%), *The Star* 8 (2.32%), *M & G* and City Press reported 2 (0.58%) each. The overall quarterly contributions in the 1st, 2nd, 3rd, and 4th quarters were 5 (7.81%), 2 (3.33%), 1 (1.11%), and 21 (16.03%) respectively.

Micro quarterly contributions by each of the media were thus: *The Citizen* 2 (3.13%), in the 1st quarter, 1 (1.67%) in the 2nd quarter and 4 (3.05%) in the 4th quarter. The *Sowetan* had 2 (3.13%) in the 1st quarter and 8 (6.11%) in the 4th quarter. M & G 1 (1.67%) in the 2nd quarter, and another 1 (1.11%) such story in the 3rd quarter (Fig. 8 B).

HIV and AIDS Prevention

At the end of the year, the media covered a total of 93 (26.96%) "HIV and AIDS Prevention" news stories, out of which *The Citizen* contributed 25 (7.25%), *Sowetan* 19 (5.51%), *M & G* 14 (4.06%), *The Star* 28 (8.21%) and *City Press* 17 (2.03%) of such stories. The overall quarterly analysis showed the media contributed 20 (31.25%) "HIV and AIDS Prevention" news stories in the 1st quarter, 16 (26.67%) in the 2nd quarter, 31 (34.44%) in the 3rd, and 26 (19.84%) in the 4th quarter.

The micro quarterly analysis indicated that *The Citizen* reported 6 (9.38%), 4 (6.67%), 8 (8.89%), and 26 (19.84%) "HIV and AIDS Prevention" news stories in the 1st, 2nd, 3rd, and 4th quarter respectively. Sowetan covered 3 (4.69%), 6 (10.00%), 5 (5.56%), and another 5 (3.82%) such news in the 1st, 2nd, 3rd and 4th quarters respectively *M & G* coverage was 3 (4.69%), 3 (5.00%), 5 (5.56%) and 5 (3.82%) in the 1st, 2nd, 3rd, and 4th quarters respectively. *The Star* had a total of 3 (4.69%) "HIV and AIDS Prevention" stories in the 1st quarter, 3 (5.00%) in the 2nd, 9 (10.00%) in the 3rd, and 13 (9.92%) in the 4th quarter. *City Press* coverage was 5 (7.81%) stories in the 1st quarter, and 2 (2.22%) in the 3rd quarter (Fig. 8 C).

HIV and AIDS Testing

There were a cumulative total of 61 (17.68%) news stories on 'HIV and AIDS testing' at the end of the year. The year's breakdown showed that 22 (6.67%) of the stories were from *The Citizen*, 21 (6.09%) from *Sowetan*, 2 (0.58%) from *M* & *G*, 9 (2.16%) from *The Star*, and 6 (1.74%) from *City Press*. The overall quarterly analysis showed that there were a total of 6 (9.38%) "HIV and AIDS Testing" stories in the 1st quarter, 18 (30%) in the 2^{nd} quarter, 12 (13.33%) in the 3^{rd} and 25 (19.08%) in the 4^{th} quarter.

At the micro quarterly level, *The Citizen* communicated a total of 2 (3.13%) "HIV and AIDS testing" stories in the 1st quarter, 9 (15.0%) in the 2nd, and 3 (3.33%) in the 3rd quarter and 9 (6.87%) in the 4th quarter. *Sowetan* covered 4 (6.25%) in the 1st quarter, 9 (15%) in the 2nd, 1 (1.11%) in the 3rd, and 7 (5.34%) such stories in the 4th quarter. *M* & *G* had 1 (1.11%) "HIV and AIDS testing" story in the 3rd quarter, and another 1 (0.76%) in the 4th quarter. *The Star* communicated 5 (5.56%) in the 3rd quarter and 4 (3.05%) such stories in the 4th quarter, while the *City Press* had 2 (2.22%) in the 3rd, and 4 (3.05%) in the 4th quarter (Fig. 8 D).

HIV and AIDS Awareness and Education

A cumulative total of 14 (4.06%) HIV and AIDS news stories were in the "HIV and AIDS Awareness and Education" category in the year. *The Citizen* contributed 2 (0.58%) stories, *Sowetan* 7 (2.03%), *M & G* 1 (0.29%), *The Star* 3 (0.87%), and *City Press* 1 (0.29%) to this category. The overall quarterly distribution were 3 (4.69%) in he 1st quarter, 3 (5.00%) in the 2nd, 3 (3.33%) in the 3rd, and 5 (3.82%) in the 4th quarter.

At the micro quarterly analysis *The Citizen* covered 1 (1.56%) "HIV and AIDS Awareness and Education" in the 1st quarter, and another 1 (0.76%) in the 4th. *Sowetan* did 1 (1.56%), 3 (5.00%), 1 (1.11%), and 2 (1.53%) such stories in the 1st, 2nd, 3rd, and 4th quarter. *M & G* had 1 (1.56%) in the 1st quarter, while *The Star* had 2 (2.22%) in the 3rd quarter, and 1 (0.76%) in the 4th quarter. The *City Press* reported 1 (0.76%) such story in the 4th quarter (Fig. 8 E).

Vaccine Development

At the end of the year, the media covered only 1 (0.29%) HIV and AIDS 'Vaccine development' news story, contributed by *Sowetan* in the 1st guarter (Fig. 8 F).

Economic Impact of AIDS

For this sub-variable, the media cumulative total coverage in the year was 5 (1.45%) news stories, with *Sowetan* covering 2 (0.58%), M & G 1 (0.29%), and *The Star* 2 (0.58%) such stories. The overall quarterly distribution were 1 (1.56%), another 1 (1.67%), 2 (2.22%), and 1 (0.76%) stories in the 1st, 2nd, 3rd, and 4th quarters respectively.

The micro quarterly analysis for each media showed that *The Citizen* did not report on this category. *Sowetan* had 2 (2.22%) "HIV and AIDS Economic impact" news stories in the 3^{rd} quarter, and M & G reported 1 (1.67%) in the 2^{nd} quarter. *The Star* did 1 (1.56%) such story in the 1^{st} quarter, and another 1 (0.76%) in the 4^{th} quarter, and *City Press* had no such story in the year (Fig. 8 G).

Medical Costs of AIDS

A year's total of 7 (2.03%) "Medical costs of AIDS" news stories was reported by the media, with The *Citizen* covering 2 (0.58%), *Sowetan* 4 (1.16%), and *City Press* 1 (0.29%) of the stories. The overall quarterly analysis showed the media reported a total of 2 (3.13%) in the 1st quarter, 1 (1.67%) in the 2nd quarter, 1 (1.11%) in the 3rd, and 3 (2.29%) such stores in the 4th quarter.

The micro quarterly analysis for each media revealed that 'The Citizen' reported 1 (1.11%) such story in the 3rd quarter, and another 1 (076%) in the 4th quarter. The 'Sowetan' covered 2 (3.13%) in the 1st quarter, 1 (1.67%) in the 2nd, and another 1 (0.76%) in the 4th quarter. 'M & G' and 'The Star' did not report on this category, but 'City Press' had only 1 (0.76%) such story in the 4th quarter (Fig. 8 H).

Politics of AIDS

'Politics of AIDS' stories were 18 (.22%) in the media, in the year. *The Citizen* contributed a total of 2 (0.58%), *Sowetan*, 4 (1.16%), *M & G* 5 (1.49%), *The Star* 4 (1.16%), and *City Press* 3 (0.87%) to this year total. The overall quarterly media distribution was as follows: 6 (10.00%) such stories in the 2nd quarter, and none in the 1st quarter, 5 (5.56%) in the 3rd, and a total of 7 (5.34%) in the 4th quarter.

The micro analysis indicated that *The Citizen* covered a total of 2 (1.53%) "Politics of AIDS" news stories in the 4^{th} quarter only. The *Sowetan* had 2 (3.33%) in the 2^{nd} quarter, and another 2 (1.53%) in the 4^{th} . There were 2 (3.33%) such stories from M & G in the 2^{nd} quarter, and 3 (3.33%) in the 3^{rd} , and none in the 4^{th} quarter. *The Star* did 1 (1.67%) in the 2^{nd} quarter, another 1 (1.11%) in the 3^{rd} quarter and 2

(1.53%) in the 4^{th} . The *City Press* had 1 (1.67%) in the 2^{nd} quarter, another 1 (1.11%) in the 3^{rd} , and another 1 (0.76%) in the 4^{th} quarter (Fig. 8 I).

AIDS Treatment

The "AIDS Treatment" category received a cumulative total of 37 (10.72%) news coverage in the year, out of which *The Citizen* covered 10 (2.90%), *Sowetan* 9 (2.61%), *M & G*, 2 (0.58%), and 15 (4.35%) such stories were from *The Star*. The overall quarterly analysis showed the media contributions as thus: 7 (10.94%) "AIDS treatment" news stories in the 1st quarter, 6 (10.00%) in the 2nd, 14 (15.56%) in the 3rd, and 13 (9.92%) in the 4th quarter.

The micro quarterly analysis distribution revealed that *The Citizen* supplied a total of 3 (4.69%) such stories in the 1st quarter, 1 (1.67%) in the 2nd, 4 (4.44%) in the 3rd, and 2 (1.53%) in the 4th quarter. The *Sowetan* had 3 (5.00%) such stories in the 2nd quarter, another 3 (3.33%) in the 3rd, and another 3 (2.29%) in the 4th quarter. The *M & G* contributed 1 (1.11%) such story in the 3rd quarter, and another 1 (0.76%) in the 4th, while *The Star* had a total of 4 (6.25%), 2 (3.33%), 3 (3.33%), and 6 (4.58%) in the 1st to 4th quarter respectively. The *City Press* communicated a total of 3 (3.33%) and 1 (0.76%) such stories in the 3rd and 4th quarter respectively (Fig. 8 J).

Cure of AIDS

End of the year total for media "Cure of AIDS" stories was just 2 (0.58%), contributed 1 (1.56%) each by *The Citizen* and *Sowetan* in the 1st quarter (Fig. 8 K).

HIV and AIDS Scientific Discovery

A cumulative total of 3 (0.87%) HIV and AIDS "Scientific discovery" stories was communicated by the media in the year, with *The Citizen* and *The Star* covering 1 (0.29%) and 2 (0.58%) such stories respectively. The overall quarterly analysis showed there was no such story in the 1st and 2nd quarters, but 3rd and 4th quarters had a total of 2 (2.22%) and 1 (0.76%) such stories respectively.

On the respective media quarterly analysis, *The Citizen* reported 1 (0.76%) such story in the 4th quarter, but *Sowetan*, *M* & *G* and *City Press* did not report any one in the year. *The Star* communicated a total of 2 (2.22%) such stories in the 3rd quarter (Fig. 8 L).

Social Behavioural Pattern

There were a total of 18 (5.22%) HIV and AIDS related "Social behavioural pattern" of South Africans in the year. A total of 3 (0.87%) such stories was communicated by *The Citizen*, 8 (2.32%) by *Sowetan*, 2 (0.58%) by *M & G*, and *The Star* and *City Press* had a total of 3 (0.87%) and 2 (0.58%) such stories respectively. The overall quarterly contributions were a total of 7 (10.94%), 2 (3.33%), 6 (6.67%), and 3 (2.29%) in the 1st to 4th quarter respectively.

At the micro analysis level, *The Citizen* communicated 2 (3.13%) and 1 (0.76%) HIV and AIDS related "Social behavioural pattern" news in the 1st and 4th quarters respectively. The *Sowetan* had 1 (1.56%) in the 1st quarter, 5 (5.56%) in the 3rd, and 2 (1.53%) in the 4th quarter. There were 2 (3.33%) such stories in M & G in the 2nd quarter only, while *City Press* had a total of 2 (3.13%) in the 1st quarter only (Fig. 8 M).

Sexual Transmission Rate

The media collectively reported a total of 2 (0.58%) HIV and AIDS "Sexual transmission rate" news stories in the year, contributed by *Sowetan* 1 (1.56%) and 'The Star' 1 (1.11%) in the 1st and 4th quarter respectively (Fig. 8 N).

HIV and AIDS Social Costs

"HIV and AIDS Social costs" was the main subject of just 3 (0.87%) media stories in the year, with M & G contributing 1 (0.29%) and *The Star* 2 (0.58%) such stories. There overall quarterly contribution were 2 (3.13%) in the 1st quarter and 1 (1.67%) in the 2nd quarter (Fig. 8 O).

HIV and AIDS Management

The media covered a cumulative total of 17 (4.93%) "HIV and AIDS management" news stories in the year, out of which *The Citizen* supplied 1 (0.29%), *Sowetan* 9 (2.61%), and *City Press* 3 (0.87%). The overall quarterly analysis distribution were 2 (3.13%), 4 (6.67%), another 4 (4.44%), and 7 (5.54%) stories in the 1st to 4th quarters respectively.

The micro quarterly analysis revealed that *The Citizen'* had 1 (0.76%) 'HIV and AIDS management' story in the 4^{th} quarter, and The *Sowetan* reported 2 (3.13%), 2 (3.33%), 3 (3.33%), and 2 (1.53%) in the 1^{st} to 4^{th} quarter respectively. *M & G* had 2 (3.33%), 1 (1.11%), and 1 (0.76%) in the 2^{nd} to 4^{th} quarters respectively, while *City Press* reported 3 (2.29%) such stories in the 4^{th} quarter only (Fig. 8 P).

Demographic Impact of AIDS

The media communicated a cumulative of 8 (2.32%) "Demographic impact of AIDS" news stories. The overall quarterly analysis indicated that *The Citizen* contributed a total of 2 (0.58%), *Sowetan* 4 (1.16%), *M & G* and *The Star* had 1 (0.26%) news story each. On quarterly basis, the media covered a total of 2 (3.13%) "Demographic impact of AIDS" stories in the 1st quarter, 4 (4.44%) stories in the 3rd quarter, and another 4 (3.05%) stories in the 4th quarter.

The overall quarterly analysis indicated that *The Citizen* reported 1 (1.11%) "Demographic impact of AIDS" story in the 2^{nd} quarter, and another 1 (0.76%) in the 4^{th} quarter. *Sowetan* had 2 (2.22%) in the 3^{rd} quarter, and another 2 (1.53%) in 4^{th} quarter. The *M & G* communicated just 1 (0.76%) such story in the 4^{th} quarter. *The Star* had 1 (1.11%) in the 3^{rd} quarter only, but *City Press* had none in all the quarters (Fig. 8 Q).

HIV and AIDS Funding

The media communicated a cumulative total of 13 (3.77%) "HIV and AIDS funding" news stories in the year, with *The Citizen* contributing a total of 4 (1.16%), *Sowetan* 3 (0.87%), *M & G* 1 (0.29%), and *The Star* 5 (1.45%) such stories. Their overall quarterly contribution were 1 (1.56%), another 1 (1.11%), 11 (8.40%) such news stories in the 1st, 3rd, and 4th quarters respectively.

The micro quarterly analysis showed that *The Citizen, Sowetan* and *M & G* reported 4 (3.05%), 3 (2.29%), and 1 (0.76%) "HIV and AIDS funding" news stories respectively in the 4^{th} quarter. *The Star* had 1 (1.56%) such story in the 1^{st} quarter, 1 (1.11%) in the 3^{rd} quarter, and 3 (2.29%) in the 4^{th} , but *City Press* did not have any one (Fig. 8 R).

HIV and AIDS Infection

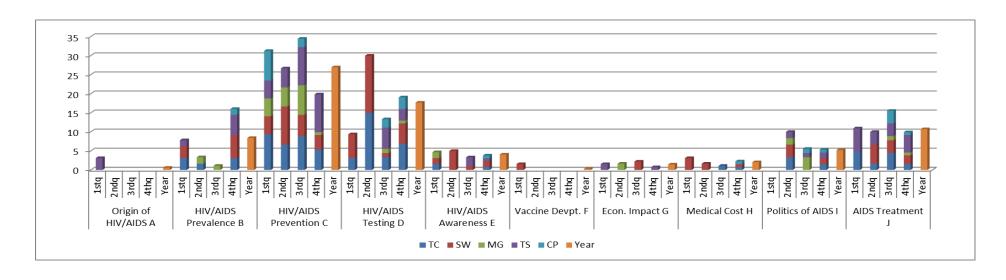
"HIV and AIDS Infection", was covered in a total of 5 (1.45%) news stories in the year, out of which *The Citizen* produced 1 (0.29%), *Sowetan* 1 (0.29%), and *The Star* 3 (0.87%) stories. On overall quarterly basis, the media communicated a total of 2 (3.13%) "HIV and AIDS infection" stories in the 1st quarter, and 3 (2.29%) in the 4th quarter. There was no such news story in the 2nd and 3rd quarters.

At micro quarterly analysis level, *The Citizen* reported 1 (1.76%) "HIV and AIDS infection" story in the 4th quarter only, and *Sowetan* also covered 1 (1.56%) such story, in the 1st quarter only. *The Star* produced 1

(1.56%) in the 1st quarter, and 2 (1.53%) in the 4th quarter. The M & G and City Press did not have any such story in the year (Fig. 8 S).

HIV and AIDS Vulnerable Group

At the end of the year, the media covered a total of 4 (1.16%) "HIV and AIDS Vulnerable Group" news stories, contributed by *Sowetan* 3 (0.87%), and M & G 1 (0.29%) story. The overall quarterly analysis showed that *Sowetan* communicated 3 (3.33%) such news stories in the 3rd quarter only, and M & G 1 (0.76%) only in the 4th quarter (Fig. 8 T).



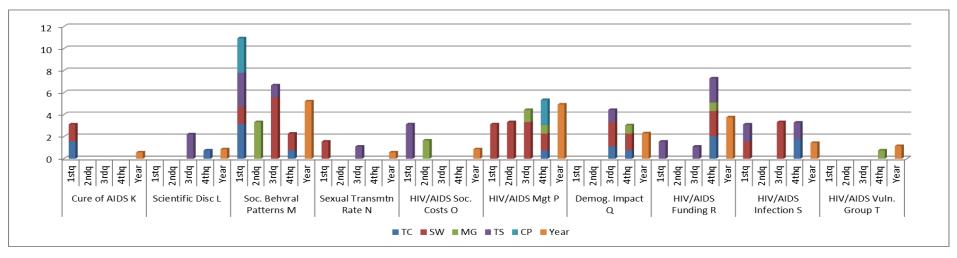


Figure 8: Main subjects of media HIV and AIDS news stories analysed on quarterly and full year basis, using five national newspapers.

5.4 MEDIA LANGUAGE USE IN HIV AND AIDS NEWS REPORTING

The media language use in HIV and AIDS news coverage was determined using the following variables:

- 5.4.1 Constructiveness of Media HIV and AIDS News reports
- 5.4.2 Professionalism in Media Use of Language in HIV and AIDS reporting
- 5.4.3 Language Tone of Media HIV and AIDS News reports

Under each of these variables above are some sub-variables which were used to analyse the contributions of the variables as used by the media in the media language use in HIV and AIDS coverage. The results are also presented quarterly and yearly.

5.4.1 Constructiveness of Media HIV and AIDS News Reports

Constructiveness of HIV and AIDS news stories communicated by the media was studied using three sub-variables, namely, Very Constructive and Informative HIV and AIDS News Stories; Constructive and Informative HIV and AIDS News Stories; and Not Constructive and Informative HIV and AIDS News Stories. The results of the analysis are as shown in figure 9 A-C.

Very Constructive and Informative HIV and AIDS News Stories

A cumulative total of 199 (57.68%) HIV and AIDS news stories communicated by the media in the year were "Very constructive and informative". The breakdown of this number showed that *The Citizen* contributed a total of 50 (14.49%), *Sowetan* 42 (12.17%), M & G 26 (7.54%), *The Star* 60 (17.39%), and *City Press* 21 (6.09%) news stories to this category. On overall quarterly contribution, the media reported a total of 33 (51.56%), 31 (51.67%), 35 (38.89%), and 100 (76.34) such stories in the 1st, 2nd, 3rd, and 4th quarters respectively.

The breakdown of each media contribution in each quarter are as follows: *The Citizen* contributed a total of 9 (14.06%) news stories to the "Very Constructive and Informative" category in the 1st quarter, another 9 (15%) in the 2nd, 7 (7.78%) in the 3rd, and 25 (19.08%) in the 4th quarter. The *Sowetan* covered a total of 6 (9.38%) in the 1st quarter, 9 (15%) in the 2nd, 5 (5.56%) in the 3rd, and 22 (19.08%) such stories in the 4th quarter. The *M & G* published 2 (3.13%) in the 1st quarter, 7 (11.67%) in the 2nd, 10 (11.11%) in the 3rd, and another 7 (5.34%) such stories in the 4th quarter. There were 12 (18.75%) "Very Constructive and Informative" HIV and AIDS stories from *The Star* in the 1st quarter, 5 (8.33%) in the 2nd, 9 (10%) in the 3rd, and 34 (25.95%) in the 4th quarter. The *City Press* reported a total of 4 (6.25%) such stories in the 1st quarter, 1 (1.67%) in the 2nd, 4 (4.44%) in the 3rd, and 12 (9.16%) in the 4th quarter (Fig. 9 A).

Constructive and Informative HIV and AIDS News Stories

A cumulative total of 143 (41.49%) media HIV and AIDS news stories were "Constructive and informative" in the year, out of which *The Citizen* communicated a total of 34 (9.86%) stories, *Sowetan* 62 (17.97%), *M & G* 11 (3.19%), *The Star* 28 (8.12%), and *City Press* 7 (2.03%). On overall quarterly basis, the media 1st, 2nd, 3rd, and 4th quarter distribution of the year's total were 31 (48.44%), 29 (48.33%), 55 (61.11%) and 28 (21.37%) such news stories.

The micro quarterly analysis indicated that in the 1st, 2nd, 3rd, and 4th quarters, *The Citizen* reported a total of 8 (12.5%), 6 (10%), 10 (11.11%), and 10 (7.63%) "Constructive and informative" HIV and AIDS news stories respectively. The *Sowetan* communicated a total of 13 (0.31%), 17 (28.33%) 20 (22.22%), and 12 (9.16%) such stories in the 1st, 2nd, and 4th quarters respectively. The *M & G* covered a total of 2 (3.13%), 5 (8.33%), and 4 (4.44%) such stories in the 1st, 2nd, and 3rd quarters respectively. The *M & G* had no story in this category in the 4th quarter. *The Star* had a total of 5 (7.81%) "Constructive and Informative" HIV and AIDS news stories in the 1st quarter, none in the 2nd quarter, 17 (18.89%) in the 3rd, and 5 (3.82%) in the 4th quarter. *City Press* had 3 (4.69%), 4 (4.44%), and just 1 (0.76%) in the 1st, 3rd and 4th quarter. There was none in the 2nd quarter (Fig. 9 B).

Not Constructive and Informative HIV and AIDS news stories

A cumulative total of 4 (1.16%) "Not Constructive and Informative" HIV and AIDS news stories were communicated by the media in the year. *Sowetan* contributed 3 (0.87%) news stories to this year's total, in the fourth quarter (2.29%), and 1 (0.29%) such story came from *The Star* in the year, in the 2nd quarter (1.67%), (Fig. 9 C).

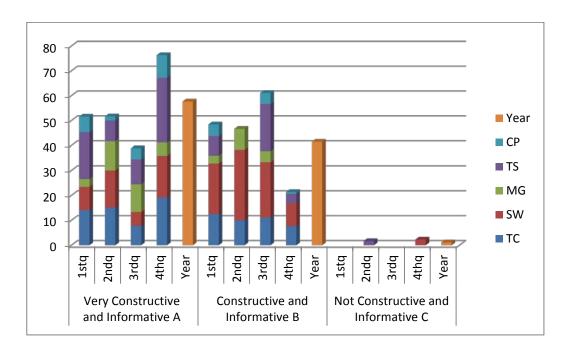


Figure 9: Language constructiveness of the media in HIV and AIDS news reporting (%), analysed on quarterly and full year basis using five national newspapers.

5.4.2 Media Use of Language in HIV and AIDS News Reporting

The sub-variables for the study of professionalism in media use of language in HIV and AIDS reporting are: Professional language use; and Unprofessional language use in HIV and AIDS reporting. The results are presented in figure 10 A - B.

Media Professional Language Use in HIV and AIDS News Reports

The media communicated a cumulative total of 343 HIV and AIDS news stories in "professional" or appropriate HIV and AIDS reporting language (99.42%) out of their overall total of 345 (100%) HIV and AIDS news stories in the year. *The Citizen* produced a total of 83 (24.06%) news stories in this category, *Sowetan* 106 (30.72%), 'M & G' 37 (10.72%), *The Star* 88 (25.51%), and *City Press* 29 (8.41%). The overall quarterly contribution by the media were 63 (98.45%) HIV and AIDS news stories communicated in professional or appropriate HIV and AIDS reporting language in the 1st quarter, 60 (100%) in the 2nd, 90 (100%) in the 3rd, and 130 (99.24%) such stories in the 4th quarter.

The micro quarterly analysis revealed that *The Citizen* reported a total of 17 (26.56%) HIV and AIDS news stories in professional or appropriate HIV and AIDS reporting language in the 1st quarter, 15 (25%) in the 2nd, 17 (18.89%) in the 3rd, and 34 (25.95%) in the 4th quarter. The *Sowetan* did a total of 18

(28.13%) such news stories in the 1st quarter, 6 (43.33%) in the 2nd, 25 (27.78%) in the 3rd, and 37 (28.24%) in the 4th quarter. The M & G had a total of 4 (6.25%) such stories in the 1st quarter, 12 (12%) in the 2nd, 14 (16.56%) in the 3rd, and a total of 7 (5.34%) in the 4th quarter. *The Star* contribution to this category in the 1st, 2nd, 3rd, and 4th quarters were 17 (26.56%), 6 (10%), 26 (28.89%), and 39 (29.77%) news stories respectively. *City Press* reported a total of 7 (10.94%), 1 (1.67%), 8 (8.89%) and 13 (9.92%) such news stories in the 1 to 4th quarter respectively (Fig. 10 A).

Media Unprofessional Language Use in HIV and AIDS News Reports

There was a cumulative total of just 2 (0.58%) media "Unprofessional language Use" in HIV and AIDS news reporting in the year. *The Citizen* contributed 1 (0.29%) news story to this category in the year, in the 4th quarter (0.76%), and *Sowetan* communicated another 1 (0.29%) such story in the year, in the 1st quarter (1.56%), (Fig. 10 B).

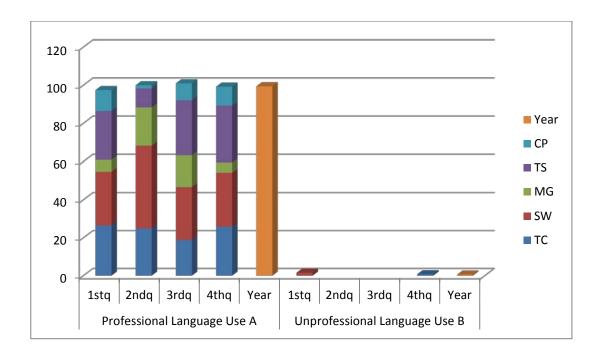


Figure 10: Professionalism in media language use in HIV and AIDS news reporting (%), analysed on quarterly and full year basis using five national newspapers.

5.4.3 Language Tone of Media HIV and AIDS News Reports

The study of media HIV and AIDS news tone looked at the following sub-variables; Negative tone; Positive tone; and Neutral tone. The results are as shown in figure 11 A - C.

Negative Tone of Media HIV and AIDS News Reports

Overall for the year, the media collectively covered a total of 16 (4.64%) HIV and AIDS stories in "negative tone". Out of this, *The Citizen* reported a total of 8 (2.3%) news stories, *Sowetan* 2 (0.58%), *M* & *G* 1 (0.29%), and *The Star* 5 (1.45%). *City Press* did not have any 'negative tone' HIV and AIDS story in the year. The overall quarterly contribution by the media were 8 (12.5%), 2 (3.17%), 6 (6.67%), and 16 (4.64%) such stories in the 1st, 2nd, 3rd and 4th quarter respectively.

The micro quarterly analysis revealed that *The Citizen* reported a total of 5 (7.31%) *negative tone* HIV and AIDS news stories in the 1st quarter, 2 (3.17%) in the 2nd, and 1 (1.11%) in the 3rd, with none in the 4th quarter. The *Sowetan* did 1 (1.56%) in the 1st quarter, and another 1 (1.11%) in the 3rd quarter. The *M* & *G* had 1 (1.56%) such story in the 1st quarter only, while *The Star* communicated 1 (1.56%) such story in the 1st quarter, 4 (4.44%) in the 3rd, and 5 (1.45%) in the 4th quarter. There was no HIV and AIDS news story in the "negative tone" category from the *City Press* (Fig. 11 A).

Language: Positive Tone of Media HIV and AIDS News Reports

The media collectively covered a total of 323 (93.62%) HIV and AIDS "positive tone" stories in the year, with *The Citizen* contributing a total of 74 (21.49%), *Sowetan* 104 (30.14%), *M & G* 35 (10.14%), *The Star* 81 (23.48%), and *City Press* 29 (8.36%) such stories in the year. The collective total contribution on quarterly basis were 52 (81.25%) "positive tone" HIV and AIDS news stories in the 1st quarter, 58 (96.67%) in the 2nd quarter, 83 (92.2%) in the 3rd, and 130 (99.24%) in the 4th quarter.

The micro quarterly analysis showed that *The Citizen* communicated 12 (18.75%) HIV and AIDS "positive tone" news stories in the 1st quarter, 13 (20.63%) in the 2nd, 15 (16.67%) in the 3rd, and 34 (25.95%) in the 4th quarter. The *Sowetan* reported a total of 17 (6.56%) such stories in the 1st quarter, 26 (41.27%) in the 2nd, 24 (26.67%) in the 3rd, and 37 (28.24%) in the 4th quarter. The *M & G* covered 2 (3.13%) such stories in the 1st quarter, 12 (20%) in the 2nd, 14 (15.56%) in the 3rd, and 7 (5.34%) in the 4th quarter. *The Star* reported a total of 7 (10.94%) "positive tone" HIV and AIDS news stories in the 1st quarter, 6 (9.52%) in the 2nd, 22 (24.445) in the 3rd, and 39 (29.77%) in the 4th quarter. The *City Press*" communicated a total of 7 (10.94%) such stories in the 1st quarter, 1 (1.57%) in the 2nd, 8 (8.89%) in the 3rd, and 13 (9.92%) in the 4th quarter (Fig. 11 B).

Neutral Tone of Media HIV and AIDS News Reports

The media cumulatively covered a total of 6 (1.74%) 'Neutral tone' HIV and AIDS stories in the year, out of which *The Citizen* contributed 2 (0.58%) stories, 1 (0.29%) story each came from *Sowetan* and *M & G*, and 2 (0.58%) from *The Star*. The overall quarterly contributions were 4 (6.25%) "neutral tone" HIV and AIDS news stories in the 1st quarter, 1 (1.11%) each in the 3rd and 4th quarters.

The micro quarterly analysis indicated that *The Citizen* reported 1 (1.11%) HIV and AIDS positive tone story in the 3^{rd} quarter, and another 1 (0.76%) in the 4^{th} quarter. *Sowetan* had 1 (1.56%), *M & G* another 1 (1.56%), and *The Star* 2 (3.13%) in the 1^{st} quarter only (Fig. 11 C).

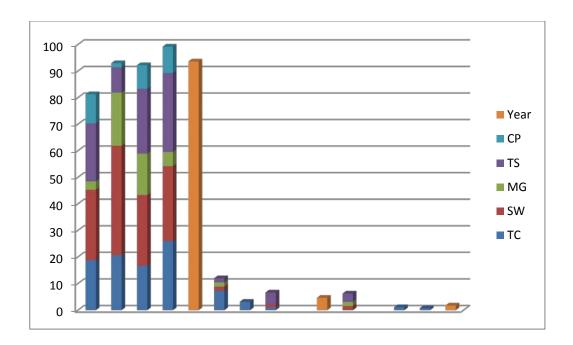


Figure 11: Language tone in media HIV and AIDS news reporting (%), analysed on quarterly and full year basis using five national newspapers.

5.5 THE BLAME ATTRIBUTION FOR HIV AND AIDS INFECTION IN MEDIA NEWS REPORTS

The following sub-variables were used for the study of blame for infection of HIV and AIDS in media news stories: Prostitution; Lesbian and Gay; Reckless lifestyle; Truck drivers; Polygamy; Husband; Wife; Govt.; Poverty; and No blame HIV and AIDS news stories. The results are as shown in fig. 12 A - J.

Blame on Prostitution as Cause of HIV and AIDS Infection in the Mass Media

Only 1 (0.29%) media HIV and AIDS news story contained blame on "prostitution" as the cause of HIV and AIDS infection in the country. This was reported by *The Citizen* in the 2nd quarter (1.67%) (Fig. 12 A).

Blame on Lesbians and Gays as Cause of HIV and AIDS Infection in the Mass Media

A total of 2 (0.59%) HIV and AIDS stories attributed HIV and AIDS infection to "lesbians and gays". This was reported by *The Star* in the 1st quarter (3.12%) (Fig. 12 B).

Blame on Reckless Lifestyle as Cause of HIV and AIDS Infection in the Mass Media

A cumulative total of 27 (7.83%) HIV and AIDS news stories blamed "reckless lifestyle" for HIV and AIDS infection in the year, contributed by *The Citizen* 10 (2.90%) such stories, *Sowetan* 7 (2.03%), *The Star* 9 (2.61%), and *City Press* 1 (0.29%). The overall quarterly contributions were 10 (15.63%), 6 (6.67%), and 4 (3.05%) stories in the 1st, 3rd, and 4th quarters respectively.

The micro quarterly analysis for each of the media were as follows: *The Citizen* covered a total of 6 (9.38%) such stories in the 1st quarter, 1 (1.11%) in the 3rd, and 3 (2.29%) in the 4th quarter. The *Sowetan'* communicated a total of 1 (1.56%) in the 1st quarter, 2 (2.22%) in the 3rd, and 4 (3.05%) in the 4th quarter. There was no news story in this category from *M & G*, while *The Star* had a total of 2 (3.13%) such stories in the 1st quarter, 3 (3.33%) in the 3rd, and 4 (3.05%) stories in the 4th quarter. The *City Press* reported only 1 (1.56%) such news story in the 1st quarter (Fig. 12 C).

Blame on Truck Drivers as Cause of HIV and AIDS Infection in the Mass Media

Truck drivers were blamed in a total of 2 (0.59%) news stories as the cause of HIV and AIDS infection. *The Star* contributed these 2 stories (1.53%) in the 4^{th} quarter (Fig. 12 D).

Blame on Polygamy as Cause of HIV and AIDS Infection in the Mass Media

There was just 1 (0.29%) news story attributing HIV and AIDS infection to polygamy, from *Sowetan*; 1 (1.11%) in the 3rd quarter (Fig. 1.5B) (Fig. 12 E).

Blame on Husband as Cause of HIV and AIDS Infection in the Mass Media

HIV and AIDS infection was attributed to "Husband" in a total of 8 (2.32%) news stories, out of which *The Citizen* communicated a total of 3 (0.87%), *Sowetan* 1 (0.29%), and *The Star* 4 (1.16%). The overall

quarterly distribution of the year's total for 2nd, 3rd, and 4th quarters were 1 (1.67%), 5 (5.56%), and 2 (1.53%) news stories.

The micro quarterly analysis showed the media contributions thus: *The Citizen* had 1 (1.67%) such story in the 2^{nd} quarter, 1 (1.11%) story in the 3^{rd} , and another 1 (0.76%) story in the 4^{th} . The *Sowetan* reported 1 (0.76%) such story in the 4^{th} quarter, and *The Star* 4 (4.44%) in the 3^{rd} quarter (Fig. 12 F).

Blame on Wives as Cause of HIV and AIDS Infection in the Mass Media

Only 1 (0.29%) news story blamed "Wives" for HIV and AIDS infection, and this came from *The Citizen* in the 4^{th} quarter (0.76%) (Fig. 12 G).

Blame on Government as Cause of HIV and AIDS Infection in the Mass Media

The year's cumulative total of 5 (1.45%) news stories laid the blame on Government for HIV and AIDS infection, out of which *Sowetan* contributed 2 (0.58%) and *The Star* 3 (0.87%) stories. The overall quarterly contributions by the media were a total of 3 (4.69%) and 2 (2.22%) in the 1st and 3rd quarters respectively.

The micro quarterly analysis revealed that *The Citizen* had 1 (1.56%) news story that attributed HIV and AIDS infection to "Government" in the 1st quarter, and another 1 (1.11%) in the 3rd quarter. *The Star* reported 2 (3.13%) such stories in the 1st quarter and 1 (1.11%) in the 3rd quarter, and *City Press* had no story in this category (Fig. 12 H).

Blame on Poverty as Cause of HIV and AIDS Infection in the Mass Media

"Poverty" was held responsible for HIV and AIDS infection in a cumulative total of 5 (1.45%) news stories in the year, with 1 (0.29%) story communicated by *The Citizen*, 1 (0.29) by *Sowetan* and 3 (0.87%) by *The Star*. The overall quarterly analysis showed a total of 4 (6.27%) such stories in the 1st quarter, and 1 (1.67%) in the 2nd quarter. The micro quarterly contributions by the respective media were thus: *The Citizen* reported 1 (1.67%) story with blame of HIV and AIDS infection on 'poverty', in the 2nd quarter, *Sowetan* had 1 (1.56%) in the 1st quarter, and *The Star* 3 (4.69%) in the 1st quarter (Fig. 12 I).

'No Blame' For Cause of HIV and AIDS Infection in the Mass Media

There were a year's cumulative total of 293 (84.93%) media news stories that did not blame any one or thing as cause of HIV and AIDS infection. *The Citizen* communicated a total of 68 (19.71%) of the stories,

Sowetan 95 (27.54%), *M* & *G* 36 (10.43%), *The Star* 66 (19.13%), and *City Press* 28 (6.12%). On overall quarterly contributions, the media reported a total of 45 (70.31%) news stories with "No blame" for HIV and AIDS infection in the 1st quarter, 57 (95%) in the 2nd, 76 (84.44%) in the 3rd quarter, and 115 (87.79%) in the 4th quarter.

The micro quarterly analysis indicated that *The Citizen* reported 11 (17.19%), 12 (20%), 15 (16.67%), and 30 (22.90%) news stories with *No blame* on HIV and AIDS infection in the 1st to 4th quarters respectively. The *Sowetan* had a total of 19 (29.69%), 26 (43.33^), 21 (23.33%), and 32 (24.43%) such stories in the 1st to 4th quarters respectively. The *M & G* reported a total of 4 (6.25%), 12 (20%), 14 (15.56%), and 6 (4.58%) such news stories in the 1st to 4th quarters respectively. *The Star* covered a total of 8 (12.5%), 6 (10%), 18 (20.00%), and 34 (25.95%) news stories with *No blame* on HIV and AIDS infection in the 1st to 4th quarters respectively. The *City Press* had a total of 6 (9.38%), 1 (1.67%), 8 (8.99%), and 13 (9.92%) such stories in the 1st to 4th quarters respectively (Fig. 12 I).

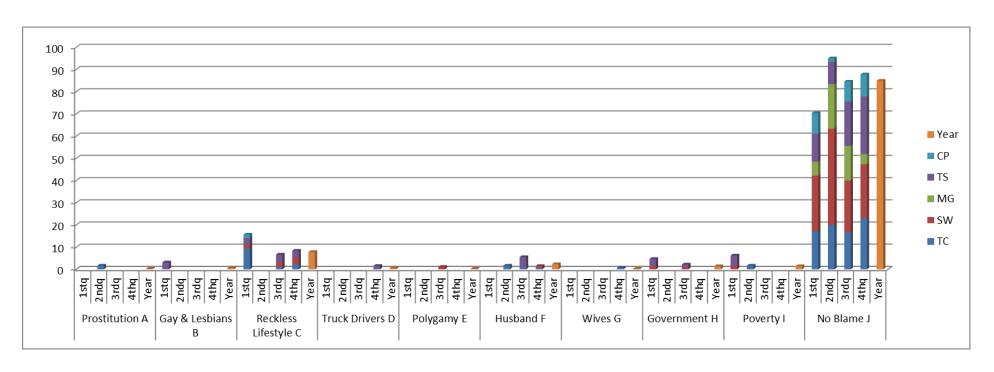


Figure 12: Blame attribution for HIV and AIDS infection in the media news stories (%), analysed on quarterly and full year basis using five national newspapers.

5.6 GEOGRAPHICAL LOCATION OF HIV AND AIDS NEWS ARTICLES OR OUTPUT

Geographical origin or setting of HIV and AIDS news stories communicated by the media in the period under study was analysed using the following sub-variables: Local HIV and AIDS news stories, National HIV and AIDS news stories, and Foreign or International HIV and AIDS news stories. The results are as shown in figure 13 A - C.

Local (Community Level) HIV and AIDS News Stories

The media communicated a cumulative total of 28 (8.12%) "Local" HIV and AIDS news stories in the year, with *The Citizen* reporting a total of 8 (2.32%), *Sowetan* 10 (2.90%), *M & G* 1 (0.29%), and *The Star* 9 (2.61%) of the stories. *City Press* did not report any "Local" HIV and AIDS news story in the year. The overall quarterly contributions by the media in the 1st, 2nd, 3rd, and 4th quarters were 5 (7.81%), 4 (6.67%), 9 (10.00%), and 10 (7.83%) stories respectively.

The micro quarterly analysis indicated that *The Citizen* covered a total of 3 (4.69%), another 3 (5.00%), 1 (1.11%), and another 1 (0.76%) "Local" HIV and AIDS stories in the 1st to 4th quarters respectively. The *Sowetan* had a total of 1 (1.56%), another 1 (1.67%), 3 (3.33%), and 5 (3.82%) such stories in the 1st to 4th quarters respectively. There was 1 (0.76%) 'Local' HIV and AIDS news story in *M* & *G* in the 4th quarter, and *The Star* did 1 (1.56%), 5 (5.56%), and 3 (2.29%) such stories in the 1st, 3rd, and 4th quarters respectively. There was no HIV and AIDS 'Local' news story in *City Press* (Fig. 13 A).

National HIV and AIDS News Stories

The media covered a cumulative total of 239 (69.28%) "National" HIV and AIDS news stories in the year, out of which *The Citizen* reported a total 53 (15.36%), *Sowetan* 83 (24.06%), *M & G* 25 (7.25%), *The Star* 56 (16.23%), and *City Press* 22 (6.38%) of the stories. The overall quarterly analysis indicated that the media collectively produced a total of 52 (81.25%), 46 (81.67%), 57 (63.33%), and 81 (61.83%) such stories in the 1st to 4th quarters respectively.

The micro quarterly analysis for the respective media were as follows: *The Citizen* covered a total of 11 (17.19%) "National" HIV and AIDS news stories in the 1st quarter, another 11 (18.33%) in the 2nd another 11 (12.22%) in the 3rd quarter, and 20 15.27%) in the 4th quarter. The *Sowetan* had a total of 16 (25%) such stories in the 1st quarter, 22 (36.67%) in the 2nd, 19 (21.11%) in the 3rd, and 26 (19.85%) in the 4th quarter. The M & G did a total of just 2 (3.13%) such stories in the 1st quarter, 12 (20.00%) in the 2nd, 8 (8.89%) in the 3rd, and 3 (2.29%) in the 4th quarter. *The Star* reported a total of 7 (10.94%) such news

stories in the 1st quarter, 3 (5.00%) in the 2nd, 11 (12.22%) in the 3rd, and 26 (19.85%) in the 4th quarter. The *City Press'* covered a total of 7 (10.94%) in the 1st quarter, 1 (1.67%) in the 2nd quarter, 8 (8.89%) in the 3rd, and 6 (4.58%) such news stories in the 4th quarter (Fig. 13 B).

International or Foreign HIV and AIDS News Stories

Internationally located HIV and AIDS news stories in the South African media were 78 (22.61%) in total, in the year, and *The Citizen* covered a total 23 (6.67%), *Sowetan* 14 (4.06%), 'M & G' 11 (3.19%), *The Star* 23 (6.67%), and *City Press* 7 (2.03%) of the stories. The overall quarterly analysis showed that the media communicated a total of 7 (10.94%) "International" HIV and AIDS news stories in the 1st quarter, another 7 (11.67%) in the 2nd, 24 (26.67%) in the 3rd, and 40 (30.53%) such stories in the 4th quarter.

The micro quarterly analysis on respective media contributions revealed *The Citizen* did a total of 3 (4.69%) "International" HIV and AIDS news stories in the 1st quarter, 1 (1.67%) in the 2nd quarter, 5 (5.56%) in the 3rd, and 14 (10.69%) such stories in the 4th quarter. The *Sowetan* contributed a total of 2 (3.13%) such news stories in the 1st quarter, 3 (5.00%) in the 2nd, another 3 (3.33%) in the 3rd, and a total of 6 (4.58%) in the 4th quarter. The *M* & *G* covered a total of 2 (3.13%) "International" HIV and AIDS news stories in the 1st quarter, 6 (6.67%) in the 3rd quarter, and 3 (2.29%) such stories in the 4th quarter. There were 3 (5.00%) "International" HIV and AIDS news stories from *The Star* in the 2nd quarter, 10 (11.11%) in the 3rd, and another 10 (7.63%) such stories in the 4th quarter. A total of 7 (5.34%) such news stories were communicated by *City Press* in the 2nd quarter only (Fig. 13 C).

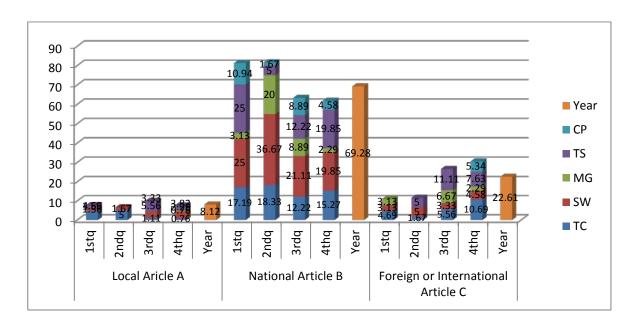


Figure 13: Geographical location of media HIV and AIDS news stories (%), analysed on quarterly and full year basis using five national newspapers.

5.7 THE NATURE OF MEDIA HIV AND AIDS NEWS STORIES

The sub-variables for the study of this variable are – HIV and AIDS as Social issue; HIV and AIDS as Religious issue; HIV and AIDS as Health issue; and HIV and AIDS as Development issue. The results are as shown in figure 14 A - D.

HIV and AIDS Pandemic as Social Issue

The media news stories that presented HIV and AIDS as "Social issue" in the period under study were a total of 8 (2.61%) stories in the year. *The Citizen* supplied 1 (0.29%), *Sowetan* 2 (0.58%), and *The Star* and *City Press* contributed 3 (0.87%) such stories each. The *M & G* had no news story in this category. The overall quarterly breakdown was as follows: a total of 6 (9.38%) such stories in the 1st quarter, none in the 2nd and 3rd quarters, and 3 (2.29%) in the 4th quarter.

The micro quarterly analysis for each media was as follows: *The Citizen* had 1 (0.76%) such story in the 4^{th} quarter only. *Sowetan* had 1 (1.56%) in the 1^{st} quarter, and another 1 (0.76%) in the 4^{th} quarter. There was no such story in *M* & *G*, but *The Star* had a total of 3 (4.61%) in the 1^{st} quarter only. The *City Press* had 2 (3.13%) such stories in the 1^{st} quarter, and 1 (0.76%) in the 4^{th} quarter (Fig. 14 A).

