

Reporting HIV/AIDS

A guide for Kenyan Journalists

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Foreword



Acknowledgement

Introduction

Over the last 20 years, HIV/AIDS has spread very rapidly in many parts of the world. In Kenya, the Ministry of Health in 2001 estimated that some 2.2 million persons are infected with HIV and 500 die of AIDS daily, leaving some 1 million orphans behind. Naturally, this has had a negative impact at all levels of society and across all sectors alike.

After years of silence, the Government of Kenya finally assumed political leadership in responding to the challenge of HIV/AIDS when the President declared HIV/AIDS a national disaster in 1999. He said:

“AIDS is not just a serious threat to our social development; it is a real threat to our very existence. AIDS has reduced many families to the status of beggars and no family in Kenya remains untouched by the suffering and death caused by AIDS. The real solution of the spread of AIDS lies in each and everyone of us.”

Since then, policy development and advocacy initiatives have started to take shape. The process led to the formation of the National AIDS Control Council (NACC) whose role is to coordinate a multi-ministerial and multi-sectored approach in the fight against HIV/AIDS at all levels and to provide leadership to communities through its 210 Constituency HIV/AIDS Control Committees (CACCs).

All along, the media has played a central role in addressing HIV/AIDS in Kenya. It has created awareness and facilitated partnerships among different sectors, and for persons living with the virus. The has been instrumental in exposing cultural influences and practices that are responsible for the spread of HIV, and advocated for policy changes to give the poor access to drugs.

However, sometimes the media has failed to observe the sensitivity needed when dealing with a disease that creates stigma, denial, blame and feelings of guilt. Therefore, it is apparent that the media needs to apply a factual, non-judgmental reporting style that helps Kenyans to maintain their health and to support those infected and affected by HIV.

This manual has been designed to help journalists acquire the necessary skills that are needed when reporting on HIV/AIDS. The book builds on the Media Council of Kenya's Code of Conduct for Journalists and provides guidance and suggestions for effective HIV/AIDS reporting. It is the hope of the authors that this manual will enhance the positive role that media can play in responding to AIDS.

The Role of the Media

The media is a very powerful tool in the formation of opinion in any society. It is therefore of the greatest essence that journalists exercise the power of their pens judiciously. In recognition of their power, the Media Council of Kenya has adopted a Code of Conduct for the practice of journalism. This Code seeks to balance the right of the public to information and the right of privacy of the individual. (See appendix)

The power of the media is also manifested when reporting on HIV/AIDS. Media can clearly contribute in educating those who are HIV negative to take care of their health and to avoid contracting the virus, while at the same time learning to live with friends, relatives and neighbours who are positive. Likewise, the media can help those who are positive to live better with this condition and to get the best out of life. All this depends on how journalists, address the task of reporting and writing on HIV and AIDS. Can the media proactively disseminate accurate, objective, balanced and non-judgmental information on this subject? This is the big question.

Unlike other issues, HIV poses unique challenges to journalists. Since the first case of HIV/AIDS was reported in Kenya in the early 1980's, society has yet to come to terms with this epidemic. Necessary preventive measures have largely failed to be embraced, while those infected and affected have been stigmatised. Journalists have a critical role in correcting this situation. They have the *social responsibility* to report on matters relating to HIV/AIDS, and must observe *ethical reporting* while doing so.

Social responsibility

Media has a responsibility to ensure that HIV/AIDS remains in the public domain. To achieve this, it is important that journalists first consciously overcome the denial complex and shifting of blame and strive to write objectively on the subject.

Reporters have therefore to be careful not to be carried away by scaring, discriminative and uninformed sources that hide the truth and influence the public to dwell on issues peripheral to prevention and control. Such reports mislead the public and policy makers on issues critical to HIV/AIDS.

Ethical reporting

The ultimate goal in HIV/AIDS reporting must be to reduce the impact it has on Kenyans. Ethical and responsible reporting should therefore provide the correct facts on HIV/AIDS, and to relieve as far as possible the physical pain and psychological distress of those living with HIV/AIDS or affected by it.

Obviously, the Code of Conduct applies even more when reporting about vulnerable people. The 1997 meeting of senior media practitioners from Mauritius, Burkina Faso, Mali, Cote d'Ivoire and Senegal adopted basic principles to assist the media in reporting HIV/AIDS. The meeting noted that any journalist who imparts biased information on HIV/AIDS is a constraint to the flow of information and a hindrance to the fight against the epidemic. Journalists therefore should:

- Respect the rights of persons living with HIV by being sober, realistic and balanced and by keeping confidentiality of news sources
- Increase knowledge and train on HIV/AIDS issues
- Be concerned about figures and facts
- Involve the community in reporting
- Collaborate with HIV/AIDS organizations and persons living with HIV
- Make a link between HIV/AIDS and STDs
- Use appropriate language
- Sustain commitment to increased coverage of HIV/AIDS and
- Avoid discrimination by linking HIV/AIDS to tribe, class, race, culture, religion or nationality

I Strategies for Effective HIV/AIDS Reporting

Challenging dogmas in cultural myths and religion

Myths

Myths abound about the HIV/AIDS epidemic. They undermine people's choices to take effective control of their lives and their sexual partners. While more informed people find some of these myths laughable, many others take them seriously. More often than not, myths also co-exist with pieces of correct information in people's minds. Journalists need to be aware of the myths and be a conscious guard against infiltration of mythical propaganda in reporting HIV/AIDS. They should also do their best to expose them for what they are just myths. Below are some of the most frequent myths circulating in Kenya. The list is by no means exhaustive, but it serves to sensitize one to the kind of propaganda to guard against.