HIV and AIDS Pandemic as Religious Issue

The media communicated a cumulative total of 6 (1.74%) HIV and AIDS news stories as "Religious issue" in the period under study. A total of 2 (0.58%) such stories came from *The Citizen*, 1 (0.9%) from *M & G*, and 3 (0.87%) from *The Star*. The overall quarterly distribution of the reports were 1 (1.56%) and 5 (3.82%) in the 1st and 4th quarter. The micro quarterly analysis showed that *The Citizen* reported 1 (1.56%), and another 1 (0.76%) such story in the 1st and 4th quarters respectively, while *M & G* and *The Star* contributed 1 (0.76%) and 3 (2.29%) such stories in the 4th quarter (Fig. 14 B).

HIV and AIDS Pandemic as Health Issue

A cumulative total of 40 (11.59%) HIV and AIDS news stories was presented by the media as "health issue" in the year, out of which *The Citizen*' reported a total of 4 (1.16%), *Sowetan* 11 (3.19%), *M & G* 9 (2.61%), *The Star* 14 (4.06%), and *City Press* 2 (0.58%) of the news stories. On overall quarterly contributions, the media communicated a total of 4 (6.25%), 10 (16.67%), 13 (14.44%), and another 13 (9.92%) such stories in the 1st to 4th quarters respectively.

The micro quarterly analysis revealed that *The Citizen* did a total of 2 (2.22%) news stories that presented HIV and AID as "Health issue" in the 3rd quarter, and another 2 (1.53%) stories in the 4th. The *Sowetan* had 5 (8.33%) such stories in the 2nd quarter, 2 (2.2%) in the 3rd, and 4 (3.05%) in the 4th quarter. The *M* & *G* covered only 1 (1.56%) such story in the 1st quarter, 5 (8.33%) in the 2nd, another 1 (1.11%) in the 3rd, and 2 (1.53%) in the 4th quarter. *The Star* reported 6 (6.67%) news stories that presented HIV and AIDS as "Health issue" in the 3rd quarter, and 5 (3.82%) in the 4th quarter, while "City Press" had a total of 6 (6.67%) such stories in the 3rd quarter only (Fig. 14 C).

HIV and AIDS Pandemic as Development Issue

The media reported a cumulative total of 290 (84.06%) news stories that presented HIV and AIDS as "Development issue" in the year. *The Citizen* contributed a total of 77 (22.22%) news stories to this category, *Sowetan* 94 (7.25%), *M & G* 27 (7.83%), and *The Star* 68 (19.71%). The overall quarterly media contributions were 53 (82.81%), 50 (83.33%), 77 (85.56%), and 110 (83.97%) such stories in the 1st to 4th quarters respectively.

The micro quarterly analysis indicated that *The Citizen* communicated a total of 16 (25%) news stories that presented HIV and AIDS pandemic as "Development issue" in the 1st quarter, 15 (25%) in the 2nd, another 15 (16.67%) in the 3rd, and 31 (23.66%) in the 4th quarter. The *Sowetan* reported a total of 18

(28.13%), 21 (35%), 23 (25.56%), and 32 (24.43%) such stories in the 1st - 4th quarters respectively. The M & G reported HIV and AIDS as "Development issue" in a total of 3 (4.69%), 7 (11.67%), 13 (14.44%), and 4 (3.05%) news stories in the 1st to 4th quarters respectively. *The Star* had a total of 11 (17.19%), 6 (10%), 20 (22.22%), and 31 (23.66%2) of such stories in the 1st to 4th quarters respectively. The *City Press* covered a total of 5 (7.81%), 1 (1.67%), 6 (6.67%), and 12 (9.16%) such stories in the 1st to 4th quarters respectively (Fig. 14 D).

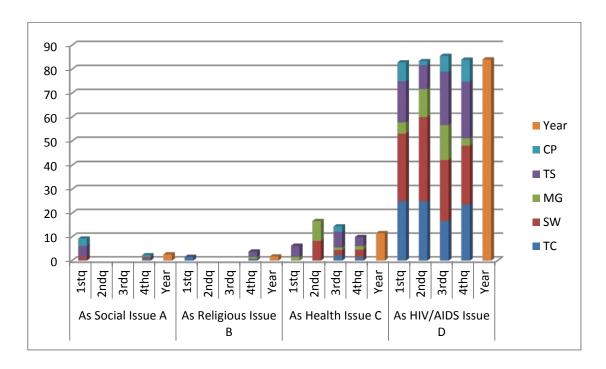


Figure 14: Nature of media HIV and AIDS news reports (%), analysed on quarterly and full year basis using five national newspapers.

5.8 NEWS RELEVANCE OF HIV AND AIDS PANDEMIC TO THE SOUTH AFRICAN MASS MEDIA

The variables for the study of the news relevance or importance of HIV and AIDS to the South African media were:

- 5.8.1 Prominence of media HIV and AIDS news reports
- 5.8.2 Editorial page location of HIV and AIDS news reports
- 5.8.3 Editorial Space dedicated to HIV and AIDS by the media (in inches)
- 5.8.4 Quantity of HIV and AIDS coverage by the media

Each of the above variables has some sub-variables which were used to analyse the importance the media attach to HIV and AIDS news communication.

5.8.1 Prominence of Media HIV and AIDS News Reports

This was studied under three sub-variables: Prominent HIV and AIDS news reports in the media, less prominent HIV and AIDS news reports in the media, and 'Not prominent' HIV and AIDS news reports in the media. The results are as presented in figure 15 A - C.

Prominent HIV and AIDS News Report in the Media

A cumulative total of 175 (50.72%) "prominent" HIV and AIDS news stories was communicated by the media in the year, with *The Citizen* contributing a total of 32 (9.28%), *Sowetan* 56 (16.23%), *M & G* 26 (7.54%), *City Press* 40 (11.59%), and *City Press* 21 (50.72%) to the news stores. On overall quarterly contributions, the media placed a total of 33 (51.56%) HIV and AIDS news stories prominently in the 1st quarter, 31 (51.67%) in the 2nd quarter, 38 (42.22%) in the 3rd, and 73 (55.73%) such stories in the 4th quarter.

The micro quarterly analysis revealed that *The Citizen* communicated a total of 7 (10.94%) "prominent" HIV and AIDS news stories in the 1st quarter, 4 (6.67%) in the 2nd quarter, 4 (4.44%) in the 3rd, and 17 (12.98%) in the 4th quarter. *Sowetan* reported a total of 9 (14.06%) such stories in the 1st quarter, 16 (26.67%) in the 2nd, 12 (13.33%) in the 3rd, and 19 (14.50%) in the 4th quarter. The *M* & *G* had a total of 3 (4.69%), in the 1st quarter, 7 (11.67%) in the 2nd, 10 (11.11%) in the 3rd, and 6 (4.58%) such stories in the 4th quarter. *The Star* prominently communicated a total of 9 (14.06%) HIV and AIDS news stories in the 1st quarter, 3 (5%) in the 2nd quarter, 7 (7.78%) in the 3rd, and 21 (16.03%) in the 4th quarter. The *City Press* had 5 (7.81%) such stories in the 1st quarter, 1 (1.67%) in the 2nd, 5 (5.56%) in the 3rd, and 10 (7.63%) in the 4th quarter (Fig. 15 A).

Less Prominent Media HIV and AIDS News Report

The media had a cumulative total of 112 (32.46%) "Less prominent" HIV and AIDS news stories in the year, with *The Citizen* supplying a total of 36 (10.43%), *Sowetan* 29 (8.41%), "M & G' 7 (2.03%), *The Star* 33 (9.57%) and *City Press* 7 (2.03%) of the stories. The overall quarterly contributions of the respective media were 22 (34.38%) "Less prominent" HIV and AIDS news stories in the 1st quarter, 15 (25%) in the 2nd quarter, 34 (37.78%) in the 3nd, and a total of 41 (31.30%) in the 4th quarter.

The micro quarterly analysis indicated that *The Citizen* reported a total of 7 (10.94%) "Less prominent" HIV and AIDS news stories in the 1st quarter, another 7 (11.67%) in the 2nd quarter, 6 (6.67%) in the 3rd, and 16 (12.21%) in the 4th quarter. The *Sowetan* had 7 (10.94%) such stories in the 1st quarter, 3 (5%) in the 2nd, 9 (10.00%) in the 3rd, and 10 (7.63%) in the 4th quarter. The *M* & *G* covered 1 (1.56%) such story in the 1st quarter, 2 (3.33%) in the 2nd, 3 (3.33%) in the 3rd quarter, and another 1 (0.76%) story in the 4th quarter. *The Star* had a total of 6 (9.38%) less prominently communicated HIV and AIDS news stories in the 1st quarter, 3 (5%) in the 2nd quarter, 13 (14.44%) in the 3rd, and 11 (8.40%) in the 4th quarter. The

City Press covered a total of 1 (1.56%) such story in the 1st quarter, 3 (3.33%) in the 3rd quarter, and another 3 (2.29%) in the 4th quarter. There was no such story in City Press' in the 2nd quarter (Fig. 15 B).

Not Prominent Media HIV and AIDS News Reports

The media communicated a total of 85 (24.64%) "Not prominent" media HIV and AIDS news stories in the year, out of which *The Citizen* contributed a total of 16 (4.64%), *Sowetan* 23 (6.38%), *M & G* 4 (1.16%), *The Star* 16 (4.35%), and *City Press* 1 (0.29%) of the stories. The overall quarterly media contributions were 9 (4.69%), 14 (23.33%), 18 (20%), and 17 (12.98%) such stories in the 1st to 4th quarters respectively.

The micro quarterly analysis showed that *The Citizen* covered a total of 3 (4.69%), 4 (6.67%), 7 (7.78%), and 2 (1.53%) such stories in the 1st to 4th quarters respectively. The *Sowetan* had a total of 3 (4.69%), 7 (11.67%), 4 (4.44%), and 8 (6.11%) such stories in the 1st to 4th quarters respectively. The *M* & *G* reported a total of 3 (5%) and 1 (1.11%) of the stories in the 2nd and 3rd quarters respectively, while *The Star* had a total of 2 (3.13%), 6 (6.67%), and 7 (5.34%) in the 1st, 3rd, and 4th quarter respectively. The *City Press* reported only a total of 1 (1.56%) such story in the 1st quarter (Fig. 15 C).

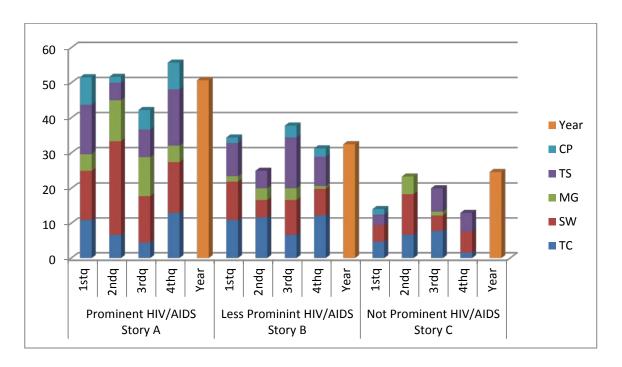


Figure 15: Prominence of HIV and AIDS news stories in the media news coverage (%), analysed on quarterly and full year basis using five national newspapers.

5.8.2 Editorial Page Location of HIV and AIDS news Reports

The relevance attached to any news story by the media is shown by the editorial page location of the news item. The sub-variables for the study of page placement of media HIV and AIDS news stories were: Front page; Editorial page; Op.editorial page; Back page; and 'Other page numbers'. The results are as shown in figure 16

Front Page Placement of HIV and AIDS News Reports

The media located a cumulated total of 10 (2.90%) HIV and AIDS news stories on their front pages in the year. *The Citizen* contributed a total of 2 (0.58%) news stories to this category, *M & G* and *City Press* had 1 (0.29%), and *The Star* 6 (1.74%). The overall quarterly analysis showed that the media presented a total of 4 (6.25%) HIV and AIDS news stories on their front pages in the 1st quarter, 3 (5%) in the 2nd quarter, 1 (1.11%) in the 3rd, and 2 (1.53%) in the 4th quarter.

The micro quarterly analysis indicated that *The Citizen* communicated 1 (1.67%) of their HIV and AIDS news stories on the "Front page" in the 2^{nd} quarter, and another 1 (0.76%) in the 4^{th} quarter. There was no HIV and AIDS "Front page" story from *Sowetan* throughout the year. The *M & G* had only 1 (1.67%)

such story in the 2nd quarter. *The Star* had a total of 3 (4.69%) such stories in the 1st quarter, 1 (1.67%) in the 2nd, another 1 (1.11%) in the 3rd, and another 1 (0.76%) in the 4th quarter. The *City Press* had 1 (1.57%) "Font page" HIV and AIDS news stories in the 1st quarter only (Fig. 16 A).

Editorial Page Placement of Media HIV and AIDS News Comments

There was just 1 (0.29%) HIV and AIDS "Editorial" on media editorial page in the year, and this came from 'City Press' in the 4th quarter (0.76%) (Fig. 16B).

Op. Editorial Page Placement of HIV and AIDS News Reports

The media placed a cumulative total of 11 (3.19%) HIV and AIDS news stories on the "Opposite (Op.) Editorial" news pages in the year, with The Citizen providing all the news stories in the 4th quarter (8.40%). There was no such stories in other quarters (Fig. 16 C).

Back Page Placement of HIV and AIDS News Reports

The media placed just 1 (0.29) HIVAIDS news story on the "Back page" in the year, and this came from M & G in the 2nd quarter 1 (1.67%) (Fig. 16 D).

Other Page Numbers Placement of HIV and AIDS News Reports

The media communicated a cumulative total of 322 (93.33%) HIV and AIDS news stories on "Other page numbers" in the year, with *The Citizen* providing 71 (20.58%), *Sowetan* 107 (31.01%), *M & G* 35 (10.14%), 'The Star' 82 (23.77%), and *City Press* 27 (7.83%) of the news stories. The overall quarterly contributions by the media were 60 (93.75%), 56 (93.33%), 89 (98.89%), and 117 (89.31%) HIV and AIDS news stories on "Other page numbers" in the 1st to 4th quarters respectively.

The micro quarterly analysis revealed that *The Citizen* communicated all their 17 (26.56%) HIV and AIDS news stories in the 1st quarter on "Other page numbers", 14 (23.33%) in the 2nd quarter, all their 17 (18.89%) HIV and AIDS stories in the 3rd quarter, and 23 (17.56%) in the 4th quarter. The *Sowetan* had 19 (29.69%) HIV and AIDS news stories on "Other page number" in the 1st quarter, 26 (43.33%) in the 2nd quarter, 25 (27.78%) in the 3rd, and all their 37 (28.245) HIV and AIDS news stories in the 4th quarter. *M* & *G*' communicated all their 4 (6.25%) HIV and AIDS news stories in the 1st quarter on "Other page numbers", 10 (16.67%) in the 2nd quarter, all their 14 (15.56%) stories in the 3rd, and 7 (5.34%) in the 4th quarter. *The Star* had a total of 14 (21.88%) such stories in the 1st quarter, 5 (8.33%) in the 2nd quarter, 25 (27.78%) in the 3rd, and 38 (29.01%) in the 4th quarter, and *City Press* reported a total of 6 (9.38%)

such stories. in the 1^{st} quarter, 1 (1.67%) in the 2^{nd} quarter, all their 8 (8.89%) stories in the 3^{rd} quarter, and 12 (9.16%) in the 4^{th} quarter (Fig. 16 E).

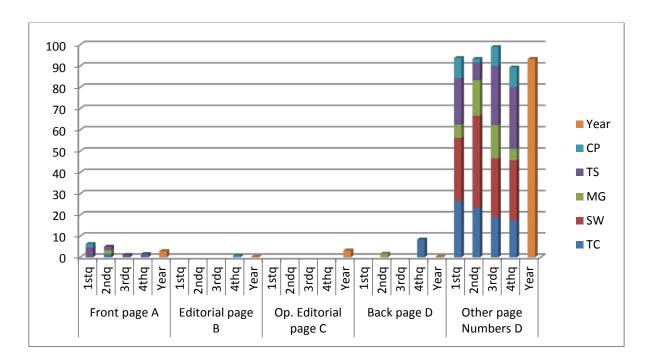


Figure 16: Page location of media HIV and AIDS news reports (%), analysed on quarterly and full year basis using five national newspapers.

5.8.3 Space Dedicated to HIV and AIDS by the Media (in Inches)

The sub-variables for the study of media space allocation to HIV and AIDS news stories were: Number of news Columns, and Column Inches (the sum of Column Height; and Column Width measurements), with the 'Inch' as the unit of measurement. The results are as presented in figure 17a A - C and figure 17b.

Column Inch and Number of News Columns of Editorial Space Dedicated to HIV and AIDS by the Media

The media dedicated a cumulative total of 5111 column inches of editorial space in their coverage of HIV and AIDS pandemic in the year. This was made up of a total of 2542 (49.74%) inches (height) and 2569 (50.26%) inches (width) of editorial matter. The media used a cumulative total of 1398 news columns in communicating these HIV and AIDS news stories in the year. The Citizen contributed a total of 483 (9.45%) column height inches and a total of 540 (10.57%) column width inches to the year's total column inches, resulting in their full year total of 1023 (20.02%) column inches. The total number of news

columns used by *The Citizen* in the year for HIV and AIDS communication was 268 (19.17%) columns. A total of 1395 (27.29%) column inches of the year's total came from *Sowetan* broken down into 706 (13.81%) column height inches and 689 (13.49%) column width inches, in a total of 366 (26.18%) news columns.

The *M & G* contributed a total of 616 (12.05%) column inches to the year's media editorial space for HIV and AIDS stories. This number was made up of a total of 62 (3.22%) column height inches and another total of 62 (3.22%) column width inches, in a total of 31 (6.35%) number of news columns. *The Star* dedicated a total of 1342 (26.26%) column inches to the year's total, made up of 681 (13.51%) column height inches and 651 (12.74%) column width inches. They used a total of 386 (27.61%) news columns in the year. The *City Press* had a total of 735 (14.38%) column inches in the year, comprising a total of 350 (6.85%) column height inches and 385 (75..33%) column width inches, in a total of 230 (16.45%) news columns (Fig. 17a A - C).

The overall quarterly analysis showed that the media dedicated a total of 1033 column inches in the 1st quarter, made up of 530 (51.31%) inches height and 503 (48.69%) inches width, in a total of 320 news columns. The media used a total of 977 column inches, made up of a total of 485 (49.64%) column height inches and 492 (50.36%) column width inches for HIV and AIDS news stories in the 2nd quarter, in a total of 292 news columns. The media allocated a total of 1174 column inches to HIV and AIDS news stories in the 3rd quarter, comprising 580 (49.40%) inches height and 594 (50.60%) inches width, in a total of 298 news columns. The media communicated HIV and AIDS news stories in a total of 1927 column inches in the 4th quarter, made up of 947 (49.14%) inches height, and 980 (50.86%) inches width, in a total of 488 news columns (Fig. 17a A - C).

The micro quarterly analysis indicated that *The Citizen* dedicated a total of 203 (19.65%) column inches of editorial space to HIV and AIDS communication in the 1st quarter made up of 88 (8.52%) inches height and 115 (11.13%) inches width, in a total, of 53 (16.56%) news columns. In the 2nd quarter, *The Citizen* used a total of 173 (17.71%) column inches, made up of 72 (7.40%) inches height and 101 (10.34%) inches width, in a total of 48 (16.44%) news columns. Their 3rd quarter total was 189 (16.20%) column inches, made up of a total of 109 (9.28%) inches height and 80 (6.81%) inches width, communicated in a total of 45 (15.10%) news columns. In the 4th quarter, *The Citizen therefore* used a total of 458 (23.77%) Column inches, made up of a total of 214 (11.11%) inches height and 244 (12.66%) inches width, in a total of 122 (25%) news columns.

The *Sowetan* dedicated a total 244 (23.62%) editorial space to HIV and AIDS communication in the 1st quarter, made up of a total of 133 (12.88%) inches height and 111 (10.75%) inches width, in a total of 62 (19.38%) news columns. Their 2nd quarter total was 348 (35.82%) column inches made up of 174 (17.81%) inches height and another 174 (17.81%) inches width, in a total of 83 (28.42%) news columns. In the 3rd quarter, *Sowetan* used a total of 339 (28.88%) column inches, comprising of a total of 175 (14.91%) inches height and 164 (13.97%) inches width, in a total of 95 (31.88%) news columns. Their 4th quarter coverage had a total of 464 (24.08%) column inches of editorial space, comprising 224 (11.62%) inches height and 240 (12.45%) inches width, in a total of 126 (25.82%) news columns.

The *M & G* allocated a total of 77 (7.45%) column inches to HIV and AIDS news stories in the 1st quarter, made up of a total of 39 (3.78%) inches height and 38 (3.68%) inches width, in a total of 19 (5.94%) news columns. Their 2nd quarter total was 202 (20.68%) column inches, made up of a total of 112 (11.46%) inches height and 90 (9.21%) inches width, in a total of 50 (17.12%) news columns. The *M & G* used a total of 213 (18.14%) column inches in the 3rd quarter, made up of a total of 99 (8.43%) inches height and 114 (9.71%) inches width, in a total of 48 (16.11%) news columns. They had a total of 124 (6.43%) column inches in the 4th quarter, made up of a total of 62 (3.22%) inches height and 62 (3.22%) inches width, in a total of 153 (31.35%) news columns.

The Star dedicated a total of 320 (30.98%) column inches of editorial space to HIV and AIDS coverage in the 1st quarter, made up of a total of 181 (17.52%) inches height and 139 (13.46%) inches width, in a total of 122 (38.13%) news columns. Their total 2nd quarter column inches for HIV and AIDS reporting was 101 (10.34%), made up of 52 (5.32%) inches height and 49 (5.02%) inches width, in a total of 41 (14.04%) news columns. The Star had a total 285 (24.28%) column inches in the 3rd quarter, made up of a total of 70 (23.49%) inches height and 140 (11.93%) inches width; in a total of 70 (23.49%). news columns. They allocated a total of 636 (33.00%) column inches in the 4th quarter, made up of a total of 318 (16.50%) inches height and 318 (16.50%) inches width, in a total of 153 (31.35%) news columns.

The *City Press* dedicated a total of 189 (18.30%) column inches of HIV and AIDS news stories in the 1st quarter, made up of a total of 89 (8.62%) inches height and 100 (9.68%) inches width, in a total of 64 (20%) news columns. They devoted a total of 153 (15.66%) column inches in the 2nd quarter, made up of 75 (7.68%) inches height and 78 (7.98%) inches width, in a total of 70 (23.97%) news columns. Their 3rd quarter total editorial space for HIV and AIDS news stories was 148 (12.61%) column inches; made up of 57 (4.86%) inches height and 91 (7.75%) inches width, in a total of 40 (13.42%) news columns. The *City*

Press therefore had a total of 245 (15.06%) column inches in the 4th quarter, made up of 129 (6.69%) inches height and 116 (6.02%) inches width, in a total of 56 (31.35%) news columns (Fig. 17a A - C).

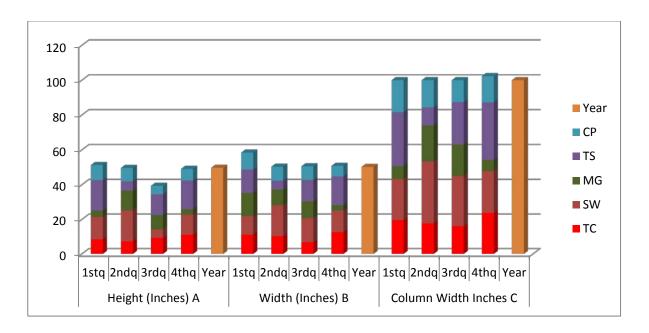


Figure 17a: Space allocation of the media to HIV and AIDS news coverage (%), analysed on quarterly and full year basis using five national newspapers.

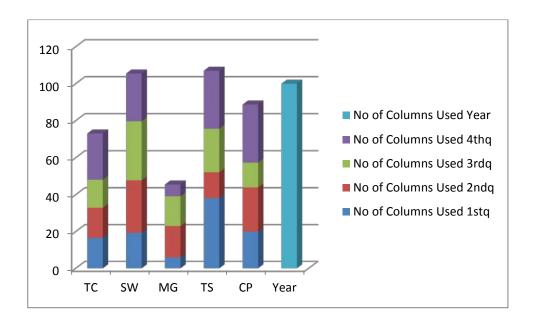


Figure 17b: News column allocation to HIV and AIDS news coverage by the media (%), analysed on quarterly and full year basis using five national newspapers.

Estimated Media Editorial Space Available in the Year

									DAYS OF	THE MO	HTMC																					
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
			SUJMMA	ARY OF F	FIRST QU	ARTER						MEDIA E	DITORIA	L SPACE																		
1. The Citizen	8860	12562	19750	9714	9415	16917	13052	20338	18800	17900	9602	9804	13454	12848	20088	15820	23444	10440	10820	19377	11898	17164	19438	10166	9510	6736	14200	13056	7231	11025	10258	42368
.2. Sowetan	6810	8240	9199	7668	7624	8120	9632	9603	11297	9076	7074	6326	9066	10822	9645	9354	12262	6798	8768	9352	7443	7861	8520	10482	8466	7367	8867	8551	8140	9195	9361	27098
3. M & G	15147	17820	0	0	27220	0	0	12870	0	0	0	27267	0	0	11484	0	0	0	24068	0	0	12870	0	0	0	23414	0	0	17820	0	0	18998
4. The Star	17990	16559	13421	22558	20995	7969.5	5835.8	19996	13151	14031	21722	19726	7210.5	7020.8	18112	13217	10911	19502	19504	6088	6072	17751	14219	14231	19311	18380	6072	7590	16698	6072	7590	42950
5. City Press	11880	11880	0	0	23720	0	0	12060	0	0	0	22760	0	0	11520	0	0	0	20564	0	0	10440	0	0	0	21220	0	0	10800	0	0	15684
Total	60687	67061	42370	39940	88974	33007	28520	74867	43248	41007	38398	85883	29731	30691	70849	38391	46617	36740	83724	34817	25413	66086	42177	34879	37287	77117	29139	29197	60689	26292	27209	147100
					- COND	OUADT							DITORI		_																	T-1-1
					SECOND				40000					L SPACI	_																	Total
1. The Citizen	8605	12162	19319	9375	8279	15975	12744	19249	18385	17754	9265	9443	13464	12574	19922	15552	24637	9760	10370	18966	11440	16268	18815	9559	9168	6228	15250	12477	6842	10546	9501	41189
.2. Sowetan	5373	7500	8903	7174		7265	9424	8953	10995	9089	6655	6142	8817	10264	9261	9270	12034	6384	9040	8693	7114	7454	7547	10276	7955	6798	8829	9136	7490	8471	9041	25854
3. M & G	0	1484		14582	0	0		0	1237	0		0		11182	0	12375	0	12582	0	0	12487	0	17226	0	17582	0	0	17425		14154	0	15838
4. The Star	11103		14031	12062		14533	19296	12936	13557	14212	12965	13646	14026	82505	11785	11960	10409	11085	11588	11768	16984	12836	12777	14031	12755	11926	11646	20592	12360	14684	7259	48236
5. City Press		11540	0		0	0		0	11606	0		0		11252	0	11250	0	10242	0	0	10143	0	10004	0	10682	0	0	10560	0		0	
Total	25081	48794	42253	54581	30411	37773	67760	41138	55780	41055	51397	29231	36307	127777	40968	60407	47080	50053	30998	39427	58168	36558	66369	33866	58142	24952	35725	70190	26692	58135	25801	145286
			SUMMA	RY OF TH	HIRD QU	ARTER						MEDIA E	DITORIA	L SPACI																		Total
1. The Citizen	6344	12390	19983	9726	9378	16942	12718	20196	18506	18209	9667	9633	13534	12668	19944	15926	24732	10312	10744	19342	11339	17178	18962	39083	9032	6833	13832	12968	6905	10942	9855	44782
.2. Sowetan	6678	7748	9332	7452		8190	9770	9231	11328	8213	7095	6165	9323	10793	9255	9206	12092	6689	9036	9197	7332	7591	8323	10456	8070	7410	8932	9348	8054	8925	9330	26829
3. M & G	0070		12786	7432	0	15104	0	0231	12784	11542	7033	0103	11286	10733	0	11246		0003	3030	12687	7 3 3 2	7331	17526	17620	0070	7410	17642	0	0034	14550	0	
4. The Star	6125		14312	6113		15819	5718	6719	13403	14294	6819	7290	14502	7157	5107	13530	59427	5957	6059	12255	5485	6159	14396	14241	6105	6319	11787	7503	8331	13603	7733	
5. City Press		11782	11686	0113	0	11862	0/10	0713	11868	11452	0019	1230	11252	7137	0	11326	10242	0907	0033	10244	0400	0133	10243	10620	0103	0313	10678	7303	0331	10504	0	
Total		63840	68099	23291			28206	36146	67889	63710	23581	23088	59897	30618	-		119173		25839	63725	2/156	30928	69450	92020	23207	20562	62871	29819	-	58524		138474
lotai	13147	03040	00033	23231	22020	0/3//	20200	30140	01003	03710	25501	23000	33031	30010	34300	01234	113173	22330	23033	03723	24130	30320	03430	32020	23201	20302	02071	23013	23230	30324	20310	130474
			SUMMA	RY OF FO	OURTH C	UARTE	2					MEDIA E	DITORIA	L SPACI																		Total
1. The Citizen	9878	12936	20054	10202		17719	13762	20790	19144	18814	9868	9774	13708	13746	20779	16486	25780	10686	11072	19805	12360	17594	19608	10170	9826	7074	15838	13260	7212	45648	10574	47382
.2. Sowetan	28964	8776	9610	8010		8704	9812	9730	11882	9322	7725	6720	9257	45404	10271	9585	12464	7188	9598	9738	7730	8048	8876	11020	8702	7902	9490	10076	8560	9215	9950	34062
3. M & G	15046	0//0		0010		0,04	0	12880	0	11426	0	11686	0207	0	11846	0	12926	0	12798	0700	7750	12690	0070	17820	0,02	17782	0	0	17784	0210	14880	19503
4. The Star	18919		14710			15958	13004	20020	13728	13237	12644	13962	77596	U	18422	13753		13784	13278	12411	12110	18316	14583		14624	12400	12290	13790	24633	15138		56897
5. City Press	11890	0	11940	0		0	0	12080	0	11680	0	11485	0	0	11582	0		0	10522		0	10224	0	10868	0	10643	0	0	10688	0	9140	
Total	84697	38861	69094	33294		42381	36578	75500	44754	64479	30237	53627	100561	73499	72900	39824		31658	57268	41954	-	66872	43067	64583	33152	55801	37618	37126	68877	-	105174	
			COMPRI	EHENSI	/E FULL	YEAR AI	NALYSIS					MEDIA E	DITORIA	AL SPACI																		Total
1. The Citizen	33687	50050	79106	39017	36725	67553	52276	80573	74835	72677	38402	38654	54160	51836	80733	63784	98593	41198	43006	77490	47037	68204	76823	68978	37536	26871	59120	51761	28190	78161		175722
.2. Sowetan	47825	32264	37044	30304		32279	38638	37517	45502	35700	28549	25353			38432	37415		27059		36980	29619	30954	33266	42234	33193	29477	36118	37111	32244	35806		113845
3. M & G	30193	34316		14582		15104	14814	25750	14021	22968	11258	38953	11286	11182	23330	23621	25606	12582	36866	12687	12487	25560	34752	35440	17582	41196	17642	17425	35604	28704	14880	72586
4. The Star	54137	66724	56474	55815		54280	43854	59671	53839	55774	54150	54624		111032	53426	52460	91795	50328	50429	42522	40651	55062	55975		52795	49025	41795	49475	62022	49497		182323
5. City Press	23770		23626				11482							11252					31086	10244		20664		21488		31863	10678		21488			
1																																
Total	189612	218556	221816	151106	197655	181078	161064	227651	211671	210251	143613	191829	226496	262585	219023	199856	285630	141409	197829	179923	139937	200444	221063	225348	151788	178432	165353	166332	179548	212952	185102	6042456

Figure 17c: The estimated cumulative total of all editorial and news space available from the media in the period under study, presented on monthly, quarterly, and full year basis. The quantity of editorial and news space the media dedicated to HIV and AIDS news coverage is included in these numbers. Five national newspapers were used in this study.

5.8.4 Quantity of HIV and AIDS Coverage by the Media

The extent or quantity of media coverage of any issue in the society is a strong reflection of how important the issue is to the media, and to some extent, to the society as well. This study deals with the number of occurrence (frequency) of media HIV and AIDS news coverage in the period under study. The results are as presented in figure 18a and figure 18b.

Analysis of Quantity of Media HIV and AIDS News Reports

The media communicated a cumulative total of 345 (100%) HIV and AIDS news stories in the period under study, out of which *The Citizen* covered a total of 84 (24.35%), *Sowetan* 107 (31.01%), *M & G* 36 (10.72%), *The Star* 88 (25.51%), and *City Press* 29 (8.41%) of the HIV and AIDS news stories.

The overall quarterly analysis showed the media communicated a cumulative total of 64 (18.55%) HIV and AIDS news stories in the first quarter. The highest coverage of HIV and AIDS in this quarter was from 'Sowetan' with a total of 19 (5.51%) stories, but *The Citizen* and *The Star* tied as the second highest suppliers of HIV and AIDS news stories with a total of 17 (4.93%) each. *City Press* took third place with 7 (2.03%), and the least supplier of HIV and AIDS news stories in the quarter was *M & G* with just 4 (1.16%). There was a total of 60 (17.39%) HIV and AIDS news stories in the 2nd quarter, with the highest single number of 26 (7.54%) stories coming from *Sowetan*, followed by *The Citizen'* with a total of 15 (4.35%), and *M & G* 12 (3.48%). *The Star* communicated a total of 6 (1.74%) such stories but *City Press* had only 1 (0.29%) (Fig. 18a).

The media had a total of 90 (26.09%) HIV and AIDS stories in the 3rd quarter, with *The Star* reporting the single highest number of 26 (7.54%) stories, followed by *Sowetan* with a total of 25 (7.25%), *The Citizen* 17 (4.93%), and *M & G* 14 (4.06%) stories. The *City Press* covered the least number of 8 (2.32%) HIV and AIDS news stories in the quarter. There was a total of 131 (37.97%) HIV and AIDS news stories in the fourth quarter, out of which *The Star* communicated the highest single number of 39 (11.30%) stories, closely followed by *Sowetan* and *The Citizen* with 37 (10.72%) and 35 (10.14%) stories respectively. *City Press* covered a total of 13 (3.77%) but *M & G* had the least number of 7 (2.03%) HIV and AIDS stories in the quarter (Fig. 18a).

The micro monthly analysis indicated that the month of December had the highest number of 60 (17.39%) media communicated HIV and AIDS news stories. *The Star* had the highest number of 19 (5.51%) stories in this month, followed by *The Citizen* with 18 (5.22%), *Sowetan* 16 (4.64%), *City Press* 6 (1.74%), and *M* & *G* only 1 (0.29%) of the stories. The month of November had the second highest

number of HIV and AIDS news stories with a total of 43 (12.46%) news stories. In this month, *The Star* again supplied the highest number of 14 (4.06%) stories, and *The Citizen* and *Sowetan* tied in the second position with 11 (3.19%) stories each. The month of July had the third highest number with a total of 39 (11.30%) stories, of which *Sowetan* covered the highest single total of 11 (3.19%), and *The Citizen* and *M* & *G* tied in the second position with 9 (2.61%) stories each, *The Star* had 7 (2.09%), and *City Press* 3 (0.87%) of the news stories (Table 1).

On the other hand, the month of June communicated the least number of 15 (4.35%) HIV and AIDS news stories, with *Sowetan* contributing the highest number of 5 (1.45%) stories, followed by *The Citizen* with a total of 4 (1.16%) stories, *M & G* 3 (0.87%), *The Star* 2 (0.58%), and *City Press* had 1 (0.29%) of the stories. The month of January had the second least HIV and AIDS news with a total of 18 (5.22%) stories, out of which *Sowetan* and *City Press* tied as the highest contributors with 5 (1.45%) stories each, *The Star* followed with 4 (1.16%), *The Citizen* 3 (0.87%), and *M & G* 1 (0.29%) of the stories.

The month of May communicated the third least number of 20 (5.80%) HIV and AIDS news stories in the year, with the single highest number of 14 (4.06%) stories coming from *Sowetan* and the remaining 6 stories were shared by *M* & *G* 3 (0.87%), *The Star* 2 (0.58%), and *The Citizen* 1 (0.29%) of the stories. The numbers of HIV and AIDS news stories in the rest of the months are close to each other. The month of October had 28 (8.12%) stories, September 26 (7.54%), while April and August had equal number of 25 (7.25%) each. The month of February had a total of 24 (6.96%) HIV and AIDS news stories and March recorded 22 (6.38%), (Table 1).

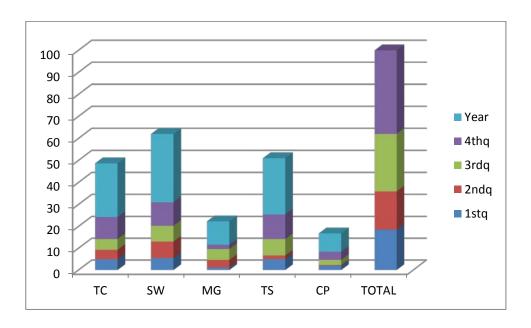


Figure 18a: Quantity of HIV and AIDS news stories communicated by the media (%), analysed on quarterly and full year basis using fuve national newspapers.

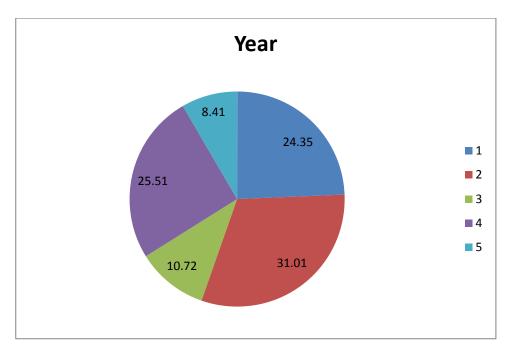


Figure 18b: Pie chart presentation of full year coverage of HIV and AIDS by the media (%), using five national newspapers. The series numbered 1 to 5 represents the newspaper (in descending order) used in this study.

Table 1: Quantity of HIV and AIDS Coverage by the Media (January – December) 2010

Number and	Names of Ne	ewspaper and N	umber of HIV	and AIDS Stories	Reported	Total (%)		
Month of the	The Citizen	Sowetan	M & G	The Star	City Press	=		
Year	(%)	(%)	(%)	(%)	(%)			
1. January	3 (0.87)	5 (1.45)	1 (0.29)	4 (1.16)	5 (1.45)	18 (5.22)		
2. February	7 (2.03)	5 (1.45)	2 (0.58)	8 (2.32)	2 (0.58)	24 (6.96)		
3. March	7 (2.03)	9 (2.61)	1 (0.29)	5 (1.45)		22 (6.38)		
Total	17 (4.93)	19 (5.51)	4 (1.16)	17 (4.93)	7 (2.03)	64 (18.55)		
(1st Quarter)								
1. April	10 (2.90)	7 (2.09)	6 (1.74)	2 (0.58)		25 (7.25)		
2. May	1 (0.29)	14 (4.06)	3 (0.87)	2 (0.58)		20 (5.80)		
3. June	4 (1.16)	5 (1.45)	3 (0.87)	2 (0.58)	1 (0.29)	15 (4.35)		
Total	15 (4.35)	26 (7.54)	12 (3.48)	6 (1.74)	1 (0.29)	60 (17.39)		
(2 nd Quarter)								
1. July	9 (2.61)	11 (3.19)	9 (2.61)	7 (2.09)	3 (0.87)	39 (11.30)		
2. August	3 (0.87)	8 (2.32)	2 (0.57)	10 (2.90)	2 (0.57)	25 (7.25)		
3. September	5 (1.45)	6 (1.74)	3 (0.87)	9 (2.61)	3 (0.87)	26 (7.54)		
Total	17 (4.93)	25 (7.25)	14 (4.06)	26 (7.54)	8 (2.32)	90 (26.09)		
(3 rd Quarter)								
1. October	6 (1.74)	10 (2.90)	3 (0.87)	6 (1.74)	3 (0.87)	28 (8.12)		
2. November	11 (3.19)	11 (3.19)	3 (0.87)	14 (4.06)	4 (1.16)	43 (12.46)		
3. December	18 (5.22)	16 (4.64)	1 (0.29)	19 (5.51)	6 (1.74)	60 (17.39)		
Total	35 (10.14)	37 (10.72)	7 (2.03)	39 (11.30)	13 (3.77)	131 (37.97)		
(4th Quarter)								
Full year total	84 (24.35)	107 (31.01)	37 (10.72)	88 (25.51)	29 (8.41)	345 (100)		
Comprehensive	Comprehensive Full Year Analysis of Quantity of Media HIV and AIDS News Output							
First quarter	17 (4.93)	19 (5.51)	4 (1.16)	17 (4.93)	7 (2.03)	64 (18.55)		
Second quarter	15 (4.35)	26 (7.54)	12 (3.48)	6 (1.74)	1 (0.29)	60 (17.39)		
Third quarter	17 (4.93)	25 (7.25)	14 (4.06)	26 (7.54)	8 (2.32)	90 (26.09)		
Fourth quarter	35 (10.14)	37 (10.72)	7 (2.03)	39 (11.30)	13 (3.77)	131 (37.97)		
Full Year Total	84 (24.35)	107 (31.01)	37 (10.72)	88 (25.51)	29 (8.41)	345 (100)		

5.9 ANOVA RESULTS

5.9.1 QUALITY OF MEDIA HIV AND AIDS NEWS REPORTS

Table 2: Comparison of Types of Media HIV and AIDS News coverage on a Year and Quarterly Basis Among the Different Media Groups Used for the Study

	*Numbe	r of Newsp	papers Used	d in the Stu	udy (Yearly re	port	
Variables	index)					SEM	
Types of HIV and AIDS							
News reports	1	2	3	4	5		
Photo News	0.08	0.00	0.00	0.00	0.00	0.037	
News Break	0.00	0.00	0.00	0.08	0.00	0.037	
News Analysis	0.00^{b}	0.00^{b}	0.17a	0.00^{b}	0.00^{b}	0.051	
Editorial	0.25	0.08	0.00	0.00	0.08	0.095	
Feature Articles	0.33	0.58	0.83	0.83	0.67	0.260	
Column Articles	0.00	0.00	0.00	0.00	0.00	0.000	
Investigative Reports	0.00	0.00	0.00	0.00	0.08	0.037	
Straight News	6.08a	6.33^{a}	1.50 ^b	5.83a	1.25 ^b	0.885	
Opinion Article	0.25^{b}	1.67a	0.50^{b}	0.25^{b}	0.42^{b}	0.172	
Vox Pop	0.00^{b}	0.00^{b}	0.00^{b}	0.00^{b}	0.17a	0.051	
Interview	0.00	0.00	0.00	0.00	0.08	0.037	
Book Review	0.08	0.00	0.00	0.08	0.00	0.051	
Letter to the Editor	0.00^{b}	0.42^{a}	0.08ab	0.17ab	0.08 ^{ab}	0.114	
Quarterly Report Index							
	Α	В	С	D	SEM		
Photo News	0.00	0.00	0.00	0.07	0.033		
News Break	0.00	0.00	0.07	0.00	0.033		
News Analysis	0.00	0.67	0.67	0.00	0.045		
Editorial	0.00	0.13	0.00	0.20	0.085		
Feature Articles	0.67^{b}	0.53^{b}	0.53^{b}	1.47a	0.232		
Column Articles	0.00	0.00	0.00	0.00	0.00		
Investigative Report	0.07	0.00	0.00	0.00	0.033		
Straight News	3.27^{b}	2.53^{b}	4.53ab	6.47a	0.792		
Opinion Article	0.60	0.47	0.73	0.67	0.154		
Vox Pop	0.07	0.00	0.00	0.67	0.045		
Interview .	0.07	0.00	0.00	0.00	0.033		
Book Review	0.00	0.00	0.00	0.13	0.046		
Letter to the Editor	0.13	0.27	0.07	0.13	0.102		

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	
5	City Press	

Table 2 shows the types of HIV and AIDS news coverage by the different media groups used for the study on a yearly and quarterly basis. There were significant differences (P<0.05) among the newspapers on the types of HIV and AIDS news coverage on a yearly basis with regard to News analysis, Straight news, Opinion article, Vox pop, and Letters to the editor. There were significant differences only for Straight news and Features article during the quarter period. During the year, the Mail and Guardian carried more (P<0.05) News analysis on HIV and AIDS pandemic than The Star, Sowetan and City Press newspapers respectively. However, Straight news report appearances were higher (P<0.05) for The Citizen, Sowetan and The Star than in Mail and Guardian and City Press newspapers although there were more (P<0.05) "Letters to the editor" and "Opinion articles" featured in Sowetan newspapers than in other newspapers. City Press has higher (P<0.05) "Vox Pop" than other newspapers during the year. Feature articles and Straight news were higher (P<0.05) among the newspapers during quarter D (fourth quarter) than quarter periods A, B and C respectively

5.9.1.1 Confidentiality of Media HIV and AIDS News Stories on a Year and Quarterly Basis

Table 3: Comparison of Confidentiality in HIV and AIDS News Reporting on a Year and Quarterly Basis Among the Different Media Groups Used for the Study

	*Number o	of Newspa	pers Used ir	n the Study	(Yearly report	
Variables	index)					
Quality of HIV and AIDS News						
Report: Confidentiality in Reporting	1	2	3	4	5	SEM
Confidential Reports	0.08	0.08	0.25	0.00	0.83	0.396
Less Confidential Reports	0.08	0.08	0.00	0.08	0.00	0.066
Neutral Confidential Reports	6.17 ^b	9.33^{a}	2.58 ^c	7.25 ^{ab}	2.42 ^c	0.977
Reports that can cause Behavioural	0.83	0.75	0.00	0.33	0.17	0.387
change						
Quarterly Report Index						
•	Α	В	С	D	SEM	
Confidential Reports	0.07	0.07	0.07	0.20	0.355	
Less Confidential Reports	0.07	0.00	0.07	0.07	0.059	
Neutral Confidential Reports	4.13 ^b	3.67^{b}	5.93b	8.47a	0.874	
Reports that can cause Behavioural	0.20	0.07	0.33	1.07	0.346	
change						

^{abc} Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	D Tourin Eductor
4	The Star	
5	City Press	

Results of "Confidentiality" level of HIV and AIDS news reported by the media groups used for the study on a yearly and quarterly basis are presented in Table 3. During the year, the *Sowetan* newspaper carried significantly more (P<0.05) "Neutral Confidential" HIV and AIDS news than *The Star, Mail and Guardian* and *City Press* newspapers respectively. However, "Neutral Confidential" reports appearances were higher (P<0.05) for quarter period D (fourth quarter) among the newspapers than quarter periods A, B and C respectively

5.9.1.2 Technical Competence of HIV and AIDS Articles on a Yearly and Quarterly Basis

Table 4: Comparison of Technical Competence of HIV and AIDS Articles on a Yearly and Quarterly Basis Among the Different Media Groups Used For The Study

	*Numbe	r of Newsp	apers Used	in the Stud	dy (Yearly rep	ort	
Variables	index)						
Technical Competence of News Reports	ı	2	3	4	5	SEM	
Vey Competent	0.00	0.00	0.00	0.00	0.00	0.000	
Competent	3.17 ^b	6.83a	1.25 ^{bc}	2.33bc	0.67 ^c	0.795	
Incompetent	0.00	0.00	0.00	0.00	0.00	0.000	
Quarterly Report Index							
,	Α	В	С	D	SEM		
Vey Competent	0.00	0.00	0.00	0.00	0.000		
Competent	1.93	3.93	3.67	1.87	0,711		
Incompetent	0.00	0.00	0.00	0.00	0.000		

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	
5	City Press	

Results of the "Technical competence" of HIV and AIDS news reported by the media groups used for the study on a yearly and quarterly basis are presented in Table 4. During the year, the *Sowetan* newspaper carried more (P>0.05) "Competent" HIV and AIDS news reports than the *City Press, The Star, The Citizen* and *Mail and Guardian* newspapers respectively. However, there were no differences (P>0.05) among the newspapers during the year and on quarterly basis for "Very competent", and "Incompetent" HIV and AIDS news reports.

5.9.1.3 Combination of Journalistic Skills and Creativity in HIV and AIDS News Reporting On A Yearly and Quarterly Basis

Table 5: Comparison of Combination of Journalistic Skills and Creativity in HIV and AIDS News Reporting on a yearly and quarterly basis among the different media groups used for the study

	*Number o	of Newspape	rs Used in	the Study (/early report	
Variables	index)			•		
Combination of Journalistic						
skills and creativity in HIV						
and AIDS news reports	1	2	3	4	5	SEM
Low	0.08	0.08	0.00	0.00	0.00	0.053
Medium	1.83 ^b	3.42^a	0.17^{c}	0.92bc	0.25 ^c	0.431
High	5.08^{a}	5.50^{a}	2.92 ^{ab}	5.67 ^a	1.75 ^b	0.968
Good	5.75^{a}	5.17 ^{ab}	2.92 ^{bc}	5.75^{a}	2.00 ^c	0.905
Fair	1.25 ^{bc}	3.67a	0.17^{c}	1.58 ^b	0.33^{c}	0.396
Poor	0.00	0.08	0.00	0.00	0.08	0.053
Quarterly Report Index						
	Α	В	С	D	SEM	
Low	0.00	0.00	0.07	0.07	0.048	
Medium	1.33	0.60	1.73	1.60	0.385	
High	3.00^{b}	3.40^{b}	3.27 ^b	7.07a	0.865	
Good	3.27 ^b	3.35^{b}	3.60^{c}	7.07a	0.809	
Fair	1.00 ^b	0.67^{b}	2.33a	1.60 ^{ab}	0.355	
Poor	0.00	0.00	0.07	0.07	0.048	

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	2 . 0
4	The Star	
5	City Press	

Results of "Combination of journalistic skills and creativity" in HIV and AIDS news reported by the media groups used for the study on a yearly and quarterly basis are presented in Table 5. During the year, there were no statistical differences (P>0.05) between the *Sowetan*, The *Citizen* and *Mail and Guardian* newspapers in terms of "Good Combination of skills and creativity" news reports.

"Fair Combination of Journalistic skills and creativity" HIV and AIDS news reports was observed for *Sowetan* newspaper than other newspapers used for the study. "Good Combination of Journalistic skills and creativity" HIV and AIDS news reports were more prominent (P<0.05) for quarter period D (fourth

quarter) among the newspapers than quarter periods A, B and C respectively, but with "Fair Combination of Journalistic skills and creativity" HIV and AIDS news reports being the same (P>0.05) for quarter periods D (fourth quarter) and C (third quarter) respectively but lower for quarter periods A and B.

5.9.1.4 Objectivity of HIV and AIDS News Reports on a Yearly and Quarterly Basis

Table 6: Comparison of Objectivity of HIV and AIDS News Reports on a Yearly and Quarterly Basis Among the Different Media Groups used for the Study

	*Number	r of Newspa	apers Used i	in the Study	(Yearly repo	ort
Variables	index)					
Quality of HIV and AIDS News						
Report (Objectivity)	1	2	3	4	5	SEM
Balanced	6.92^{a}	7.42^{a}	3.08 b	7.08a	2.25 ^b	0.965
Biased	0.03^{b}	0.67a	$0.00\mathrm{b}$	0.25ab	0.17 ^{ab}	0.172
Quarterly Report Index						
	Α	В	С	D	SEM	
Balanced	4.13b	3.93^{b}	5.67ab	7.67a	0.864	
Biased	0.13	0.67	0.33	0.40	0.153	

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

City Press

5

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	

Results of the "Objectivity" of HIV and AIDS news reports (under the quality of HIV and AIDS news stories) by the media groups used for the study on a yearly and quarterly basis are presented in Table 6. During the year, *The Citizen, Sowetan* and *The Star* newspapers carried similar (P>0.05) *balanced* reports but different (P<0.05) from the *City Press* and *Mail and Guardian* newspapers. "Biased' reports were carried more (P<0.05) in *Sowetan, The Star* and *City Press* newspapers than in *The Citizen* and *Mail and Guardian* newspapers respectively. However, "balanced" reports were the same (P>0.05) during quarter periods A, B and C but was more pronounced (P<0.05) among the newspapers during quarter period D

5.9.1.5 Use of Research in HIV and AIDS News Reporting on a Yearly and Quarterly Basis

Table 7: Comparison of Use of Research in HIV and AIDS News Reporting on a Year and Quarterly Basis Among the Different Media Groups Used for the Study

	*Number o	of Newspape	rs Used in	the Study (Y	early report	
Variables	index)					
Use of Research in HIV and AIDS News Reporting						
(Quality)	1	2	3	4	5	SEM
Well Researched	5.42^{a}	5.00^{a}	2.67 ^{ab}	5.67a	1.92 ^b	0.989
Fairly Researched	3.08^{a}	3.33^{a}	0.25 ^b	1.42 ^{ab}	0.42^{b}	0.832
Not Researched	0.17	0.58	0.17	0.25	0.08	0.163
Quarterly Report Index						
,	Α	В	С	D	SEM	
Well Researched	3.13^{b}	3.27 ^b	3.80 ^b	6.33a	0.885	
Fairly Researched	2.33	0.67	1.60	2.20	0.744	
Not Researched	0.20ab	0.00^{b}	0.60a	0.20ab	0.146	

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

City Press

5

*N and R	Name of Publication	A – First Quarter			
1	The Citizen	B - Second Quarter C – Third Quarter			
2	Sowetan	D – Fourth Quarter			
3	Mail & Guardian	2			
4	The Star				

Results of *Use of research* in HIV and AIDS news reporting (quality of HIV and AIDS stories) by the media groups used for the study on a yearly and quarterly basis are presented in Table 7. During the year, *The Citizen, Sowetan, Mail and Guardian* and *The Star* newspapers carried similar (P>0.05) *Well researched* HIV and AIDS news reports but different (P<0.05) from the *City Press. Fairly researched* HIV and AIDS news reports were carried more (P<0.05) in *The Citizen, Sowetan* and *The Star* newspapers than in the *City Press* and *Mail and Guardian* newspapers respectively. However, "Well researched" HIV and AIDS news reports were the same (P>0.05) during quarter periods A, B and C but was more pronounced (P<0.05) among the newspapers during quarter period D. "Not researched" HIV and AIDS news reports were higher (P<0.05) during quarter period A, C and D but was less pronounced (P<0.05) among the newspapers during quarter period B

5.9.2 SOURCES OF HIV AND AIDS NEWS REPORTS ON A YEARLY AND QUARTERLY BASIS

Table 8: Comparison of Sources of HIV and AIDS News Reports on a Yearly and Quarterly basis among the Different Media Groups used for the Study

	*Numbe	r of Newsp	apers Use	ed in the Stud	y (Yearly repo	ort
Variables	index)					
Sources of the HIV and AID	S					
News (Quality)	I	2	3	4	5	SEM
Department of Health	1.75a	1.75a	0.17^{b}	2.00^{a}	0.17 ^b	0.464
Minister (Government)	0.75	0.42	0.25	0.25	0.08	0.213
Presidency	0.08	0.00	0.00	0.17	0.00	0.081
Private Organisation	0.08	0.33	0.08	0.25	0.00	0.153
Opposition Party	0.25	0.17	0.00	0.08	0.00	0.099
Religious Organisation	0.17	0.33	0.08	0.25	0.00	0.142
Donor Agency	0.75	0.25	0.33	0.33	0.00	0.254
Research Report	0.42	0.17	0.50	0.25	0.17	0.182
Research Centre	0.25	0.25	0.08	0.50	0.08	0.153
CSO	1.25 ^{ab}	1.67a	0.25^{c}	1.50a	0.42bc	0.302
Journalists	0.42	0.66	0.75	0.75	0.33	0.249
Columnists	0.25^{b}	1.42a	0.00^{b}	0.33^{b}	0.08^{b}	0.152
Readers	0.17	0.50	0.25	0.42	0.42	0.171
Editorial	0.25	80.0	0.17	0.00	0.08	0.108
Quarterly Report Index						
	Α	В		С	D	SEM
Department of Health	1.00	0.8		1.13	1.67	0.415
Minister (Government)	0.27^{b}	0.2		1.13a	0.80^{b}	0.191
Presidency	0.20	0.0		0.00	0.00	0.073
Private Organisation	0.13	0.2		0.06	0.20	0.137
Opposition Party	0.27	0,0		0.00	0.07	0.089
Religious Organisation	0.00^{b}	0.0		0.13^{b}	0.53^{a}	0.127
Donor Agency	0.20	0.0		0.53	0.60	0.227
Research Report	0.13^{b}	0.2		0.20 ^{ab}	0.67^{a}	0.163
Research Centre	0.67	0.2		0.33	0.33	0.137
CSO	0.53^{b}	0.6		1.40 ^a	1.53 ^a	0.270
Journalists	0.40^{b}	0.3		0.47^{b}	1.13a	0.222
Columnists	0.40	0.3		0.53	0.40	0.136
Readers	0.40	0.2		0.27	0.47	0.153
Editorial	0.00	0.2	0	0.07	0.20	0.097

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	
5	City Press	

Table 8 shows the sources of HIV and AIDS news reported by

the media on a yearly and quarterly basis. There were significant differences (P<0.05) among the

newspapers on sources of HIV and AIDS news reported by the media on a yearly basis with regard to Department of Health, CSO and Columnists. Sourcing of HIV and AIDS news from Department of Health were similarly (P>0.05) observed in *The Citizen, Sowetan* and *The Star* newspapers but lower (P<0.05) in *Mail and Guardian* and *City Press* newspapers while HIV and AIDS news from CSO was lowest (P<0.05) in *Mail and Guardian* and the *City Press* than other newspapers used for the study. HIV and AIDS news sourced from Columnists was the same (P>0.05) for *The Citizen, Mail and Guardian, The Star* and *City Press* but highest (P<0.05) for *Sowetan* newspaper.

During the quarter period, sourcing of HIV and AIDS news were significantly different (P<0.05) for Minister (Government), Religious Organisation, Research Report, CSO and Journalists among the newspapers. Sourcing of HIV and AIDS news from Minister (Government) was higher (P<0.05) among the newspapers during quarter C than quarter periods A, B and D respectively. However, sourcing of HIV and AIDS news from Religious Organisation were higher (P<0.05) among the newspapers during quarter D than quarter periods A, B and C respectively. Sourcing of HIV and AIDS news from 'Research Report' was similar (P>0.05) during quarter periods B, C and D by all the newspapers but with lower (P<0.05) 'Research Report' during quarter period B. Sourcing of HIV and AIDS news from CSO was higher (P<0.05) during quarter periods C and D than quarter periods A and B while sourcing from Journalists was highest (P<0.05) during quarter period D than quarter periods A, B and C respectively.

5.9.3 MAIN HIV AND AIDS NEWS SUBJECTS REPORTED BY THE MEDIA ON A YEARLY AND QUARTERLY BASIS

Table 9: Comparison of Main HIV and AIDS News Subjects Reported by the Media on a Year and Quarterly Basis Among the Different Media Groups Used for the Study

	*Number	of Newspa	pers Used i	n the Study	(Yearly repo	rt
Variables	index)					
HIV and AIDS Subjects						
Covered By News Reports	I	2	3	4	5	SEM
Origin of HIV and AIDS	0.00	0.00	0.00	0.17	0.00	0.075
HIV and AIDS Prevalence	0.25	0.17	0.17	0.08	0.00	0.110
HIV and AIDS Prevention	1.83	1.83	1.08	1.83	0.75	0.456
HIV and AIDS Testing	1.92a	1.75 ^{ab}	0.17 ^c	0.75 ^{bc}	0.58^{c}	0.386
HIV and AIDS Awareness	0.17 ^{ab}	0.58^{a}	0.08^{b}	0.25ab	0.08b	0.141
Vaccine Development	0.00	0.08	0.00	0.00	0.00	0.037
Economic Impact of AIDS	0.00	0.17	0.08	0.17	0.00	0.082
Medical Costs of AIDS	0.17 ^{ab}	0.33^a	0.00^{b}	0.00^{b}	0.08ab	0.090
Politics of AIDS	0.17	0.33	0.42	0.33	0.25	0.180
Treatment of HIV and AIDS	0.83ab	0.75ab	0.25 ^b	1.08a	0.25 ^b	0.208
AIDS Occurrence	0.08	0.08	0.00	0.00	0.00	0.051
Scientific Discovery	0.08	0.00	0.00	0.17	0.00	0.084
Social Patterns	0.25	0.67	0.17	0.25	0.16	0.217
Social Transmission Rate	0.08	0.00	0.00	0.08	0.00	0.053
HIV and AIDS Social Costs	0.00	0.00	0.08	0.17	0.00	0.084
HIV and AIDS Management	0.17 ^{ab}	0.50^{a}	0.08 ^{ab}	0.42ab	0.00^{b}	0.145
Demographic Impact of HIV	0.17	0.33	0.08	0.08	0.00	0.107
and AIDS						
HIV and AIDS Funding	0.33	0.25	0.08	0.33	0.00	0.143
HIV and AIDS Infection	0.33	0.17	0.00	0.33	0.00	0.139
HIV and AIDS Vulnerable	0.25	0.00	0.17	0.00	0.00	0.121
Group						
Quarterly Report Index	_	_	_	_		
	A	В	С	D	SEM	
Origin of HIV and AIDS	0.13	0.00	0.00	0.00	0.067	
HIV and AIDS Prevalence	0.33^{a}	0.13 ^{ab}	0.07ab	0.00^{b}	0.985	
HIV and AIDS Prevention	1.33	1.07	2.07	1.40	0.408	
HIV and AIDS Testing	0.40 ^b	1.20 ^{ab}	0.87 ^{ab}	1.67a	0.346	
HIV and AIDS Awareness	0.20	0.20	0.20	0.33	0.126	
Vaccine Development	0.07	0.00	0.00	0.00	0.033	
Economic Impact of AIDS	0.07	0.07	0.13	0.07	1.073	
Medical Costs of AIDS	0.13	0.07	0,07	0.20	0.081	
Politics of AIDS	0.00	0.40	0.33	0.47	0.161	
Treatment of HIV and AIDS	0.33 ^b	0.40 ^{ab}	0.93a	0.87 ^{ab}	0.186	
AIDS Occurrence	0.13	0.00	0.00	0.00	0.046	
Scientific Discovery	0.00	0.00	0.13	0.07	0.075	
Social Patterns	0.47	0.13	0.40	0.20	0.194	
Social Transmission Rate	0.07	0.00	0.07	0.00	0.048	
HIV and AIDS Social Costs	0.13	0.07	0.00	0.00	0075	
HIV and AIDS Management	0.20 ^{ab}	0.00^{b}	0.33 ^{ab}	0.40^{a}	0.130	

Demographic Impact of HIV	0.00	0.00	0.27	0.27	0.095
and AIDS					
HIV and AIDS Funding	0.07^{b}	0.00^{b}	0.00^{b}	0.73^{a}	0.128
HIV and AIDS Infection	0.13^{b}	0.00^{b}	0.00^{b}	0.53^{a}	0.125
HIV and AIDS Vulnerable	0.00	0.00	0.27	0.07	0.109
Group					

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	
5	City Press	

Table 9 shows the HIV and AIDS news subjects coverage by the different media groups used for the study on a yearly and quarterly basis. There were significant differences (P<0.05) among the newspapers on HIV and AIDS news subjects coverage on a yearly basis with regard to HIV and AIDS Testing, HIV and AIDS Awareness, Medical Costs of AIDS, Treatment of HIV and AIDS and HIV and AIDS Management. Reporting of HIV and AIDS Testing was observed higher (P<0.05) in *The Citizen* than in other newspapers while HIV and AIDS Awareness report was more (P<0.05) prevalent in *Sowetan* than other newspapers used for the study. Reporting of Medical Costs of AIDS was the same (P>0.05) for *The Citizen, Sowetan* and *City Press* but lower (P<0.05) for *Mail and Guardian* and *The Star* newspapers respectively. Treatment of HIV and AIDS were similarly (P>0.05) reported by *Mail and Guardian* and *City Press* but was lower (P<0.05) for *The Star*. HIV and AIDS Management were similarly (P>0.05) reported by *The Citizen, Sowetan, Mail and Guardian* and *The Star* but was lower (P<0.05) for *City Press* newspaper.

During the quarter period, the HIV and AIDS Prevalence news were higher (P<0.05) among the newspapers during quarters A, B and C than quarter period D but with HIV and AIDS Testing higher (P<0.05) for quarter period D than quarter periods A, B and C. Treatment of HIV and AIDS were lower (P<0.05) among the newspapers during quarter A than quarter periods B, C and D respectively. HIV and AIDS Management were similarly (P>0.05) reported during quarter periods A, C and D by all the newspapers but was lowly (P<0.05) reported during quarter period B. HIV and AIDS Funding and HIV and AIDS Infection were higher (P<0.05) during quarter period D than quarter periods A, B and C respectively

5.9.4 LANGUAGE USED BY THE MEDIA IN HIV AND AIDS NEWS REPORTING ON A YEARLY AND QUARTERLY BASIS

5.9.4.1 Language Constructiveness of HIV and AIDS News Reports on a Yearly and Quarterly Basis

Table 10: Comparison of Language Constructiveness of HIV and AIDS News Reports on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

	*Number	of Newspap	ers Used in	the Study	(Yearly repo	rt	
Variables	index)						
Constructiveness of HIV							
and AIDS News Reports	I	2	3	4	5	SEM	
Very Constructive '	4.17 ^{ab}	3.50 ^{ab}	2.17 ^b	5.00^{a}	1.75 ^b	0.837	
Constructive	2.67b	4.92a	0.92 ^{bc}	2.08bc	0.67 ^c	0.596	
Not Constructive	0.00	0.25	0.00	0.08	0.00	0.116	
Confusing	0.00	0.00	0.00	0.00	0.00	0.000	
Quarterly Report Index							
,	Α	В	С	D	SEM		
Very Constructive	2.20^{b}	2.07b	2.33 ^b	6.67a	0.749		
Constructive	2.07 ^b	1.93 ^b	3.67a	1.33 ^b	0.533		
Not Constructive	0.00	0.00	0.00	0.27	0.104		
Confusing	0.00	0.00	0.00	0.00	0.000		

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter
2	Sowetan	D - Scond Quarter
3	Mail & Guardian	C – Third Quarter
4	The Star	
5	City Press	D – Fourth Quarter

Results of the Constructiveness of the language used in HIV and AIDS news reported by the media groups in the study on a yearly and quarterly basis are presented in Table 10. During the year, *The Citizen, Sowetan, Mail and Guardian* and *The Star* newspapers carried similar (P>0.05) "Very Constructive" HIV and AIDS news reports but different (P<0.05) from the *City Press.* "Constructive" news reports were carried more (P<0.05) by *Sowetan* than *City Press, The Star, The Citizen* and *Mail and Guardian* respectively. However, 'Very Constructive" reports were more pronounced (P<0.05) among the newspapers during quarter period D than quarter periods A, C and B respectively. "Constructive" reports were higher (P<0.05) during quarter period C among the media than quarter periods A, B and D

respectively. There were no differences (P>0.05) among the newspapers during the year and on quarterly basis for "Not Constructive" and "Confusing" reports on the quality of HIV and AIDS news reports.

5.9.4.2 Professional Language Use by the Media in Communicating HIV and AIDS News on a Year and Quarterly Basis

Table 11: Comparison of Professional Language Use by the Media in Communicating HIV and AIDS News on a Year and Quarterly Basis Among the Different Media Groups Used for the Study

	*Number o	of Newspaper	rs Used in	the Study (Y	'early report	
Variables	index)					
Media Language:						
Professional use of						
Language in HIV and AIDS						
Reporting	I	2	3	4	5	SEM
Professional	6.67a	8.25a	3.00^{b}	6.83a	2.25 ^b	1.001
Unprofessional	0.00^{b}	0.17a	0.00^{b}	0.00^{b}	0.00^{b}	0.051
Quarterly Report Index						
• •	Α	В	С	D	SEM	
Professional	4.27 ^b	4.47 ^b	5.27 ^{ab}	7.60a	0.896	
Unprofessional	0.07	0.00	0.00	0.07	0.045	

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	D Tourist Eductor
4	The Star	
5	City Press	

Results of the media language use in HIV and AIDS news communication on a yearly and quarterly basis are presented in Table 11. During the year, "Professional" language used by the media in communicating of HIV and AIDS news were more (P<0.05) observed in *The Citizen, Sowetan* and *The Star* than in *Mail and Guardian* and *City Press* but with lower (P<0.05) "Unprofessional" media language use observations recorded for The Citizen, *Mail and Guardian*, *The Star* and *City Press* respectively. However, "Professional media language use" in HIV and AIDS news Communication were higher (P<0.05) among the newspapers during quarter periods C and D than quarter periods A and B respectively.

5.9.4.3 Language Tone of Media HIV and AIDS News Reports on a Yearly and Quarterly Basis

Table 12: Comparison of Language Tone of Media HIV and AIDS News Reports on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

	*Number	of Newspap	ers Used in	the Study	(Yearly repo	rt
Variables	index)					
Media Language: HIV and						
AIDS News Tone	I	2	3	4	5	SEM
Negative	1.00	0.67	0.08	0.33	0.00	0.386
Positive	4.50ab	6.08a	1.83 ^b	4.67 ^{ab}	1.75 ^b	0.949
Neutral	0.17	0.08	0.08	0.17	0.00	0.102
Quarterly Report Index						
	Α	В	С	D	SEM	
Negative	1.53a	0.13^{b}	0.00^{b}	0.00^{b}	0.346	
Positive	2.47 ^b	3.93b	0.00^{c}	8.67a	0.849	
Neutral	0.27	0.13	0.00	0.00	0.091	

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	2
4	The Star	
5	City Press	

Results of the language tone used by the media in communicating HIV and AIDS news on a yearly and quarterly basis are presented in Table 12. During the year, HIV and AIDS news stories the media communicated in "Positive" tone were more (P<0.05) observed in *Sowetan* than in *Mail and Guardian* and *City Press* newspapers but with similar (P>0.05) observations recorded for *The Citizen* and *The Star* newspapers respectively. However, the HIV and AIDS news stories the media communicated with "Negative" tone were higher (P<0.05) among the newspapers during quarter period A than quarter periods B, C and D respectively but those with "positive" language tone were higher (P<0.05) among the newspapers during quarter period D than quarter periods A, B and C respectively.

5.9.4.4 Blame Attribution for HIV and AIDS Infection as Reported by South African Mass Media on a Yearly and Quarterly Basis

Table 13: Comparison of Blame Attribution for HIV and AIDS Infection as Reported by South African Mass Media on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

Variables	*Number of Newspapers Used in the Study (Yearly report index)					
Blame Attribution for HIV and						
AIDS Infection in Media						
Reports	I	2	3	4	5	SEM
Prostitution	0.00	0.00	0.00	0.00	0.00	0.00
Gay and Lesbian	0.00	0.00	0.00	0.08	0.00	0.037
Reckless Lifestyle	0.58	0.58	0.25	0.33	0.00	0.224
Truck Drivers	0.00	0.00	0.00	0.00	0.00	0.00
Polygamy	0.00	0.17	0.00	0.00	0.00	0.075
Husband	0.25	0.25	0.00	0.00	0.00	0.099
Wives	0.08	0.00	0.00	0.00	0.00	0.037
Other Social Ethics	0.16	0.00	0.00	0.33	0.00	0.127
Government	0.00^{b}	0.17 ^{ab}	0.00^{b}	0.25^{a}	0.00^{b}	0.075
Poverty	0.08	0.08	0.00	0.25	0.00	0.123
No Blame	5.67 ^{ab}	7.92a	3.00bc	5.50 ^{ab}	2.33 ^c	0.909
Quarterly Report Index						
	Α	В	С	D	SEM	
Prostitution	0.00	0.00	0.00	0.00	0.000	
Gay and Lesbian	0.07	0.00	0.00	0.00	0.033	
Reckless Lifestyle	0.33 ^{ab}	0.00^{b}	0.40 ^{ab}	0.67^{a}	0.201	
Truck Drivers	0.00	0.00	0.00	0.00	0.000	
Polygamy	0.00	0.00	0.13	0.00	0.067	
Husband	0.00	0.07	0.20	0.13	0.089	
Wives	0.00	0.00	0.00	0.07	0.033	
Other Social Ethics	0.13	0.06	0.00	0.20	0.113	
Government	0.20	0.00	0.13	0.00	0.067	
Poverty	0.27	0.07	0.00	0.00	0.110	
No Blame	3.00 ^b	3.80 ^b	5.07^{b}	7.67a	0.813	

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication
1	The Citizen
2	Sowetan
3	Mail & Guardian
4	The Star
5	City Press

A - First Quarter

B - Second Quarter

C – Third Quarter

D - Fourth Quarter

Results of the attribution of blame in HIV and AIDS news communicated by the media on a yearly and quarterly basis are presented in Table 13. During the year, the media HIV and AIDS news stories that blamed the "Government" for HIV and AIDS pandemic were least (P<0.05) observed in *The Citizen*, *Sowetan*, *Mail & Guardian* and *City Press* than in *The Star* newspaper but with the lowest (P<0.05) attribution of "No Blame" HIV and AIDS news stories observed in *City Press* than other newspapers. However, attribution of HIV and AIDS infection to "Reckless lifestyle" were highest (P<0.05) among the newspapers during quarter period D than quarter periods A, B and C respectively, Similarly, HIV and AIDS news stories with "No blame" for the infection was also the highest (P<0.05) among the newspapers during quarter period D than quarter periods A, B and C respectively.

5.9.5 GEOGRAPHICAL LOCATION AND SETTING OF HIV AND AIDS NEWS REPORTS BY THE MEDIA ON A YEARLY AND QUARTERLY BASIS

Table 14: Comparison of Geographical Location and Setting of HIV and AIDS News Reports by the Media on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

	*Number o	of Newspape	ers Used in	the Study	(Yearly repo	rt
Variables	index)					
Geographical Location of HIV						
and AIDS News	I	2	3	4	5	SEM
Local News	0.67 ^{ab}	0.83^{a}	0.08bc	0.67 ^{ab}	0.00^{c}	0.198
National News	4.00 ^b	6.83a	2.08 ^b	4.00 ^b	1.67 ^b	0.796
Foreign News	1.08 ^{ab}	0.33 ^{ab}	0.08^{b}	1.58a	0.00^{b}	0.433
Quarterly Report Index						
, .	Α	В	С	D	SEM	
Local News	0.33	0.27	0.53	0.67	0.177	
National News	2.40 ^b	3.27 ^b	3.80 ^{ab}	5.40a	0.712	
Foreign and International						
News	0.13^{b}	0.00^{b}	0.27 ^b	2.07a	0.387	

^{abc} Means in the same row not sharing a common superscript are significantly different (P<0.05). SEM: Standard error of the mean

*N and R	Name of Publication
1	The Citizen
2	Sowetan
3	Mail & Guardian
4	The Star
5	City Press

A – First QuarterB - Second QuarterC – Third QuarterD – Fourth Quarter

Results of the geographical location and setting of HIV and AIDS news communicated by the media on a yearly and quarterly basis are presented in Table 14. During the year, the use of "Local news" were least (P<0.05) observed in the *City Press* than in other newspapers used in the study but with the highest (P<0.05) use of "National news" observed in the *Sowetan* than in *The Citizen, Mail and Guardian, The Star* and *City Press* respectively. The use of "Foreign and International news" were also more (P<0.05) pronounced in *The Star* newspaper than other newspapers used for the study during the year. However, use of "National news" were higher (P<0.05) among the newspapers during quarter periods C and D than quarter periods A and B respectively but with the highest (P<0.05) use of "Foreign and International news" observed during quarter period D than quarter periods A, B and C respectively.

5.9.6 NATURE OF MEDIA HIV AND AIDS NEWS REPORTS BY THE MEDIA ON A YEARLY AND QUARTERLY BASIS

Table 15: Comparison of Nature of HIV and AIDS News Reported by the Media on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

Variables	*Number	*Number of Newspapers Used in the Study (Yearly report index)					
Nature of HIV and AIDS							
News (Reported as:	1	2	3	4	5	SEM	
Social Issue	80.0	0.08	0.00	0.25	0.25	0.131	
Religious Issue	0.17	0.00	0.08	0.25	0.00	0.956	
Health Issue	0.75 ^{ab}	0.92ab	0.50 ^{ab}	1.17a	0.17^{b}	0.293	
Development Issue	6.83a	6.83^{a}	2.17 b	5.58a	2.92 ^b	0.938	
Quarterly Report Index							
, ,	Α	В	С	D	SEM		
Social Issue	0.40^{a}	0.00^{b}	0.00^{b}	0.13 ^{ab}	0.117		
Religious Issue	0.07^{b}	0.00^{b}	0.00^{b}	0.33^{a}	0.085		
Health Issue	0.27	0.80	0.87	0.87	0.262		
Development Issue	4.27b	2.73^{b}	5.13 ^{ab}	7.33^{a}	0.839		
					1166 1 /0 0		

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	
5	City Press	

During the year, *The Citizen, Sowetan, Mail & Guardian* and *The Star* and *City Press* newspapers had similar (P>0.05) comparisons in reporting HIV and AIDS as "social" and "religious' issues. Similarly, *The Citizen, Sowetan, Mail & Guardian, City Press* and *The Star* newspapers' had similar (P>0.05) HIV and

AIDS news stories presenting HIV and AIDS as "health issue". In the same manner, *The Citizen, Sowetan, Mail & Guardian*, and *City Press* newspapers had similar (P>0.05) HIV and AID news stories reporting HIV and AIDS as "health issue". However, HIV and AIDS news stories presenting HIV and AIDS as "health issue" were different (P<0.05) between *The Star* and *City Press* newspapers, respectively. HIV and AIDS news stories with HIV and AIDS as "Development issue" were similar (P>0.05) for The *Citizen, Sowetan* and *The Star* newspapers but different (P<0.05) from the Mail & Guardian' and *City Press* respectively. On the other hand, result of the quarter period indicate that HIV and AIDS news stories that treated HIV and AIDS as "social issue" were similar (P>0.05) during quarters A and D. Similarly, those as "social issue" were also similar (P>0.05) during quarters B and C, respectively. However, HIV and AIDS news stories that presented HIV and AIDS as "religious issue" were more pronounced (P<0.05) among the newspapers during quarter period D than quarter periods A, C and B respectively. HIV and AIDS as "development issue' were reportedly more (P<0.05) pronounced during quarter period D than quarter periods A and B, respectively

5.9.7 NEWS RELEVANCE OF HIV AND AIDS PANDEMIC TO THE SOUTH AFRICAN MEDIA ON A YEARLY AND QUARTERLY BASIS

5.9.7.1 Prominence of HIV and AIDS News Stories to the Media

Table 16: Comparison of Prominence and Importance Attached to HIV and AIDS News Coverage on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

Variables	*Number of Newspapers Used in the Study (Yearly report index)					
Prominence Attached to HIV						_
and AIDS News coverage	I	2	3	4	5	SEM
Prominent Reports	2.67b	4.67a	2.17 ^b	3.33 ^{ab}	1.75 ^b	0.558
Less Prominent Reports	3.00^{a}	2.42a	0.58^{b}	2.75 ^{ab}	0.58^{b}	0.434
Not Prominent	1.83a	1.92a	0.33bc	1.25 ^{ab}	0.83^{c}	0.379
Quarterly Report Index						
, .	Α	В	С	D	SEM	
Prominent Reports	2.20 ^b	2.07^{b}	2.53 ^b	4.87a	0.499	
Less Prominent Reports	1.47 ^{bc}	1.00 ^c	2.27 ^{ab}	2.73a	0.388	
Not Prominent	0.60^{b}	0.93ab	1.67a	1.13 ^{ab}	0.339	

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	
5	City Press	

Results of the "Prominence' attached to HIV and AIDS news coverage by the different media groups used for the study on a yearly and quarterly basis are presented in Table 16. There were significant differences (P<0.05) among the newspapers on "Prominence" attached to HIV and AIDS news coverage both on a yearly and quarterly basis. During the year, the *Soweta*n newspaper gave a higher (P<0.05) prominent report to HIV and AIDS news coverage than *The Star, Mail & Guardian* and *City Press* respectively. However, prominent HIV and AIDS news report appearances were higher (P<0.05) for quarter period D among the newspapers than quarter periods A, B and C respectively. "Less prominent" reports were obtained from the *Mail & Guardian* and *City Press* during the year than *The Citizen, The Star* and *Sowetan* respectively but with "Less prominent' reports among the newspapers during the quarter period B of the year. *The Citizen* and *Sowetan* HIV and AIDS news coverage

indicated a higher (P<0.05) value for "Not prominent" HIV and AIDS news reports during the year than other newspapers respectively, with HIV and AIDS news coverage having the highest (P<0.05) value for "Not prominent" during the third quarter of the year.

5.9.7.2 Editorial Page Location of HIV and AIDS news Reports on a Yearly and Quarterly Basis

Table 17: Comparison of Media Page Location of HIV and AIDS News Reports on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

	*Number of Newspapers Used in the Study (Yearly report						
Variables	index)						
Page Location of HIV and							
AIDS Media Reports	1	2	3	4	5	SEM	
Front Page	0.17 ^b	0.00^{b}	0.08^{b}	0.50^{a}	0.08b	0.114	
Editorial Page	0.00	0.00	0.00	0.00	80.0	0.037	
Op.Ed. Page	0.92	0.00	0.00	0.00	0.92	0.563	
Back Page	0.00	0.00	80.0	0.00	0.00	0.372	
Other Page Numbers	5.92 ^b	892a	2.92 ^c	6.83 ^{ab}	2.25 ^c	0.860	
Quarterly Report Index							
	Α	В	С	D	SEM		
Front Page	0.27	0.20	0.07	0.13	0.102		
Editorial Page	0.00	0.00	0.00	0.07	0.033		
Op.Ed. Page	0.00	0.00	0.00	1.47	0.503		
Back Page	0.00	0.07	9.99	0.00	0.033		
Other Page Numbers	4.00b	3.73 ^b	5.93 ^{ab}	7.80a	0.769		

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	
5	City Press	

Results of the page placement of HIV and AIDS news stories by the different media groups used for the study on a yearly and quarterly basis are presented in Table 17. Performance indices showed that "Front page" HIV and AIDS news reports indicate significant differences (P<0.05) among the newspapers on a yearly basis but with similar (P>0.05) values in the quarter periods. During the year, *The Star* newspaper had higher (P<0.05) "Front page" HIV and AIDS news report appearances than *The Citizen, Sowetan, Mail & Guardian* and *City Press* newspapers respectively. Although, there were

no differences (P>0.05) in HIV and AIDS news reports placed on "Editorial page", "Op-ed page" and 'Back page" among the newspapers both on a yearly and quarterly basis. However, the result obtained for placement of HIV and AIDS news stories on "Other page numbers" revealed significant differences (P<0.05) among the newspaper groups during the year and quarter periods respectively. During the year, the lowest (P<0.05) 'Other page numbers" news report appearances for HIV and AIDS was obtained from *City Press* and *Mail & Guardian* newspapers respectively with the *Sowetan* having the highest (P<0.05) report value for the year. However, reports of "Other page numbers" appearances for HIV and AIDS news reports were similar (P>0.05) for quarters periods A, B and C, with quarter D having a higher (P<0.05) such "Other page numbers" news report appearances than quarters A, B and C respectively.

5.9.7.3 Space Dedicated to HIV and AIDS by the Media (in Inches)

Table 18: Comparison of Editorial Space Dedicated to HIV AND AIDS News Coverage by the Media on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

Variables	*Number of N	*Number of Newspapers Used in the Study (Yearly report index)					
Space Dedicated to HIV							
and AIDS Reports (In							
Inches)	1	2	3	4	5	SEM	
Number of news							
columns Used	17.00 ^{bc}	27.83ab	12.33 ^c	32.17a	11.1 7 ¢	4.235	
Column Height	37.58 ^{ab}	56.17a	26.00 ^b	57.58a	21.17 ^b	7.294	
Column Width	45.00 ^{ab}	57.42a	25.33bc	54.25a	21.42 ^c	7.055	
Quarterly Report Index							
• •	Α	В	С	D	SEM		
Number of news							
columns Used	19.20 ^b	13.07b	17.73 ^b	30.40a	3.788		
Column Height	31.07b	28.07b	36.53 ^c	43.13a	6.524		
Column Width	31.40 ^b	28.53 ^b	37.47b	65.33a	6.310		

abc Means in the same row not sharing a common superscript are significantly different (P<0.05).

*N and R	Name of Publication	A – First Quarter				
1	The Citizen	B - Second Quarter C – Third Quarter				
2	Sowetan	D – Fourth Quarter				
3	Mail & Guardian	2 . 3 3 23 a				
4	The Star					
5	City Press					

SEM: Standard error of the mean

Results of the editorial space dedicated to HIV and AIDS news coverage by the different media groups used for the study on a yearly and quarterly basis are presented in Table 18. During the year, *Sowetan*,

and *The Star* newspapers had similar (P>0.05) number of news columns dedicated to HIV and AIDS news reports, but were different (P<0.05) from the number used by *City Press, The Citizen* and *Mail & Guardian* newspapers. Similarly, the news Column height dedication to HIV and AIDS reports were similar (P>0.05) in *Sowetan* and *The Star* newspapers but different (P<0.05) from *City Press, The Citizen* and *Mail & Guardian* newspapers respectively. The Column width dedication to HIV and AIDS news reports were also similar (P>0.05) in *Sowetan* and *The Star* but different (P<0.05) from *City Press, The Citizen* and *Mail & Guardian* respectively. However, "News column", "Column height" and "Column width" dedication to HIV and AIDS news reports were more pronounced (P<0.05) among the newspapers during quarter period D than quarter periods A, C and B respectively.

5.9.7.4 Quantity of HIV and AIDS News Stories Communicated by the Media

Table 19: Comparison of Quantity of HIV and AIDS News Stories Communicated by the Media on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study

Variables	* Number of Newspapers Used in the Study (Yearly reporting index)					dex)
	I	2	3	4	5	SEM
Quantity of HIV and AIDS Media Reports Quarterly Report Index	7.00a	8.92ª	3.08b	7.33a	2.42 ^b	0.947
Quarterly Report Index	Α	В	C	D	SEM	
Quantity of HIV and AIDS	^	U	C	D	JLIVI	
Media Reports	4.27 ^b	4.00b	6.00b	8.73a	0.847	

^{abc} Means in the same row not sharing a common superscript are significantly different (P<0.05).

SEM: Standard error of the mean

*N and R	Name of Publication	A – First Quarter
1	The Citizen	B - Second Quarter C – Third Quarter
2	Sowetan	D – Fourth Quarter
3	Mail & Guardian	
4	The Star	
5	City Press	

Results of the quantity of HIV and AIDS news communicated by the media on a yearly and quarterly basis are presented in Table 19. Performance indices showed that both yearly and quarterly reports on quantity of HIV and AIDS news indicate significant differences (P<0.05) among the newspapers. During the year, *The Citizen, Sowetan* and *The Star* newspapers had higher (P<0.05) reports and quantity of HIV and AIDS news than the *City Press* and *Mail and Guardian* newspapers respectively. However, there were no differences (P>0.05) in quantity of HIV and AIDS news reporting among *The Citizen, Sowetan* and *The Star* newspapers respectively. On the other hand, during the quarter period, the

highest (P<0.05) report on quantity of HIV and AIDS news was obtained during the quarter period D. However, reports on quantity of HIV and AIDS news were similar (P>0.05) for quarters periods A, B and C, respectively.

5.10. PUBLIC PERCEPTION AND ATTITUDE IN LIMPOPO PROVINCE TOWARDS SOUTH AFRICAN MEDIA COVERAGE OF HIV AND AIDS

5.10.1 Gender and Age Groups Distribution, Marital Status, and Education Level of Respondents A total of 120 respondents were analysed to determine public perception and attitude towards HIV coverage by South African media.

Out of the 120 respondents studied 16 (13.3%) aged between 20-25 years were males, and 19 (15.8%) were female. The 26-30 years age group had 14 (11.7%) males and 7 (5.8%) females, while there were a total of 8 (6.7%) males and 12 (10%) females in the 31-35 years age group. The 36-40 years age group had 9 (7.5%) and 6 (5%) male and female respondents respectively, but 41 and above age group had 17 (14.2%) and 12 (10%) respondents accordingly. The different age strata (male and female combined), each contributed a total of 35 (29.2%), 21 (17.5%), 20 (16.7%), 15 (12.5%), and 29 (24.2%) respondents respectively (Fig. 19).

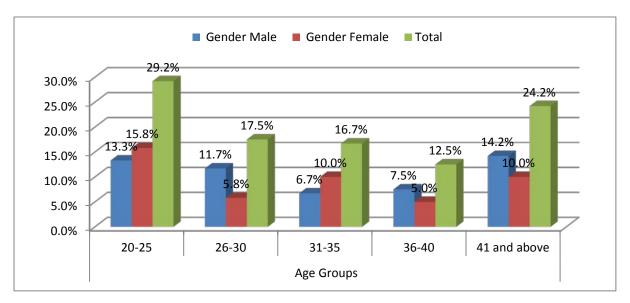


Figure 19: Gender and age groups distribution - 20–25, 26-30, 31-35, 36-40, 41 and Above age groups.

Marital Status

The marital status of all the respondents are as shown in figure 20. There were 69 (57.5%) singles, out of which 39 (32.5%) were male and 30 (25%) were female. Married respondents were 49 (40.8%) in total, with 24 of them (20%) male and 25 (20.8%) female. Only 1 (0.8%) male was divorced and 1 (0.8%) of the females never married.

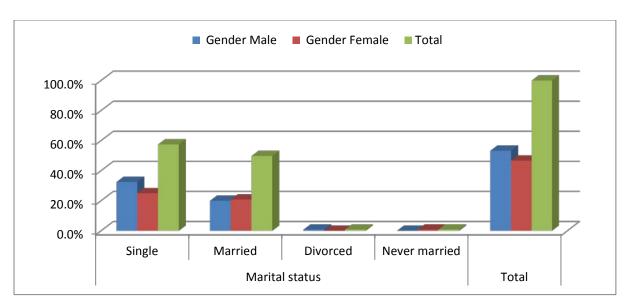


Figure 20: Gender and marital status categorized into Gender – male and female, and Marital status – single, married, divorced and never married.

Education level and discipline of the respondents

The analyses of the educational training of the respondents showed that 4 (3.3%) had Grade 12 (Matric) level education, 6 (5.0%) Certificate level education, 43 (35.8%) have Diploma and 67 (55.8%) were degree holders (Table 20; Fig. 21). Their disciplines cut across the humanities, health, finance and management, and science and technology.

Discipline Studied at School	Highest lev	Highest level of education				
	Grade12	Certificate	Diploma	Degree		
Public Admin	0	0	2	4	6	
	0.0%	0.0%	1.7%	3.3%	5.0%	
Education	0	1	16	25	42	
	0.0%	0.8%	13.3%	20.8%	35.0%	
Commerce	2	1	3	11	17	
	1.7%	0.8%	2.5%	9.2%	14.2%	
Human Resource	0	1	2	1	4	
	0.0%	0.8%	1.7%	0.8%	3.3%	
Policing	0	0	3	0	3	
	0.0%	0.0%	2.5%	0.0%	2.5%	
Journalism	0	0	2	6	8	
	0.0%	0.0%	1.7%	5.0%	6.7%	
Agriculture	0	0	0	1	1	

	0.0%	0.0%	0.0%	0.8%	0.8%
Law	0	0	1	4	5
	0.0%	0.0%	0.8%	3.3%	4.2%
Information Studies	0	0	0	1	1
	0.0%	0.0%	0.0%	0.8%	0.8%
Computer Science	0	0	2	2	4
	0.0%	0.0%	1.7%	1.7%	3.3%
Nursing	0	2	3	0	5
	0.0%	1.7%	2.5%	0.0%	4.2%
Engineering	0	0	3	0	3
	0.0%	0.0%	2.5%	0.0%	2.5%
Youth Development	0	0	0	1	1
	0.0%	0.0%	0.0%	0.8%	0.8%
Catering	0	0	1	0	1
	0.0%	0.0%	0.8%	0.0%	0.8%
Environmental Science	0	0	0	2	2
	0.0%	0.0%	0.0%	1.7%	1.7%
Marketing	0	0	1	0	1
	0.0%	0.0%	0.8%	0.0%	0.8%
Social Science	0	0	1	4	5
	0.0%	0.0%	0.8%	3.3%	4.2%
Optometry	0	0	0	1	1
	0.0%	0.0%	0.0%	0.8%	0.8%
Sciences	0	0	0	1	1
	0.0%	0.0%	0.0%	0.8%	0.8%
Information Technology	0	1	0	0	1
	0.0%	0.8%	0.0%	0.0%	0.8%
Chemistry	0	0	0	1	1
	0.0%	0.0%	0.0%	0.8%	0.8%
Linguistic	0	0	1	0	1
	0.0%	0.0%	0.8%	0.0%	0.8%
Secretary of Office Admin.	0	0	1	0	1
	0.0%	0.0%	0.8%	0.0%	0.8%
Mathematics and Science	1	0	0	1	2
	0.8%	0.0%	0.0%	0.8%	1.7%

Call Centre Operator	0	0	1	0	1
	0.0%	0.0%	0.8%	0.0%	0.8%
Molecular and Life Science	0	0	0	1	1
	0.0%	0.0%	0.0%	0.8%	0.8%
History and Geography	1	0	0	0	1
	0.8%	0.0%	0.0%	0.0%	0.8%
Total	4	6	43	67	120
	3.3%	5.0%	35.8%	55.8%	100.0%

Table 20: Educational level and disciplines of the respondents ranging from Grade 12 to Degree level. Their disciplines cut across the humanities, health, finance and management, and science and technology.