Myth	Observation
<ul style="list-style-type: none">- <i>HIV/AIDS only kills sex workers in cities and towns.</i>- <i>HIV/AIDS attacks mainly the Luo from Western Kenya, because they practice wife inheritance.</i>- <i>Only gay men contract HIV.</i>- <i>HIV/AIDS affects mainly uncircumcised men.</i>	<p>The virus is very indiscriminative. It does not choose the ethnic origin of the person, or their sexual preferences.</p> <p>Anybody who has unprotected sex with an infected person can contract HIV. This is illustrated by national HIV surveillance data that confirm infections in rural and urban areas, and in different ethnic groups are alike.</p>

Myth	Observation
<ul style="list-style-type: none"> <li data-bbox="141 204 524 268">- <i>Sex is safe as long as my partner looks strong and healthy.</i> <li data-bbox="141 528 524 560">- <i>HIV/AIDS is spread by mosquitoes.</i> <li data-bbox="141 890 524 1026">- <i>Sex is a natural thing, which we desire, just like food. You cannot stop or control the sexual urge because it involves passion.</i> 	<p data-bbox="581 204 981 483">This is a dangerous misconception. There is no way of knowing whether a person is infected by looking at them. A person infected with HIV will usually live with the virus for many years before the first health problems occur. All this time, it can be transmitted to unprotected sex partners.</p> <p data-bbox="581 528 981 842">The virus needs direct contact of the body fluids of two human beings to be transmitted, and mosquitoes do not have a role to play in it. This is also evidenced by the fact that HIV predominantly occurs in sexually active adults or newborns infected by their mothers, while older children and old adults are not infected.</p> <p data-bbox="581 890 981 1385">The way one has sex is not unchangeable. Sexuality and sexual behaviour are influenced by social norms and expectations. In Kenya, men do have sex regularly, and sometimes with different partners. In the era of HIV/AIDS, such behaviour has become one of the driving forces behind the epidemic. The time has come to question the value of one's relationships, and what they mean in the context of HIV. Other useful engagement, for example sports, can keep the mind off sex.</p>

Myth	Observation
<ul style="list-style-type: none"> - <i>Condoms are laced with HIV.</i> - <i>Condoms have holes to allow the virus pass.</i> - <i>Witchdoctors can provide herbs that can be taken before sex and therefore prevent contracting HIV.</i> - <i>One has been bewitched.</i> - <i>HIV/AIDS is a curse “Chira”</i> - <i>A person is emaciated because there is something the gods want from him.</i> - <i>It is possible to remove all infected blood and fill the infected person with fresh healthy blood.</i> 	<p>These types of myths are regularly spread by people whose agenda is to discredit condoms. Fact is that all condoms recommended by the Kenya Bureau of Standards are lubricated with a chemical that kills HIV and other viruses. In addition, their material is strong enough to even prevent water from leaking out when poured inside. Viruses are a lot bigger than water molecules. How would they be able to pass such a wall?</p> <p>There are no herbs that prevent one from contracting HIV/AIDS. Such a belief endangers one’s life.</p> <p>AIDS is caused by HIV and witchcraft or curses have no role in transmission. Such a belief, however, hinders people from protecting themselves and their partners from the virus, and from living positively with the virus once infected.</p> <p>A common belief among the Akamba. The same comments as above apply.</p> <p>Unfortunately no because there is scientific evidence to it. HIV infected cells are all over the body, not only in the blood.</p>

Myth	Observation
<ul style="list-style-type: none"> - <i>Sex with a virgin cures the disease.</i> - <i>Sex with a baby cures AIDS.</i> - <i>Sleeping with a dead body is a cure.</i> - <i>Certain witchdoctors can cure HIV/AIDS.</i> - <i>Certain people cure HIV/AIDS through prayers.</i> 	<p>There is no biological mechanism that would cleanse the body from the virus. But chances are high that the virgin will become infected as well.</p> <p>These myths have no connection with cure, as there is no biological mechanism to cleanse the infected person from the virus. However, such beliefs are dangerous because they divert the attention from protecting one's partners from contracting the virus, and - if infected - from living positively with the virus.</p>

Media, Religion and HIV/AIDS

Religion is a great force in society. All religions share common values especially on respect and sanctity of human life. Religion, therefore, is the source of love, compassion and tolerance and it has a lot to contribute to the fight against HIV/AIDS.