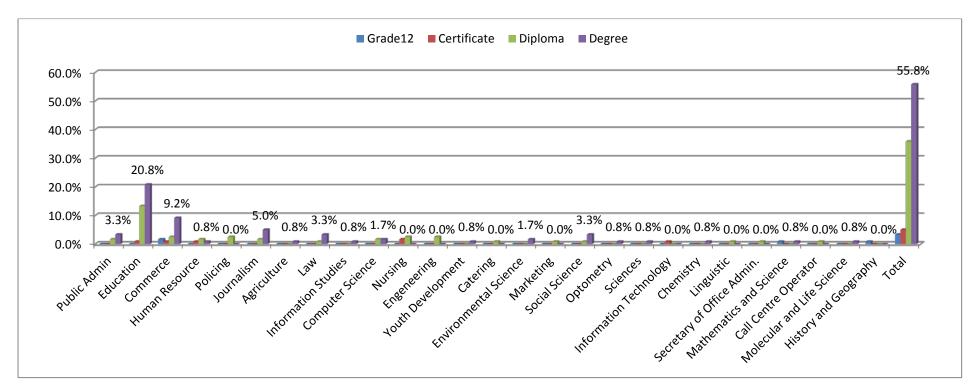


Figure 21: Educational level and disciplines of the respondents ranging from Grade 12 to Degree levels. Their disciplines cut across the humanities, health, finance and management, and science and technology.

Employment Status and Professional Sector Employed

The result revealed that a total of 105 (87.5%) respondents were employed and 15 (12.50%) were unemployed. Further analysis (Fig. 22) showed that 44 (36.67%) respondents are employed in the education sector, 7 (5.83%) in the Health and Medical services, 2 (1.67%) in the Social work, 4 (3.33%) in the Science and Technology sector, 2 (1.67%) in the Mass media, 11 (9.17%) in the Financial services, and 19 (15.83%) were Administrators. Equally, a total of 7 (5.83%) respondents were in the Legal Services (Bar and Bench), and 15 (12.50%) in the Information Technology sector.

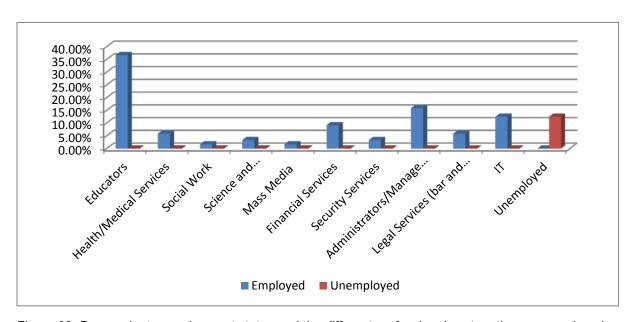


Figure 22: Respondents' employment status and the different professional sectors they are employed.

5.10.2 LIMPOPO (SOUTH AFRICA) PROVINCIAL OVERALL PUBLIC KNOWLEDGE OF HIV AND AIDS AND MEDIA HIV AND AIDS INFORMATION COMMUNICATION

Limpopo (South Africa) Provincial Overall Public Knowledge of HIV and AIDS

On the level of public knowledge of HIV and AIDS, a total of 67 (55.8%) respondents are well informed about HIV and AIDS, 28 (23.3%) have above average knowledge of the disease, and 25 (20.8%) have below average knowledge of the disease (Figure 23).

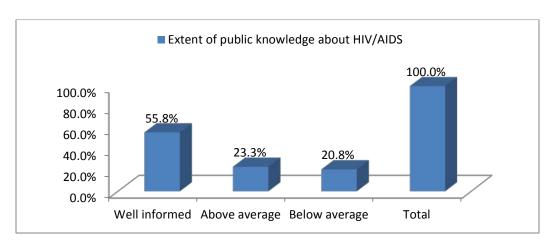


Figure 23: Limpopo Province (South African) knowledge level of HIV and AIDS.

Extent of Media Provision of Overall HIV and AIDS Information Need of South Africans (Limpopo Province)

The analysis of South African media news attention towards addressing the overall HIV and AIDS information needs of the people in Limpopo Province of the country showed that the media paid enough news attention to providing enough coverage of the HIV and AIDS issues confronting the people 104 (86.7%), telling the people what they need to know about HIV and AIDS and related issues, 103 (85.8%), providing enough practical information about what the people can do to deal with specific HIV and AIDS problems, 102 (85%), and meeting the people's personal HIV and AIDS information needs, 105 (87.5%).

The percentage distribution for 'too little" news attention to the above sub-categories were 16 (13.3%), 15 (12.5%), 12 (10%, and 11 (9.2%) respectively. The percentage distribution for "not enough" news attention were all below 10% (Fig. .24).

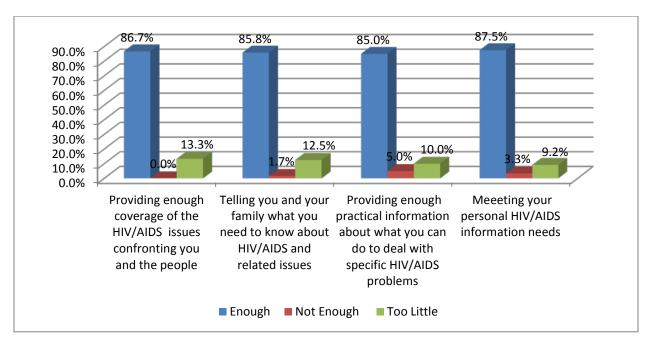


Figure 24: Media provision of HIV and AIDS information needs of South Africans (Limpopo Province)

5.10.3 MEDIA ACCESS, USE AND SOURCES OF HIV AND AIDS INFORMATION Audience Access and Exposure (Use) to the Media

All the 120 (100%) respondents have television at home, 112 (93.3%) have radio, but 8 (6.7%) do not have radio at home. A total of 47 (39.2%) respondents have internet access at home, 65 (54.2%) do not, but 8 (6.7%) have internet access at home only sometimes. Additionally, 100 (83.3%) respondents have access to newspaper (regularly), 3 (2.5%) do not, and 17 (14.2%) sometimes (Fig. 25a).

Consequently, 116 (96.7%) watch television news broadcast, 115 (95.8%) listen to radio news broadcast, and 113 (94.2%) respondents read newspaper news reports. However, 4 (3.3%), 5 (4.2%) and 7 (5.8%) respectively do not watch television, listen to radio or read newspaper (Fig. 25b).

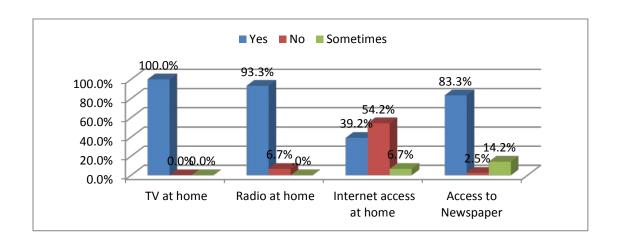


Figure 25a: Audience access to the media categorized into TV, radio, newspaper, and internet.

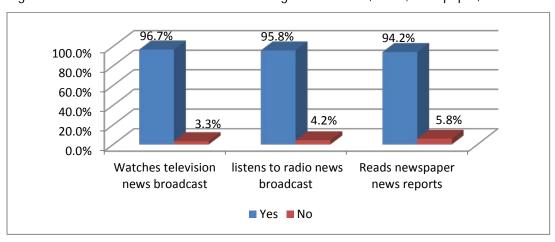


Figure 25b: Audience exposure and consumption of media contents (TV, radio, newspaper).

Frequency of Media Exposure and Content Consumption

Among the respondents, 61 (50.8%) listen to radio everyday, 32 (26.7%) almost everyday, and 27 (22.5%) 1 to 3 days a week. There were 87 (72.5%) respondents that watch television everyday, 20 (16.7%) almost everyday, and 13 (10.8%) 1 to 3 times a week. A total of 49 (40.8%) of them read newspaper news reports everyday, another 49 (40.8%) almost everyday and 22 (18.3%) 1 to 3 times a week (Fig. 26).

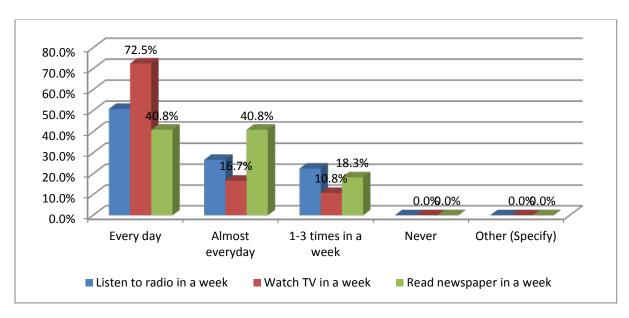


Figure 26: Frequency of audience media exposure and content consumption.

Audience Preference for Different Media Sources

Weekdays Exposure to Television and Content Consumption

All the 120 respondents (100%) watched television (Fig. 27), but distributed among the different media sources as follows, 110 (91.7%) watch SABC 1 channel regularly and 10 (8.3%) do not, 96 (80.0%) watch SABC 2 regularly and 24 (20.0%) do not, 71 (59.2%) watch SABC 3 frequently and 49 (40.8%) do not, and 87 (72.5%) watch ETV regularly and 33 (27.5%) do not. There were 61 (50.8%) respondents that watch DSTV regularly and 59 (49.2%) do not, and 13 (10.8%) watch MNET regularly and 107% do not.

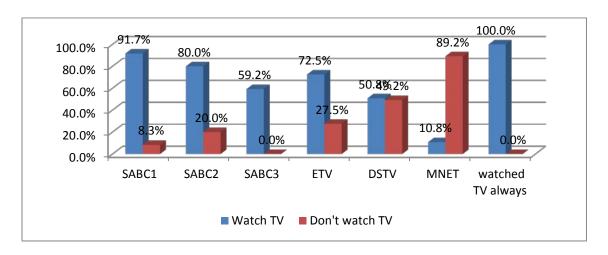


Figure 27: Audience weekdays exposure, and consumption of television contents.

Weekdays Exposure to Radio and Content Consumption

The listening interest of the respondents showed the following distributions (Fig. 28) 68 (56.7%) listened to Thobela FM most often, 52 (43.3%) do not, 20 (16.7%) listened to Phalaphala FM most often and 100 (83.3%) do not, while 24 (20.0%) listened to Jacaranda FM most often but 96 (80.0%) do not. A total of 45 (37.5%) listened most often to Capricorn FM and 75 (62.5%) do not, 2 (1.7%) do not listened to any radio station, but a total of 118 (98.3%) respondents listened to radio. A total of 8 (6.7%) respondents listened to 'other radio stations' most often but 112 (93.3%) do not.

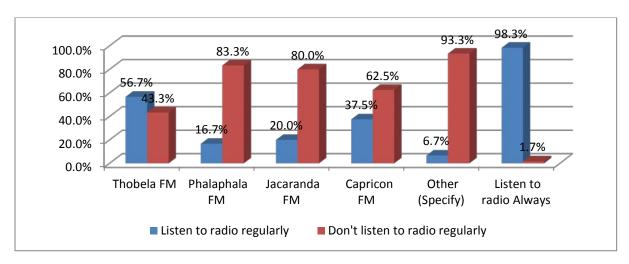


Figure 28: Audience weekdays exposure to radio, and content consumption.

Weekend Exposure to the Media and Content Consumption (TV, Radio and Newspaper)

All the respondents watched TV, listened to radio or read newspaper over the weekends. A total of 99 (82.5%) respondents watched TV more on weekend but 21 (17.5%) watched less of TV programmes, 75 (62.5%) listened to radio more on weekend and 45 (37.5%) did less of it, while 90 (75.0%) respondents read newspaper more on weekend but 30 (25.0%) less so (Fig. 29).

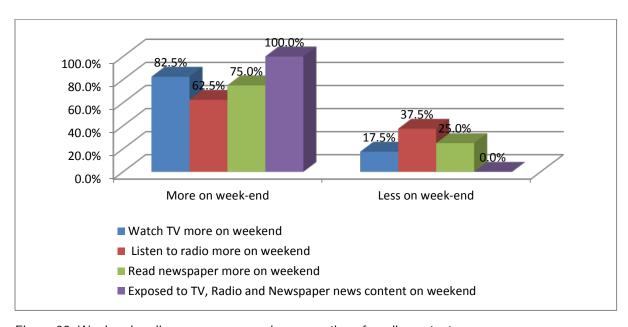


Figure 29: Weekend audience exposure and consumption of media content

5.10.4 REGULAR SOURCES OF PUBLIC HIV AND AIDS INFORMATION IN SOUTH AFRICA (LIMPOPO PROVINCE)

As shown in figure 1.29, 96 (80.0%), 78 (65.0%) and 84 (70.0%) of the respondents regularly source their HIV and AIDS information from television, newspaper and radio respectively. However, 19 (15.8%) and 4 (3.3%); 34 (28.3%) and 4 (3.3%), and 23 (19.2%) and 9 (7.5%) depended on television, newspaper and radio for "some" and "a few" HIV and AIDS related information's respectively. Only 1 (0.8%), 4 (3.3%) and another 4 (3.3%) do not source HIV and AIDS information from television, radio or newspaper.

The internet was used regularly by 68 (56.7%) respondents to source all information about HIV and AIDS, 28 (23.3%) sourced "some information" and 5 (4.2%) sourced only a few HIV and AIDS information from internet. The remaining 19 (15.8%) did not use the internet to source HIV and AIDS information.

Furthermore, `1the following percentages of the respondents sourced "a lot of HIV and AIDS information" from the corresponding sources, 42 (35.0%) from family and friends; 57 (47.5%), HIV positive person; 45 (37.5%), School, teacher and student; 63 (52.5%), Government agencies; 26 (21.7%), political leaders; 37 (30.8%), NGO or other advocacy leaders; 25 (20.8%), popular sport or music stars; 83 (69.2%), Doctors and other health care givers; 38 (31.7%), Church and religious organization; 63 (52.5%) from Street signs or billboards and 22 (18.3%) from employer or job.

The analysis additionally showed that "some HIV and AIDS information" was sourced by 52 (43.3%), 30 (25.9%), 48 (40.0%), 35 (29.2%), 56 (46.7%), 41 (34.32%), 49 (40.8%), 16 (13.3%), 42 (35.0%), 52 (43.3%), 29 (24.2%) and 59 (49.2%) of the respondents from the following respective sources: family and friends, HIV positive person, school, teacher and student, government agencies, political leaders, NGO or other advocacy leaders, popular sport or music stars, doctors and other health care givers, church and religious organization, street signs or billboards and employer or job. Similarly, 17 (14.2%), 16 (13.3%), 16 (13.3%), 16 (13.3%), 26 (21.7%), 22 (18.3%), 31 (25.8%), 9 (7.5%), 18 (15.0%), 21 (17.5%), 19 (15.8%) and 18 (15.0%) sourced "a few HIV and AIDS information" correspondingly from the above sources. But, 9 (7.5%), 17 (14.2%), 11 (9.2%), 6 (5.0%), 12 (10.0%), 20 (16.7%), 15 (12.5%), 12 (10.0%), 26 (21.7%), 9 (7.5%), 9 (7.5%) and 21 (17.5%) did not source HIV and AIDS information from any of the above respective sources. Overall, television with 96 (80.0%) respondents was the single highest regular source of HIV and AIDS prevention and management information, followed by radio, 84 (70.0%)

respondents, doctors and other health care givers 83 (69.2%), and newspaper 78 (65.0%) respondents (Fig. 30).

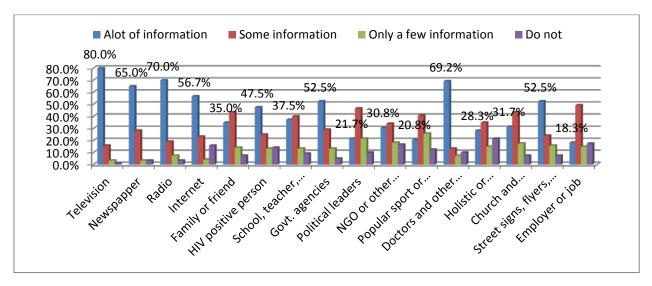


Figure 30: Regular sources of public HIV and AIDS information in South Africa (Limpopo Province).

5.10.5 TRUSTWORTHINESS OF THE SOURCES OF HIV AND AIDS INFORMATION

The result on trustworthiness of the sources of HIV and AIDS information informed that HIV and AIDS information from doctors and medical personnel 88 (73.3%) was always trustworthy, followed by television 85 (70.8%), radio 64 (53.3%), government agencies 63 (52.5%), internet 55 (45%), newspaper 45%, HIV and AIDS positive person 53 (44.2%), School, teacher or student 29 (24.2%), and churches and religious organizations 24 (20%). The rest of the sources of HIV and AIDS information recorded below 20% respondents on "always" trust worthiness (Fig. 31).

In addition, the result showed that for "most of the time" the percentage of the respondents that trusted HIV and AIDS information from school, teachers or students was 41 (34.2%), followed by newspaper 39 (32.5), radio 38 (31.7%), 36 (30%), family or friend, churches and religious organizations 35 (29.2%), political leaders 34 (28.3%), television 28 23.3%), government agencies 25 (20.8%) and the rest of the sources scored below 20% (Fig. 31).

The respondents that trusted HIV and AIDS information from these sources "only sometimes" had the following percentage distribution, family or friend and popular spots and music stars 56 (45.7%), churches and religious organizations 44 (36.7%), political leaders 43 (35.8%), school, teacher or student 40 (33.3%), holistic or alternative medicine providers 39 (32.5%), NGO or other advocacy leaders 33 (27.5%), government agencies 27 (22.5%), newspaper 25 (20.8%), and the rest of the sources were scored below 20% (Fig. 31).

The percentage distribution of the respondents that "hardly ever" trusted these HIV and AIDS information sources was respectively as follows: holistic or alternative medicine providers 43 (35.8%); popular sports and music stars 32 (26.7); political leaders 33 (27.5%) and internet 20 (16.7%) and the rest of the sources recorded between 0% to below 9% (Fig. 31).

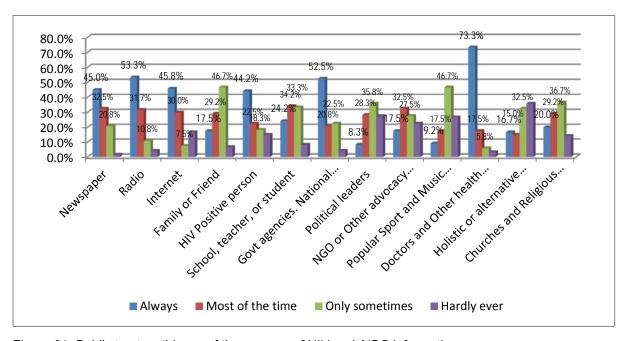


Figure 31: Public trustworthiness of the sources of HIV and AIDS information.

5.10.6 PUBLIC PERCEPTION OF THE EFFECTIVENESS OF THE VARIOUS SOURCES OF HIV AND AIDS INFORMATION

The analysis is as shown in Figure 32. It indicated that television and national HIV and AIDS prevention and education campaign ranked in the very effective category with 110 (91.7%), followed by radio and health workers such as doctors and nurses with 106 (88.3%) each. Newspaper scored 104 (86.7%), peer

educators 97 (80.8%), school and teachers 88 (73.3%), local or community centre 86 (71.7%), parents 74 (61.7%) and church 71 (59.2%).

In addition, in the percentage distribution of the respondents that said these sources of HIV and AIDS information are "not effective", parents and churches tallied with 45 (37.5%) each, followed by local or community centre, and school and teachers 32 (26.7%) each, peer educators 22 (18.3%), newspaper 16 (13.3%), health workers such as doctors and nurses 14 (11.7%), radio 12 (10%), while television and national HIV and AIDS prevention and education campaign recorded 10 (8.33%) and 9 (7.5%) respectively (Fig. 32).

However, 4 (3.3%) do not know how effective "churches" are as sources of HIV and AIDS information, 2 (1.7%) each for radio and local or community centre, and 1 (0.8%) each for parents and national HIV and AIDS prevention and education campaign. The rest of the sources scored 0% (Fig. 32).

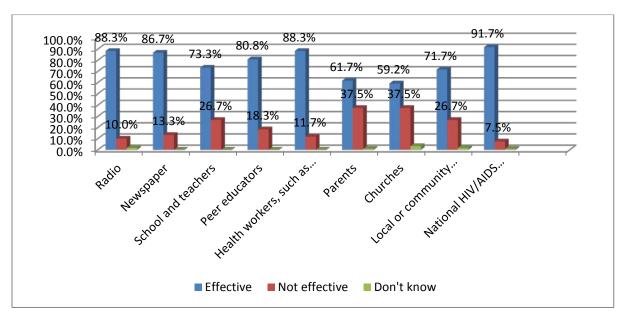


Fig. 32: Public perception of the effectiveness of the various sources of HIV and AIDS information in Limpopo Province of South Africa.

5.10.7 PUBLIC PERCEPTION OF MEDIA COVERAGE OF HIV AND AIDS ETHICAL ISSUES

On the media coverage of ethical issues around HIV and AIDS (Fig. 33a), the result informed that 87 (72.5%) respondents "don't agree" that the media are making people live in denial and die, 27 (22.5%)

agreed, 76 (63.3%) "don't agree" that the media are highly sensationalizing HIV and AIDS, 39 (32.5%) agreed, 102 (85%) "don't agree" that they are encouraging stigma and discrimination against people living with HIV and AIDS, while 11 (9.2%) agreed. Equally, 103 (85.8%) respondents "don't agree" that the media are stereotyping the disease as disease of the poor, promiscuous, homosexuals, lesbians and drug addicts, and 11 (9.2%) agreed they are. One hundred and two (102) (85%) "don't agree" that the language used by media in reporting about HIV and AIDS is often not appropriate, confusing, and information not adequate, but 13 (10.8%) agreed they are.

The percentage distribution further showed that 109 (90.8%) respondents "don't agree" that HIV and AIDS information given by the media is often judgmental rather than constructive, and 5 (4.2%) agreed they are. A total of 88 (73.3%) "don't agree" that the media often release unverified HIV and AIDS information from their sources, and 19 (15.8%) agreed. There were 95 (79.2%) that agreed the media is helping to fight stigma and discrimination against PLHIV, 17 (14.2%) "don't agree", 81 (67.5%) "don't agree" that HIV and AIDS statistics from the media are often not accurate, and 28 (23.3%) "agreed" they are. Equally, 95 (79.2%) agreed that there are positive changes in the language used by the media in reporting about HIV and AIDS, 18 (15%) "don't agree", while 101 (84.2%) agreed that there is now human interest angle to media reports about HIV and AIDS, but 12 (10%) "don't agree".

In all, the percentage distribution of the respondents that "don't know" whether the media are promoting the different ethical issues raised in this study were less than 10% except in the issue that the media "often release unverified HIV and AIDS information from their sources" which scored 13 (10.8%).

Furthermore, 82 (68.3%) respondents are of the opinion that the media reporting on HIV positive people was objective enough, 18 (15.0%) said it was sensational, 8 (6.7%) said such reports were negative and biased against them, but 6 (10%) "don't know" how to describe the media reporting of HIV positive people known to them (Fig. 33b).

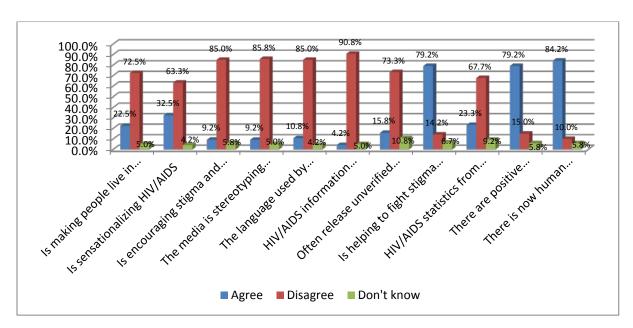


Figure 33a: Public perception of media coverage of HIV and AIDS ethical issues

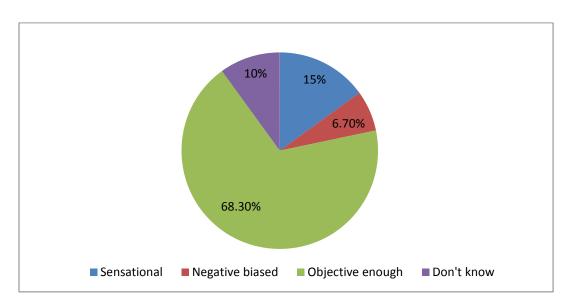


Figure 33b: Description of South African media reporting on HIV and AIDS positive people

5.10.8 PUBLIC PERCEPTION OF MEDIA PROMOTION OF HIV AND AIDS MANAGEMENT ISSUES

The percentage distribution of public perception of media efforts in helping to promote issues relating to HIV and AIDS management and eradication showed that 86 (71.7%) disagreed that the media were promoting HIV and AIDS stigma and discrimination, and 26 (21.7%) agreed they were doing that, 114 (95%) agreed that the media were promoting HIV and AIDS prevention, but 5 (4.2%) disagreed (Fig. 34).

The result also indicated that 116 (96.7%) respondents agreed the media were helping to: promote HIV and AIDS testing, 4 (3.3%) disagreed; promote HIV and AIDS care-giving 110 (91.7%), but 9 (7.5%) disagreed, promote condom use 113 (94.2%), 7 (5.8%) disagreed, and promote HIV and AIDS free generation 109 (90.8%), but 8 (6.7%) disagreed. The percentage distribution of the respondents that "don't know" whether the media are helping to promote any of the HIV and AIDS issues studied were all below 10%.

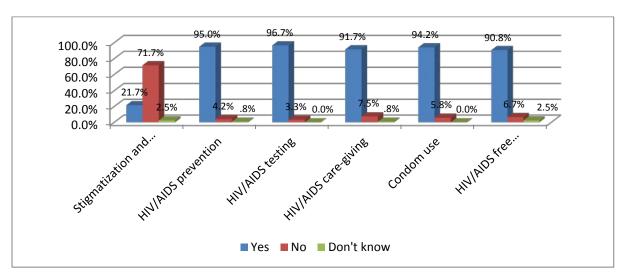


Figure 34: Public perception of media promotion of HIV and AIDS prevention, management and eradication (South African HIV and AIDS free generation).

5.10.9 HIV AND AIDS RELATED PROBLEMS IN SOUTH AFRICA (LIMPOPO PROVINCE) AND PUBLIC ATTITUDE TOWARDS MEDIA HIV AND AIDS INFORMATION COMMUNICATION

HIV and AIDS related Problems in Limpopo Province (South Africa)

The percentage distribution for HIV and AIDS related problems of concern in the various localities (Fig. 35) showed that 61 (50.8%) respondents said fear of discrimination is HIV and AIDS related problem in the society, and it is not to 59 (49.2%). Alcoholism and drugs are HIV and AIDS related problems to 74 (61.7%) and 46 (38.3%) said they are not, poverty is HIV and AIDS related problem to 80 (66.7%) and not to 40 (33.3%), while sexual transmitted disease is to 76 (63.3%) respondents and not to 44 (36.7%). In addition, HIV and AIDS opportunistic disease and "increasing HIV and AIDS infection" are HIV and AIDS related problem to 50 (41.7%) each but no longer a problem to 70 (58.3%) each, and multiple sexual partnership is still HIV and AIDS problem to 95 (79.2%) and not to 25 (20.8%).

The percentage distribution further informed that unplanned teenage pregnancy is HIV and AIDS problem of concern to 63 (52.5%) and not to 57 (47.5%), rape (in and outside marriage) is HIV and AIDS problem to 78 (65%) and not to 42 (35%), difficulty assessing HIV and AIDS testing is a problem to 39 (32.5%) and not to 81 (67.5%), and difficulty assessing HIV and AIDS counselling and treatment is HIV and AIDS problem to 40 (33.3%) and not to 80 (67.8%).

Overall, the result indicated that multiple sexual partnership ranked the highest HIV and AIDS related problem of concern 95 (79.2%) in the society, followed by poverty 80 (66.7%), rape (in and outside marriage) 78 (65%), sexual transmitted disease (STD) 76 (63.3%), alcohol and drugs 74 (61.7%), unplanned teenage pregnancy 63 (52.5%), and fear of discrimination 61 (50.8%). However, HIV and AIDS opportunistic disease and increasing HIV and AIDS infection showed positive signs of reduction with score of 50 (41.7%) each.

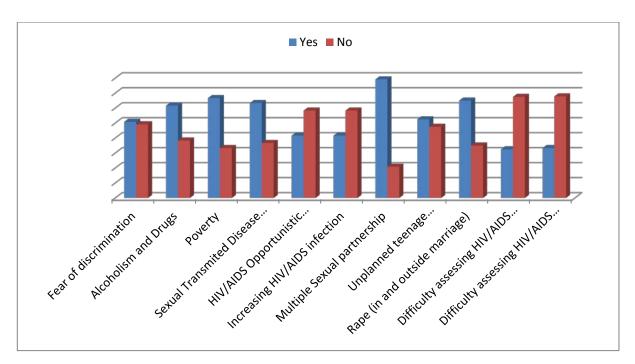


Figure 35: Current HIV and AIDS related problems of concern in South Africa

5.10.10 SOUTH AFRICAN (LIMPOPO PROVINCE) PUBLIC ATTITUDE TO MEDIA HIV AND AIDS INFORMATION COMMUNICATION

The percentage distribution of respondents on public attitude to media HIV and AIDS information communication indicated that 80 (66.7%) believed they know enough about HIV and AIDS, 36 (30%) do not, 99 (82.5%) need to know more, but 17 (14.2%) don't. Forty (33.3%) believed the people who talk to them about HIV and AIDS do not understand the pressure on the infected and affected people, but 62 (51.7%) disagreed with them, and 79 (65.8%) acceded that most HIV and AIDS information are relevant to people life style, but 34 (28.3%) think otherwise (Fig. 36a).

The result showed also that 111 (92.5%) agreed that the media should do more stories on different aspects of HIV and AIDS pandemic, 7 (5.8%) disagreed, and 82 (68.3%) have the opinion that there is inadequate HIV and AIDS information in the media for success against HIV and AIDS, 30 (25%) disagreed. There were 112 (93.3%) that want more information in the media regarding HIV and AIDS, especially to inform children

(teens) and youth about the disease, but 5 (4.2%) disagreed. One hundred and fourteen (114) (95%) agreed that there should be more information in the media on the transmission, treatment, prevention, and consequences of the disease, but 6 (5%) disagreed, while 67 (55.8%) agreed that HIV and AID information they received from the media are enough to positively affect their attitude to HIV and AIDS, 45 (37.5%) disagreed. Equally, 80 (66.7%) agreed that the media are doing enough in terms of coverage of the pandemic to bring about attitudinal change to the disease among the people, but 40 (33.3%) disagreed.

In all, the result showed that percentage scores for those who answered "don't know" to the questions asked were below 10% except the 18 (15%) by those that said the people who talk to them about HIV and AIDS do not understand the pressure on the infected and affected people.

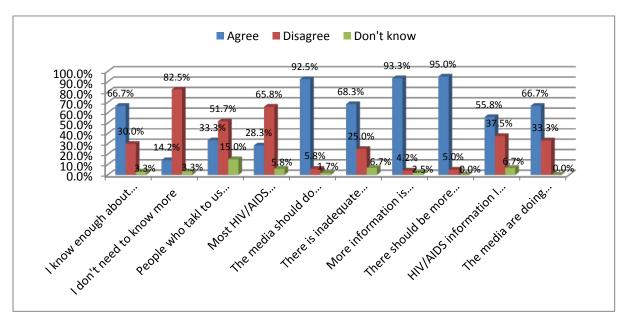


Figure 36a: South African (Limpopo Province) public response and attitude to media HIV and AIDS information communication.

Furthermore, the percentage distribution of public response and attitude to TV, radio and newspaper HIV and AIDS information communication (Fig. 36b) informed also that 89 (74.2%) listen to them for their HIV and AIDS news information in addition to entertainment, but 30 (25%) listen to radio, watch TV, and read newspaper for entertainment only because they don't want to be scared or made to worry about other things by the media. There were 99 (82.5%) that preferred HIV and AIDS information from the media and

other sources, but 19 (15.8%) obtain enough HIV and AIDS information from other sources and completely opposed to sourcing such information from TV, radio, or the newspaper.

Moreover, 103 (85.8%) believed more HIV and AIDS related content on TV, radio and in newspaper will certainly make a difference to the pandemic, but 16 (13.3%) disagreed to such a difference, and while 97 (80.9%) believed such might discourage people from having casual and unsafe sex, 20 (16.7%) believed the opposite. The percentage distribution for the respondents that "don't know" (indecisive) were below 5%.

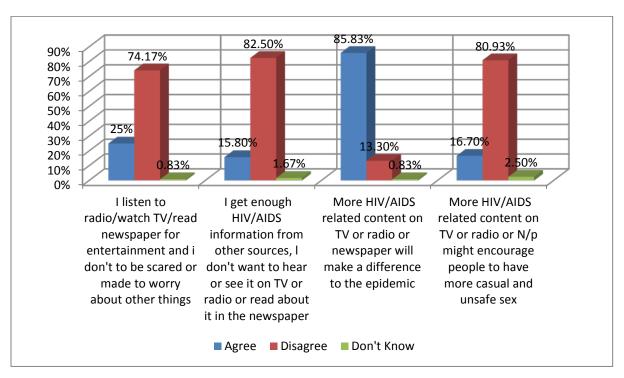


Figure 36b: South African (Limpopo Province) public response and attitude to media HIV and AIDS information communication.

5.10.11 EFFECTS OF MEDIA HIV AND AIDS INFORMATION COMMUNICATION ON THE AUDIENCE

The results on the effect of media HIV and AIDS information communication showed that television, radio and newspaper positively influenced the understanding of HIV and AIDS and related sexual behaviour of 107 (89%) respondents. A hundred and three (86%) believed the media can help reduce the spread of HIV and AIDS by bringing attention to the sexual behaviour, attitude and traditions driving HIV and AIDS pandemic, and 108 (90%) generally agreed the media are doing a good job communicating about HIV and AIDS and related health issues.

The percentage distribution for the audience with contrary views about the effect of media HIV and AIDS information communication showed that only 12 (10%) think television, radio, and newspaper can not help reduce the spread of HIV and AIDS by bringing attention to the sexual behaviour, attitude and traditions driving the HIV and AIDS pandemic, the rest were less than 10%. Those that "don't know" were equally below 10% (Fig. 37a).

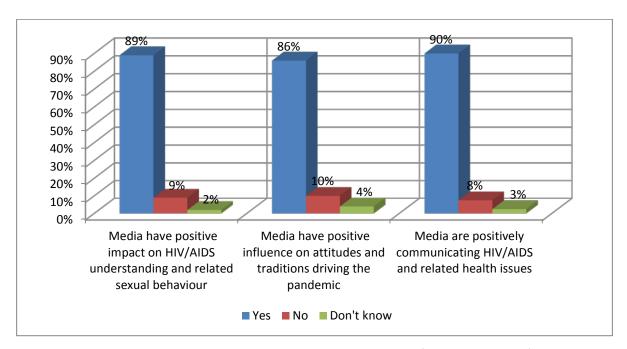


Figure 37a: Effects of media information communication on the public (Limpopo Province).

The result further showed that HIV and AIDS radio and TV programmes, newspaper news and feature articles made 87 (72.5%) respondents to visit a doctor or other health care provider, 103 (85.8%) talked to youth and adults about HIV and AIDS, sex, or other difficult issues, 107 (89.2%) talked to siblings and/ or friends about HIV and AIDS, 109 (90.8%) talked to a partner about safer sex, birth control, or sexual transmitted diseases, 97 (80.8%) took HIV and AIDS test, 75 (62.5%) looked for more information on HIV and AIDS (e.g. called help line, etc.), 88 (73.3%) had gone for HIV and AIDS counselling, 104 (86.7%) have only one sexual partner and avoid multiple partners, 99 (82.5%) used condom, and 52 (43.3%) practiced total abstinence. However, 29 (24.2%), 29 (24.2%), 12 (10%), 9 (7.5%), 22 (18.3%), 42 (35%) and 30 (25%), 15 (12.5%), 9 (15.8%) and 64 (53.3%) accordingly believe media programmes had no effect on them. The respondents that "don't know"(indecisive) of any effect of media HIV and AIDS information communication on the audience were below 5% (Fig. 37b).

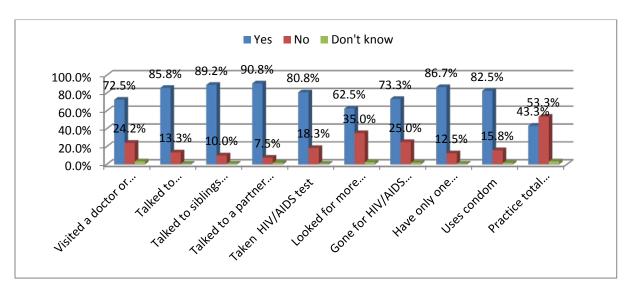


Figure 37b: Effects of media HIV and AIDS information communication on the public (Limpopo Province).

5.10.12 AUDIENCE SUGGESTIONS FOR IMPROVED MEDIA COVERAGE OF HIV AND AIDS AND RELATED ISSUES, AND ACHIEVING POSITIVE PUBLIC ATTITUDINAL CHANGE TOWARDS HIV AND AIDS

In the analysis, there were a number of suggestions to improve media information communication on HIV and AIDS and related issues, and also help achieve public attitudinal change concerning the disease (Fig. 38). All the suggestions are critical to HIV and AIDS prevention, management and consequent eradication. The percentage distributions were as follows:

- 1. Free and easy access to HIV and AIDS information is necessary 109 (90.8%),
- 2. There should be more HIV and AIDS content on television radio, and newspaper 113 (94.2%),
- 3. HIV and AIDS messages about fear and death turn people off 87 (72.5%),
- 4. Television, radio, and newspaper news and features should give straight-forward information about different aspects of HIV 118 (98.3%),
- 5. HIV and AIDS messaging on TV and radio, and in the newspaper contents need to offer hope for an end to the pandemic 108 (90%),
- 6. HIV and AIDS communication contents that tap into people's aspirations can be effective in the efforts against the disease 108 (90%),

7. HIV and AIDS messaging need to better address the social and cultural influence on people's lives 113 (94.2%).

The percentage distribution of the respondents that disagreed with each of the above suggestions for improved media HIV and AIDS information communication were less than 10% except that HIV and AIDS messages about fear and death turn people off 29 (24.2%), and that HIV and AIDS content on television, radio and newspaper content need to offer hope for an end to AIDS 12 (10%). In all, each of those that responded "don't know" to the suggestions was not more than 5%.

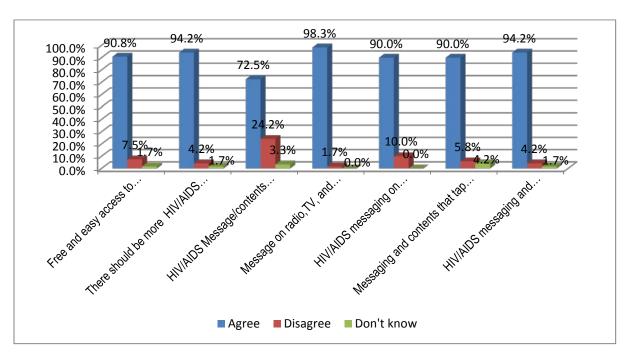


Figure 38: Audience suggestions for success in the media efforts against HIV and AIDS and related issues.

Furthermore, the qualitative audience responses on the suggestions to improving the media coverage of the pandemic bordered on the media introducing more programmes and providing information updates on HIV and AIDS; informing and encouraging the South African youth to go for counselling and testing; more and consistent information on prevention, treatment and care on HIV and AIDS are needed in the media, media to do more programmes targeting the youth, training of journalist on HIV and AIDS reporting to enable them understand the importance of having good knowledge about the disease and to appropriately inform the community of the pandemic, the media communicating HIV and AIDS in appropriate and local language is needed; the media should be creative in reporting HIV and AIDS, and should use experience

reporters; the media should research their HIV and AIDS reports thoroughly before communicating it to the public; and that they should have in-house HIV and AIDS policy and be conscious of their social responsibility.

Moreover, according to two of the respondents, "all forms of media should talk about HIV and AIDS on a daily basis, children should be taught about HIV and AIDS at school", and "during school holidays, the media must improve their TV and radio programmes and inform the youth of this country about HIV and AIDS because most people who are infected are youth rather than adults".

CHAPTER SIX

DISCUSSION

The media (newspaper) coverage of or attitude of the media in the fight against HIV and AIDS pandemic in South Africa was investigated. The major role of the media is to create awareness and educate the society on issues of public, national, and international interests such as HIV and AIDS (indeed, any other public health concern), and motivate them to take informed daily decisions against the pandemic. This role is a significant part of the efforts to manage, control and mitigate the spread and impact of HIV and AIDS pandemic. The media shape the society through moulding public opinion by communicating news information, emphasising one news item, and playing down the other. In this process of news selection, the media determine what to publish or leave out, where to publish it, and what to leave out of the selected news. Through this, the media play a strong persuasive role on their audience's estimate of the selected news item. HIV and AIDS still impacts South Africa (and several other nations) at the social, economic, health, family set up, and developmental levels. Thus the role of the media in the fight against this disease needs to undergo constant evaluation and this is one of such studies.

In the present study, the quality of South African media HIV and AIDS news reports, their sources of HIV and AIDS news stories, the main HIV and AIDS news subjects they covered, the language the media used in the coverage of the pandemic, and the tone of their language in the news stories, attribution of blame of HIV and ADS infection in the news reports, the geographical setting of their HIV and AIDS news stories, the nature of the HIV and AIDS news stories, news relevance of the pandemic to the South African media, and the quantity of media coverage of HIV and AIDS in the study period were examined. The results revealed interesting findings on the attitude of the South African media to HIV and AIDS pandemic in the study period.

6.1 QUALITY OF MEDIA HIV AND AIDS NEWS REPORTS

The quality of HIV and AIDS news stories communicated by the media in the period studied was assessed using the following variables (Types of HIV and AIDS news reports communicated by the media; Confidential level of the HIV and AIDS news reports; Technical competence of HIV and AIDS news reports, Combination of Journalistic skills and creativity in HIV and AIDS news reporting; Objectivity in media HIV

and AIDS news reporting, and Use of research in HIV and AIDS news reporting). These characteristically and traditionally determine the value of media output on a news item:

Types of HIV and AIDS News Reports Communicated by the Media:

The analysis of the types of HIV and AIDS news stories for the evaluation of the quality of media HIV and AIDS news stories shows two distinct groups of types of HIV and AIDS news stories. One of the groups (with 76.81% of all the types of HIV and AIDS news stories in the year, in this category) is news stories that require less research, news information, no analysis or interpretation, and easier to write and consists of Straight news (with a full year's total of 73.04%), Photo news (0.29%), Newsbreak (0.29%), Book review (0.58%), and 2.61% for Letter to the editor. The second group of types of HIV and AIDS consisting of (News analysis (1.16%), News editorial (1.45%), Feature article (8.99%), Investigative news (0.29%), Opinion article (10.43%), Vox pop (0.59%), and Interview (0.29%) requires research, analysis or interpretation, and gives in-depth information on the news topic made up the remaining 23.19% of the types of HIV and AIDS news stories in the year.

The results of the types of HIV and AIDS news stories communicated by the media shows that Straight news reports (73.04%) dominated other HIV and AIDS news types in all the four quarters, as well as the full year. The high number of Straight news in the year may be because Straight news type (without much research) is easy to write, and be used to communicate the gravity of HIV and AIDS pandemic to the public in no ambiguous manner. Straight news type; commonly used for writing hard news, is associated with emotional issues such as life threatening occurrences, sudden and untimely death and disasters among others. The media may have therefore viewed the pandemic as a serious issue in the society, and were able to communicate the necessary news information through the Straight news format. However, the danger is that Straight news format (using the traditional news writing 5Ws and H model) may have limited number of words, and lack in-depth factual information needed for HIV and AIDS education and awareness creation purposes. Regularly reporting HIV and AIDS news in straight news format may create monotony and consequent disinterest on the side of the media consumers. This may have a limiting effect on the media success in creating public awareness on the pandemic, as well as improving the public's knowledge of the disease. The above may explain the finding of Shisana, Rehle, Simbayi et al. (2009:74-76) who reported that despite high HIV and AIDS awareness and knowledge level among South Africans, accurate knowledge of HIV and AIDS significantly decreased in recent years in some age groups. Moreover, the

latest research finding shows that knowledge of HIV and AIDS among South Africans is low with a national average of just 28% (Shisana, Rehle, Simbayi et al., 2014).

In all these, a good mix of the different types of news format in communicating HIV and AIDS information will get the necessary news facts to the media audiences, make the news stories entertaining and, keep the topic interesting to the public. It should be stated here that the public's knowledge and understanding of HIV and AIDS is strongly related to the type of representations presented by the media over time.

Confidentiality of HIV and AIDS news Reports:

The "neutral confidential' HIV and AIDS news stories predominated other sub-variables in the Confidentiality of HIV and AIDS news study in the 1st, 2nd, 3rd, and 4th quarters - 93.75%, 96.67%, 98.89%, and 89.31% respectively. This pattern was also repeated at the full year level with a total of 92.46% of the year's HIV and AIDS news stories. These results indicate that the voice of the HIV and AIDS infected and affected individuals were nearly silent in the media. It means that most of the HIV and AIDS news stories in the year were on HIV and AIDS related issue but not on or from the directly infected and affected people.

The media and the public therefore missed the opportunity for the People Living with HIV and AIDS (PLHIV) and affected individuals to communicate their plights and positive experiences in living with the disease. This would have further enriched the stories and give a face to the disease. It would have also encouraged more openness, more effective individual level management of the disease, and motivate those living with the disease (but not bold enough to speak out) to openly do so. However, "Neutral confidential" HIV and AIDS reporting (news reports on any aspect of the pandemic) will add to the public awareness and education level on issues and developments around the pandemic by including different aspects and knowledge of the pandemic in its news coverage. The inability of the media to get the People Living with HIV and AIDS (PLHIV) to openly contribute to media output may help to sustain social stigmatization while the media ability to get the (PLHIV) involved may positively reduce, if not eradicate this chagrin.

The "breaking of silence' news stories (PLHIV who speak out openly on their status) were few; just 4.93% of the full year result, and 'confidential reporting' (the infected telling their stories but still prefer to be unidentified) were only 2.61% of all the year's HIV and AIDS news stories. This pattern was consistent in all

the quarters and shows that South Africans may still be afraid of coming out with their HIV and AIDS status openly. There may still be a degree of shame, self-pity and fear attached to being infected with HIV and AIDS. This may be due to the social stigma and discrimination still attached to the disease despite the availability of free ARV treatment in the country. Fortunately, only 0.58% of the whole HIV and AIDS news stories in the year were stigmatizing and discriminatory. This suggests that the media have come to terms with the general impact of such reports, and have therefore drastically improved on their HIV and AIDS reporting from their earlier style of news coverage of the pandemic.

However, the media should ensure that they are not contributing to silencing the voice of the People Living with HIV and AIDS (PLHIV) through their method of coverage of the pandemic by preferring to report 'neutral confidential' HIV and AIDS new stories. A good strategy of encouraging the PLHIV to come out and be open with their status, and thus contribute to HIV and AIDS education and campaign success is for the media to win their trust and confidence. Declaring and discussing their status in the open will greatly contribute to the elimination of the 'veil' on HIV and AIDS (as a killer disease or "death sentence' still placed on the disease by the public due to no cure for the disease yet) and fight against social stigma and discrimination against people infected by the disease. "Breaking of silence" by the infected individuals gives a human face to the disease, and helps eliminate the fear attached to it.

The extend a person living with HIV and AIDS may be open with his and her status depends on some factors including the family background, economic status, social setting, level of security of the individual, and personal conviction to act against the pandemic. Others include the individual's education or knowledge level of the disease, the extent of fear of discrimination and stereotyping by the society members against the individual and family, as well as the individual's family approval or disapproval of such act. Despite all the successes recorded so far against the disease (including the existence of laws against discrimination of PLHIV), the results still strongly suggest that those living with the disease are still discriminated against and stereotyped by the society. This is mainly due to the society's belief that such people are often promiscuous and live a reckless lifestyle. However, this is not often the case since there are other means of contracting the disease, including accidents or occupational hazards.

Technical Competence of HIV and AIDS News Stories:

There was slight difference between the 'Very competent' (54.68%) and 'Competent" (45.31%) HIV and AIDS news stories in the 1st quarter. This small percentage difference was also observed in the 2nd quarter except in the 3rd quarter with slight increase; 45% against 55%, and 38.89% against 61.11% respectively. However, this was followed by high percentage difference recorded in the 4th quarter between the 'Very competent' (76.34%) and "Competent' (21.37%) HIV and AIDS news stories indicating a shift towards 'Very Competent' HIV and AIDS news reporting.

The small percentage difference pattern is also seen at the full year with the "Very competent' HIV and AIDS stories making for 57.10%, and the 'Competent' stories having 42.03% of the full year's results. The addition of the two sub-variables gives a significant total of 99.13% of the year's HIV and AIDS stories, against just 0.87% recorded by the 'Incompetent' HIV and AIDS stories in the year. These suggest that the HIV and AIDS news stories reported by the media at both the quarterly and full year levels were competently written and thus, of high news quality. It therefore implies that the South African media communicated HIV and AIDS news stories that are capable of contributing to more effective efforts against the disease in the period under study. They were competent enough to improve the educational and knowledge levels of South Africans on this pandemic, and possibly encourage them to take actions based on informed background.

HIV and AIDS news reporting is a specialized news coverage (a part of health communication) and requires good knowledge of its specialized writing style and pattern. This includes the use of right words and phrases, avoidance of stigmatizing and offensive words and phrases, good knowledge of the disease, and other technicalities for positive impact on the media readers, listeners and viewers. It is absolutely not enough to just communicate HIV and AIDS news information to the society due to its pandemic nature. It is required that such news be communicated in the form(s) and ways that will result in great influence in awareness creation for the pandemic, sufficiently educate the society on the pandemic, and encourage individuals and the society in general to take the required actions concerning the disease based on the news facts they have received. This will enhance the efforts against the pandemic. However, media alone have not been proven to change social conduct because of some underlying determinant factors impacting human behaviour (Bandura (2001:284). In another study, Sood & Nambiar (2006:143) reported that

mediating internalized factors in the media audiences impact in the effectiveness or ineffectiveness of the media HIV and AIDS news information.

Combination of Journalistic Skills and Creativity:

HIV and AIDS news stories with "Good" combination of journalistic skills and creativity were predominant in all the quarters, making a total of 76.56%, 83.33%, 60%, and 80.92% of the HIV and AIDS news stories in the 1st, 2nd, 3rd and 4th quarter respectively. This pattern continued in the full year result with a total of 75.07% such stories against 24.35% of "Fair", and just 0.58% of "Poor" combinations of journalistic skills and creativity HIV and AIDS news stories. This indicates that most of the media HIV and AIDS news stories in the study period were well written journalistically, and creative enough to encourage media audience acceptance, consumption and absorption of their contents.

The use of journalistic skills and creativity in HIV and AIDS news reporting enables the production of well written, high quality, easy to read and understood, simple and flowing HIV and AIDS journalistic pieces that are real delight to consume. In addition, creativity deals with the application of different news angles and ideas about HIV and AIDS, and communication of different aspects of the disease in news reporting.

These types of HIV and AIDS news stories accomplished the education and entertainment aspects of the functions of the media in addition to other functions. They therefore ensure media audience are hooked to the HIV and AIDS news stories to the end. Retaining the attention of the media consumers in the news story is critical because media consumers are impatient in consuming media contents. They have limited time for media exposure, and most of the time glance through news stories that are not interesting to them. The media audiences easily abandon the news stories if they are not interesting to them, and/or are poorly written. The use of journalistic skills and creativity in HIV and AIDS news reporting also enables the media consumers to absorb the content of the news stories. This is an extension of media education role, and can help raise HIV and AIDS awareness and education, and influence positive behavioural changes.

Objectivity in HIV and AIDS news reporting:

"Balanced" HIV and AIDS news stories were predominant in all the quarters, making for 96.88%, 93.33%, 94.44%, and 95.42% of the total stories in the 1st, 2nd, 3rd, and 4th quarters respectively. The "biased" HIV and AIDS news stories recorded 3.13%, 1.67%, 5.56%, and 4.58% of the total HIV and AIDS news stories

in the respective quarters. The balanced HIV and AIDS news stories maintained the same pattern at the full year analysis with the highest total percentage of 95.94% against the 4.06% for biased HIV and AIDS news stories, suggesting that the South African media communicated balanced, high quality HIV and AIDS news stories in the period studied. The involvement of the views of necessary parties in media stories on HIV and AIDS, as found in this study attests to the accuracy and objectivity of the stories.

This suggests that the media may have realized the dare consequences of sensationalizing HIV and AIDS news stories as was the case at the early period of the pandemic. This finding is a welcome development on the part of the media since it revealed the media's ability to flexibly adapt to styles that will enhance their objective role in the society. This is because sensationalizing HIV and AIDS news stories has its dare consequences such as heightening the fear of the disease, stigmatization of and discrimination against the infected individuals and affected families. It may also include even killing of the infected by society members, and such will consequently mitigate the media role in the fight against the pandemic. It may imply that South African media no longer allow profit making pressures to drive the quality of their HIV and AIDS news coverage. The global interest in the fight against the pandemic (awareness, education and eventual eradication of the disease) may be their drive and focus, suggesting the possibility of future improvement.

Objectivity in HIV and AIDS news reporting (and in media news production generally) is critically important in the media gaining the trust and confidence of their audiences, and getting them to believe and accept media account of daily happenings as true. Thus, the high percentage recorded in this variable (Objectivity in HIV and AIDS news reporting) may have abetted in increasing the confidence of the people in media HIV and AIDS stories. Furthermore, it probably may have led to increased interest and sustained consumption, resulting in enhanced awareness, education and informed knowledge about the pandemic. The overall effect will consequently be reduction in the spread and better management of the disease holistically. Additionally, the low percentage of biased reporting is critical in eliminating mistrust and confusion, which if not properly handled, will jeopardise the efforts against HIV and AIDS pandemic. It is essentially important that HIV and AIDS news stories be objectively reported without favour to any particular stakeholder. The views and angles of all the parties in the story should be sought and included in the news report.

Use of Research in HIV and AIDS Reporting:

Well researched HIV and AIDS news stories predominated in each of the quarterly and full year analysis as demonstrated by the percentages of the quarterly and yearly analysis. A total of 73.44%, 81.67%, 63.33%, and 72.52% of all the HIV and AIDS news stories in the 1st, 2nd, 3rd, and 4th quarter respectively, and with 71.89% in the year analysis, were "Well researched". The "Fairly researched" HIV and AIDS news stories followed in percentage ranking to "Well researched" HIV and AIDS stories, recording 21.88%, 16.67%, 26.67%, in the respective quarters and 23.48% for the year analysis. The "Not researched" HIV and AIDS news stories were just 4.64% of the full year's HIV and AIDS news stories. Thus the "Well researched" HIV and AIDS news stories dominated throughout the whole year. The grading from "well researched", to "fairly researched", and to "not researched" may illustrate the profile of the media news stories on HIV and AIDS in the period studied. Apart from underlining the priority given to HIV and AIDS news coverage by the media, the high percentage of "Well researched" HIV and AIDS news stories points to the fact that factual information on different aspects of the pandemic was delivered to the public by the media in South Africa.

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Furthermore, the pandemic nature of HIV and AIDS is such that the media consumers and society at large still need regular updates on new developments regarding the disease. They are eager to receive new and interesting information on different aspects of the pandemic and such information are better communicated in varying media news formats. Researching the news enables the journalists to access such relevant information that will eliminate monotony in HIV and AIDS news reporting, and keep the interest of media consumers on the pandemic. In other words, it helps to enrich the stories with factual updates, and may contain interpretation of relevant statistical figures. Such HIV and AIDS news stories will also continue to keep the pandemic as a burning issue in the public domain.

Research helps the media to access newsy educational information on different aspects of the disease that will raise the information, awareness, educational level of media audiences on the pandemic. This may enable positive attitudinal and behavioural changes towards the disease. On the other hand, lack of research in media HIV and AIDS news reporting gives the understanding that the media have exhausted the coverage of the pandemic, and there is therefore nothing new and interesting to report about the pandemic. However, this was not the case as shown by the present result.

In conclusion, the media communicated high quality HIV and AIDS news stories in the period of this study. Most of the HIV and AIDS news stories in the year were predominantly straight news stories because HIV and AIDS news are hard news and are therefore best written in straight news format. These news stories were well written, accurate, and contained factual information needed by the public for HIV and AIDS awareness, education, and knowledge update.

Most of the HIV and AIDS news stories in the year were competent of educating and updating the general public on the pandemic and enabling them to effect positive changes in their attitudes and behaviours. However, individuals' risk awareness and willingness to change is key in making change possible. The HIV and AIDS news reports were technically capable of impacting the audience on their awareness, education and knowledge level of the disease, and work towards encouraging them to take positive personal decisions and actions concerning the disease. Yet it still lies on the media audiences or content consumers to positively act or not to act on the educational knowledge they received from the media.

The media made good use of journalistic skills and creativity in their coverage of HIV and AIDS in the year, which could enable the HIV and AIDS news reports to draw and retain the interest and attention of the media audiences that were exposed to them. The dominance of 'HIV and AIDS news stories from other news sources rather than the HIV and AIDS infected and affected people may have limited the voice of the PLHIV but added different aspects and knowledge of HIV and AIDS into the news coverage of the pandemic. The media were objective enough in their HIV and AIDS news reporting, and only two news stories were discriminatory against People Living with HIV and AIDS in the year. Overall, most of the HIV and AIDS news stories were well researched and balanced, and these impacted positively on the quality of HIV and AIDS news stories in the year. Consistent, accurate and balanced HIV and AIDS news reporting empowers the society to make informed decisions about their lives. However, earlier study by Panos (2004:48) finds that South African media HIV and AIDS news stories were of low quality.

6.2 SOURCES OF HIV AND AIDS NEWS REPORTS

The sources of media HIV and AIDS news stories in the study period can be divided into two groups: media internally and externally sourced HIV and AIDS news stories. The media sourced most of their HIV and AIDS news stories externally in the period studied. This is supported by the fact that the Department of Health and Social Development (DHSD) and Civil Society Organisations (CSO) supplied the highest

percentages of HIV and AIDS news stories to the media in the quarterly and year analysis - (19.42% and 18.55% respectively for the year analysis only). Furthermore, 5.78% and 6.67% of the media output were respectively sourced from Government Ministries and Private organisations in the year.

This finding is consistent with that reported by Kwansa-Aidoo (2001) and also by Hodgetts et al. (2008:50, 55). These authors, however, cautioned that such dependency on outside sources by the media may tilt the framing and patterning of the coverage to favour such sources (Hodgetts et al., 2008:50,55) and consequently negatively impact on the quality of media HIV and AIDS news reporting (Kwansa-Aidoo (2001); Hodgetts et al. (2008:50,55). Though, this tilting effect was not discovered in this study as shown by the low percentage of biased reporting. Nevertheless, South African media too much dependence on outside sources for HIV and AIDS news may be unhealthy, because in such instances, the outside sources often dictate and determine what HIV and AIDS information gets to the public through the media. This may subtly introduce some element of bias in the news story that may not be apparent, more so, when many of such news stories are often press releases prepared by such agencies to promote their establishments' activities and other self-interests, including information on their own efforts against HIV and AIDS. Therefore, the interest of the public may be compromised in such reports. Much dependence on such outside sources for HIV and AIDS news stories may also explain the reason for the media production of high number of Straight news in the year. Press release is written in Straight news writing style. The attraction for such easy HIV and AIDS news hand-outs is that they are already prepared news stories and little or no effort is required to polish them up.

Internally, the media generated a total of 11.88% of their HIV and AIDS news stories from their reporters, 7.25% from their Columnists, and their news editorial accounted for only 1.74% of the stories in the year. These gave a total of 20.87% of media HIV and AIDS news stories in the year. Generally, the internal sourcing and production of such news stories by the media themselves has the advantage of ensuring the factuality, accuracy, objectivity and credibility of such stories. It also ensures the inclusion of proper educational content in the stories. These may not be likely when such outputs are sourced from outside the media houses. Most probably, the present high level of HIV and AIDS public educational awareness may have been higher if not for the high dependence on outside sources for HIV and AIDS stories.

In conclusion, the media depended more on external sources of HIV and AIDS news sources in the study period than producing such news stories internally. Such HIV and AIDS news hand outs are easy to use but may be lacking in credibility, factuality and objectivity since they are meant to promote the interest of their sources. The much needed HIV and AIDS educative information may be missing in such news stories. Internally sourced HIV and AIDS news stories are beneficial to both the media and the media consumers.

6.3 MAIN SUBJECTS OF MEDIA HIV AND AIDS NEWS STORIES

The South African media based most of their HIV and AIDS news coverage in the period studied on major events that occurred within the year. Previous studies support the present finding of events based HIV and AIDS coverage by the South African media (Brodie et al., 2004:7; Cullen, 2007:3; Cullen,:2000:233). However, Cullen (2005:114) added that the media coverage of HIV and AIDS in Papua Guinea was both event based and personality driven. The personality involvement was not evident in the case of South Africa as revealed by the present study.

Though HIV and AIDS Prevention (as one of the subjects) was mostly reported by the media in the country because of the high prevalence rate of the pandemic, however, HIV and AIDS Prevention, Testing and Treatment dominated media HIV and AIDS subjects in all the quarters of the year. This probably may have arisen from the fact that the South African Government and the media continuously kept these news subjects in the public consciousness throughout the year. The successful National HIV and AIDS Prevention, Treatment and Care (HTC) that targeted the testing of 14 million South Africans (lasting from April 15, 2010 – June 30, 2011) needed to be communicated to the public. The media aligned with the Government in the campaign and was actively involved in disseminating the campaign information. They contributed to educating the nation on different issues around the campaign including HIV and AIDS Prevention, Testing, Treatment, and Care and Support. This was aimed at motivating the public to continue HIV and AIDS testing and to know their status early enough for better personal management of the infection, enrolment into Government expanded treatment programme where necessary, and improved effectiveness in the nation's efforts against the pandemic. The general public's fear of the disease needed to be allayed with constant communication of the availability of free and easily accessible ARV treatment at all medical centres in the country. This contributed immensely to the great success recorded by the campaign.

The HIV Prevalence was the most reported news subject (19.84%) in the 4th quarter due to the annual release of the national and Global HIV and AIDS Reports by the South African Health Science Research Council (HSRC) and the WHO and UNAIDS respectively in this quarter. HIV and AIDS 'Funding' had its highest media coverage of 8.40% in the 4th quarter. This was because of the media coverage of the year's World AIDS Day and HIV and AIDS related activities by Governments and HIV and AIDS activists in this quarter. The year's International AIDS conference deliberated so much on such issues as the dwindling HIV and AIDS funding by donor nations and International agencies. There were also calls for continuous funding of the efforts against the pandemic, and for such nations and donor agencies to redeem their HIV and AIDS funding pledges. The media coverage of these events may have greatly contributed to the high number of issues of HIV and AIDS prevalence in this quarter period.

Overall, this pattern continued in the full year analysis with HIV and AIDS Prevention topping the year's HIV and AIDS subjects with 26.96%, followed by HIV and AIDS Testing (17.68%), AIDS Treatment (10.72%), and HIV and AIDS Prevalence (8.41%). By constantly placing HIV and AIDS in the public space throughout the year, the media helped shape public debate on the disease, and also ensured the success of the National HIV Prevention, Treatment, and Care (HTC) campaign. These indicate that any news subject (e.g. HIV and AIDS) the media focus on over a period of time is seen as important to the public and can have tremendous influence on public opinion. However, the media dependence on HIV and AIDS events for their coverage of the pandemic costs the public the much needed in-depth reporting of the disease. Again, presumably, the present success in public awareness of the pandemic may have been far more successful if the media not only focussed on the HIV and AIDS subjects, but also explored other issues of interest concerning the disease for the populace.

In conclusion, South African media HIV and AIDS news stories were event based in the study period. They relied more on the Government and CSO organized HIV and AIDS news events and news subjects. HIV and AIDS prevention, testing, and treatment were the main news subjects communicated by the media because of the much publicised Government's HIV and AIDS Prevention, Treatment and Care (HTC) campaign throughout the study period.

6.4 MEDIA LANGUAGE USE IN HIV AND AIDS NEWS REPORTING

Media Language use in HIV and AIDS news reporting in the period studied was assessed with the following variables: Constructiveness, and Information richness, Language professionalism, and Language Tone of media HIV and AIDS news stories within the period.

Constructiveness and Information Richness of Media HIV and AIDS News Stories:

The "Very Constructive and Informative" HIV and AIDS news stories were slightly more than "Constructive" and Informative" HIV and AIDS news stories - 51.56 and 48.44% respectively in the 1st quarter, and 51.67% and 46.67% in the 2nd quarter. But, there was a high difference in percentage value of 76.34% for "Very Constructive and Informative" HIV and AIDS news stories in the 4th quarter against 21.37% for "Constructive and Informative" news stories. However, in the 3rd quarter, "Constructive and Informative" HIV and AIDS news stories became higher with a total of 61.11% against 38.89% recorded by "Very Constructive and Informative" HIV and AIDS news stories. Though, very constructive and Informative HIV and AIDS news stories showed a fairly consistent high percentage values, there seems to be an element of fluctuation in language use by the media as indicated by the reversed percentage values in the 3rd quarter. However, in the full year analysis, the "Very constructive and Informative" news stories maintained a high percentage (57.68%)' than the "Constructive and Informative" (41.41%)' HIV and AIDS news stories. HIV and AIDS news stories that were "Not Constructive and Informative" were only 1.16% of the year's total HIV and AIDS news stories. Therefore, the combination of "Very Constructive and Informative" and "Constructive and Informative" HIV and AIDS news stories in the year (99.17%), suggests that the South African media communicated well-constructed and informative HIV and AIDS news stories in the study period, and may explain South Africans' good and informed knowledge of HIV and AIDS within the period. .

Constructiveness of HIV and AIDS story deals with the use of appropriate words and terminologies in reporting the disease. Since HIV and AIDS is a special and peculiar disease, reporting about the disease goes beyond mere use of 5Ws and H in news reporting, to include the use of clear and concise sentences, appropriate use of words, and avoidance of grammatical ambiguity. Misleading grammatical construction and misuse of words will negatively impact on the effectiveness of the news story in the fight against the pandemic. Additionally, the story lead or 'intro' should be very clear, and interesting enough to lure the readers to not only read the first few lines of the story but to also read the rest of the story. The body of HIV and AIDS story should equally be interesting and should be full of interesting facts that will be of benefit to

further inform and educate the readers on the pandemic. Relevant statistical figures should be used (where necessary) and adequately interpreted for the media audiences. The quality of language as a communication tool for HIV and AIDS communication is critical in achieving the desired objectives.

Language Professionalism of Media HIV and AIDS News Reports:

South African media predominantly used professional or appropriate language to communicate HIV and AIDS news stories throughout the quarters. Most of the media HIV and AIDS news stories contained enough news information that helped to educate the public on the pandemic. This dominance is seen in the 98.45%, 100%, 100%, and 99.24% of the HIV and AIDS news stories in the 1st, 2nd, 3rd, and 4th quarter respectively and as well as in the full year analysis (99.42%). The implication is that South African media have drastically improved on their use of language in HIV and AIDS reporting. This finding differs from the early research finding by Wallis (2008:30) which shows that South African media use of language in HIV and AIDS communication contributed to earlier public fear of the disease. Their news reports then were stigmatizing, discriminating and stereotyping those infected and affected by the pandemic. This earlier study found that language used in the media in a few instances was positive, but most often was still negative and stereotyped – with use of words and phrases like "victims", "death sentence", "AIDS sufferers", "gay disease", 'AIDS patients", "killer disease', "AIDS patients", "died of HIV and AIDS'. Such words were not found in South African media HIV and AIDS news stories in the period studied. This may point to a positive change on the part of the media in their effort to help save the society from the encompassing devastations of the pandemic.

The media have the ability to positively influence public opinion on issues of societal interest such as HIV and AIDS. However, such media role also has dysfunctional effects (which may arise as an extension of media use of language) when the public misinterprets media language and therefore the information. For instance, sensationalism is commonly seen in the kind of language used, and tone of such stories. As a strong tool against HIV and AIDS, professional or appropriate use of words is absolutely necessary in HIV and AIDS reporting because of its pandemic nature and its impact on all spheres of the society. The present study clearly showed appropriate language use by the media in communicating the news reports on HIV and AIDS during the period studied and revealed that the South African populace are being aptly educated about HIV and AIDS pandemic.

The media audience are not just taking in any information and word from the media, but are processing and interpreting them as they are received based on their own predetermined meaning and understanding of such words and information. Wrong use of words (whether intentionally or unintentionally) by the media in reporting HIV and AIDS can further promote stereotyping and stigmatizing HIV and AIDS infected and affected individuals and their families. This also can hamper the success of the effort against the pandemic. Understanding how this works will go a long way to ensure that the media remains a great tool and effective partner in the efforts against the pandemic. It is therefore critical that the appropriate words, ideas and meaning should be communicated to the media audiences in reporting HIV and AIDS.

In conclusion, South African media communicated most of their HIV and AIDS news stories in the period studied in professional and appropriate, simple and easily understood words. They also contained adequate HIV and AIDS news information that could enhance HIV and AIDS awareness and education level of the public. HIV and AIDS news reporting is indeed a specialized area for the media personnel. Good knowledge and use of relevant and appropriate words in HIV and AIDS reporting can be acquired through training in specialized reporting on news coverage of the pandemic.

Language Tone of Media HIV and AIDS News Stories:

The "positive" toned HIV and AIDS news stories predominated in all the quarters – 81.25%, 96.67%, 92.22%, and 99.24% for the 1st, 2nd, 3rd and 4th quarters respectively. This cumulated in the full year dominance of 93.62% against 4.64% "negative" and 1.74% "neutral" toned HIV and AIDS news stories in the year. This shows that most of the HIV and AIDS communicated by the media in the study period were in good (positive) tone and supportive of the efforts against HIV and AIDS. Through this form of reporting, South African media may have won the confidence of the people, carried them along in their stories and consequently this therefore probably resulted to the increased HIV and AIDS awareness and education. They equally helped in the motivation of South African public to rise up against the pandemic at their individual levels, including, acquiring more knowledge on the disease, going for testing, enrolling on ARV treatment if positive, and reducing their exposure to risks of infection and reinfection. Without the individuals rising up, the level of successes achieved in the efforts against HIV and AIDS may be impossible. This supportive reporting also assisted in overcoming public fear of the disease and reducing stigmatization of the people living with the disease. This finding further highlights the fact that South African media are now sensitive to the prevailing circumstances surrounding HIV and AIDS pandemic, unlike their

Papua New Guinea media that were described as insensitive to people living with HIV and AIDS (PLHIV) due to their style and use of language in HIV and AIDS news coverage (Cullen 2005:114).

Media news reports have voices and tones in their communications including neutral, negative, and positive tones, or neutral, low, and high tones depending on how the journalist or the media presents the news story. This is often not conspicuously stated, but clearly detectable in any media news story. The tone is neutral if the media is detached from the issue, and low if they are in support of it (as when the issue is of interest to the media). Media tone is high or positive if they are interested in the issue and see it as important and deserving serious attention which was the case in the present study on media HIV and AIDS reporting. It is negative and critical if they are completely not in support of the issue at stake. Media tone can also be negative and high or positive and high.

In conclusion, South African media' voice and tones in their HIV and AIDS news stories in the period studied were positive and supportive of the efforts against HIV and AIDS. They also helped to motivate the public to stand up against the pandemic.

6.5 BLAME ATTRIBUTION OF HIV AND AIDS INFECTION IN MEDIA NEWS STORIES

Greater percentage of the HIV and AIDS news stories in all the quarters and year analysis did not contain blame attribution for HIV and AIDS infection news reporting (70.31%, 95%, 84.44%, and 87.79% for 1st, 2nd, 3rd, and 4th quarters respectively and 84.93% for the full year analysis). This indicates that the South African media no longer focus on HIV and AIDS infection blame in their report of the pandemic as was prevalent in the early part of the pandemic. People living with HIV and AIDS then (who had access to the media) were eager to point fingers at the sources of their infection, as well as tell stories on how they contracted the disease. Now the sensationalism is over, and the public are getting educated on the methods of contracting and accurately managing the disease.

The results further imply that attribution of HIV and AIDS infection is no longer a serious issue to the public. Rather, the important issues now have become HIV and AIDS prevention, testing and treatment as was previously stated. Attributing HIV and AIDS infection became common at the early period of the pandemic due to the heightened fear, shame, hopelessness, and stigma and discrimination associated with the disease in its early stage. The infected then found it difficult to accept responsibility for their new health

status, and rather consoling to shift blame to something or someone. The study reveal that these attributions are gradually fading away as the media rigorously and effectively educate the people on the possible treatment and effective management of the disease, and thereby restore hope once more to the people.

However, the major blame attributed to HIV and AIDS infection in the media coverage of the pandemic was 'Reckless lifestyle' – 15.63%, 6.67%, and 8.40% in the 1st, 3rd and 4th quarters respectively. It also made a total of just 7.83% at the full year. This was followed by 'Blame on husband' with only 2.32% of the year's HIV and AIDS news stories. Though, these percentages are low, the finding may suggest that South African HIV and AIDS pandemic is mostly driven by sexual related activities (coming in contact with body fluid of the infected) which has been proven as the fastest HIV and AIDS transmission route.

In conclusion, most media HIV and AIDS news reports in the study period (84.93%) did not contain blame for contracting HIV and AIDS. Rather, their focus was on other issues and aspects of the pandemic that were interesting, informative and educative to the public. However, 7.83% of the year's HIV and AIDS news reports contained blame on "Reckless lifestyle", and "Blame on husband" came second with just 2.32% of the year's HIV and AIDS news reports. These indicate improvement in South African media coverage of the pandemic.

6.6 GEOGRAPHICAL LOCATION OF HIV AND AIDS NEWS STORIES

The study classified media HIV and AIDS news stories into two broad categories – "National" and "Local" HIV and AIDS news stories, and "Foreign or International" HIV and AIDS new stories. Of the first group, the 'National" HIV and AIDS news stories predominated the 'Local' HIV and AIDS new stories having the following percentages at quarterly and year analysis – (81.25%, 81.67%, 63.33%, and 61.83% in the 1st, 2nd, 3rd, and 4th quarters respectively and 69.28% for year analysis) as against the "Local" (village or community level) HIV and AIDS news stories with 8.12% for the full year, suggesting that the community HIV and AIDS interest may have been compromised by the media. However, the media HIV and AIDS news stories used for study were mainly national media, and therefore may be responsible for the low percentage value of the "Local" HIV and AIDS news stories. On the other hand, it is commendable that the national news stories included some percentage of "Local' HIV and AIDS stories

These indicate that South African media reported more HIV and AIDS news studies that have direct bearing on the people, and contained issues the people can identify with. In other words, the contents were related to South African media audiences and the prevailing situations concerning HIV and AIDS pandemic in the country. Prominence, proximity and timeliness were among the news criteria used by the media in the selection of their HIV and AIDS news stories in this instance.

The high percentage of 'National' HIV and AIDS stories may also indicate that the media focussed mainly on national HIV and AIDS issues within South Africa. This has the capacity to raise the interest of the local audience to these reports on HIV and AIDS and thus increased education and awareness of the pandemic. The media thus were able to utilize the factor of proximity in news reporting, which may have aroused the interest of the people seeing that it all concerns them and therefore important.

The percentage of the 'Foreign' HIV and AIDS news stories (10.94%, 11.67%, 26.67%, and 30.53% in the 1st, 2nd, 3rd, and 4th quarters and 22.61% for the overall year analysis, respectively) reported by the South African media within the period show that the media incorporated international developments on HIV and AIDS, thereby enriching the knowledge base of their South Africa audience on the disease. On the other hand, the low percentage coverage of foreign HIV and .AIDS news by South African media may be regarded as a deliberate and cautious step by the media, to ensure sustained interest of the local audience on issues of HIV and AIDS. This is also a step to avoid domination and overshadowing of the local HIV and AIDS issues and news by foreign news. Ultimately, the South African audience will not see the HIV and AIDS as a foreign disease, but as a reality in their own environment. The pandemic will therefore remain a burning issue in the local public news space, instead of being overtaken by some other issues interesting to the media and media audiences.

In conclusion, most of the South African media HIV and AIDS news stories were national and community level HIV and AIDS news stories with a total of 77.4% of the full year results. Foreign HIV and AIDS news stories accounted for the remaining 22.61% in the year. The predominance of South African located HIV and AIDS news stories made the news stories interesting to the people because they could relate to such news stories. It helped to educate the public on different aspects of the pandemic through raising the HIV and AIDS knowledge level of the society, and enabled the public to come to terms with the pandemic situation in their environment. The foreign HIV and AIDS news stories brought the knowledge of interesting

international HIV and AIDS developments and issues to South African publics, thereby enriching and raising their knowledge of the pandemic.

6.7 NATURE OF HIV AND AIDS REPORTS REPORTED BY THE MEDIA

The nature of media HIV and AIDS news reports during the period was evaluated based on whether the pandemic was communicated as developmental, health, social or religious issue. The HIV and AIDS stories communicated as development issue dominated (82.81%, 83.33%, 85.56%, and 83.97% in the 1st, 2nd, 3rd, and 4th quarters and year at 84.06% respectively) over those communicated as health issue (6.25%, 16.67%, 14.44%, and 9.92% in the 1st, 2nd, 3rd, and 4th quarters and year at 11.59% respectively) as indicated by these quarterly and year analysis. The high percentage of HIV and AIDS stories reported as development issue suggests that South African media followed the prevailing news issues and developments on HIV and AIDS in the study period and therefore presented accurate picture of the disease. This finding differs from a previous finding by Panos (2004:48) that South African media reported HIV and AIDS only as health issue. It is important that HIV and AIDS be reported as development and health issues as this will encourage Government and all other stakeholders to pay the right attention to successfully tackle it. As a development issue, it becomes clear to all that no one in the society is exempted from contracting it, and from its impact. As health issue, it is life threatening and can therefore attract the necessary funding and other resources needed to adequately deal with it. For media organizations, the increasing important goal of maintaining their market share in the rapidly evolving media business environment can be achieved through consistently communicating the news their audiences want and find interesting. The media need to make HIV and AIDS news consistently interesting to their audiences.

In conclusion, the media predominantly communicated HIV and AIDS pandemic as a development issue with a cumulative total of 84.08% of the year's total HIV and AIDS news stories. Media news stories that presented the epidemic as health issue were only 11.59% of the year's HIV and AIDS news stories. The South African media adequately communicate the true nature of HIV and AIDS to the people in the study period. When HIV and AIDS is seen as just any other issue such as social issue or religious issue, the pandemic becomes trivialized. Moreover, the efforts of the stakeholders to control and halt it will be misdirected, and the pandemic will continue to spread in the society. The mass media have the ability to direct public debates and public opinion.

6.8 NEWS RELEVANCE (IMPORTANCE) OF HIV AND AIDS PANDEMIC TO THE MEDIA

The relevance of a news item to a media outlet may be determined by the value the media attached to such a news item. Such value(s) is characterized by the prominence of the news item in the media, Editorial page location, news space dedicated by the media to the news item, and the quantity of the news item or issue communicated by the media in a given time frame. This (news relevance) also draws related importance from media audience concerning the event, topic or issue. It is another means of agenda-setting by the media. The relevance of HIV and AIDS news stories to South African media was assessed using these variables.

Prominence of HIV and AIDS News Reports in the News Media:

These percentage levels (51.56%, 51.67%, and 55.73% in the 1st, 2nd, and 4th quarters but just 42.22% in the 3rd quarter and the overall year at 50.72% respectively) of "prominent reporting" of HIV and AIDS news stories as against "less prominent reporting" (34.38%, 25%, 37.78%, and 31.30% in the 1st, 2nd, 3rd, and 4th quarters and overall year at 32.46% respectively) suggest that though the HIV and AIDS pandemic was an important issue to the media, the media, however, did not consider it necessary to accord a particularly special attention to it. The media, therefore, seem to have managed the pandemic with other competing issues of public interest. However, HIV and AIDS news events that the media judged to command headline attention were prominently presented by the media in the year. The low percentage difference between the prominently and less prominently placed HIV and AIDS news stories may be due to the media's much dependence on HIV and AIDS news hand-outs from Government, public and private organizations instead of developing and producing them in-house. As previously stated in this study, such news stories are often press releases with limited news worthiness.

The media characteristically assign different values to HIV and AIDS news events and issues by emphasizing them to different degrees in their news reports. Thus, a news item is prominent on a news page if the news item is the main headline on the news page, and with the biggest font size on the page, conspicuously positioned on the news page to attract readers' attention, and or occupies the biggest news space (measured in column and inch). The news item may also be printed in reverse print to prominently present it on the same news page with other news items and stories. For broadcast media, it is time slot and duration of such broadcast item.

Editorial Page Location of HIV and AIDS News Reports:

The high percentage location of HIV and AIDS news stories on "Other page numbers" or "unimportant page numbers" (93.75%, 93.33%, 98.89%, and 89.31% of the 1st, 2nd, 3rd, and 4th quarters and 93.31% for year analysis, respectively), and important news pages (such as front page, editorial page, Op. editorial page, and back page) with very low percentages in all the quarters and in the year (6.67%) may similarly suggest that the media skilfully managed the issue of HIV and AIDS pandemic (a national interest) among other issues of national and public interest without necessarily jeopardizing the much needed public attention to HIV and AIDS pandemic. Thus, while the expected very high attention may not have been given to this pandemic (by not locating most of the HIV and AIDS news stories on important news page(s) such as front page, Op.ed page and editorial page) public awareness for the disease seem to have been adequately created, hence the high HIV and AIDS education and awareness among the South Africa populace. However, better result (higher level of education and awareness) may have been obtained if the important pages were vastly utilized.

Undoubtedly, print media industry practitioners are very much aware of the importance attached to different pages of a newspaper just as the broadcast media deals with broadcast time - peak or prime time, and time frame. This is because some newspaper pages attract or are easily accessible readers more than other pages because of the positions they occupy. The most important newspaper pages are the front page, pages 2 and 3, editorial page, Op.editorial page, second to the last page and the back page. The front page carries the day's news headline and is the first page the readers access. Pages 2 and 3 are the first two pages readers' access as they open the newspaper. The editorial page contains the newspaper's editorial (opinion on national burning issues, and at times international issues of national interest) and is therefore relevant to readers. The Opposite editorial page (or op.ed) is the page next to editorial page and contains opinion articles from columnists and the members of the general public. Readers access it as they look for the day's editorial.

The page before the back page is sports related page and attracts interested readers, particularly, sports lovers. The back page stands out in relevance as the front page. In terms of layout and design, this page is attractively designed to attract and lead readers into the newspaper pages, and also contains important news reports of the day. In some media organizations, the back page is part of sports pages and therefore

contains the most important sports news item of the day. Any other newspaper page is grouped together in terms of relevance or importance.

Editorial (News) space dedicated by the media to HIV and AIDS news stories:

The percentages (0.07%; 0.07%, 0.08%, 0.11% and overall year 0.08%) of the calculated column width inches of all editorial space available for news reporting (1, 471,001; 1, 452,869; 1,733,841; 1,384,745 respectively for each quarter and 6, 042,456 column inches for the overall year) allocated by the media to HIV and AIDS news stories in the quarter and year analysis were staggeringly very small. This pattern is in agreement with the results already discussed above and similarly suggests less news attention to HIV and AIDS news coverage but very professionally managed to yield remarkable results.

The print media deal with allocation of editorial space (measured in millimetre or inches) to editorial matter or news story on their perceived importance of such news item. This is based on their editorial judgement which assists them to categorize news stories and assign values to them. The bigger the editorial space allocated to a news story or illustration (e.g. cartoon), the higher the relevance of such editorial item to the media practitioners. On the other hand, the smaller the editorial space allocated to such editorial item, the less the relevance of such editorial item to the media. In this case, allocation of limited editorial space to HIV and AIDS news reporting by the South African media reflects less concern about the pandemic, which is a serious development and health issue requiring concerted news coverage.

In conclusion, South African media did not treat HIV and AIDS as special news worthy issue in the country in the period studied as indicated by the slight difference between the prominently and less prominently located and communicated HIV and AIDS news stories. It was like just any other news issue to the media. It therefore suggests that the media did not give the highly needed much news attention to HIV and AIDS pandemic in the country. The South African media dedicated far few number of editorial space to the communication of HIV and AIDS news stories, and thus, did not give HIV and AIDS news reporting the serious news attention it deserves as a pandemic in the country. However, they were able to manage its communication creditably well.

Quantity of HIV and AIDS News Coverage by the Media

The South African media communicated a total number of 345 HIV and AIDS news stories, quarterly distributed as 64 (18.55%); 60 (17.39%); 90 (26.09%) and 131 (37.97%) in the 1st, 2nd, 3rd and 4th quarters respectively). This number of HIV and AIDS stories expresses low coverage of HIV and AIDS news by the media, more so, because the media sampled for this study are among the main South African national news media. Additionally, the gradual increase in the number of HIV and AIDS stories from 1st to the 4th quarters in the period studied may indicate a gradual increase in the response of the media to an issue of increasing national and public interest. The reason for this finding is not clearly understood, but may be due to heightened global interest towards the celebration of AIDS Day on December 1 or that South African media were initially disinterested in covering the pandemic in the year as previously reported by Cullen 2007:3 with the mass media in Papua Guinea.

This may further be explained by a previous study by Martinez, Robles-Silva et.al (2001:242) which found that media reporting on health issues and conditions (e.g. HIV and AIDS) are not based on the extent of the significance of the issue reported but on media selectivity and interest. Mass media interest and focus are reflected in the direction of their news coverage. The issues of interest to them are given heightened coverage and the coverage of other issues is down-played. This media news selectivity and interest may be driven by the fact that the mass media (particularly in a capitalist economy, and moreover, privately owned) are majorly profit oriented. This may therefore influence their (media owners and editorial gatekeepers) news choice in HIV and AIDS news coverage amongst other competing stories that are also of national interest.

In conclusion, the low number of HIV and AIDS news stories communicated by the South African media in the study period translates to low coverage and level of sensitivity to the pandemic. There were fluctuations in the quantity of media HIV and AIDS news stories in the quarters. Though the public still depends greatly on the media for their HIV and AIDS news information and education, South African media position as the main source of HIV and AIDS information in South Africa may soon become questionable unless their coverage of the pandemic is increased. Low coverage of the pandemic has the risk of making the pandemic a non issue to South African publics and thereby delay the exit of the pandemic from the country.

6.9 COMPARATIVE ANALYSIS OF THE MEDIA IN HANDLING HIV AND AIDS PANDEMIC THROUGH THEIR OUTPUT: ANALYSIS OF VARIANCE (ANOVA)

The ANOVA analysis was used in the study to evaluate the HIV and AIDS news stories communicated by the individual media houses in the period under study. It helped in identifying the different contributions of individual media outlets to HIV and AIDS news coverage in the period studied based on the topics and variables studied. This is because, each society is stratified into groups and classes of people based on shared socio-economic conditions, a relational set of inequalities with economic, social, political and ideological dimensions.

6.9.1 ANOVA ANALYSIS OF QUARTERLY HIV AND AIDS NEWS COVERAGE OF THE MEDIA HOUSES

The results of the present study has shown that the efforts and activities (South African's HTC programme, the December 1st HIV and AIDS day, the HIV and AIDS international conference, among others) of the Government, various organs of the government, Civil Society Organizations (CSO) and International donor agencies' against HIV and AIDS pandemic were amplified toward the end of the 3rd quarter and during the last quarter of the year. Incidentally, these quarter periods coincide with the publication of financial sheet by international donors as well as review of the success of the previous year's activities in relation to the utilization of the funds previously released.

Additionally, the annual November and December release of the national and UNAIDS Global HIV and AIDS reports may also have contributed to this. Most probably these increases in activities at the last quarter period of the year against the pandemic may be due to a number of reasons viz 1). Efforts to utilize any denoted fund that has not been used, before the end of the next financial year; 2). To burst the report sheet of their activities in other to attraction more fund from donors and 3). Most probably because this period corresponds with the time of increased festive activities so as to maintain sustained awareness and caution individuals on expected risk behaviours prevalent during this quarter. It is therefore interesting that this period witnessed significant HIV and AIDS news stories on "Treatment of HIV and AIDS", "HIV and AIDS management", 'HIV and AIDS funding" and "HIV and AIDS testing". It is also not surprising that HIV and AIDS news stories addressing "Reckless lifestyle' and the individuals' blame attribution to their sex partners (for contracting the disease) were high during this period.

These increases in the activities of these organizations therefore affected the media activities and output on HIV and AIDS pandemic. Thus, the media output on some of the variables were significantly affected as a result. This is understandable since the media is the main channel between these organizations and the public. Therefore the pressure to beat the news deadline at the respective media houses, and report as many HIV and AIDS news stories as possible during this period may have contributed to this finding.

6.9.2 QUALITY OF MEDIA HIV AND AIDS NEWS STORIES

Due to the above, it was not surprising that "Straight news" and "Feature articles" (news type); "Confidentiality in HIV and AIDS news reporting" ("Neutral Confidential" HIV and AIDS news stories), with "Combination of journalistic skills and creativity" (combination of "Good", and "Fair" use of Journalistic skills and creativity) were significantly employed by the media in their HIV and AIDS news stories in the 3rd and last quarters.

Additionally, other variables such as "Objectivity in HIV and AIDS News Reporting" ("Balanced" HIV and AIDS news stories), "Research in HIV and AIDS News Reporting" ("Well researched" and "Not researched" HIV and AIDS news stories), Sources of HIV and AIDS News Reports ("Government Ministers", "Religious organization", "CSO" and 'Journalists") also featured prominently in the HIV and AIDS news stories from the media during this period. During the same period and quarters, the media output on HIV and AIDS news stories greatly concentrated on news subjects relating to "Treatment of HIV and AIDS", "HIV and AIDS management", "HIV and AIDS funding" and "HIV and AIDS testing". These findings clearly demonstrate that the quality of media HIV and AIDS news stories was most positively affected during these quarters than in the first and second quarters.

6.9.3 MEDIA LANGUAGE USE IN HIV AND AIDS NEWS STORIES

It was also observed that the constructiveness of media use of language ("Very Constructive" and "Constructive"), media professional use of language ("Professional" HIV and AIDS news stories), media language tone ("Positive tone" HIV and AIDS news stories) and blame Attribution ("No blame" HIV and AIDS news stories and "Reckless lifestyle") were significantly featured in media HIV and AIDS news stories during the 4th quarter than the rest of the quarters. These findings may among others be due to media efforts to attract the attention and interest of their audiences and hence the high number of very constructive and constructive stories as well as increased professionalism in their use of language in

communicating HIV and AIDS pandemic. The media efforts to support the various anti HIV and AIDS activities may also explain their significant use of positive tone in HIV and AIDS news stories during this quarter. Furthermore, the significant number of HIV and AIDS stories on "Reckless lifestyle" and the individuals' blame attribution to their sex partners (for contracting the disease) during this quarter may be related to festive activities that characterize this period of the year.

6.9.4 GEOGRAPHICAL LOCATION OR SETTING OF HIV AND AIDS NEWS REPORTS

Similarly, the result showed that both the media "National" and "Foreign and International" HIV and AIDS news stories increased and were higher during the 4th quarter than in other quarters. This may be evidence of media support for Government HTC programme, World AIDS Day celebrations, and activities of local and international HIV and AIDS activists among others in this period.

6.9.5 NATURE OF HIV AND AIDS NEWS REPORTS

With respect to the nature of HIV and AIDS media news reports, the significant HIV and AIDS news stories as a 'Social issue' in the 1st quarter to "Health issue" and "Developmental issue" in the 4th suggests a movement from limited knowledge (just "Social issue" or "Religious issue") of HIV and AIDS to improved knowledge and understanding of what HIV and AIDS is – a development issue and health issue that touches all aspects of people's lives and needs all the serious attention it deserves to be put under control. However, HIV and AIDS as a religious issue was also significant in the 4th quarter, possibly due to increased faith-based organizations' ('Religious organizations') contributions (teachings, crusades, etc.) to the efforts against HIV and AIDS especially during this period.

6.9.6 NEWS RELEVANCE (IMPORTANCE) OF HIV AND AIDS TO THE MEDIA

Prominence of HIV and AIDS News Stories in the Media

Under this category, the ANOVA analysis showed that the HIV and AIDS news stories from the various media houses were significantly conspicuous ("Prominently") and slightly conspicuous ("Less Prominent") on the news pages when compared with other stories carried by the same media house in the 4th quarter, while not conspicuous ("Not Prominent") HIV and AIDS news stories featured significantly in the 3rd quarter compared to other stories. Evidently, this may be associated with efforts of the media in promoting activities against the pandemic.

Media Page Location of HIV and AIDS News Reports:

The significant number of HIV and AIDS news stories placed on "Other page numbers" than on the "Front page" may be attributed to high number of HIV and AIDS news stories competing for attention with other equally important national and news worthy developments in the 4th quarter. This may explain the media use of prominence in communicating HIV and AIDS news stories during the quarter (the most active quarter in anti-HIV and AIDS activities), as this will attract the attention of their audience.

Editorial Space Dedicated to HIV and AIDS News Stories

The media use of significantly high number of news columns as well as "Column width" inches (editorial space) for HIV and AIDS news communication, during the 4th quarter of the year compared to other quarters may be related to the relevance attributed to the pandemic by the media at this period. It further suggests that the value or importance attributed to the pandemic by the media fluctuates according to the period of the year, probably influenced by the extent of the pandemic-related important activities happening within a particular period. Additionally it may be associated (among other factors) with the sales volume (media audience and business organization patronages) at a particular period.

Quantity of HIV and AIDS News Stories

Similarly, the significant number (quantity) of HIV and AIDS news stories communicated by the media in the 4th quarter as against other quarters supports the significant editorial space devoted to HIV and AIDS news stories by the media during the same period (4th quarter). Further to this point may be the high HIV and AIDS related activities during this period as earlier on severally explained.

6.10 ANOVA ANALYSIS OF FULL YEAR HIV AND AIDS NEWS COVERAGE OF THE MEDIA HOUSES

6.10.1 ANOVA ANALYSIS OF QUALITY OF MEDIA HIV AND AIDS NEWS STORIES

ANOVA Comparison of Types of Media HIV and AIDS News Coverage on a Yearly Basis Among the Different Media Groups Used for the Study:

The very high number of "Straight news" carried by *Sowetan* and *The Citizen* newspapers (as shown by ANOVA analysis) may reveal the type of audience targeted by these newspapers in the media fight against HIV and AIDS pandemic. Commonly, the "Straight news" format is used to target the low and middle

classes (with high school to degree level education, and as well average income group) in the society. Moreover, these media (*Sowetan* and *The Citizen*) are South African popular tabloid newspapers. Equally, *Sowetan* had the highest number of *Opinion article* and "Letter to the editor" showing that the newspaper's audience are quite vocal and active members of the society, who are often the middle social class members. This target group happens to be the most sexually active in the society and most hit by the pandemic.

The *Mail & Guardian* communicated the most HIV and AIDS "News analysis" in the year, and this indicated that the newspaper has remained a highly analytical, research inclined, in-depth publication. This type of news report targets the intellectual in the society. The interpretative or analytical news reporting adds detailed explanation of the pandemic's news occurrences to its news communication, and thereby improve the HIV and AIDS awareness and education of the people.

ANOVA Comparison of Confidentiality in HIV and AIDS News Reporting on a Yearly Basis Among the Different Media Groups Used for the Study:

The *Sowetan* reported the highest number of "Neutral Confidential" reports in the year, indicating that the newspaper communicated more of HIV and AIDS news stories from news sources other than the PLHIV and their relatives. This pattern may have greatly eliminated the voice of the infected and affected from their HIV and AIDS news reports in the period studied.

The *Sowetan* reported the highest number of "Neutral Confidential" reports in the year, indicating that the newspaper communicated more of HIV and AIDS news stories from news sources other than the PLHIV and their relatives. They may have therefore contributed most to the elimination of the voice of the infected and affected from HIV and AIDS news reports in the period under study.

The "Neutral Confidential" HIV and AIDS news stories was highest in the 4th quarter of the year, and this may be connected with the much Government, Civil Society Organizations (CSO) and International donor agencies' HIV and AIDS activities found in the period.

ANOVA Comparison of Technical Competence of HIV and AIDS Articles on a Yearly Basis Among the Different Media Groups Used for the Study:

Though, the analysis by ANOVA, showed no difference in the "Very Competence" category among the newspapers, *Sowetan* communicated the highest number of "Competent" HIV and AIDS news stories in the period under study. This may be associated with the fact that the newspaper (a national tabloid) contributed the highest number of HIV and AIDS news stories in the period and probably contributed more to HIV and AIDS public awareness and education of South Africans.

ANOVA Comparison of Combination of Journalistic Skills and Creativity in HIV and AIDS News Reporting on a Yearly Basis Among the Different Media Groups Used for the Study:

Further analysis showed that *The Citizen* and *The Star* used the highest number of "Good Journalistic skills and creativity" in their HIV and AIDS news stories among the media studied. In addition, *Sowetan* communicated the most HIV and AIDS news stories in the "Fair journalistic skills and creativity" category in the year. These findings linked *The Citizen*, *The Star* and *Sowetan* with the most simple, well written and creative HIV and AIDS news stories in the period than *Mail & Guardian* and *City Press* newspapers. This kind of HIV and AIDS news stories are easy and enjoyable to reader, and encourage the interest of media audiences in the stories. However, *Mail & Guardian and City Press* performances here may be strongly related to their HIV and AIDS news outputs in the period.

ANOVA Comparison of Objectivity of HIV and AIDS News Reports on a Yearly Basis Among the Different Media Groups Used for the Study:

The highest number of "Balanced" HIV and AIDS news stories (ANOVA Analysis) by The *Sowetan, The Citizen* and *The Star* indicated that they covered HIV and AIDS development professionally, ensured the accuracy of their HIV and AIDS news reports, and included the voices and views of all the parties involved in the respective news reports. Furthermore more, the analysis associated *Sowetan* with the highest number of "Balanced" HIV and AIDS news stories, also reported the most number of "Biased" HIV and AIDS news stories in the period studied, showing that the newspaper do sometimes allow its sentiments, and interests (probably, including ownership, political or economic) to interfere in its HIV and AIDS news

coverage. It is important to note that "Mail & Guardian" non-significant contribution to "Balanced' HIV and AIDS news stories was also due to their low number of HIV and AIDS news stories in the period studied.

ANOVA Comparison of Use of Research in HIV and AIDS News Reporting on a Yearly Basis Among the Different Media Groups Used for the Study:

Additionally, the analysis of ANOVA, related *The Citizen, Sowetan,* and *The Star* with significant number of "Well researched" HIV and AIDS news stories in the year than *Mail & Guardian* and *City Press* newspapers. Such are stories that contain the necessary HIV and AID news information for general public consumption. The "Fairly researched" HIV and AIDS news stories were significantly also carried by *The Citizen* and *Sowetan* newspapers. This shows that both the tabloid and broadsheet newspapers were found to have communicated adequately researched and accurate HIV and AIDS news information to their various audiences within the study period. The commitment of these three media to the education of the populace about the dangers of the pandemic may be attested by the non-significant result of "Not researched" stories among all the three media in the period.

6.10.2 ANOVA ANALYSIS OF SOURCES OF MEDIA HIV AND AIDS NEWS STORIES

ANOVA Comparison of Sources of HIV and AIDS News Reports on A Yearly Basis Among The Different Media Groups Used For The Study:

The results of the analysis of ANOVA indicated that *The Citizen, Sowetan,* and *The Star* mostly depended on outside sources (DoHSD, CSOs, and private organizations) for their HIV and AIDS news stories compared to *Mail & Guardian* and *City Press.* Thus, they (*Citizen, Sowetan,* and *The Star*) were more likely to compromise the interest of their audiences by communicating regulated and partially objective HIV and AIDS news stories in the period studied. However, this point contrasts the result on the use of research in their HIV and AIDS news stories. It thus implied that the media houses must have carried out further investigations to enrich their stories on the pandemic. On the other hand, the *Sowetan,* and *City Press* were less likely to compromise the interest of the general publics in HIV and AIDS news communication since significant number of their HIV and AIDS news stories were developed in-house (sourced from their "Columnists" and "Journalists"). This suggests that they were therefore less exposed to the negative influence from outside sources. There were no significant differences in the media sourcing of HIV and

AIDS news stories from all the other sources such as "Government Minister", "Religious organization", "Research report", "CSO" amongst others.

6.10.3 ANOVA ANALYSIS OF MAIN HIV AND AIDS NEWS SUBJECTS REPORTED BY THE MEDIA ANOVA Comparison of Main HIV and AIDS News Subjects Reported By The Media on A Yearly Basis Among The Different Media Groups Used For The Study:

Further analysis (ANOVA) indicated that while *The Citizen* most significantly reported news stories on "HIV and AIDS testing" in the year, *Sowetan* significantly majored in "HIV and AIDS awareness", "Medical costs of AIDS", and "HIV and AIDS management". The above suggest that the tabloid newspapers characteristically (highly vocal and aggressive in defence of issues of interest to them) tackled the sensitive aspects of the disease. *The Citizen* and *Sowetan* - topped the list in exceptionally communicating some of the HIV and AIDS news subjects covered by the media in the period studied. Thus, they contributed more to HIV and AIDS media coverage and ensured that HIV and ADS news information was constantly available and communicated to South African audiences. *The Star* newspaper's coverage of "Treatment of HIV and AIDS" complemented the areas covered by *The Citizen* and *Sowetan* newspapers. This aspect of HIV and AIDS coverage also touched on such areas as recent advances and discoveries in HIV and AIDS researches - an interesting area to upper class and intellectuals in the society. Thus, it may be inferred that the media generally supplemented each other's efforts in the fight against the disease.

6.10.4 ANOVA ANALYSIS OF MEDIA LANGUAGE USE IN HIV AND AIDS NEWS REPORTING ANOVA Comparison of Constructiveness of HIV and AIDS News Reports on a Yearly Basis Among the Different Media Groups Used for the Study:

Among all the newspapers, (from the analysis of ANOVA) the HIV and AIDS news stories from *The Star* and *Sowetan* were characteristically "Very Constructive" and "Constructive" respectively. These may be attributed to their nature, focus and personality; *The Star* (a broadsheet newspaper) with typical use of high quality grammar and *Sowetan* (a tabloid newspaper) with medium level grammar construction and use in their HIV and AIDS news stories. These styles suit the target audiences of *The Star* and *Sowetan* newspapers - the high social class members and intellectuals and middle class members of the society respectively. These points highlight the great extent the mission, vision, and editorial policy of any media house can influence the nature of its news communication including the coverage of HIV and AIDS.

ANOVA Comparison of Language Professional Use by the Media in Communicating HIV and AIDS News on a Yearly Basis Among the Different Media Groups Used for the Study:

The HIV and AIDS news stories from *The Citizen, Sowetan*, and *The Star* probably have good positive impact on the general public than other newspaper HIV and AIDS news stories. This is because the use of appropriate and professional language in communicating HIV and AIDS news stories was significantly seen in HIV and AIDS news stories in *The Citizen, Sowetan*, and *The Star*. Surprisingly, *Sowetan* also had the highest number (though small compared to professional language use) of HIV and AIDS news stories communicated in "Unprofessional" language. This probably may be due to its nature as a tabloid publication and commonly associated with the use of mundane language in its news communication. This finding is also interesting because all segments or classes of the society were covered by this mix of the tabloids and broadsheet newspapers reports on HIV and AIDS.

ANOVA Comparison of Language Tone of Media HIV and AIDS News Reports on a Yearly Basis Among the Different Media Groups Used for the Study:

There was significant use of "Positive tone" by the *Sowetan* compared to other newspapers in communicating HIV and AIDS news stories. This suggests that *Sowetan* may have contributed tremendously to garnering public support, acceptance, participation in the Government HIV and AIDS HTC programme, and making necessary changes at individual level (knowledge level and attitude) towards overcoming the pandemic. This finding is interesting because this newspaper has consistently maintained its pre-apartheid history of championing the cause of the common man in South Africa, even after the demise of apartheid. It has also remained very vocal on issues that are against the general interest of its constituent - the common South Africans. The non-significant use of negative and neutral language tones may signify that South African media were very sensitive to feelings of the population and were in support of the campaign and other efforts against the pandemic. These also agreed with the earlier findings on percentage analysis.

6.10.5 BLAME ATTRIBUTION FOR HIV AND AIDS INFECTION REPORTED BY SOUTH AFRICAN MASS MEDIA ON A YEARLY BASIS

ANOVA Comparison of Blame Attribution for HIV and AIDS Infection Reported by South African Mass Media on a Yearly Basis Among the Different Media Groups Used for the Study:

The blame attribution (against the government) significantly featured in HIV and AIDS news communicated by *The Star* compared to other newspapers sampled. Such criticisms (accessibility of ARV treatment for example) would have assisted the Government in taking the right policy decisions and actions and improved their efforts and contributions towards controlling and combating the spread of the disease. On the other hand, the "No blame attribution" which highly featured in *Sowetan* HIV and AIDS news stories may suggest that the newspaper mostly covered Government and other stakeholders' HIV and AIDS activities more than other newspapers. This fact may also express dependence on external sources for its HIV and AIDS news stories, with such negative consequences as earlier on explained under the sources of HIV and AIDS news stories. This also may imply that *Sowetan* newspaper excluded the voice of HIV and AIDS infected and affected individuals.

6.10.6 GEOGRAPHICAL LOCATION OR SETTING OF MEDIA HIV AND AIDS NEWS STORIES ANOVA Comparison of Geographical Location and Setting of HIV and AIDS News Reports By The Media on A Yearly Basis Among The Different Media Groups Used For The Study:

The *Sowetan* more than other newspapers significantly communicated "Local" and "National" HIV and AIDS news stories within the period studied. This may rank the newspaper as one of the top media houses that championed the campaign against HIV and AIDS and probably in other efforts aimed at educating the populace about the disease. Additionally, it speaks of its commitment towards the national efforts against HIV and AIDS in the period studied. *The Star* coverage of most (highest number) "Foreign and International" news stories in the period studied, helped to balance and improve the public's HIV and AIDS awareness and education. On the other hand, it suggests that the newspaper has strong international links and demonstrates the extent of ownership, political, economic, and ideological influences on media HIV and AIDS news coverage.

6.10.7 NATURE OF HIV AND AIDS REPORTED BY THE MEDIA

ANOVA Comparison of Nature of HIV and AIDS News Reported by the Media on a Yearly Basis Among the Different Media Groups Used for the Study:

The HIV and AIDS news stories communicated as "Health issues" by *The Star* were significantly higher in number than those from the other newspapers sampled. Similarly, *The Citizen, Sowetan,* and *The Star* presented the pandemic as "Development issue" in the study period. This proves that most South African media organizations have acquired good knowledge of HIV and AIDS pandemic and its related aspects and correctly communicated them to the public in the period. The fact that HIV and AIDS news stories were barely reported as either "Social" or "Religious" issues explains the gravity attributed to the pandemic by the media. However, "Religious organisations" contributed their efforts (through increased faith–based communication and anti-promiscuity activities) against the disease. The media therefore significantly communicated HIV and AIDS as development and health issue in the period studied, signifying good understanding of the pandemic.

6.10.8 ANOVA ANALYSIS OF NEWS RELEVANCE OF HIV AND AIDS TO THE MEDIA ON A YEARLY AND QUARTERLY BASIS

ANOVA Comparison of Prominence and Importance Attached to HIV and AIDS News Coverage on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study:

On the part of the media, the *Sowetan* contributed significant number of, "Prominent" HIV and AIDS news stories, "Less prominent" (together with Citizen) and "Non Prominent" HIV and AIDS HIV and AIDS news during the year, compared to the rest of the newspapers sampled. The significant contribution of *Sowetan* in all the categories can be attributed to the quantity of its output during the year. This is interesting because only the two daily national newspapers (*The Citizen*, and *Sowetan*) used in this study - with their tabloid inclinations and characteristics, were involved in this finding.

ANOVA Comparison of Media Page Location of HIV and AIDS News Reports on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study:

Furthermore, a significant number of front page HIV and AIDS reports was from *The Citizen* and *The Star* while *Sowetan* placed most (significant number) of its reports on "Other page numbers". The front page placement by both newspapers (*The Citizen* and *The Star*) illustrated the gravity of the disease to these media houses. However, the high placement on "Other pages" by *Sowetan* newspaper, may be due to its high number of HIV and AIDS news stories since they also considered HIV and AIDS pandemic as a very important and newsworthy issue as previously stated above. This is evidenced by their very high number of prominently communicated (position of a news story on a news page) HIV and AIDS news stories in the period studied.

ANOVA Comparison of Editorial Space Dedicated to HIV AND AIDS News Coverage by the Media on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study:

In this category, the number of news columns, column height and width inches of editorial and news space utilized by *Sowetan* and *The Star* were significantly higher compared to the rest of the newspapers. Again, this finding corresponds with the high number of HIV and AIDS news stories communicated by the two newspapers in the period studied. However, the significant number of news columns used by *The Star* than other newspapers may be due to well written and readable HIV and AIDS news stories communicated by this newspaper, since the use of more news columns in news reporting translates to use of more editorial space, better layout and readability.

ANOVA Comparison of Quantity of HIV and AIDS News Stories Communicated by the Media on a Yearly and Quarterly Basis Among the Different Media Groups Used for the Study:

Similarly, the comparison of the quantity of HIV and AIDS news from the individual media within the period studied, showed that significantly greater number were from *Sowetan*, *The Star* and *The Citizen* compared to *Mail & Guardian* and *City Press* newspapers.

The quantity of news on the pandemic from these media houses, apart from ensuring sustained coverage, created consciousness in the minds of the people about the pandemic. Thus, they may have considered

the pandemic a great threat to the society's wellbeing more than the others. Moreover, this list (*Sowetan, The Citizen*, and *The Star*) includes the tabloids as well as the broadsheet publications which may imply that all the social classes of South African society were adequately reached with HIV and AIDS news information in the period studied.

6.11. LIMPOPO PROVINCE PUBLIC PERCEPTION AND ATTITUDE TOWARDS SOUTH AFRICAN MEDIA COVERAGE OF HIV and AIDS

6.11.1 DEMOGRAPHY OF RESPONDENTS

Gender, Age Groups, Marital Status, Educational Level and Discipline of Respondents

The gender and age of the respondents were well distributed with no tangible differences within the strata. The married (41%) group was adequately represented and their experience and knowledge of married life, which is essential in this kind of survey, was obviously beneficial to the quality of the study. Additionally, the marginally higher percentage (58%) of the single participants than the married was also very important in the study since the singles are a high risk group in_ the HIV and AIDS pandemic (Ntozi, Mulindwa, et al., 2003: 107-116; Dibua, 2009; Matsoso-Makhate and Wangenge-Ouma, 2009:76).

The high educational level (degree holders, 56% and Diploma holders, 36%) of all the participants was very beneficial to the study since all of them could adequately respond and express their perceptions and ideas in line with the questionnaire or the study tools used. Thus, they adequately contributed to this research. Moreover, their disciplines and employment cut across the humanities, health, finance and management, and science and technology which by implication suggest a broad societal view in the study. This is essential for quality and balanced information in this kind of survey, particularly because it affects the fabrics of our societal life. Furthermore, the educational background of the participants may have contributed greatly to the averagely high HIV and AIDS knowledge observed in the study. This probably is a reflection of the state of HIV and AIDS information in our society, though, the overall result indicates that some knowledge gap of the disease still exist amongst few segments of the society. While this is a compliment to the media efforts in providing enough coverage of the HIV and AIDS issues confronting the people, it calls for the media to increase their efforts in this regard especially for a wider coverage of the pandemic.

However, the existence of such HIV and AIDS knowledge gap has been linked to some South Africans constantly constructing their sexual identities and protection from infection based on competing knowledge systems available to them and "within context that produce, reproduce and send conflicting messages to them" ((Skinner, 2001; Baxen and Breidlid, 2009:8). Some others do not still regard themselves as vulnerable to the disease and their attitudes and behaviour have therefore generally remained unchanged

with consistent high-risk behaviour despite several media campaigns and efforts to halt further spread of the pandemic (Nupen and Wangenge-Ouma, 2009:87; Simbayi, Kalichman, Jooste et al., 2005).

Extent of Media Provision of Overall HIV and AIDS Information Need of South Africans (Limpopo Province) The result showed that there is sufficient news attention and coverage of HIV and AIDS issues confronting the people by South African media. This is supported by high percentage of the participants that indicated the media provided adequate coverage of the HIV and AIDS issues (87%), HIV and AIDS and related issues (86%), practical information necessary for individuals in dealing with the disease (85%) and meeting the people's personal HIV and AIDS information needs (85%). The consistent high percentage, definitely is not a coincidence, but strongly suggests that media output in the above areas were highly adequate. On the other hand, it clearly tells us that 100% awareness is possible but not yet reached. This finding differs with those by Moynihan, et al., 2000:1645; Cassel, Hughes, Cole, et al., 2003:1133-1137; Schwartz and Woloshins, 2004:226-228, which found the media information inadequate for their audiences.

6.11.2. AUDIENCE MEDIA ACCESS, EXPOSURE AND CONTENT CONSUMPTION, AND SOURCES OF HIVIAIDS INFORMATION IN LIMPOPO PROVINCE

Audience Access and Exposure to the Media

The high percentage audience and consistent access to the media (television 100%), radio (93%) and newspaper (83%) contents at their respective homes in South Africa, paints a picture of an enlightened society in love with media information and entertainment, especially as it relates to health and wellbeing. Interestingly, this regular access was recorded through the weekdays as well as weekends, suggesting that media houses could release their news stories on HIV and AIDS all the days of the week, knowing it will reach their target audience. This may have contributed to the success of the media in educating the South African public about the pandemic. Moreover, the 100% access to television and its content, more than radio and newspaper, suggest South Africans are particularly television lovers. This finding is consistent with the report by Statistics SA (2013:35-82). Furthermore, the high audience access to the media (television, radio and newspaper) in South Africa also indicates high penetration of the media into South African society. This is a positive development for HIV and AIDS (and other health) communication efforts in the country because the success of any communication effort such as HIV and AIDS prevention and management information communication or campaign strongly hinges on such information reaching their target or intended audience. This finding supports the view of a great majority of the respondents (74%)

that believed the media have positively influenced their attitude towards the pandemic as well as their lifestyle (e.g. abstaining from casual and unsafe sex. Therefore, this study finds that the media influenced the respondent's lifestyle and attitude towards HIV and AIDS. However, some studies revealed that despite high audience access and consumption of media HIV and AIDS campaigns and contents, the attitude and behaviour of the people generally remained unchanged with consistent high-risk behaviour (Matsoso-Makhate and Wangenge-Ouma, 2009:76; Nupen and Wangenge-Ouma, 2009:87; Simbayi, Kalichman, Jooste et al., 2005).

There is, however, low penetration of internet at family and home level with only 39% respondents having internet access at home. Nonetheless, this medium is• developing and expanding consistently particularly among the youth as it is becoming increasingly accessible through the cell phone technology. The lower DSTV 61 (51%) and MNET 13 (11%) audience exposure and consumption may be due to cost implication monthly subscription costs) involved in accessing the services of the digital television station.

The high percentage access to the media also correlates with high percentage of media content consumption by the participants, suggesting high media content consumption by the public. But, access to, and consumption of media contents may not necessarily determine the extent of their influence on the media audience, and people's individual use of the media differ, including educational, entertainment, and news information purposes. Generally, though, access to the media is a very important prerequisite for consumption of media contents and media influence on the individual. Moreover, consistent and frequent media exposure have been proven to induce positive attitudinal and behavioural modifications at individual and societal levels (Lawton, Rose, Mclead et al., 2003:845; Haas, Kaplan, Gerstenberger et al., 2004:184; Majumdar, Almasi and Stafford, 2004:1983; Van Rossem and Meekers, 2007:352). Even, brief news media exposure on health issues and conditions have equally been shown to influence people's health-related decisions (LI, Chapman, et al., 2008:543).

6.11.3 REGULAR SOURCES OF PUBLIC HIV AND AIDS INFORMATION IN LIMPOPO PROVINCE, SOUTH AFRICA

The study revealed mass media (television, radio and newspaper) as the main source of regular HIV and AIDS news information in South Africa, followed by health officers (Doctors and other health givers). In the result, above 75% and 69% of the participants obtain their HIV and AIDS information respectively from

mass media and health officers, suggesting that a large segment of the society depend on these sources for HIV and AIDS information. While the contribution of health officers as regular sources of information on HIV and AIDS may be due to the people's regular medical consultations with the medical professionals, and their involvements in national HIV and AIDS campaign efforts including prevention, testing and treatment, it seemed the mass media have succeeded in penetrating the South African society and has established itself as a significant role player on issues of national interest such as this. It also suggests the acceptance of the mass media by the general public as an authentic source of HIV and AIDS information, and hence the success of the mass media in the efforts against the pandemic. This finding is in line with that by Murdock (1998:206), but differs with that of De wet (2004:110) which finds the South African media focusing more on politics to the detriment of HIV and AIDS pandemic.

Furthermore, as earlier on indicated above, consumption of television programmes and contents on weekdays and weekends ranked the highest as a source HIV and AIDS information. This may be due to the advancement of its technology enabling production of high quality audio-video outputs that engage both the ears and the eyes, addition of more features to television, and enabling seamless integration with other media technologies. This suggests that in combining and using the media in the efforts against HIV and AIDS, television may be used more in HIV and AIDS information communication for improved outcome. This strategy equally applies to all other media health communication. Yet for more effectiveness, studies have shown that in addition to the application of the right communication media mix, the mass media HIV and AIDS educational efforts should be combined with entertainment (Zaire Population Services International, 2001:1; UNAIDS AIDSTAR-One, 2011:1; UNAIDS, 2004:8; UNAIDS, 2005:11).

6.11.4 TRUSTWORTHINESS OF THE SOURCES OF HIV AND AIDS INFORMATION

The extent of people's trust on sources of HIV and AIDS information and education correlates with their acceptance of such information and the influence it may have on them. It shows the extent such source and s can be effectively utilized in communicating HIV and AIDS news information to the people. The results indicate "Doctors and other health care givers" was the most trusted source of HIV and AIDS information and education to the public with 73% of respondents on the affirmative. This is expected since this aspect deals with knowledge and expertise in health issues such as HIV and AIDS. Collectively, the mass media were the second most reliable source of HIV and AIDS information and education, but with slight variations

at individual media genre level. Among the media, television was particularly mostly trusted by the public with 85 (71%). The radio came next with 64 (53%), and newspaper (45%).

6.11.5 PUBLIC PERCEPTIONS OF MEDIA COVERAGE OF HIV AND AIDS ETHICAL ISSUESS, AND ACCURACY OF COVERAGE

According to 87 (73%), the South African media are positively empowering the people through their coverage of the pandemic instead of making them live in denial and die. They are therefore giving human face to the pandemic. The study showed that the media, unlike the early stages of the pandemic, have greatly improved their coverage, and adequately factually informed and educated the public on all aspects of the pandemic including its mitigation and management. They have also been discouraging stigmatization and discrimination against people living with HIV and AIDS and sensationalizing and stereotyping the disease as disease of the poor, promiscuous, homosexuals, lesbians, and drug addicts. Indeed, the study revealed great improvement in the language use (i.e. no such phrases as "killer disease", "death sentence", disease of the immoral", "homosexual disease", ambiguous statements, among others), media knowledge" of the disease, and the quality of the coverage of the pandemic compared to its early period. These changes may have contributed greatly to the people being responsible enough to take informed decisions and actions concerning their health in particular, and life in general. This is an interesting development because the media seem to have jettisoned their initial pursuit of sensationalism and profit making and now consider the interests, feelings and needs of the people living with HIV and AIDS. Also the media may have realized the inherent danger in reporting insensitively on this pandemic by not considering how their reports impact on the infected and affected in particular, and the society at large. All the above findings collaborates the findings in the content analysis of the South African media coverage of HIV and AIDS.

The results also showed that overwhelming majority of the participants - 72% believed the South African media are helping to promote HIV and AIDS prevention as attested by 95% respondents, testing 97%, caregiving 92%, and condom use 94% as strategies for prevention of HIV and AIDS new infections, and management of the disease. They are also promoting HIV and AIDS free generation in South Africa, as agreed by 91% of the respondents. The above results indicate that the media efforts in contributing to mitigating, controlling and possible eradication of HIV and AIDS in South Africa is quite recognized and appreciated by the general public. These findings however differ from those by Swanepoel, Fourie, and

Froneman (2007:74) and Ngan (2007:53) which found the South African mass media sensational and alarmist in their coverage of the pandemic and its related issues.

6.11.6 HIV AND AIDS RELATED PROBLEMS IN LIMPOPO PROVINCE, SOUTH AFRICA

In the area of HIV and AIDS related problems in the society, the study showed that many of the various catalysts or drivers of HIV and AIDS pandemic still exist in South Africa, though at different proportions. All the results showed positive improvement in the overall situation from what it has been previously in all the areas of HIV and AIDS related concern studied. However, despite the availability of free and accessible HIV and AIDS testing, counselling and treatment in the country, there is still fear of discrimination against people living with HIV and AIDS in South Africa as indicated by the 51% respondents in support of this view. However, the extent of the discrimination tends to have been far less than before as can be attested by 49% who said it is no longer a problem in the country.

Additionally, alcoholism and drugs, sexually transmitted diseases (STD) and multiple sexual partnerships, rape (in and within marriage) are still HIV and AIDS related problems in the society according to 62%, 63%, 79% and 65% respectively of the respondents. These factors have been previously identified as drivers of HIV and AIDS pandemic in South Africa and are still the case as found in this study. The implication of this is that there will continue to be new HIV and AIDS infections due to alcohol and drug induced reckless lifestyle which has also been linked to teenage pregnancy in this study. Though the low percentage that affirmed the opposite suggest that little progress has been made in changing sexual attitudinal and behavioural patterns necessary to reduce the pandemic. This finding correlates with that in the media content analysis that found, alcoholism, 'reckless lifestyle' as the major channel and route of HIV and AIDS infection in South Africa.

Interestingly, the study linked poverty as one of the drivers of HIV and AIDS pandemic in the society with about 67% of the respondents. People may be involved in risky sexual behaviour in the course of trying to meet their daily economic and social needs. Therefore the need for the government programme aimed at poverty alleviation is critical to compliment media drive against the pandemic. However, minority of the people in the society (33%) may have been affected positively by media campaign against the disease and did not see poverty as a factor in the spread of the disease. It all point to the fact that, though the media have made good progress in their efforts against HIV and AIDS, they must step up their campaign against

the pandemic and try to explore the link between the people's socio-cultural behaviour and the HIV and AIDS. This is because this study seems to indicate a strong link between this and people's attitudinal change as also supported by the findings in the content analysis. The reports by Dibua, (2009), and Archie-Booker, Cervero and Langone (1999) collaborate this finding, and Cohen, (2002) finds that cultural aspects (besides socioeconomic circumstances) presents serious constraints in the efforts against HIV and AIDS. However, study has shown that the generation of efficient culturally sensitive programmes and contents depends not only on understanding the community, but also on how the organization (e.g. the media) offering the interventions operate (Baxen and Breidlid 2009:11).

Contrary to the above, and in the early stage of the pandemic, difficulty accessing HIV and AIDS testing and counselling is no longer an HIV and AIDS related problem of concern in the country according to 68% respectively of the respondents, due to the available and easily accessible Government testing and counselling and treatment programmes. This development implies that people will be aware of their status early enough to be able to manage it well, and those who need treatment can proceed to enrol themselves in the Government's expanded treatment programme. The benefit at individual level will also include reduction in HIV and AIDS related deaths, and funeral costs, and attaining longer life and higher productivity. But, 32% that viewed HIV and AIDS testing as a problem in their localities may be because most of the testing and counselling services are concentrated in the urban and peri-urban localities. The service should therefore be extended to the rural areas and this will enable the people to access it easily. Though, Government and NGOs are working together in this regards, there is still need for improvement.

6.11.7 SOUTH AFRICAN (LIMPOPO PROVINCE) PUBLIC ATTITUDE TO MEDIA HIV AND AIDS INFORMATION COMMUNICATION

Concerning the South African (Limpopo Province) public attitude to media HIV and AIDS information communication, a slight majority of the respondents - 56% are convinced that the HIV and AIDS information they received from the media is enough to affect their attitude to HIV and AIDS positively, but 38% said the HIV and AIDS information they received from the media is not enough to affect their attitude to HIV and AIDS positively. The slight difference between the two groups indicates that though the media is making reasonable effort in their coverage of HIV and AIDS, there is still need for them to intensify their coverage of the pandemic, instead of reducing their news focus on the disease. In doing this, they also work towards positively transforming people's attitude towards the pandemic. Again, this may suggest a need for the

media to increase their output on HIV and AIDS in such areas as transmission, treatment, prevention and consequences of the disease, while bearing in mind the teens and youth in the society. However, the study further revealed that media programmes (radio and TV programmes, and newspaper contents) positively changed their attitude in such a way that good percentage (73%) of the respondents visited a doctor or other health care providers, talked to youth and adults about HIV and AIDS, sex, or other difficult issues - (86%); talked to siblings and or friends about HIV and AIDS - (89%); talked to a partner about safer sex, birth control, or sexual transmitted diseases- (91%); have taken HIV and AIDS test- (81%); looked for more information on HIV and AIDS (e.g. called help line, etc.) - (63%); gone for HIV and AIDS counselling - (73%); has only one sexual partner and avoid multiple partners - (87%); and (83%) use condom, while 43% practice total abstinence. While this may be a reflection of the events in the society regarding HIV and AIDS following the efforts of the media, it clearly indicates the need for more and concerted effort by all stakeholders to reach the segment of the society that is yet to be affected by media programmes and contents. This can be seen in the suggestions for improvement from the participants in the study (summarized below).

6.11.8 AUDIENCE SUGGESTIONS FOR IMPROVED MEDIA COVERAGE OF HIV AND AIDS AND RELATED ISSUES, AND ACHIEVING POSITIVE PUBLIC ATTITUDINAL CHANGE TOWARDS HIV AND AIDS

In the analysis, there were a number of suggestions to improve media information communication on HIV and AIDS and related issues, and also help achieve maximal attitudinal change concerning the disease. All the suggestions •are critical to HIV and AIDS prevention, management and consequent eradication. The percentage distributions were as follows:

- 1. Free and easy access to HIV and AIDS information is necessary (90.8%),
- 2. There should be more HIV and AIDS content on television radio, and newspaper (94.2%),
- 3. HIV and AIDS messages about fear and death turn people off (72.5%),
- 4. Television, radio, and newspaper news and features should give straight-forward information about different aspects of HIV (98.3%),
- 5. HIV and AIDS messaging on TV and radio, and in the newspaper contents need to offer hope for an end to the pandemic (90%),
- 6. HIV and AIDS communication contents that tap into people's aspirations can be effective in the

efforts against the disease (90%),

7. HIV and AIDS messaging need to better address the social and cultural influence on people's lives (94%).

Furthermore, the qualitative audience responses on the suggestions to improving the media coverage of the pandemic bordered on the media introducing more programmes and providing information updates on HIV and AIDS; informing and encouraging the South African youth to go for counselling and testing; more and consistent information on prevention, treatment and care on HIV and AIDS are needed in the media, media to do more programmes targeting the youth; training of journalist on HIV and AIDS reporting to enable them understand the importance of having good knowledge about the disease and to appropriately inform the community of the pandemic; the media communicating HIV and AIDS in appropriate and local language needed; the media being creative in reporting HIV and AIDS, and should use experience reporters; the media researching their HIV and AIDS reports thoroughly before communicating it to the public; and they having in-house HIV and AIDS policy and be conscious of their social responsibility.

Moreover, according to two of the respondents, 'all forms of media should talk about HIV and AIDS on a daily basis, children should be taught about HIV and AIDS at school", and "during school holidays, the media must improve their TV and radio programmes and inform the youth of this country about HIV and AIDS because most people who are infected are youth rather than adults". In addition, a parent suggested that "we should join the media in this campaign. Let's talk to our children about the dangerousness of this disease".

CHAPTER SEVEN: CONCLUSIONS AND RECOMMENDATIONS

7.1 CONCLUSIONS

The results of the descriptive statistics (percentage analysis) were in harmony with those of the analysis of ANOVA, indicating good positive correlation between both analytical methods and hence applicability of either method in content analysis of media news stories. Additionally, some of the results of the descriptive statistics (percentage analysis) for public perception and attitude to South African media coverage of the pandemic correlate with those of the content analysis.

The South African media communicated good quality HIV and AIDS news stories in the period studied. HIV and AIDS news reports were mainly reported by the media in straight news format without adequate mixture of the various news types (for examples, news analysis and feature news) that would have further increased the media success in reducing the spread of the pandemic by increasing public awareness and knowledge of the disease. However, the media were able to adequately communicate the necessary HIV and AIDS news information and education through the straight news format as shown by high HIV and AIDS knowledge in the public perception study. The results indicated increased ability of the media to handle HIV and AIDS news reporting due to very few number of stigmatizing and stereotyping HIV and AIDS news stories; a drastic improvement from their earlier style of news coverage of the pandemic (see literature review).

Technically, the South African media communicated competent HIV and AIDS news stories with good combination of journalistic skills and creativity. The media also demonstrated objectivity in their HIV and AIDS news reporting. Such HIV and AIDS news stories were capable of improving the awareness, educational and knowledge levels of South Africans on this pandemic, and possibly encourage them to take personal health related decisions and actions based on informed background. The media displayed ability to flexibly adapt to styles that will enhance their objective role in the society, and can empower the society to make informed decisions about their lives.

Furthermore, South African media HIV and AIDS news story contained adequate factual and objective news information on different aspects of the pandemic which explain the high level of HIV and AIDS knowledge presently recorded in the country. These suggest that the media generally and reasonably researched on the HIV and AIDS news stories delivered to the public during this period studied. Though the South African media sourced most of their HIV and AIDS news stories in the year externally rather than inhouse (from their journalists and columnists), the quality of their HIV and AIDS news reports were improved through further research, investigation and editing processes. This helped to eliminate to some extent the possibility of compromising the interest of their audience.

The HIV and AIDS news carried by the media concentrated mainly on issues of prevention, testing, and treatment which mirrored the Government HIV, treatment and care (HTC) campaign. This alignment of the media HIV and AIDS news stories with Government HIV campaign programmes contributed to great success recorded against the spread of this pandemic.

The study showed, as well, a careful use of language in the HIV and AIDS news stories communicated during the period. The HIV and AIDS stories were very constructive, informative and professionally and appropriately framed for the understanding of their audience. Good knowledge and use of relevant and appropriate words in HIV and AIDS reporting (and in health communication generally) as well as the use of good (positive) tone in such reports, eliminated the possibility of the public misinterpreting media HIV and AIDS news stories. The result also demonstrated that the media reports on the disease did not concentrate on blame attribution as was formerly the case, and were focused mainly on such issue as prevention, testing and treatment. However, very low blame attribution in HIV and AIDS infection was recorded against "reckless life style" and "blame on husband". This finding highlights two major routes of HIV and AIDS infection in South Africa and all stakeholders should endeavour to keep addressing these issues and work towards achieving the needed behavioural changes in the society.

It is interesting that the media greatly restricted themselves within their geographical location on issues of HIV and AIDS pandemic in their reports. This fact enabled the media reports to address issues of HIV and AIDS pertinent to South Africa society. The inclusion of few foreign news, seem to have enhanced the flavour of HIV and AIDS news reports. Additionally, the media commonly treated the pandemic as developmental issue, and as a health issue but never trivialized the disease as mere social of religious issues.

Though the pandemic was and continue to be relevant news item to the South African media, the media interest is similarly attracted by other equally societal important news items of national and international interest. Hence, the media did not give special prominence to HIV and AIDS news stories in terms of distinctive placement on important newspaper pages, editorial page allocation and news space. Thus high percentage of HIV and AIDS news stories appeared on "Other page numbers", (not too important pages). This translated to weakness in media coverage of the pandemic in this period. However, HIV and AIDS stories considered important were appropriately placed on important newspaper pages. Overall, there was good page allocation management which balanced the interest of the media without compromising their role of delivering quality HIV and AIDS information to the society

In terms of quantity of HIV and AIDS news coverage, there was low media coverage of the news on the pandemic, indicating inadequate coverage of the pandemic in the period studied. However, the media coverage of the disease increased from the 1st to the 4th quarters within the year studied. The quantity of news item covered by the media is influenced by media interest amongst other competing factors.

Public Perception and Attitude to South African Media Coverage of HIV and AIDS

The media (TV, radio and newspaper) were the main source of regular HIV and AIDS news information in Limpopo Province, South Africa, followed by health officers. Therefore, a large segment of the people depends on the media for their HIV and AIDS information and updates. The media have succeeded in penetrating the South African society and have established itself as a significant role player on issues of national interest such as HIV and AIDS pandemic. The public seems to have accepted and trusted the media as an authentic source of HIV and AIDS information, hence the media success in the educational and awareness efforts against HIV and AIDS.

Though, the general public has accepted the media as reliable source of information on HIV and AIDS issues, "Doctors and other health care givers' was the most trusted source of HIV and AIDS in South Africa, with the media collectively taking second position. Amongst the media, television was the most trusted source of HIV and AIDS information, followed by radio and then, newspaper. It demonstrates that these are effective instruments in the efforts against HIV and AIDS. Succinctly put, although the media are heavily relied upon by the public for HIV and AIDS information and preferred by most as a source of HIV and AIDS information, media are not held as the most trustworthy source of HIV and AIDS information by the public.

There is high knowledge level of HIV and AIDS among the people of Limpopo Province, South Africa, but some knowledge gap still exist among few segments of the society. The media are therefore expected to intensify their coverage of this pandemic, touching on all HIV and AIDS related issues and aspects. Moreover, the people are very much interested in increasing and updating their knowledge of HIV and AIDS through the media. This aspect of the study indicates that the media adequately covered the HIV and AIDS issues confronting the people in the Limpopo Province, though more sustained coverage is needed to create continual exposure and information update necessary for eventual possible total eradication.

The public of Limpopo Province, South Africa, love media information and entertainment and there is high media penetration in the Province, with high exposure and access to media contents, and no differences in weekdays and weekends. Television is exceptionally loved by public among the media. Therefore, there is greater possibility of the media HIV and AIDS information reaching their target members of the public, and this may have contributed to the high HIV and AIDS knowledge in the Province and country.

The high access to the media correlates with high media content consumption and therefore suggests high media influence on the people. Thus, the media positively influenced the people's attitude and behaviour towards the disease, as well as their lifestyle

The audience perception study indicates that the media have greatly improved the quality of their HIV and AIDS coverage by adequately informing and educating the public on all aspects of the disease including its mitigation and management. Through their information communication, the media are helping to discourage stigma and discrimination against people living with HIV and AIDS, and stereotyping the disease as disease of the poor and immoral. In addition, there is great improvement in their language use in HIV and AIDS communication as can be seen in their no longer use of discriminatory and ambiguous words in reporting the pandemic.

The media are helping through their coverage to promote HIV and AIDS prevention, testing, counselling, and treatment, caregiving, HIV and AIDS free generation and other related issues in Limpopo Province, South Africa, and their efforts are quite recognized by the general public.

However, the various catalyst or drivers of HIV and AIDS pandemic such as fear of discrimination against HIV and AIDS positive individuals, poverty, alcoholism and drugs, STIs, multiple sexual partnership, rape, and reckless lifestyle – remain a challenge, though, at a lesser magnitude than previously.

Moreover, the results indicate that there is a strong link between the social and cultural behavior of the people and attitudinal change, and the media (together with the Government and other stakeholders) must address them thoroughly for tangible positive effects to be recorded in such areas at both the individual and societal levels.

Most of the early HIV and AIDS related problems such as accessing HIV and AIDS testing, counselling, and treatment are no longer serious concerns in Limpopo Province, South Africa, due to the easily accessible Government's HIV and AIDS Prevention, Treatment, Counselling and Care programme. Government and their NGO partners are extending these services to rural areas but there is need for improvement, particularly, the frequency of the visit, and availability of the teams in those localities that don't yet have easy access to medical clinics or hospitals.

In terms of their severity, overall, the result indicate that multiple sexual partnership ranked the highest HIV and AIDS problem of concern in the society, followed by poverty, rape, STDs, alcohol and drugs, and unplanned teenage pregnancy.

7.2 POLICY IMPLICATIONS FOR THE STUDY

- For the Media

Based on the findings of this study, the media organizations will be assisted to understand or reminded of their strength and weaknesses, and see the need to incorporate HIV and AIDS reporting in their in-house policies to enable them to be more responsive to HIV and AIDS,

Regular training on HIV and AIDS reporting should be encouraged and included in all the media house policy documents. The media should understand that HIV and AIDS news reporting is a specialized area and that they require the specialized training to be able to achieve their professional functions and

objectives. There is need to expose all levels of their reporters as well as their editors to the modalities of HIV and AIDS reporting through training.

The seriousness of the pandemic calls for the media to ignore the assumed audience influence on media news selection against HIV and AIDS but rather regularly find new angles to HIV and AIDS coverage. Self-motivation by the media is encouraged in HIV and AIDS coverage.

All the stake holder, particularly the media practitioners, should understand that HIV and AIDS affects every one directly or indirectly and that there is no immunity from contracting HIV and AIDS. Therefore, the need for increased reportage is underscored.

- For the Government

The findings of the study will enable the Government to get a clearer picture of the present situation and therefore, endeavour to find more ways to continue partnering with the media in the efforts against HIV and AIDS.

Though there is Government policy document on HIV and AIDS, the findings of the study will assist the Government to review the content of the policy document relating to the media in the light of the current findings.

7.3 RECOMMENDATIONS

- Although, available and free ARV treatment has drastically contributed to controlling the pandemic, new infections keep occurring among the people. Therefore, the media should not relax in their coverage of the pandemic in the country because of the consequences of such development, including the possibility of the disease going underground. People should always be reminded of the existence of the pandemic in our society. It is indeed still a pandemic.
- All efforts to find the cure or vaccine for HIV and AIDS should be intensified by the various Government, research institutions, and donor agencies. This is the only sustainable and effective measure against the pandemic.
- The South African media should constantly find a better and creative way of presenting HIV and AIDS news stories to the public in other to keep it interesting to them. They should find news angles to the news stories.
- The media should ensure that they are not contributing to silencing the voice of the People Living with HIV and AIDS (PLHIV) in their coverage of the pandemic by preferring to report HIV and AIDS new stories that are not related to them. The media should endeavour to keep their trust, and constantly encourage them to be open with their status. This will contribute positively to HIV and AIDS education and campaign success. Journalists and their editors should see the necessity for amplification of the voices of those infected and affected by the disease.
- HIV and AIDS is still a pandemic disease in South Africa. The media consumers and society at large still need, and are eager to regularly update their knowledge of the pandemic with new developments regarding the disease. The South African media should always research their HIV and AIDS news to enrich the stories with factual and accurate updates and keep the interest of media consumers on the pandemic.
- The Government's HIV and AIDS counselling and testing services should be extended (and on regular basis) to rural areas and this will enable the people to access it easily.

- The family institution should be strengthened and should wake up to its responsibilities and duties in the upbringing and greater moral training of the society members, particularly the children, teens and youth.
- The media should not just be the channel for the transmission of HIV and AIDS findings and developments to the public, but practitioners, particularly editors and all levels of journalists should be given adequate, specialized and formal training on reporting the pandemic. Specialized training will equip media practitioners with the skill of interpreting scientific researches.

Finally, the major blames for HIV and AIDS infection in South Africa identified in this study were "Reckless lifestyle" and "Blame on husband". These have remained the fastest route to contracting the disease. Therefore, all stakeholders in the efforts against HIV and AIDS in South Africa should endeavour to keep addressing these issues and work towards achieving the needed behavioural changes in the society. This can decrease the HIV and AIDS new infection (incidence rate) to near zero in a short period of time. This will help ease the increasing pressure on South Africa's expanded access to HIV and AIDS treatment programme and will release the needed funds for the development of other sectors of the country's economy.

Recommendations for Further Studies

- Further study on national and commercial broadcast stations (radio and television) coverage of this
 pandemic should be done to ascertain their contributions to HIV and AIDS mitigation efforts in the
 country.
- Further study should also be carried out on the training and knowledge level of practicing media professionals and journalists on HIV and AIDS or health reporting. This will help reveal any training need they may have and appropriately endeavour and meet such needs.
- This type of study should be done using community media (newspapers and radio stations) since the media used in this study were mainly national media. This will help to obtain the understanding of all that is happening at the grassroot or community level about the pandemic. This is important because of the position community media occupy, and the role they are playing in South Africa.

7.4 REFERENCES

- Abhijit, B. 2012. Science communication through mass media. *Research Journal of Recent Sciences*, 1(1):10-15.
- Abrom, L. C. & Maibach, E. W. 2008. The effectiveness of mass communication to change public behaviour. *Annual Review Public Health*, 29:219-234.
- Acemoglu, D. & Simon. J. 2007. Disease and development: The effect of life expectancy on economic growth. *Journal of Political Economy 115:925–85.*
- Actuarial Society of South Africa. 2005. *ASSA 2003 AIDS and Demographic Model.* Cape Town: Actuarial Society of South Africa.
- Adams, J., Claassens, M., Dikweni L. & Streak, J. 2001. Responding to the HIV and AIDS pandemic in the Department of Social Development. A social development paper Funding the fight against HIV and AIDS. Budget Information Service. Institute for a Democratic Alternative for South Africa (Idasa), South Africa.
- Addison, G. 1993. The watchdog role of development journalists. Unpublished paper read to a media workshop at the Department of Journalism and Media Studies, Rhodes University, Grahamstown.
- Advisory Council on AIDS (ACA) 2001. Setting the agenda of promoting acceptance of people living with HIV and AIDS in Hong Kong A Strategy Paper. 35th ACA Meeting. Hong Kong, SAR.
- African Development Bank, OECD Development Centre, United Nations Development Programme and United Nations Economic Commission for Africa 2011. 2011 African Economic Outlook Africa, and its Emerging Partners Tunis: African Development Bank (AfDB).
- Agha, S. 2003. The impact of a mass media campaign on personal risk perception, perceived self-efficacy and on other behavioural predictors. *AIDS Care*,15(6):749-762.
- AIDS Foundation South Africa. 2014. HIV/AIDS in South Africa. AIDS Foundation of SA, Durban. Available at: www.aids.org.za/hivaids-in-south-africa/, Accessed on April 23, 2014.
- AIDS Media Centre 2005. What media can do. (Accessed on November 12, 2011). Available at: htp://www.aidsmedia.org/content-library-detail-1233/
- Ajibola, O. A. 2009. The Ethics of Reporting on HIV and AIDS in Three Major South African Newspapers. Unpublished Masters dissertation, University of the Free State, Bloemfontein, South Africa.
- Albert, E. 1986. Illness and deviance: the response of the press to AIDS. In D. Feldmans & T. Johnson. (Eds.). *The Social Dimension of AIDS*, pp. 163-178. New York: Praeger.
- Ali, A., Jones, G. J., Klopp, J. & Nabi, R. 2006. Building an ethical public life: Case studies in transformational leadership. World ethics forum. Conference Paper. Keble College, University of Oxford, UK.

- Altman, D. 1986. AIDS in the Mind of America. Garden City, NY: Doubleday.
- Alwyn, Y. 2007. In sorrow to bring forth children: Fertility amidst the plague of HIV. *Journal of Economic Growth 12:283–327*
- Andsager, J. & Smiley, L. 1998. Evaluating the public information: Shaping news coverage of the silicone implant controversy. *Public Relations Review*, 24(2):183-201.
- APS. 2013. Media representations and responsibilities: Australian Psychological Society (APS). Melbourne, Australia. Social Issues Working Group Paper. pp. 1
- Archie-Booker, D. E., Cervero, R. M. & Langone, C. A. 1999. The politics of planning culturally relevant AIDS prevention education for African-American Women. *Adult Education Quarterly*, *49*, *4:163-175*.
- Ardington, C., and M. Leibbrandt. 2010. "Orphanhood and Schooling in South Africa: Trends in the Vulnerability of Orphans between 1993 and 2005." Economic Development and Cultural Change 58(3): 507–36.
- Arimah, B. C. 2004. Poverty reduction and human development in Africa. *Journal of Human Development,* 5: 399-415.
- Ashraf, Q. H., Lester, A. &. Weil, D. N. 2009. When does improving health raise GDP? pp. 157–204. In Daron Acemoglu, Kenneth Rogoff and Michael Woodford (Eds.). Chicago, USA: University of Chicago Press.
- AVERT 2011. HIV and AIDS in South Africa. West Sussex, UK: AVERT.
- AVERT. 2009. HIV and AIDS in Africa. Available at: http://www.avert.org/hiv-and-aids-africa.htm. (Accessed July 2010).
- Babalola, S., Quedraogo, D. & Vondrasek, C. 2006. Motivation for late sexual debut in Cote d'Ivoire and Burkina Faso: A positive deviance inquiry. *Journal of HIV and AIDS Prevention in Children and Youth*, 7(2):65-87.
- Babbie, E., Mouton. J., Voster, P. & Prozesky, B. 2010. *The Practice of Social Research*. Cape Town, South Africa: Oxford University Press. Bandur, L. 2005. The primacy of self-regulation in health promotion. *Applied Psychology*, *54*(2):245-254.
- Baker, A. 1986. The portrayal of AIDS in the media: An analysis of articles in New York Times. In L. Walters, L. Williams & T. Johnson (Eds.). *Bad Tidings: Communication and Catastrophe*, pp. 179-194. Hillsdale, NJ: Lawrence Erlbaum Associates.
- Bandur, L. 2005. The primacy of self-regulation in health promotion. *Applied Psychology*, 54(2):245-254.
- Bandura, A. 2001. Social cognitive theory of mass communication. *Media Psychology*, 3(3): 265-299.

- Bandura, A. 1986. *Social Foundations of Thoughts and Actions: A Social Cognitive Theory.* Eaglewood Cliffs, NJ: Prentice Hall.
- Banister, J., Bloom, D. E & Rosenberg, L. 2010. Population aging and economic growth in China. programme on the global demography of aging. Working Paper Series. No. 53. pp. 9 and 33
- Baxen, J. & Breidlid, A. 2009. Researching HIV and AIDS and Education in Sub-Saharan Africa: Examining the Gaps and Challenges. In J. Baxen & A. Breidlid (Eds.). *HIV and AIDS in Sub-Saharan Africa: Understanding the Implications of Culture and Context*, pp. 3, 11, 15. Cape Town: UCT Press.
- Baxen J. 2009. What question? HIV and AIDS education research: Beyond more of the same to asking different epistemological questions. In J. Baxen & A. Breidlid (Eds.). *HIV and AIDS in Sub-Saharan Africa: Understanding the Implications of Culture and Context*, pp. 19. Cape Town: UCT Press.
- Bell, C., Devarajan, S. & Gersbach, H. 2003. The Long-run economic costs of AIDS: Theory and an application to South Africa. Washington, DC, The World Bank, Working Paper.
- Beetham, D., Byrne, I., Ngan, P. & Weir, S. 2002. *Democracy Under Blair: A Democratic Audit of the United Kingdom*, (2nd ed.). London: Politico's and Democratic Audit.
- Bertrand, J. T. & Anhang, R. 2006. The effectiveness of mass media in changing hiv and aids-related behaviour among young people in developing countries. In D. Ross, B. Dick & J. Ferguson (Eds.). *Preventing HIV and AIDS in Young People: A Systematic Review of the Evidence from Developing Countries, World Health Organisation Technical Report Series 938*, pp. 205-242. Geneva, Switzerland: World Health Organisation.
- Bertrand, J.T., O'Reilly, K., Denison, J., Anhang, R. & Sweat, M. 2006. Systematic review of the effectiveness of mass communication programmes to change HIV and AIDS-related behaviours in developing countries. *Health Education Research*, 21(4):567-597.
- Bless, C. & Higson-South, C. 1995. Fundamentals of Social Research Methods: An African Perspective, 2nd ed. Cape Town: Juta.
- Bloom, D. E. & Canning, D. 2005. Health and economic growth: Reconciling the micro and macro evidence. Freeman Spogli Institute for International Economics. Working Paper Series.
- Bloom, D. E., Canning, D. & Fink, G. 2011. Implications for population aging for economic growth. Programme on the Global Demography of Aging, Working Paper Series. No. 64. pp.27.
- Booysen, Fredrick le Roux. 2003. Poverty Dynamics and HIV and AIDS Related Morbidity and Mortality in South Africa, Paper presented at an *International Conference on Empirical Evidence for the Demographic and Socio-Economic Impact of AIDS*, Health Economics and HIV and AIDS Research Division, University of KwaZulu-Natal, South Africa, March 26-28.
- Booysen, Fredrick le Roux. 2004. Income and poverty dynamics in HIV and AIDS-affected households in the Free State Province of South Africa. *The South African Journal of Economics*, 72:522-545.

- Bor, J., Herbst, A.J., Newll, M-L. and Barnighausen, T. 2013. Increase in adult life expectancy in rural South Africa: valuing the scale-up of HIV treatment. *Science*, *339:961-965*.
- Brand South Africa. 2014. Health care in South Africa. Accessed on April 15, 2014. Available at: www.southafrica.info/about/health/.htn#.UOVXJV14j5M.
- Breidlid, A. 2009. HIV and AIDS, Cultural Constraints and Educational Intervention Strategies. in HIV and AIDS in Sub-Saharan Africa: Understanding the Implications of Culture and Context. In J. Baxen & A. Breidlid (Eds.). *HIV and AIDS in Sub-Saharan Africa: Understanding the Implications of Culture and Context*, pp. 21. Cape Town: UCT Press.
- Brink, H. I. 2006. Fundamentals of Research Methodology for Health Care Professionals. (2nd ed.). Cape Town: Juta.
- Brodie, M., Hamel, E., Brady, L. A., Kates, J. & Altman, D. E. 2004. AIDS at 21: Media coverage of the HIV epidemic 1981-2002', *Columbia Journalism Review (supplement)*, March and April, 2004, 1-8
- Brown, J., Chapman, S. & Lupton, D. 1996. Infinitesimal risk as public health crisis: News media coverage of a Doctor-patient HIV contact tracing investigation. *Social Science and Medicine*, 43(12):1685-1695.
- Callaghan, K. & Schnell, F. 2001. Assessing the democratic debate: how the news media frame elite policy discourse. *Political Communication*, 18:183-212
- Callaghan, K. & Schnell, F. 2001. Assessing the democratic debate: How the news media frame elite policy discourse. *Political Communication*, 18:183-212.
- Carter, M. R., May, J., Agüero, J, & Ravindranath, S. 2007. "The Economic Impacts of Premature Adult Mortality: Panel Data Evidence from KwaZulu-Natal, South Africa." AIDS 21(Suppl. 7): S67–S73.
- Casale, M. 2005. The impact of HIV/AIDS on poverty, inequality and economic growth. HEARD. University of Kwazulu-Natal, South Africa.
- Casale, M., Chamka, D., Drimie, S., Gillespie, S., Kadiyala, S., Msoma, P. et al. 2007. Experiencing vulnerability in Southern Africa: The interaction of multiple stressors. Synthesis Paper Report. Durban: HEARD, University of Kwazulu-Natal and Washington DC RENEWAL Programme, and International Food and Policy Research Institute.
- Cassels, A., Hughes, M. A., Cole, C., Mintzes, B., Lexchin, J., & McCormack, J. P. 2003. Drugs in the news: An analysis of Canadian newspaper coverage of new prescription drugs. *Canadian Medical Association Journal*, 168: 1133-1137.
- Castro, A. & Farmer, P. 2005. Understanding and addressing AIDS-related stigma: from anthropological theory to clinical practice in Haiti. *American Journal of Public Health*, 95(1):53-59.

- Centres for Disease Control and Prevention. 2011. HIV and AIDS in the United States: 30 years of Leadership and Lessons. Atlanta, Georgia. The Centres for Disease Control and Prevention (CDC).
- Centres for Disease Control and Prevention. 2007. The Role of Information in HIV and AIDS Prevention, Atlanta, Georgia. The Centre for Disease Control and Prevention (CDC).
- Centers for Disease Control and Prevention (CDC), December 2013. Today's HIV/AIDS Epidemic. Washington, DC: Centres for Disease Control and Prevention (CDC).
- Centres for Disease Control and Prevention. June 5, 1981. Pneumocystis pneumonia, Los Angeles. *Morbidity and Mortality Weekly Report*, 30(21): 1-3.
- Chanda, M., Mchombu, K. & Nengomasha, C. 2008. The representative of HIV and AIDS in the media and its impact among young people in Namibia: A study of Windhoek and Katrima Mulilo. *Information Development*, 24: 188-203.
- Chant, S. H. 2007. Gender, Generation and Poverty: Exploring the 'Feminisation of Poverty' in Africa, Asia and Latin America. Cheltenham, UK: Edward Elgar Publishing.
- Chant, S. H 2003. Female household headship and the feminisation of poverty: facts, fictions and forward strategies. Available at http://eprints.lse.ac.uk/574/, (Accessed on April 23, 2014).
- Children's Project. 2008. Update on Child Support Grant Update. Cape Town, South Africa: University of Cape Town.
- Chin-Chuen, L., Chan, J., Pan, Z. & So, C. 2002. *Global Media Spectacle*. Buffalo: New York State University Press.
- Chirambo, K. 2008. The Political Cost of AIDS in Africa; Evidence from Six Countries. Pretoria, South Africa: Idasa.
- Chloe, J. 2007. Gone in Six Second: HIV and AIDS and Poverty in Sub-Sahara Africa. Department of Economics, Haverford College, Senior Thesis, May 4.
- Chopra, M., Daviaud, E., Pattinson, R., Fonn, S., & Lawn, J. 2009. Saving the lives of South Africa's mothers, babies and children: Can the health system deliver? *Lancet*, *374*: *835-46*.
- Ciesielski, C. A., Marianos, D.W., Schochetman, G., Witte, J. J. & Jaffe, H. W. 1994. The 1990 Florida dental investigation: The press and the science. *Annals of Internal Medicine.; 886-888.*
- Clark, J. & Everest, M. 2006. Cancer in the mass print media: Fear, uncertainty and the medical model. *Social Science and Medicine*. 62: 2591-2600.
- Clausen, L. 2004. Localizing the global 'domestication' processes in international news production. *New Media and Society, 26:25-44.*

- Cohen, D. 2002. HIV and education in Sub-Saharan Africa: Responding to the impact. *Perspective in education*, 20(2):13-23.
- Collinge, J. 2005. Confronting HIV and AIDS Through Mass Media and Community Action. In Ijumba P and Barron P (eds.). *South African Health Review*. Durban, South Africa: Health Systems Trust
- Collins, K. J., De Plooy, G. M., Grobbelaar, M. M., Puttergill, C. H., Terreblanche, M. J., Vaneeden, R., Van Rensgurg, G. H. & Wigton, D. J. 2000. *Study Guide. Research in the Social Sciences*, Pretoria: University of Southern Africa, Muckeneuk.
- Colvin, M. 2008. The Impact of AIDS The Health Care Burden. In Abdool Karim S. and Abdool Karim Q, (eds.). *HIV and AIDS in South Africa*. Cape Town, South Africa: Cambridge University Pres. pp. 338-350.
- Connelly, M & Macleod, C. 2003. Waging War: Discourses of HIV and AIDS in South African Media.

 Department of Psychology. East London, South Africa: University of Fort Hare and Rhodes University,
- Connelly, P. & Rosen, S. 2005. Will small and medium enterprises provide HIV/AIDS services to employees? An analysis of market demand. *South African Journal of Economics, Issue Supplement*, 73(1):613-626.
- Corrigan, P., Gerhard, G. & Mendez, F. 2005. AIDS crisis and growth. *Journal of Development Economics*, 77(1):107-124.
- Coulson, N. 2002. Development in the Use of the Mass Media at the National Level for HIV and AIDS Prevention in South Africa. British Columbia, Canada: Communication Initiative Network.
- Crewe, M. 2002. Reflection on South African HIV and AIDS epidemic. *Society in Transition*, 33(3):446-454.
- Cullen, T. 2000. Repeating Mistakes: Press Coverage of HIV and AIDS in Papua New Guinea and the South Pacific. PhD Thesis. St Lucia: University of Queensland.
- Cullen, T. 2005. Press coverage of HIV in PNG: Is it sufficient to report only the news? *Australian Studies in Journalism*, 15,133-150.
- Cullen, T. 2007. 25 Years of Reporting HIV: What Can Pacific Journalists Learn? A Peer-reviewed paper Presented at the JEANZ Conference in Wellington, New Zealand, December 11.
- Cullen, T. 2008. HIV Survey and Communication Theories: What Journalists and Journalism Educators in Asia and the Pacific need to Know. A peer-reviewed paper presented at the 17th AMIC International Conference, Manila, Philippines, July 15.
- Cullinan, K. 2004. Behaving 'Better'? The Media, HIV and AIDS and Stigma. Speaker's notes for the Study of AIDS Forum, 2004. Health-e News Service.
- Cullinan, K. 2001. The media and HIV and AIDS: A blessing and a curse. AIDS Bulletin, 10(2):35-39.

- Davidson, R., Hunt, K., Kitzinger, J. 2003. Radical blueprint or social change? Media representations of new labour policies on public health. *Sociology of Health and Illness*, 25:532–552.
- Day, A. D. 2003. Ethics in Media Communications: Cases and Controversies. Canada: Webcom Ltd.
- Deaton, A. 2003. Health, inequality, and economic development. Journal of Economic Literature, XLI:113-158.
- De Vos, A.S., Strydom, H., Fouche, C.B, & Delport, C. S. L. 2003. Research at Grass Roots: For the Social Sciences and Human Service Professions, (2nd Ed.). Pretoria, South Africa: Van Schaik.
- De Vos, M. C. & Baim-Lance, A. 2002. Addressing HIV and AIDS. In Human Science Research Council (HSRC) *Public Attitudes in Contemporary South Africa: Insights from an HSRC Survey.* Pretoria, South Africa. HSRC Press.
- De Wet, G. 2004. Agenda setting and HIV and AIDS news sources, implications for journalism education: An exploratory study. *Ecquid Novi*, 25(1):94-114.
- Dean, R. H. 2004. Retrospective Studies and Chart Reviews. *Respiratory Care*, 49(10):1171–1174.
- Dearing, J. W. & Rogers, E. M. 1996. Communication Concepts, 6: Agenda Setting. Thausand Oaks, California:Sage.
- Delport C. S. L. 2003. Quantitative Data Collection Methods. In De Vos A.S, Strydom H, Fouche C.B & Delport C. S. L. (eds.). *Research at the Grass Roots for the Social Sciences and Human Service Professions* (2nd Ed.). Pretoria, South Africa: Van Schaik.
- Department of Health and Social Development, South Africa. 2006. National HIV and Syphilis Antenatal Prevalence Survey, South Africa, 2005. Pretoria, Department of Health South Africa. In Pembrey, G. 2008. HIV & AIDS in South Africa. Sussex, UK: AVERT.
- Department of Social Development (DSD). 2010. Strategic Plan 2010 2015. Pretoria, South Africa. Department of Social Development, DSD.
- Department of Social Development (DSD, 2013). Comprehensive HIV and AIDS, TB and STI strategy 2013 2016. Pretoria: DSD.
- Dibua, U. E. 2009. Socio-Economic And socio-cultural predisposing risk factors to HIV and AIDS: Case study of some locations in Eastern Nigeria. *The Internet Journal of Tropical Medicine, 6 Number 2.*
- Dickinson, D. 2004. Corporate South Africa's response to HIV/AIDS: Why so slow? *Journal of Southern African Studies*, *30*(3):627-650.
- Drimie, S. & Casale, M. 2009. Multiple stressors in Southern Africa: The link between HIV/AIDS, food security, poverty and children's vulnerability now and in the future. *AIDS Care, Supplement 1, Special Issue. 21(51):28-33.*

- Duncan, C. 2009. HIV in the Print Media: A Comparative and Retrospective print media monitoring analysis. HIV/AIDS and the Media Project. Anova Health Institute and Media Monitoring Africa.
- Dunu, I. 2013. Good governance in Nigeria: What role for the media? *European Scientific Journal*, 19(32):1857-7881.
- Du Plooy, G. M. 2007. Communication Research Techniques, Methods and Application. Lansdowne: Juta.
- Egbochukwu, S. 2002. The Power of the Media in the Society. The BusinessDay Newspapers. Lagos, Nigeria. (August 14).
- Entman, R. 1993. Framing: towards clarification of a fractured paradigm. *Journal of Communication*, 43(4): 51-58.
- Epstein, B. G. 2004. The Demographic Impact of HIV and AIDS. In The Macroeconomics of HIV and AIDS. Markus, H. (ed.). Washington, D.C.: International Monetary Fund. pp.1-40.
- Eyiah, J. K. 2004. The Role of the Mass Media in Community Development. Toronto, Canada: Brookview Academy.
- Family Health International and AIDSCAP. 1997. AIDS in Kenya: Socio-Economic Impact and Policy Implications, Nairobi. Available at:
 http://www.www.fhi.org/en/HIV-AIDS-pub-Archive-aidscapreports-finalreportAIDSCAPkenya-index.htm. (Accessed on December 4, 2012)
- Faure, C. 2005. Investigative Journalism as a Democratic Practice: A Mail & Guardian Case Study (2002-2003). *Communicare*, 24(1):154-170.
- Faure, C. 2008. Media and HIV and AIDS. In Fourie P. J. (eds.). Media Studies: Policy, Management and Media Representation, Vol. 2. Lansdowne: Juta. pp. 379-413.
- Finlay, A. 2004. Shaping the conflict: Factors influencing the representation of conflict around HIV/AIDS in the South African press. *Communicare*, 23(2):68-93.
- Finlay, A. 2006. Media Helped win the drugs fight: But the end of the conflict over antiretrovirals shouldn't mean the end of Aids coverage. *The Star.* January 06, 2006.
- Finlay, S. & Faulkner, G. 2005. Physical activity promotion through the mass media: inception, production, transmission and consumption. *Preventive Medicine*, 40:121-130.
- Fishbein, M. & Cappella, J. N. 2006. The role of theory in developing effective health communication. *Journal of Communication*, 56:S1-S17.
- Fonseca-Becker, F., Bakadi, G., Mwebesa, G. & Sienche, C. (2003). HIV and AIDS prevention among youth in Upper Guinea: Impact evaluation report of a behavior change and community mobilization campaign. Baltimore, MD: Johns Hopkins University Bloomberg School of Public Health, Center for Communication Programs.

- Fouche, C. B. & De Vos, A. S. 2004. Quantitative Research Designs. In De Vos A.S, Strydom H, Fouche C.B and Delport C.S.L (Eds.). Research at the Grass Roots for the Social Sciences and Human Service Professions (2nd Ed.). Pretoria, South Africa: Van Schaik.
- Fourie, P. J. 2004. Media Studies, Volume 1: Institutions, Theories and Issues. pp. 304. Lansdowne: Creda Juta Education.
- Fourie, P. J. 2001. The Role and Functions of the Media: Functionalism. In P. J. Fourie (ed). Media Studies, Volume 1: Institutions, Theories and Issues, pp. 264-289. Lansdowne: Juta..
- Fourie, P. J. 2001. Approaches to the Study of Mass Communication. In Fourie, P. J. (ed.). Media Studies, Volume 1: Media History, Media and Society. pp. 89-183.. Cape Town: Juta:
- Freedman, J. & Nana, P. 2005. The socioeconomic context of Africa's vulnerability to HIV and AIDS. *Review of International Studies*, 31: 665-686.
- Frohlich, J. 2008. The Impact of AIDS on the Community. In Abdool Karim S. and Abdool Karim Q, (eds.). HIV and AIDS in South Africa. Cape Town, South Africa: Cambridge University Press. Pp. 351-369
- Geary, C. W., Burke, H. M., Castelnau, L., Neupane, S., Sall, Y. B., Wong, E. & Tucker, H. T. 2007. MTV's "staying alive" global campaign promoted interpersonal communication about HIV and positive beliefs about HIV prevention. *AIDS Education Prevention*, 19(1): 51-67.
- Gallant, M. & Maticka-Tyndale, E. 2004. School-based HIV prevention programmes for African youth. *Social Science and Medicine, 58:1337-1351.*
- Gerald, J. S. 2009. AIDS Update 2009: An Annual Overview of Acquired Immune Deficiency Syndrome. New York: McGraw-Hill.
- Giesecke, J. 2002. Modern Infectious Disease Epidemiology. (2nd ed.). London: Arnold.
- Gilbert, L., Selikow T., Walker, L. 2010. Society, Health and Disease in a Time of HIV/AIDS. Macmillian: Johannesburg.
- GMBSR. 2006. HIV and AIDS and Gender Baseline Study. Regional Report. Available at: www.mediamonitor.org.za). (Accessed on 09 October, 2011).
- Goklamy, I. M. 2007. The improving state of the world: Why we are living longer, healthier, more comfortable lives on a cleaner planet. pp. 4. Washington DC. Cato Institute.
- Government of South Africa. (2010, 14 December). Massive Reduction in ARV Prices. Pretoria: South African Government Information.
- Grassly, N. C., Desai, K., Pegurri, L., Sikazwe, A., Malambo, I., Siamatowe, C. & Bundy, D. 2003. The economic impact of HIV/AIDS on the education sector in Zambia. *AIDS*, *17:1039-1044*.

- Greeff, M. 2004. Information Collection: Interviewing. In De Vos A. S, Strydom H, Fouche C. B & Delport C. S. L. (eds.). *Research at the Grass Roots for the Social Sciences and Human Service Professions.* (2nd ed.). Pretoria, South Africa: Van Schaik.
- Greener, R. 2004. The Impact of HIV and AIDS on Poverty and Inequality. In Haacker, M. (Ed.). *The Macroeconomics of HIV and AIDS*. Washington, D.C.: International Monetary Fund. pp. 167-181.
- Gwyn, R. 2002. Communicating Health and Illness. London: Sage
- Haacker, M. 2004. HIV and AIDS: The Impact on the Social Fabric and the Economy. In Haacker M. (Ed.). *The Macroeconomics of HIV and AIDS*. Washington DC.: International Monetary Fund. pp. 41-95.
- Haas, J. S., Kaplan, C. P., Gerstenberger, E. P. & Kerlikowske, K. 2004. Changes in the use of postmenopausal hormone therapy after the publication of clinical trial results. *Annals of Internal Medicine*, 140:184-189.
- Hafez, K. 2007. *The Myth of Media Globalization*. Cambridge: Polity Press.
- Haider, J, & Bawden, D. 2007. Conceptions of "Information Poverty" in LIS: A discourse analysis. Journal of Documentation, 63(4):534-557.
- Hamlyn, C. 2004. HIV Stigma and Discrmination; A Department of Heath Perspective. In HIV-Related Stigma and Discrimination. Impact 9. National AIDS Trust.

 Available at: http: and and www.nat.org.uk and document and 86. (Accessed November, 2011).
- Haung, J., Bova, C., Fennie, K. P., Roger, A. & Williams, A. 2005. Knowledge, attitudes, behaviour, and perceptions of risk related to HIV and AIDS among Chinese university students in Hunan, China. *AIDS Patients Care and STDs.* 19(11):769-77.
- Health Resources and Services Administration (HRSA). 2014. Women and AIDS. A Living History: The Ryan White HIV/AIDS Program. U.S. Department of Health and Human Services. Accessed April 22, 2014. Available at: www.hrsa.gov/livinghistory/issues/women-And-Aids.pdf.
- HEARD 2013. AIDS brief for professionals: Development Personnel. University of East Anglia. Available at: www.aids-brief.for-professionals-development-personnel-pdf. Accessed on April 15, 2014.
- Hester, J. B. & Rhonda, G. 2007. The agenda setting-function of national versus local media: a time-series analysis for the issue of same-sex-marriage. *Mass Communication and Society*, 10(3):299-317.
- Hodgetts, D., Chamberlain, K., Scammell, M., Karapu, R. & Nikora, L. W. 2008. Constructing health news possibilities for a civic-oriented Journalism. *Health* (London), 12(1):43-66.
- Hodgetts, D. & Chamberlain, K. 2006. Developing a critical research agenda for health psychology. *Journal of Health Psychology*, 11(2):317–327.

- Hoffman-Goetz, L., Friedman, D. & Clark, J. N. 2005. HIV and AIDS risk factors as portrayed in mass media targeting first nations, Metis and Inuit peoples of Canada. *Journal of Health Communication*, 10:145-162.
- Hogan, D. R., Baltussen, R., Hayashi, C., Lauer, J. A, & Salomon, J. 2005. Achieving the Millennium Development Goals for health: Cost effective analysis of strategies to combat HIV and AIDS in developing countries. *BMJ*, 331:1431.
- Homer, J.R., Romer, D. & Vanable, P. A. 2008. Using culture-centred qualitative formative research to design broadcast messages for HIV prevention for African American adolescents. *Journal of Health Communication*, 13(4):309-325.
- Houghton, J. 2006. What is HIV? Nurse Prescribing, 4 (3):98-102.
- Human Sciences Research Council (HSRC). 2006. National HIV Prevalence in South Africa The Graphics. Cape Town, South Africa: HSRC Press.
- Independent Newspapers. 2012. Profile. Available at: http://www.iol.co.za/newspapers. (Accessed March, 2012).
- Institute for Work & Health (IWH). 2010. What Researchers Mean by --- Retrospective vs. Prospective Studies. *At Work*, Issue 59, Winter 2010. Toronto: Institute For Work & Health. Available at: http://www.iwh.on.ca and at.work and 59 and retrospectrive-vs-prospective-studies. (Accessed May, 2012).
- Inter Press Services News Agency (2006, May). Health South Africa: A Burden that will only become Heavier. IPSNA.
- International Labour Organisation (ILO). 2006. An ILO Code of Practice on HIV and AIDS and the World of Work. Geneva: ILO. Available at: www.ilo.org. (Accessed October 09, 2011).
- International Marketing Council of South Africa. 2005. HIV and AIDS in South Africa. Johannesburg: Brand South Africa Project.
- IIEP/UNESCO. 2002. The initiation on the impact of HIV/AIDS on education. EFA Flagship Initiatives. Paris, France; IIEP/UNESCO.
- International Labour Organization (ILO), 2004. HIV/AIDS and Work: Global Estimates, Impact and Response, ILO Programme on HIV/AIDS and the World of Work, Geneva: International Labour Office.
- IRIN Plus News. 2005. South Africa: Men falling through the Cracks. July 25, 2007.
- Ivers, L. C., Cullens, K.A., Freedberg, K.A., Block, S., Coates, J. & Webb. P. 2009. HIV/AIDS, undernutrition, and food insecurity. *Clinical Infection Disease*, 49(7):1096-1102.
- Iyengar, S. & Kinder, D. 1987. News That Matters. Chicago: University of Chicago.

- Jack, D. 2004. Stigma and discrimination: The other epidemic. In HIV-Related Stigma and Discrimination. Impact 9, Policy Bulletin 9. National AIDS Trust.
- Jefferis, K., Kinghorn, A., Siphambe, H. & Thurlow, J. 2006. The Economic Impact of HIV/AIDS in Botswana. Gaborone: UNDP and National AIDS Co-ordinating Agency, (NACA).
- Jefferis, K., Nannyonjo, J., Byamugisha, J. & Baine, S. 2007. Assessing the macroeconomic impact of HIV/AIDS in Uganda. Phase 1 Report. pp.31-58. UNDP and Ministry of Finance, Planning and Economic Development.
- Johnson, L. F., Mossong, J., Dorrington, R. E., Schomaker M., Hoffmann C. J., Keiser, O., Fox, M. P., Wood, R., Prozesky, H., Giddy, J., Belen, G. D., Cornell, M., Egger, M, & Boulle, 2013. A. Life expectancies of South African adults starting antiretroviral treatment: collaborative analysis of cohort studies. *PLoS Medical*, 10: 1001418.
- Jooste, K. 2010. *The principles and practice of nursing and health care.* Pretoria, South Africa: Van Schaik Publishers.
- Jyoti, S. 2006. *HIV and AIDS prevention and creating awareness role of the media*. New York: Bologi Media.
- Kaiser Family Foundation (KFF). 2014. The HIV/AIDS Epidemic in the United States. April 07, Washington D.C, Kaiser Family Foundation.
- Kaiser Family Foundation (KFF). 1996. *The Kaiser Survey on Americans and AIDS: The role of the media.* Menlo Park, CA: Kaiser Family Foundation.
- Kaiser Family Foundation & SABC. 2007. Young South Africans, broadcast media, and HIV and AIDS awareness: Results of a national survey. Johannesburg: Henry Kaiser Foundation (HKFF) and SABC.
- Kaiser Family Foundation (KFF). October, 2013. Fact Sheet: The Global HIV/AIDS Epidemic. Menlo Park, CA: Kaiser Family Foundation.
- Kaushik, P., Pandey, R. M. & Pande, J. M. 2000. Evaluation of the WHO clinical case definition of AIDS in the Indian context: Suggesting a prediction rule. *Medical Principles and Practice*, 9(1): 42-51.
- Keating, J., Meekers, D. & Adewuyi, A. 2006. Assessing effects of a media campaign on HIV and AIDS awareness and prevention in Nigeria: Results from the VISION Project. *BMC Public Health, 6:123-134.*
- Kevany, S., Benatar, S. R. & Fleischer, T. 2013. Improving resource allocation decisions for health and HIV programmes in South Africa: Bioethical co-effectiveness and health diplomacy considerations. *Global Public Health*, 8(5):570-587.

- Khosa, M. N. 2011. Young Adults Perception of the Effectiveness of HIV and AIDS Awareness Campaigns as an Instrument of Reducing Risk-Bearing Sexual Behaviour. Unpublished Masters dissertation, University of Pretoria, Pretoria.
- Kirby, D. B., Laris, B. A. & Rolleri, L. O. 2007. Sex and HIV education programme: Their impact on sexual behaviours of young people throughout the World. *Journal of Adolescent Health*, 40:206-217.
- Kimberly, N. K. 2006. A decade of research on health content in the media: the focus on health challenges and sociocultural context and attendant informational and ideological problems. *Journal of Communication*, 11:43-59.
- Kincaid, D. L., Parker, W., Schierhout, G., Connolly, C. & Pham, V. H. T. 2008. AIDS communication programmes, HIV prevention and living with HIV in South Africa, 2006. Pretoria, South Africa: JHHESA.
- Kiousis, S. & McCombs, M. E. 2004. Agenda-setting effects and attitude strength: Political figures during the 1996 presidential election. *Communication Research*, 31:36-57.
- Kreuter, M. W. & Haughton, L. T. 2006. Integrating culture into health information for African American women. *American Behavioural Science*, 49:794-811.
- Kruger, K . 2001. Ethics in a time of AIDS. Available at: www.journ-aids.org. (Accessed on October 10, 2011).
- Kukard, P. 2004. Staring HIV and AIDS in the face. *Daily Dispatch Newspaper*, pp.12, December 1st.
- Larsson, A., Oxman, A. D., Carling, C. & Herrin, J. 2003. Medical messages in the media: Barriers and solutions to improving medical journalism. *Health Expectations*, 6: 323-331.
- Lau, R. W. K. 2004. Critical realism and news production. *Media Culture and Society*, 6(5):693-712.
- Lawn, E. J., Bamford, L., Moodley, J., Patrick, M. & Velaphi, S. 2008. Every death counts: Use of mortality audit data for decision making to save the lives of mothers, babies, and children in South Africa. *The Lancet*, 371:(9620)1294-1304.
- Lawton, B., Rose, S., Mclead, D. & Dowell, A. 2003. Changes in use of hormone replacement therapy after the report from the women's health initiative: Cross sectional survey of users. *British Medical Journal*, 327:845-846.
- Li, L., Wu, Z., Lin, C., Jihui, G., Rotheram-Borus, J. Yao, L. & NIMH Collaborative HIV and STD Prevention Trial Group. 2009. Mass media and HIV and AIDS in China. *Journal of Health Communication*, 14(5):424-438.
- Li, M., Chapman, S., Agho, K., & Eastman, C. J. 2008. Can even minimal news coverage influence consumer health-related behaviour? A case study of iodized salt sales, Australia. *Health Educational Research*, 23:543–8.

- Limpopo Provincial Department of Health and Social Development (2006:i). *Socio-economic Impact of HIV and AIDS on Population and Development in Limpopo Province.* Polokwane: Department of Health and Social Development.
- Limpopo Tourism Agency, South Africa. 2014. Ba-Phalaborwa. (Accessed April 30, 2014. Available at: www.golimpopo.com/Mopani/ba-phalaborwa.
- Link, B. & Phelan, J. 2001. Conceptualizing stigma. *Annual Review of Sociology*, 27:363–385.
- Lorentzen, P., McMillan, J., & Wacziamg, R. 2008. Death and development. *Journal of Economic Growth,* 13(2):81-124.
- Louw, J., Shisana, O., Peltzer, K, & Zungu, N. 2009. "Examining the Impact of HIV and AIDS on South African Educators." South African Journal of Education 29: 205–17.
- Lovasz, E. & Schipp, B. 2009. The impact of HIV/AIDS on economic growth in Sub-Saharan Africa. *South African Journal of Economics*, 77(2):245-256.
- Lovell C.C., Pappas-Deluca K.A., Sebert Kuhlmann A.K, Koppenhaver T., Kong S., Mooki M., Galavotti C. 2007-2008. One day I might find myself like her: Audience involvement and identification with role models in an entertainment education radio drama in Botswana. *International Quarterly Community Health Educators*, 28(3):181-200.
- Lule, E. & Haacker, M. 2012. The Fiscal Dimension of HIV/AIDS in Botswana, South Africa, Swaziland, and Uganda., Washington, DC: The World Bank.
- Lupman, D. 1994. *Moral threats and dangerous desires: AIDS in the news media.* London: Taylor and Francis.
- Lupton, D. 1999. Archetypes of infection: People with HIV and AIDS in the Australian press in the mid-1990s. *Sociology of Health and Illness*, 21(1):37-53.
- Lupton, D. 1998. The End of AIDS?: AIDS reporting in the Australian press in the mid-1990s. *Critical Public Health*, 8 (1):33-46.
- Macrander, A. M. 2011. Bloggers as newsmen: Expanding the testimonial privilege. Boston, Massachusetts: Boston University (BU) School of Law.

 Available at: www.bu.edu-and-law-and-central-and...and-MACRANDER-BloggersasNewsmen.pdf (Accessed February, 2012).
- Madhu, K. P., Mia, M., Nanna, E., Moneeza, H., Prerna, S, & Shane, E. 2009. "Getting the Story and Telling it Right: HIV on TV". United Nations Educational, Scientific, and Cultural Organization (UNESCO Series on Journalism Education): 6.
- Magnani, R. J. 2001. *Impact of a Health Communications Programme on Adolescents Reproductive Health Knowledge: Attitude and Behaviours in Three Cities in Paraguay.* Washington, DC: Pathfinder International (Focus on Young Adults, FOCUS Programme Working Paper).

- Majumdar, S. R., Almasi, E. A. & Stafford, R. S. 2004. Promotion and prescription of hormone therapy after report of harm by the women health initiative. *Journal of the American Medical Association,* 292(16): 1983-1988.
- Malan, M. 2006. Exposing AIDS: Media Impact in South Africa. *Georgetown Journal of International Affairs, Winter, 7(1):41-49.*
- Mallinson, R. K., Rajabiun, S. & Coleman, S. 2007. The provider role in client engagement in HIV care. AIDS Patient Care STDS, 21 Suppliment 1:S77-84.
- Malone, R., Boyd, E. & Bero, L. 2000. Science in the news: Journalists' constructions of passive smoking as a social problem. *Social Studies of Science*, 30:713-734.
- Mandela, N. & HSRC. 2005. South African National HIV Prevalence, HIV Incidence, Behaviour and Communication Survey. Cape Town, South Africa: HSRC Press.
- Mandela, N. & HSRC 2002. South African National HIV Prevalence, Behavioural Risks and Mass Media Household Survey 2002. Shisana O. and Simbvayi L. (eds). Pretoria, South Africa: HRSC Press.
- Mandiwana, N. 2012. We don't want to know our status. *Capricorn Voice*, p. 1. 29 February 2 March.
- Marum, E., Morgan, G., Hightower, A., Ngare, C. & Taegtmeyer, M. 2008. Using mass media campaigns to promote voluntary counselling and HIV testing services in Kenya. *AIDS*, *22(15):2019-2024*.
- Maunder, N. & Wiggins, S. 2006. Food security in Southern Africa: Changing the Trend? Review of lessons learnt on recent responses to chronic and transitory hunger and vulnerability. Oxfam-GB, World Vision International, CARE, RHVP and OCHA. Discussion Draft, September.
- Mathebe, M. L. 2005. The Story of an immune deficiency disease and its representation in the South African print media (1981-2000). Unpublished doctoral thesis, University of South Africa, Pretoria, South Africa.
- Matsoso-Makhate, M. & Wangenge-Ouma, G. 2009. Performing masculine and feminine identities:

 Sexuality and identity construction among youth in the context of HIV and AIDS. In Baxen, & Breidlid (Eds.). HIV and AIDS in Sub-Saharan Africa: Understanding the Implications of Culture and Context, pp. 76. Cape Town: UCT Press.
- Mayosi, B. M., Lawn, J. E., van Niekerk, A., Bradshaw, D., Abdool Karim, S. S, & Coovadia, H. M. 2012. For the Lancet South Africa team. Health in South Africa: changes and challenges since 2009. *Lancet*, 380(9858):2029–2043.
- Mbengashe, T., Nevhutalu, Z., Chipimo, M., Chidarikire, T. & Diseko, L. 2012. The national HIV counselling and testing campaign and treatment expansion in South Africa: a return on investments in combination prevention. Oral Poster Discussion during the XIX International AIDS Conference held in Washington DC, USA 22–27 July, 2012.

- McCombs, M. E. & Shaw, D. L. 1972. The agenda-setting function of mass media. *Public Opinion Quarterly*, 36:176-187.
- McCombs, M. E. & Reynolds, A. 2002. News influence on our pictures in the world. In J. Bryant & D. Zillmann (Eds.). *Media effects: Advances in theory and research*, 2nd ed. pp. 1-16. Hillsdale, NJ: Lawrence Erlbaum.
- McCombs, M. 1981. The agenda-setting approach. In D. D. Nimmo & K. R. Sanders (Eds.). *Handbook of political communication*, pp. 75-110. Beverly Hills, CA: Sage.
- McCombs, W. 2004. *Setting the Agenda: The Mass Media and Public Opinion*. pp.1. Malden, MA. USA: Blackwell Publishing.
- Mchombu, K. 2000. The coverage of HIV and AIDS in Namibian media: A content analysis. In K.S.T. Boafo (Ed.). *Media and HIV and AIDS in East and Southern Africa: A resource book*. Paris, France: UNESCO.
- McKee, N., Bertrand, J. T. & Becker-Benton, A. 2004. *Strategic communication in the HIV and AIDS epidemic.* New Delhi, India: Sage.
- McNair, B. & Hibberd, M. 2003. Mediating access, political broadcasting, the internet and democratic participation. In G. F. Lowe, & T. Hujanen (Eds.). *Broadcasting and convergence: New articulations of the public service remit*, pp. 272-283. Stockholm, Sweden: Nordicom.
- McQuail, D. 1994. *Mass communication theory: An introduction*. London: Sage.
- McQuail, D. 2000. McQuail's Mass communication theory. 4th edition. London: Sage.
- Measure DHS+. 2007. HIV and AIDS survey indicators database. Calverton, MD: Macro International. Available at: http://and.and.www.measuredhs.com/and hivdata. (Accessed November 16, 2011).
- Media Tenor. 2005. Agenda cutting HIV and AIDS coverage: AIDS fatigue still media's excuse? 6th International Agenda Setting Conference, October 26-28, Lugano, Switzerland.
- Medical Research Council. 2005. *South African national burden of disease study 2000.* Cape Town, South Africa: Medical Research Council.
- Mercado-Martinez, F. J., Robles-Silva, L., Moreno-Leal, N, & Franco-Almazan, C. 2001. Inconsistent journalism: The coverage of chronic diseases in the Mexican press. *Journal of Health Communication*, *6: 235-247.*
- Miguel, E. & Akaremer, M. 2004. Worms: Identifying impacts on education and health in the presence of treatment externalities. *Econometrics*, 72(1): 159 -217.
- Miles, M. B. & Huberman, A. M. 1994. Qualitative data analysis: An expanded source book edition. Newbury Park, CA: Sage.

- Moegsien, W. 2012. About us. Letter from the editor, *The Star*, Johannesburg. Available at: http://www.iol.co.za/cmlink/the-star/about-us-1.913265. (Accessed March 2012).
- Mohga, K. S. 2002. Gender, poverty, and intergenerational vulnerability to HIV/AIDS. *Gender and Development.* 10(3):63-70.
- Mouton, J. 2001. How to succeed in your masters and doctoral studies: A South African guide and resource book. Pretoria, South Africa: Van Schaik.
- Moynihan, R., Bero, L., Ross-Degnan, D., Henry, D., Lee, K., Watkins, J., Mah, C., & Soumerai, S. B. 2000. Coverage by the news media of the benefits and risks of medications. *New England Journal of Medicine*, 342:1645-1650.
- Mu, LI., Chapman, S., Agho, K. & Erasmus, C.J. 2008. Can even minimal news coverage influence consumer health-related behaviour? A case study of iodized salt sales, Australian *Health Education Research*, 23(3): 543-548.
- Muhwava, W., Herbst, K. & Newell, M-L. 2013. The impact of HIV-related mortality on life expectancy: Evidence from the African Centre Demographic Surveillance Area. Pp. 2-23. *South African Journal of Demography*, 14(1):2-108.
- Mukiza-Gapere, Jackson. 1995. Impact of AIDS on marriage patterns, customs, and practices in Uganda. *Health Transition Review*, Supplement to Volume 5: 205-208.
- Murdock, G. 1998. Mass Communication and the Construction of Meaning. London: Arnold.
- Muula, A.S. 2008. South Africa's national response to HIV and AIDS treatment: Popular media perspective. *Croatian Medical Journal*, 46:114-119.
- Myers, M. 2002. From Awareness to Action: Tackling HIV and AIDS Through Radio and Television Drama. Disaster Studies Working Paper 5, Benfield Greig Hazard Research Centre.
- NACC/NASCOP, 2012. The Kenya AIDS epidemic Update. pp. 2. Nairobi, Kenya: National AIDS Control Council and National AIDS and STI Control Programme.
- Nagasvare, D. & Krishnasamy, O. M. 2014. New media Vs traditional media. Kuala Lumpur, Malaysia: AIBD.
- Naidu, V. 2003. Economic impact of HIV/AIDS on urban households A pilot study in Soweto". Available at: www.jeapp.org.za/attachment.php?attachmentid=14. Accessed April 12, 2014.
- Naidu, V. & Geoff, H. 2005. The Impact of HIV/AIDS Morbidity and Mortality on Households—A Review of Household Studies. *South African Journal of Economics*, 73 (Special Edition on HIV/AIDS): 533–44
- Nathanson C. A. 1999. Social movement as catalysts for policy change: The case of smoking and guns". Journal of Health Politics and Law, 24(3):421-488.

- National Treasury. 2010. Estimates of National Expenditure (2010), Vote 7, Women, Children and People with Disabilities. National Treasury, Department, South Africa. pp.xxi.
- Nattrass, N. 2002. AIDS and Human Security in Southern Africa. Paper prepared for the Conference on HIV and Global Security; Swedish Parliament, Stockhold, 27 November 2002. CSSR Working Paper No. 18, November 2002, AIDS and Society Research Unit, Centre for Social Science Research, University of Cape Town.
- Ndlovu, N., Sithole, F., Vilakazi, M., Mbatha, K. & Guthrie, T. 2010. CEGAA-TAC Joint Statement: A story of hope on national HIV and AIDS Policy and Funding in South Africa, Treatment Action Campaign (TAC), Cape Town, Available at:

 http://doi.org.za and community and node and 2815. (Accessed on 05 September 2011).
- Nel, F. 2005. Writing for the Media in Southern Africa. (3rd ed.). Cape Town, South Africa: Oxford University Press.
- Neuman, W. L. 2000. Social Research Methods: Qualitative and Quantitative Approaches. (4th ed.). Boston: Allyn & Bacon.
- News 24 Special Report. (August 25, 2011). HIV Rate Outpaces Prevention Motlanthe. News 24.
- Ngam, T. M. 2007. Media as Agenda Setters: A Study of the Infected and Affected Living with HIV and AIDS. Masters degree dissertation. Stelllenbosch, South Africa: Stellenbosch University.
- Noar, M. S. 2009. The Utility of 'old' and 'new' Media Tools for HIV Prevention. In Pope C, White R.T, Malow R. (Eds.). HIV and AIDS Global Frontiers in Prevention and Interrventions. New York: Routledge.
- Norman, A., Chopra, M. & Kadiyala, S. 2007. Factors relating to HIV disclosure in 2 South African communities. *American Journal of Public Health*, *97(10):1775-1781*.
- Ntozi, J. P. M., Mulindwa, I. N., Ahimbisibwe, F., Ayiga, N. & Odwee, J. 2003. Has the HIV and AIDS epidemic changed sexual behaviour of high risk groups in Uganda? *African Health Sciences, 3(3):* 107-116.
- Nupen, J. K & Wangenge-Ouma. 2009. Grade 10 Learners' Conceptions of Risk of HIV Infection in Four Secondary Schools in the Western Cape. In J. Baxen and A. Breidlid (Ed.). HIV and AIDS in Sub-Saharan Africa: Understanding the Implications of Culture and Context, Cape Town, South Africa: UCT Press.
- Odiaka, P. & Muanya, C. *The Guardian, Nigeria (*Friday, December 1, 2006). *HIV and AIDS:* Curtailing the Epidemic on World AIDS Day.
- Oldewage-Theron, W., Dicks, E. & Napier. C. 2006. Poverty, household food security and nutrition: Coping strategies in an informal settlement in the Vaal Triangle, *South Africa. Public Health*, 129:795-804.

- ONE. International HIV and AIDS Organisation: HIV and AIDS. *The Issue Brief* 1584, 2011. Available at: http: and and www.one.org and c and international and issue and 1584 and . (Accessed on August 20, 2011).
- O'Shaughnessy, M. & Stadler, J. 2006. Media and Society: An Introduction. (3rd ed.). Cape Town, South Africa: Oxford University Press
- O'Sullivan, T., Hartley, J., Saunders, D., Montgomery, M. & Fiske, J. 1994. Key Concepts in Communication and Cultural Studies. London: Routledge.
- O'Shaughnessy, M. & Stadler, J. 2006. Media and Society: An introduction, (3rd ed). Cape Town, South Africa: Oxford University Press.
- Pan, Z. & Kosicki, G. 1993. Framing analysis: An approach to new discourse. *Political Communication*, 10:55-75.
- Panos Research Institute. 2006. Lessons for Today and Tomorrow: An Analysis of HIV and AIDS Reporting in Southern Africa. Lusaka, Zambia: Panos Southern Africa.
- Panos Research Institute. 2006. Reporting AIDS. Lusaka, Zambia: Panos Southern Africa.
- Parker, B. & Kozel, V. 2005. Understanding poverty and vulnerability in India's Uttar Pradash and Bihar: A Q Squared approach. O Squared Working Paper 9; Centre for International Studies, University of Toronto.
- Parker, I. 1992. Discourse Dynamics. London: Routledge.
- Patterson, A. S. 2006. Civil society organizations: The search for empowerment. In J. C. Senghor & N. k. Poku (Eds.). *Towards African Renewal.* pp. 255. 290. Hampshire, England: Ashgate Publishing.
- Pawley, C. 2003. Information Literacy: a contradictory coupling. *Literacy Quarterly*, 73(4):422-452.
- Pattinson, R. C., Stephen, C., Bradshaw, D., Chopra, M., Kerber, K., Lawn, J. E., Moodley, J., Patrick, M., & Velaphi. S. 2005. Every death counts: Saving the lives of mothers, babies and children in South Africa. Pretoria, South Africa: South African Medical Research Council.
- Peltzer, K. & Promtussananon, S. 2003. Evaluation of Soul City school and mass media life skills education among junior secondary school learners in South Africa. *Social Behaviour and Personality*, 31(8):825-834.
- Peltzer, P. T. & Seoka, P. 2004. Evaluation of HIV and AIDS prevention intervention messages on a rural sample of South African youths knowledge, attitudes, beliefs and behaviours over a period of 15 months. *Journal of Child and Adolescent Mental Health*, 16:93-102.
- Peltzer, K., Mngqundaniso, N. & Petros, G. 2006. HIV and AIDS and STI and TB knowledge, beliefs and practices of traditional healers in KwaZulu-Natal, South Africa. AIDS Care, 18(6):608-13.

- Pembrey, G. 2008. HIV & AIDS in South Africa, West Sussex, UK: AVERT.
- Pettersen, S. 2005. Norwegian health journalist's ability to report on health research: A concern to science education? *Nordic Studies in Science Education*, 1: 5-16.
- Pettifor, A. E., Rees, H. V., Kleinschmidt, I., Steffenson, A. E., MacPhail, C., Hlongwa-Madikizela, L., Vermaak, K. & Padian, N. S. 2005. Young people's sexual health in South Africa: HIV prevalence and sexual behaviours from a nationally representative household survey. *AIDS*, 19:1525-1534.
- Phaswana-Mafuya, M. N. & Peltzer, K. 2005. "Perceived HIV/AIDS Impact among Staff in Tertiary Institutions in the Eastern Cape, South Africa. *Journal of Social Aspects of HIV/AIDS* 2(2):277–85.
- Picard, R. G. 2002. The Economic and Financing of Media Companies, (1st ed.). Fordham: Fordham University Press.
- Pickle., K, Quinn., S. C. & Brown, J. D. 2002. HIV and AIDS coverage in black newspapers, 1991-1996. Implication for health communication and health education. *Journal of Health Communication*, 7: 427-444.
- Pillar, N. 2012. HIV and Human Rights. Message of support by United Nations High Commissioner for Human Rights to the inaugural summit of GlobalPOWER Women Network Africa. May 24. New York, United Nations, Office of the High Commissioner for Human Rights.
- Piot, P. April 8, 2003. From Planning to Implementation: Success Against AIDS in the Region. An Opening Speech at the 2nd Latin American Forum on HIV and AIDS and STIs. Havana, Cuba
- Poku, K. N. 2002. Poverty, debt and African's HIV/AIDS crisis. *International Affairs*, 78(3):531-546.
- Population Research Centre. 2002. AIDS in Africa. New York: Population Research Centre (PRC).
- Population Services International. 2001. Mass media campaign HIV and AIDS Zaire 2001. Development Communication Report No. 77 1992 and 2, Washington, DC: Population Services International.
- Pratt., C. B., Ha., L. & Pratt., C. A. 2002. Setting the public health agenda on major diseases in Sub-Africa: African popular magazines and medical Journals, 1981-1997. *Journal of Communication*, 52(4): 889-904.
- Pressat, R. & Christopher, W. 1985. The Dictionary of Demography. Oxford: Blackwell.
- Pungente, J. 2007. Canada's key concepts of media literacy.

 Available at: http: and and www.medialit.org and reading_room and article210.htm and (Accessed on August 17, 2009).
- Quattek, K 2000. The Economic Impact of AIDS in South Africa: A Dark cloud on the Horizon, HIV and AIDS: A Threat to the African Rennaisance? Konrad Adenauer Stiftung Occassional Papers, Johannesburg, June 2000.

- Rehbock, 2009. Better HIV reporting in SA media. Accessed on April 22, 2014. Available at: www.mediaclubsouthafrica.com/themedia/1418-better-hiv-reporting-in-sa-media.
- Regina, G. L. 2004. Framing obesity: The evolution of news discourse on a public health issue. *Press and Politics*, 9(3): 56-75.
- Rehle, M. T., Hallet, B. T., Shisana, O., Pillay-van-Wyk, V., Zuma. K., Carrara, H. & Jooste, S. 2010. A decline in new HIV infections in South Africa: Estimating HIV incidence from three national HIV surveys in 2002, 2005, and 2008. *PLoS one*, 5(6):e11094.
- Reisfield, G. & Wilson, G. 2004. Use of metaphor in the discourse on cancer. *Journal of Clinical Oncology*, 22 (19): 4024-4027.
- Richter, L., Foster, G. & Sheer, L. 2006. Where the heart is: Meeting the Psychosocial Needs of Young Children in the Context of HIV/AIDS. The Hague. The Netherlands: Bernard van Leer.
- Richter, L. M., Manegold, J. & Pather, R. 2004. Family and community interventions for children affected by AIDS. Cape Town, South Africa: HSRC Press.
- Ridgard, N. & Struthers, H. 2010. Sex, "soap" and HIV: Multiple and concurrent partnerships in South African soap operas. *Communicare*, 29(1):40-57.
- Robbins, S. 2005. Rights Passages From 'Near Death' to 'New Life': AIDS Activism and Treatment Testimonies in South Africa. IDS Working Paper 251. October 2005. Brighton, UK: Institute of Development Studies.
- Robins, S. & Mayer, R. 2000. The metaphor framing effect: Metaphorical reasoning about text-based dilemmas. *Discourse Processes*, 30(11): 57-86.
- Roelofse, J. 1996. Press Theories. In L. M. Oosthuizen (Eds.). Introduction to Communication: Course Book 5 Journalism, Press, and Radio Studies, pp. 53-54. Cape Town, South Africa: Juta.
- Rogers, E., Dearing, J. & Chang, S. 1991. AIDS in the 1980s: The agenda–setting process for a public issue. *Journalism Monographs*, 126:1-80.
- Romer, D., Sznitman, S., DiClemente, R., Salazar, L. F., Vanable, P. A., Carey, M. P., Hennessy, M., Brown, L. K., Valois, R. F., Stanton, B. F., Fortune, T. & Juzang, I. 2009. Mass media as an HIV-prevention strategy: Using culturally sensitive messages to reduce HIV-associated sexual behaviour of at-risk African American youth. *American Journal of Public Health*, 99(12):2150-2159.
- Rosen, S., Feeley, F., Connelly, P. & Simon, L. 2007. The private sector and HIV/AIDS in Africa: Taking stock of six years of applied research. *AIDS*, *21*, *Issue P: S41-S51*.
- Rosen, S., Sanne, L., Collier, A. & Simon, J. L. 2005. Rationing antiretroviral therapy for HIV/AIDS in Africa: Choices and consequences. *Public Library of Science Medicine*, *2*(11):e303.
- Rubin, A. & Babbie, E. 2001. Research Methods for Social Works, 4th ed. Belmont, CA: Wadsworth.

- Rupar, V. 2006. How did you find out? Transparency of the newsgathering process and the meaning of news: A case study of New Zealand Journalism. *Journalism Studies*, 7(1):127-143.
- Salinas, G. & Markus, H. 2006. HIV and AIDS: The impact on poverty and inequality (May 2006). IMF Working Paper, No. 06 and 126:1-24.
- SANAC. South Africa. 2007. HIV and AIDS and STI Strategic Plan for South Africa, 2007 2011. Pretoria, South Africa: South African National AIDS Council, SANAC.
- SANAC. 2011. National Strategic Plan (NSP) on HIV, STIs and TB 2012 2016 Summary. Pretoria: South Africa: South African National AIDS Council, SANAC.
- Sarantakos, S. 2000. Social Research. Sydney, Australia: Macmillan Press.
- Schatz, E., Madhavan, S. and Williams, J. 2011. Female-headed households contending with AIDS-related hardship in rural South Africa. *Health and Place*, *17(2):598-605*.
- Scheufele, D. A. & Tewskbury, D. 2007. Framing, agenda setting, and priming: The evolution of three media effects models. *Journal of Communication*, *57:9-20*.
- Schwartz, L. M. & Wolloshins, S. 2004. The media matter: A call for straightforward medical reporting. *Annals of Internal Medicine*, 140: 226-228.
- Schwitzer, G. 2008. How do US Journalists cover treatments, tests, products, and procedures? An evaluation of 5000 stories. *PLos Med*, 5(5):e95
- Sebert Kuhlmann, A. K., Kraft, J. M., Galavotti, C., Creek, T. L., Mooki, M. & Ntumy, R. 2008. Radio role models for the PMTCT of HIV testing among pregnant women in Botswana. *Health Promotion International*, 23(3):260-268.
- Shefer, T. 2004. Gendered Representations of HIV and AIDS and the Reproduction of Hegemonic Discourses on Feminity in Media Images. A paper submitted to the international workshop on Gender and Visuality (with special emphasis on the South).

 Available at: www.uwc.ac.za/arts/gendervisuality/TamaraShefer.doc. (Accessed June, 2011)
- Shell, R. 2000. Halfway to the holocaust: The economic, demographic and social implications of the AIDS pandemic to the year 2010 in the Southern African region. In R. Shell (Ed.). *HIV and AIDS: A threat to the African renaissance?* pp. 19. Johannesburg, South Africa: Konrad Adenauer Stiftung.
- Shisana, O. 2013. Plenary Session3, 20 June 2013 HIV/AIDS in South Africa: At Last the Glass is Full. Pretoria, South Africa: HSRC.
- Shisana, O., Rehle, T., Simbayi L. C., Zuma, K., Jooste, S., Zungu, N., Labadarios, D., Onoya, D, et al., 2014. *South African National HIV Prevalence, Incidence and Behaviour Survey, 2012.* Cape Town, South Africa: HSRC Press.

- Shisana, O., Rehle T., Simbayi, L.C., Zuma, K., Jooste, S., Zungu, N., Labadarious, D., Onoya, D. et al., 2014. South African national HIV Prevalence, Incidence and Behaviour Survey, 2012. Cape Town: HSRC Press.
- Shisana, O., Rehle, T., Simbayi, L., Parker, W., Zuma, K., Bhana, A., Connoly, C., Jooste, S. & Pillay, V. 2005. South Africa National HIV Prevalence, HIV Incidence, Behaviour and Communication Survey, 2005. Pretoria, South Africa: HSRC Press.
- Shisana, O., Rehle, T., Sinbayi, L. C., Zuma, K., Jooste, S., Pillay-van-Wyk, V., Mbelle, N., Van Zyl, J., Parker, N. P., Pezi, S. & the SABSSM 111 Implementation Team 2009. South African national HIV prevalence, incidence, behaviour and communication survey, 2008: A turning tide among teenagers? Cape Town, South Africa: HSRC Press.
- Shisana, O., Hall, E. J., Maluleke, R., Chauveau, J. & Schwabe, C. 2004. HIV and AIDS prevalence among South African health workers. *South African Medical Journal*, 94(10): 846-850.
- Shisana, O., Rice, K., Zungu, N. & Zuma, K. 2010. Gender and Poverty in South Africa in the Era of HIV/AIDS: A Quantitative Survey. Journal of Females's Health. 19 (1):39–46.
- Shukla, T. 2014. Media and good governance. Kuala Lumpur, Malaysia: AIBD.
- Simbayi, L. C., Kalichman, S. C., Jooste, S., Cherry, C., Mfecane, S. & Cain, D. 2005. Risk factors for HIV and AIDS among youth in Cape Town. South Africa. *AIDS and Behaviour*, 2005: 9(1): 53-61.
- Singhal, A., Cody, M., Rogers, E., & Sabido, M. 2004. Entertainment-Education and social change. Mahwah, NJ: Lawrence Erlbaum Associates, Publishers.
- Skonik, L. 2004. Addressing HIV/AIDS from an Intergenerational Perspective. Background Paper for Policy Workshop on HIV/AIDS and Family Well-being, Windhoek, Namibia, pp. 28 30. *Social Science and Medicine*, *58*:1337-1351.
- Smith, D. E., Wilson, A. J. & Henry, D. A. 2005. Monitoring the quality of medical news reporting: Early experience with media doctor. *Medical Journal of Australia*, 183 (4): 190-193.
- Sniderman, P., Brody, R. & Tetlock, P. 1991. *Reasoning and Choice: Explorations in Political Psychology.* Cambridge: Cambridge University Press.
- Sood, S. & Nambiar, D. 2006. Comparative cost-effectiveness of the components of a behavioural change communication campaign on HIV and AIDS in North India. *Journal of Health Communications*, Suppl. 2(11):143-162.
- Soul City Institute. 2008. Soul City Institute Regional Programme 2002-2007: Impact evaluation. South Africa: Soul City Institute for Health Development Communication.

- South African Advertising Research Foundation (SAARF), 2008. All Media and Products Survey (AMPS). Average Issue Readership of Newspapers and Magazines. SAARF AMPS 2008A. Available at: http://www.saarf.co.za/. (Accessed March 2012).
- South African Advertising Research Foundation (SAARF). 2011. All Media and Products Survey (AMPS). Average Issue Readership of Newspapers and Magazines. SAARF AMPS July 2010 June 2011. Available at: http://www.saarf.co.za/. (Accessed March 2012).
- South African Advertising Research Foundation (SAARF). 2011. SAARF Radio Audience Measurement Survey (RAMS). Commercial Station Summary. RAMS 2011 February 12 (Sep Dec '11). Available at: http://www.saarf.co.za/. (Accessed March 2012).
- South African Advertising Research Foundation (SAARF) 2001. All Media and Products Survey (AMPS). Average Issue Readership of Newspapers and Magazines. SAARF AMPS 2001A. Available at: http://www.saarf.co.za/. (Accessed March, 2012).
- South African Government Information. 2012. Outline of the National HIV Counselling and Testing (HTC)
 Campaign by Dr Aaron Motsoaledi, Minister of Health. Delivered to the nation at the South African
 National AIDS Council (SANAC) and Government meeting on 25 March, 2010. Available at:
 http://www.gov.za/main/redirect.htm?p=speeches/2010/10082611051001.htm
- South African Institute of International Affairs (SAIIA). 2011. African Economic Outlook 2011 Report: South Africa Full Country Note Overview, p. 3. Johannesburg, South Africa: SAIIA.
- South African Institute of Race Relations (SAIRR) 2012. South Africa Survey: Population Would Be 4.4 Million more Without HIV and AIDS. Press Release, 23 January 2012. Johannesburg South Africa: SAIRR.
- South African Medical Journal. 2001. Can Kwazulu-Natal hospitals cope with the HIV and AIDS human tide? *South African Medical Journal*, 91(5): 351-434.
- Sparks, C. 2009. South African media in transition. *Journal of African Media Studies*, 2(2): 201-209.
- SparkNotes Editors. 2014. The media: Functions of the media. SparkNotes LLC. Available at: www.sparknotes.com/us-government-and-politics/american-government/the-media/section2.rhtml. Accessed on April 14, 2014.
- Standard Bank (South Africa). 2002. The implications of AIDS reports that HIV and AIDS lowers worker efficiency, raises costs, and reduces individual savings and firms' profits. Workshop paper, p. 24.
- Statistics South Africa. 2006. Mortality and Causes of Death in South Africa, 2003 and 2004: Findings from Death Notification. Pretoria, South Africa: Statistics South Africa.
- Statistic South Africa. 2013. A Survey of Time Use: How South African Women and Men Spend Their Time. Pretoria, South Africa: Statistics South Africa.

- Statistics South Africa 2013. Mid-year population estimates 2013. Statistical Release, PO302. Pretoria, South Africa: Statistics SA.
- Stein, J. 2002. What is News? Perspectives on HIV and AIDS in the South African media: Research and evaluation. Johannesburg, South Africa: Centre for AIDS Development Research and Evaluation (CADRE). Available at: http://news.pdf (Accesses June, 2011).
- Steinberg, M., Jonathan, S., Schierhout, G., Ndegwa, D., Hall, K., Russel, B. & Morgan, J. 2002. Hitting Home: How Households Cope with the Impact of the HIV and AIDS Epidemic: A Survey of Households Affected by HIV and AIDS in South Africa. Menlo Park, CA: Kaiser Family Foundation.
- Steinberg, M., Johnson, S., Schierhurtm G., Hdegwa, D. & Henry, J. 2002. Impact of HIV/AIIDS on Public Health, Home Care, Employment, Gender and Poverty: A Household Survey in South Africa, Washington D.C, Kaiser Family Foundation.
- Stewart, H., McCauley, A., Baker, S., Givaudan, M., James, S., Leenen, I., Pick, S., Reddy, P., Rewthong, U., Rumakon, P. & Walker, D. 2001. Reducing HIV and AIDS Infection Among Youth: What can Schools Do? Key Baseline Findings from Mexico, Thailand, and South Africa. (Report on the Horizons school-based studies). New York: Population Council.
- Stover, J., Johnson, P., Zaba, B., Zwahlen, M., Dabis, F. & Ekpini, R. E. 2008. The spectrum projection package: improvements in estimating mortality, ART needs, PMTCT impact and uncertainty bounds. *Sex Transmission Infection*, 84(Suppliment 1): i24-i30.
- Streak, J. 2007. Provincial Budgets for Developmental Social Welfare Services over MTEF 2005 and 2006. A Vulnerable Child Perspective. Budget Briefs 158. Cape Town, South Africa: IDASA.
- Strydom, H. & Venter, L. 2004. Sampling and Sampling Methods. In A. S. De Vos, H. Strydom, C. B. Fouche & C. S. L. Delport (Eds.). *Research at the Grass Roots for the Social Sciences and Human Service Professions*, 2nd Ed. Pretoria, South Africa: Van Schaik.
- Swanepoel, T., Fourie, L. M. & Froneman, J. D. 2007. HIV and AIDS reporting in three South African newspapers. *Communicare*, 26(1):74-91.
- Tanner, A. H. 2004. Agenda building, source selection, and health news at local television stations: Local television health reporters. *Science Communication*, *25(4):350-363*.
- The Guardian (UK). (May 22, 2003). South Africans Pin Hope on Hip Sex Campaign. pp. 12. London: The Guardian.
- The LoveLife Mornitoring Team. 2004. LoveLife 2004 report on activities and progress. Johannesburg, South Africa: LoveLife. (Accessed September 13, 2011.

 Available at: http://www.LoveLife.org.za/corporate-research/AnnualReport_2004.pdf.).

- The Presidency, Republic of South Africa. 2011. Questions for Oral Reply by Deputy President Kgalema Motlanthe in the National Council of Provinces, 15 August, 2011, Question 9 (by Mr B.L Mashile (ANC Mpumalanga). Union Buildings (Pretoria): The Presidency, South Africa. (Available at: http://www.thepresidency.gov.za/pebble.asp?relid=4733. (Accessed July 2012)
- Thomass, B. 2003. Knowledge Society and Public Sphere: Two Concepts for the Remit. In G. F. Lowe & T. Hujanen (Eds.). *Broadcasting e-Convergence: New Articulations of the Public Service Remit,* pp. 33. Goteborg, Sweden: Nordicom.
- Timaeus, I. M. 2008. Death in the Family: AIDS, demography and poverty in Africa. Inaugural lecture delivered to the London School of Hygiene and Tropical Medicine, London, February, 26.
- Treatment Action Campaign (TAC). (April 23, 2010). Detailed Commentary on Updated ART Guidelines. Cape Town, South Africa: TAC.
- Trochim, W. M. 2006. The Research Methods Knowledge Base. 'Probability Sampling. Available at: http://www.socialresearchmethods.net/kb/sampprob.php. (Accessed on February 11, 2010).
- UNAIDS. 2000. UNAIDS Best Practice Collection: Protocol for the Classification of Discrimination Against People Living With HIV and AIDS. Geneva, Switzerland: UNAIDS.
- UNAIDS 2000a. HIV and AIDS-related stigmatization, discrimination and denial: Forms, Contexts and Determinants, Research Studies from Uganda and India. Geneva, Switzerland: UNAIDS
- UNAIDS. 2004. *The Media and HIV and AIDS: Making a Difference*. UNAIDS and 03.58E (English original, January). Geneva, Switzerland: UNAIDS.
- UNAIDS. 2008. Report on the Global AIDS Epidemic. Geneva, Switzerland: UNAIDS
- UNAIDS/Kaiser Family Foundation. 2004. *The Media and HIV and AIDS: Making a Difference.* (UNAIDS and 03 and 58E). Geneva, Switzerland: UNAIDS/KFF.
- UNAIDS Best Practice Collection, Armstrong S. 2005. *Monograph: Getting the Message Across: The Mass Media and the Response to AIDS. UNAIDS and 05.29E.* Geneva, Switzerland: UNAIDS-Joint United Nations Programme on HIV and AIDS.
- UNAIDS Global Report. 2007. AIDS Epidemic Update. Geneva, Switzerland: UNAIDS.
- UNAIDS Global Report. 2006. AIDS Epidemic Update. Geneva, Switzerland: UNAIDS.
- UNAIDS/WHO. 2006. UNAIDS Report on the Global AIDS Epidemic, Annex 2: HIV and AIDS Estimates and Data, 2005. Geneva, Switzerland: UNAIDS.
- UNAIDS/WHO. (2008, March). *UNAIDS Annual Report: Knowing your Epidemic.* Geneva, Switzerland: UNAIDS.
- UNAIDS/WHO. 2004. AIDS Epidemic Update, December. Geneva, Switzerland: UNAIDS/WHO.

- UNAIDS. 2010. Report on the Global AIDS Epidemic. Geneva, Switzerland: UNAIDS.
- UNAIDS, 2011. AIDS at 30: Nations at the crossroads. Geneva, Switzerland: UNAIDS.
- UNAIDS. 2012b. World's AIDS Day Report: Results. Geneva, Switzerland: UNAIDS.
- UNAIDS, 2012a. Report on the Global AIDS Epidemic. Geneva, Switzerland: UNAIDS.
- UNAIDS. 2013a. Report on the Global AIDS Epidemic. Geneva, Switzerland: UNAIDS.
- UNAIDS. (2013b). 2013 Regional Report Getting to zero: HIV in Eastern and Southern Africa. Geneva, Switzerland: UNAIDS
- UNAIDS. 2013c. Core Slides: Global Summary of the AIDS Epidemic, 2013. Geneva, Switzerland: UNAIDS
- UnderWood, C., Hachonda, H., Serlemitsos, F. & Bharath-Kumar, U. 2006. Reducing the risk of HIV transmission among adolescents in Zambia: Psycosocial and behavioural correlates of viewing a risk-reduction media campaign. *Journal of Adolescent Health*, 36(1):55.e1-55.e13.
- United Nations (UN). 2004. Paper delivered at the Policy Workshop on HIV and AIDS and Family Wellbeing, Windhoek, Namibia, 28-30 January 2004. United Nations Department of Economic and Social Affairs. pp. 5.
- United Nations (UN). June 9, 2011. "As women, girls bear disproportional burden of HIV/AIDS epidemic, no gains will be made without gender equality, ending violence against women, panel told." Sixty-fifth General Assembly High-Level Meeting on HIV/AIDS Panel Discussion (PM). United Nations General Assembly, GA/11092.
- United Nations Development Ptrogramme (UNDP). 2001. On the Socioeconomic impact of the HIV and AIDS epidemic. *Population and Development Review*, 27(3): 619-624.
- United Nations Development Programme. 2006. Human Development Report, 2006. New York: Palmgrove, Macmillan.
- United States Agency for International Development (USAID) and AIDSTAR-One. 2011. *Mass Media and HIV Prevention*. Washington, DC: USAID.
- Van Blerk, L. & Ansell, N. 2007. Alternative care giving in the context of Aids in southern Africa: Complex strategies for care. *Journal of International Development*, 19(7):865-884.
- Van Rossem, R. & Meekers, D. 2007. The reach and impact of social marketing and reproductive health communication campaigns in Zambia. *BioMedicineCentral Public Health*, 7:352-368.
- Wallas, L. S. & Ballard, J. E. 2003. Osteoporosis coverage in selected women's magazines and newspapers, 1998-2001. *American Journal of Health Behaviour*, 27(1):75-83.

- Wallis, P. & Nerlich, B. 2005. Disease metaphors in news epidemic: The UK media framing of the 2003 SARS epidemic. *Social Science and Medicine*, 60:2629-2639.
- Wallis, R. E. 2008. Hungry for the Other: Representation of HIV and AIDS in the South African Media.

 Unpublished Minor Dissertation for Masters of Philosophy in African Studies. Cape Town, South Africa: University of Cape Town.
- Wasserman, H. & De Beer, A. 2004. Covering HIV and AIDS: Towards a Heuristic Comparison Between Communication and Utilitarian Ethics. Communicatio, 30(2):84-97.
- Weil, D. N. 2005. Accounting for the effects of health on growth. NBER Working Paper 11455.
- Welman, J. C. & Kruger, S. J. 2004. Research Methodology for the Business and Administrative Sciences, 2nd ed. Cape Town: Oxford University Press.
- White, C. J., Malan, B. & De kock, P. 2005. Research: A Practical Guide. Pretoria: Ithuthuko Investments Publishing.
- Whiteside, A. 2008. The Economic Impact of AIDS. In S. K. Abdool & Q. K. Abdool, (Eds.). HIV and AIDS in South Africa, pp. 405-418. Cape Town, South Africa: Cambridge University Press.
- Whiteside, A. 2002. Poverty and HIV and AIDS in Africa, Third World Quaterly, 23(2): 313-332.
- Wigston, D. 2002. AIDS and Political Cartoons: A Case Study. Communicatio, 28(2):74-94.
- Wikipedia. 2012. The Sowetan (South Africa). Available at: http://en.wikipedia.org/wiki/The_Sowetan. (Accessed April, 2012).
- Wikipedia. 2012. City Press (South Africa).

 Available at: http://en.wikipedia.org/wiki/City_Press_(South_Africa). (Accessed March, 2012).
- Wikipedia. 2012. The Citizen (Sourh Africa). Available at: http://en.wikipedia.org/wiki/The_Citizen_(South_Africa). (Accessed March, 2012).
- Wikipedia. 2012. The Star (South Africa). Available at: http://en.wikipedia.org/wiki/The_Star_(South_Africa). (Accessed April, 2012)
- Wikipedia. 2012. City Press (South Africa). Available at: http://en.wikipedia.org/wiki/City_Press_(South_Africa). (Accessed March, 2012).
- Wikipedia. 2012. The Mail and Guardian Newspaper. Available at: http://en.wikipedia.org/wiki/Mail_%26_Guardian. (Accessed March, 2012).
- Wilson, K., Code, C., Dornan, C., Ahmad, N., Herbert, P. & Graham, I. 2004. The reporting of theoretical health risks by the media: Canadian newspaper reporting of potential blood transmission of creutzfeldt-jakob disease. *BioMedicineCentral Public* Health, 4(1):1-9.

- Wojcicki, J. M. & Malala, J. 2001. Condom Use, Power and HIV and AIDS Risk: Sex-workers Bargain for Survival in Hillbrow and Joubert Park and Berea, Johannesburg. *Social Science and Medicine*, 53:99-121.
- World Health Organisation (WHO). 2001. Macroeconomics and Health: Investing in Health for Economic Development. Geneva, Switzerland. World Health Organisation.
- Yamano, T. & Jayne, T.S. 2005. Working Age Adult Mortality and Primary School Attendance in Rural Kenya. *Economic Development and Cultural Change*. 53(3):619-653.

7.4 APPENDICES

Appendix A: Data Collection Tool for Newspaper (Media) HIV and AIDS Content Analysis Study

DATA COLLECTION TOOL THE SOUTH AFRICAN MEDIA HIV AND AIDS CONTENT STUDY

Name of Publication: Month and Year:

Page Location of output within																Days	of the	Mor	nth												
each newspaper edition	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	1 8	19	20	21	22	23	24	25	26	27	28	29	30	31
Front Page																															
2. Back Page																															
3. Other Page Numbers (2,3,4,)																															
1. Main article																															
2. Secondary article																															
1. Types of Media HIV and AIDS	Outp	outs						1		ı	•					1				1			1	1				•			
1. HIV and AIDS news break																															
2. News Analysis																															
3. Editorial																															
4. Feature articles																															
5. Straight news																															
6. Opinion Article																															
7. Investigative news																															
8. Letters to the editor																															
1. Local news story																															
2. International news story																															
3. National news story																															
The Quality or Depth of the outpo	uts																			•			•	•				•			
Combination of Journalism Skills																															

1. Good																
2. Fair																
3. Poor																
Application of Creativity 1. High quality																
2. Medium quality																
3. Low quality																
Research:																
- Well Researched																
- Fairly Researched																
- Not Researched																

<u>DATA COLLECTION TOOL</u> Name of Publication: -----

Month:														Days	of the	Mont	h														
<u>Year</u> :	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		20	21	22	23	24	25	26	27	28	29	30	31
																			9												
Newspaper Space for HIV an	id Al	DS	artic	eles	and	rep	orts	(mea	sure	d in c	olumi	n inch	(cm2)																		
- Space (size) dedicated to																															
HIV and AIDS																															
Nature of Publication as:																															
Development Issue																															
Health Issue																															
Social Issue																															
HIV and AIDS Issue																															
Tone towards HIV																															
and AIDS																															
- Negative																															
- Positive																															
- Neutral																															
Language Use a. Professional																															
b. Unprofessional																															
Prominence or Importance																															
attached to the story																															
a - Prominent																															
b - Less Prominent																															
c - Not Prominent																															
Confidentiality																															
- Confidential report																															
- Less Confidential report																															

- Not Confidential report																
- Breaking of Silence for overcoming stigma and discrimination																
- Stigmatizing/Stereotyping output																

Main Subjects of HIV and AIDS Articles (Primary and Secondary Articles) / Information about HIV/AIDS

Topics/Subjects of HIV and AIDS Article Days Month-----Year-----Name of Media Organization: -----Subjects/Topics 3 4 5 6 7 8 9 1 2 12 13 14 15 N/B 16 | 17 18 19 20 21 22 24 25 26 27 Total HIV and AIDS Prevalence HIV and AIDS Prevention HIV and AIDS Testing HIV and AIDS Awareness and Education Medical cost of AIDS Economic cost of 6. AIDS Demographic cost of AIDS Other social costs 8. of AIDS Politics of AIDS 9. AIDS Treatment Claim of ability to 11. cure AIDS Scientific 12 Discoveries 13 Social/Behavioura I Pattern Sexual Transmission Rate 14. Vulnerable Groups

15.	Vaccine																
	Development																
16	HIV and AIDS																
	Management																

Sources of HIV and AIDS News Reports/Articles/Topic

<u>N/B</u>	Sources/Topic		
		Names of Media Organizations:	Month and Year:
1.	Department of Health and Social Development		
2.	Other Government Ministers/Official		
3.	Presidency		
4.	Private Organizations and Government Department		
5.	Government Opposition party		
6.	Officials of Religious Organizations		
7.	Donor Agency		
8.	Research Report		
9.	Research Center/University		
11.	Civil Service Organizations (CSO)		
12.	Journalist's Initiative		

13.	Columnist/Articles			
14.	Readers/Letters to the Editor/Opinion Articles			
15	Editorial (Media)			

Geographical Sources of Media HIV and AIDS Articles

N/B	Geographical Sources of HIV/AIDS	Names of Media O	rganizations	Month and Ye	<u>ar:</u>	 TOTAL
	<u>Articles</u>					<u>TOTAL</u>
1.	Local/Provincial					
2.	National					
3.	Foreign/Global					
4.	Local Syndicate/Feature Service					
5.	Foreign Syndicate/Feature Service					

Media Coverage of HIV and AIDS for Each Month

					Νι	<u>ımb</u>	er o	of A	rticl	es/Ou	tputs	<u>.</u>				 		<u> </u>	Month	and	<u>Year</u> :	 	 				<u>Total</u>
N/B	N/B Names of Media 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Organizations 1.																										
2.																											
3.																											
4.																											
5.																											
6.																											

Blame Attribution for HIV and AIDS in Media HIV and AIDS News Stories/Outputs

<u>N/B</u>	Blame Attribution	Names of Media Organizations	Month and Yea	<u>r:</u>	 TOTAL
1.	Prostitution				
2.	Gays/Lesbians				
3.	Reckless Lifestyle				
4	Truck Drivers				
5.	Polygamy				
6.	Husband/Men				
7.	Wives/Women				
8.	Other Ethnic Cultural Practices				
9.	Medical Sector/Government				
10.	Poverty				
11.	No Blame Attribution				

Constructiveness of Media HIV and AIDS News Output

N/B	Constructiveness/Style of HIV and AIDS Articles	Names of Media Org	ganizations	Month	and Year:	 TOTAL
1.	Very Constructive and Informative					
2.	Constructive and Informative					
3.	Not Constructive and Informative					

Technical Competence of Media HIV and AIDS Outputs/Reporting

N/B	Technical Competence	Names of Media Organ	izations	<u>Mon</u>	th and Year:	 TOTAL
1.	Very Competent					
2.	Competent					
3.	Incompetent					
4.	Very Incompetent					

Appendix B: Public Perception and Attitude Towards South African Media HIV and AIDS Coverage

QUESTIONNAIRE

This research is for study purposes towards the completion of a PhD degree. This interview may take about 20 minutes of your time to complete.

The information provided will help in arriving at how the media have been contributing to the efforts against HIV and AIDS as well as their capability in playing this critical social development role. It will also help in recommending and suggesting possible solutions for improved media participation in tackling the HIV and AIDS epidemic. All information will be highly appreciated and will be treated confidentially.

Section 1: DEMOGRAPHIC DETAILS 1.1 Gender
Male Female Female
1.2. Age groups 20 -25 26 - 30 31 - 35 36 - 40 41 and Above
1.3. Sex Male Female Female
1.4. Marital status Single
1.5. Highest level of education
1.6. Area of study or discipline studied at School
Employment Status 1.7.1 What is your present amployment status?
1.7.1 What is your present employment status? Employed
1.7.2 What is your present position in your organization if employed? Please state in the box.

SECTION 2: MEDIA ACCESS, USE AND SOURCES OF HIV AND AIDS INFORMATION 2.1 Do you have any of the following: Sometimes Don't Know Yes No 2.1.1 TV at home 2.1.2 Radio at home 2.1.3 Internet access at home 2.1.4 Access to newspaper 2.2. Do you read newspaper? Yes No \square 2.3. If Yes, how often do you read newspaper in the week? Every Day Almost every day 1 to 3 times a week Never Other (Specify) 2.4. If No, why do you not read newspaper? 2.5. Do you listen to radio news broadcast? Yes _____ No ____ 2.6. If Yes, how often do you listen to radio in the week? Almost every day 1 to 3 times a week Other (Specify) Every day Never 2.7. Do you watch television news broadcast? Yes No 2.8 If Yes, how often do you watch TV in the week? Every Day Almost every day 1 to 3 times a week Other (Specify) Never 2.9. Which television channel(s) do you watch regularly? (You can give multiple answers) 2.9.1 SABC1 2.9.2 SABC 2 2.9.3 SABC 3 2.9.4 MNET 2.9.5 DSTV 2.9.6 ETV 2.9.7 Never watch TV

2.10 Which radio station do you listen to regularly		t Da sudanlu		
Regularly 2.10.1 Thobela FM,	INO	t Regularly		
2.10.2 Phalaphala FM,				
2.10.3 Jacaranda FM				
2.10.4 Capricorn FM				
2.10.5 Listen to radio always				
2.10.6 Other (Specify)				
2.11 Which newspaper do you read regularly?				
Regularly	Not F	Regularly		
2.11.1 Sowetan				
2.11.2 The Citizen				
2.11.3 Daily Sun				
2.11.4 The Star				
2.11.5 Sunday Times				
2.11.6 City Press				
2.11.7 Mail and Guardian				
2.11.8 The New Age				
2.12. Do you watch more TV on weekend?				
Yes No Don't know				
2.12. Do you liston to radio more on weekend?				
2.13 Do you listen to radio more on weekend? Yes No Don't know				
res No Don't know				
2.14 Do you read newspaper more on weekend?				
Yes No Don't know	V			
2.15. Identify your regular source or sources of HI	V and AIDS inf	formation in the	e nast 12 mon	ths
2.10. Identify your regular source or sources of the	v ana mbo mi		o past 12 mon	1113.
	A lot of	Some	Only a few	Don't know
	information	information	information	
2.15.1 Television				
2.15.2 Newspaper				
2.15.3 Radio				
2.15.4 Internet				
2.15.5 Family and Friend				
2.15.6 HIV positive persons				
2.15.7 School and teachers and students				

2.15.8 Govt. agencies and National HIV and				
AIDS prevention and education				
campaigns				
2.15.9 Political leaders				
2.15.10 NGOs or other advocacy leaders				
2.15.11 Popular sports and or music star				
2.15.12 Doctors and other health care givers				
2.15.13 Holistic healers and Alternative				
medicine providers				
2.15.14 Churches and religious organizations				
2.15.15 Street signs, flyers, or billboards				
2.15.16 Employer or job				
21/ From the oboughts identify and course the	مدالم محمر باطام	the meant info	manation object II	IIV and AIDC
2.16. From the above list, identify <u>one source</u> that prevention and management to you in the			rmation about H	IIV and AIDS

SECTION 3: TRUSTWORTHINESS OF HIV AND AIDS INFORMATION SOURCES

3.1. How much you trust each of the following sources of HIV and AIDS information and education.

		Always	Most of the time	Only sometimes	Hardly ever
3.1.1	Television				
3.1.2	Newspaper				
3.1.3	Radio				
3.1.4	Internet				
3.1.5	Family and Friend				
3.1.6	HIV positive persons				
3.1.7	School/teachers/students				
3.1.8	Govt. agencies and National HIV and AID)S			
	prevention and education campaigns				
3.1.9	Political leaders _				
3.1.10	NGOs or other advocacy leaders				
3.1.11	Popular sports and or music star				
3.1.12	2 Doctors and other health care givers				
3.1.13	B Holistic healers and Alternative medicine providers				
3.1.14	Churches and religious organizations				

SECTION 4: THE EFFECTIVENESS OF THE SOURCES OF HIV AND AIDS INFORMATION SOURCES

4.1 How effective is each of the following	in teaching	•	ut HIV and AID	S?	
	Effective	Not Effective	Don't know		
4.1.1 Television 4.1.2 Radio 4.1.3 Newspapers 4.1.4 Schools and teachers 4.1.5 Peer educators					
4.1.6 Health workers, such as doctors and nurses4.1.7 Parents4.1.8 Churches4.1.9 Local or community centres4.1.10 National HIV and AIDS prevention and education campaigns				<u>-</u>	
SECTION 5: NEWS ACCURACY AND N	/IEDIA HAN	DLING OF	ETHICAL ISS	UES ON HIV	AND AIDS
 5.1. Through its coverage of HIV and AID 5.1.1 Is making people live in denial and of 5.1.2 Is highly sensationalizing HIV and AID 5.1.3 Is encouraging stigma and discrimin against People Living with HIV and AID 5.1.4 The media is stereotyping the disear promiscuous, homosexuals, lesbian 5.1.5 The language use by the media in real HIV and AIDS is often not appropriating information not adequate. 5.1.6 HIV and AIDS information given by the form their sources. 5.1.7 Often release unverified HIV and AID from their sources. 5.1.8 Is helping to fight stigma and discrimms. 5.1.9 HIV and AIDS statistics from the median reporting in about HIV 5.1.11 There is now human interest angle reports about HIV and AIDS. 	die IDS lation AIDS (PLW se as disease s and drug a eporting about the media is uctive DS informat mination aga edia is often anguage us V and AIDS.	rH) se of the pool addicts. out ng, and ion inst PLWH not accurate	Agree	Disagree	Don't Know
5.2. How can you describe media reportin Sensational Negatively bias				□ Don	't know 🖂

5.3. Based on your knowledge of media coverage of HIV and AIDS, do you think the media are to promote:	e helping
5.3.1 Stigmatization and discrimination 5.3.2 HIV and AIDS prevention 5.3.3 HIV and AIDS testing 5.3.4 HIV and AIDS care –giving 5.3.5 Condom use 5.3.6 HIV and AIDS free generation	
SECTION 6: HIV AND AIDS RELATED PROBLEMS AND ADEQUACY OF MEDIA COVER AND AIDS	RAGE OF HIV
6.1. What are the HIV and AIDS related problems of concern in your locality (you can give mulanswers)	ltiple
6.1.1 Fear of stigma and discrimination 6.1.2 Alcoholism and drug 6.1.3 Poverty 6.1.4 Sexually transmitted diseases (STDs) 6.1.5 HIV and AIDS opportunistic diseases 6.1.6 Increasing HIV and AIDS infection 6.1.7 Multiple sexual partnership 6.1.8 Unplanned teenage pregnancies 6.1.9 Rape (In and outside marriage) 6.1.10 Difficulty assessing HIV and AIDS testing 6.1.11 Difficulty accessing HIV and AIDS counseling and treatment	
6.2. Is the HIV and AIDS information in the media adequate for success in the fight against HI	IV and AIDS?
Yes No Some how Don't know	
6.3 Do you agree of or disagree with each of the following statements.	
6.3.1 I know enough about HIV and AIDS. 6.3.2 I don't need to know more about HIV and AIDS 6.3.3 People who talk to us about HIV and AIDS don't understand the pressure on those infected and affected by the pandemic 6.3.4 Most HIV and AIDS information is not relevant to people's lifestyle 6.3.5 The media should do more stories on different aspects of HIV and AIDS pandemic	t Know

6.3.6 There is adequate information on HIV and AIDS in the media for success against HIV and AIDS
6.3.7 More information is needed in the media regarding HIV and AIDS, especially to inform children and youth about the disease
6.3.8 There should be more information in the media on the
transmission, treatment, prevention, and consequences of the disease.
6.3.9 HIV and AIDS information I received from the media is enough
to affect my attitude to HIV and AIDS positively.
6.3.10 The media are doing enough for success against HIV and AIDS
6.4. Do you agree or disagree with each of the following statements.
Agree Disagree Don't Know 6.4.1 I listen to the radio and watch TV and read newspaper (N/P) for
entertainment and I don't want to be scared or made to
worry about other things
6.4.2 I get enough HIV and AIDS information from other sources, I don't want to hear or see it on TV or radio or read
about it on newspaper (n/p)
6.4.3 More HIV and AIDS related content on TV or radio or newspaper won't make any difference to the epidemic
6.4.4 More HIV and AIDS related content on TV or radio or
newspaper might encourage people to have more casual
and unsafe sex.
SECTIO 7: EFFECTS OF MEDIA HIV AND AIDS INFORMATION COMMUNICATION ON THE
AUDIENCE
7.1 In your own experience do TV/radio/newspaper have positive impact on your understanding of HIV and AIDS and related sexual behaviour?
Yes No Don't know
7.2 Do you think TV, radio and newspaper have positive influence on attitude and traditions driving the HIV and AIDS pandemic?
Yes No Don't know
7.3 Do you think that TV, radio and newspaper are positively communicating about HIV and AIDS and related health issues?
Yes No Don't know

SECTION 8: PUBLIC RESPONSE TO MEDIA INFORMATION ON HIV AND AIDS

8.1 Which of the following actions have you taken because of what you learned from HIV and AIDS

information contained in radio or TV programme, or newspaper news and feature articles. 8.1.1 Visited a doctor or other health care provider 8.1.2 Talked to parents and adults about HIV and AIDS, sex or other difficult issues 8.1.3 Talked to siblings and or friends about HIV and AIDS 8.1.4 Talked to a partner about safer sex, birth control or sexual transmitted disease 8.1.5 Taken HIV and AIDS test 8.1.6 Looked for more information on HIV and AIDS (called helpline, etc) 8.1.7 Gone for HIV and AIDS counseling 8.1.8 Have only one sexual partner and avoid multiple partners 8.1.9 Uses condom 8.1.10 Practices total abstinence 8.2 If No, why have you not taken any action and s based on media information on HIV and AIDS? 8.3 Based on your responses about HIV and AIDS messaging and content on radio, TV, and newspaper, what do you think of the following statements? Agree Disagree Don't know 8.4 Free and easy access to HIV and AIDS information is critical to its prevention and management 8.5 There should be more HIV and AIDS messaging and programming and content on radio, TV, and newspaper 8.6 Messages and contents about fear and death turn people off 8.7 Messages on radio and TV, and newspaper news and feature contents should give straight-forward information about how to prevent and manage HIV 8.8 HIV and AIDS messaging on radio and TV and newspaper contents need to offer hope for an end to AIDS 8.9 Messaging and contents that tap into people's aspirations can be effective in HIV and AIDS prevention and management 8.10 HIV and AIDS messaging and contents need to better address the social and cultural influences on people's lives

.1. Suggestions
/hat are your suggestions for success and improvement in media coverage of this pandemic?

Source: Part of the questionnaire for the study of public perception and attitude to South African media coverage of HIV and AIDS is a modified version of SABC/KFF interview schedule for "Young South Africans, broadcast media, and HIV/AIDS national awareness survey", 2007.