Media can sharpen public opinion on how different religious leaders deal with issues of HIV/AIDS. They can acknowledge the religions' substantive influence on people's attitudes towards HIV/AIDS by highlighting the noteworthy initiatives in support of those in need. They also need to play a stronger role in challenging religious dogmas that undermine efforts to prevent infection or live without stigma if infected. This also calls for them to be more inquisitive and critical of issues; not just trailing and reporting what religious leaders do or say.

In the past, the religious groups attitude towards HIV/AIDS has to an extent been pharisaic and moralistic. Based on a never changing clichè of *'If you want to avoid HIV/AIDS, keep God's commandments'*, its messages have often been simplistic and judgmental.

Here are some examples:

- **Condom use:** Twenty years into the AIDS epidemic, it is obvious that the “No condom!” message has increased people's risk of HIV infection because it has deprived them of responsible protection during sexual intercourse.
- **Pre-marital HIV testing:** HIV testing as a prerequisite for marriage increases stigmatization, isolation and victimization, especially when names of those who are HIV infected have to be disclosed. This practice sows seeds of distrust, hatred and hypocrisy, and is therefore inconsistent with the churches' professed mission of preaching and showing love to all
- **Faithfulness:** Faithfulness only works in the prevention of HIV if both partners are mutually faithful. Religious groups have little to offer to a faithful partner who is infected by an unfaithful one. For the majority of married women in Sub-Saharan Africa where 70% are infected by their unfaithful husbands, this is the grim reality.
- **Abstinence:** Abstinence is a highly effective way of preventing infection. The

problem is that it is not an option for the majority of Kenyans and is therefore rarely practiced. Illustratively, even religious leaders are dying of AIDS related complications but their institutions keep quiet about it.

Apart from highlighting these contradicting policies, reporters should also appreciate that the religious groups have played quite a supportive role in combating HIV/AIDS. The media should therefore publicise and inform the public on the positive contribution of the religious groups.

Some of them are:

- Individual sacrifice and commitment is evident in cases of support of the infected and affected, and pastoral commitment is visible even in areas where pastors and lay leaders live in difficult environments.
- Community mobilization has taken place in areas where people organized around mosques and churches to pool resources for the support of the most affected.
- There is a marked volunteer spirit in individuals and congregations who have sacrificed their resources to help AIDS orphans, widows, widowers and the poor and marginalized by setting up orphanages, counselling centers, micro lending facilities and other ways of mitigating socio-economic impact of HIV/AIDS.

Suggestion for reporting:

Reporters should raise issues such as these below:

- Why have a policy against condoms and not against HIV/AIDS? What are alternatives to condoms? Are they realistic?
- Why have an ethic on sexuality and not on saving lives? How does it conflict with the role of the religion?
- In which cases have religious organisations acted contrary to the values they are supposed to uphold?
- What have the religions done to educate its congregations so as to protect sacredness of life, which it professes?
- What difference does religion make in the communities? How does it treat persons infected and affected by HIV and AIDS? What do pastors, priests, deacons and congregations do to reach out to them?

Stories of Hope

Like other stories in our media, HIV/AIDS reports tend to be pegged on statements by policy makers, organizations and from politicians. While many statements are often treated as important news, they are however dull, stereotypical, rhetorical, and devoid of new messages altogether. 'HIV/AIDS will wipe out Africa,' is not new information to media consumers. Yet the media are persistent with stories of politicians and other news makers 'warning', 'cautioning,' 'advising,' 'castigating' and 'appealing' to the public about HIV/AIDS.

The media, to a large extent, hold the key to either killing or boosting the morale of communities to respond to the HIV/AIDS epidemic. Journalists therefore can make a difference and highlight the numerous success stories and community initiatives that exist in the country, and the benefits they have for all those infected or affected by HIV, or striving to remain virus free.

Here are some examples of successful, encouraging stories around HIV/AIDS:

- At community level, success has been reported in fighting stigma and discrimination. In terms of developing legal, ethical and human rights frameworks, significant progress has been achieved to guide communities in securing the rights of persons living with HIV, ranging from the right to privacy and confidentiality in HIV testing; rights at workplace and schools; rights in prisons and other places of confinement; succession and inheritance; insurance, marriage and divorce. All this has helped people living with HIV/AIDS continue to be accorded dignity and respect.
- Examples abound of individuals whose courage and determination to face a crisis inspired their respective communities to rise in solidarity with them. Community partnerships have emerged in search of solutions to many problems. These have seen the subsequent rise of many community-based and civil society organizations and institutions committed to fighting the scourge. There is also increased use of theatre, arts, poetry, puppetry and folklore; of child-centred approaches to the epidemic; youth programs; resettlement and rehabilitation of the street families and a number of programmes focusing on the girl child.

Community mobilization and advocacy have taken gender sensitivity and HIV/AIDS to the top of the agenda list.

- Religious groups have also become active in initiatives against HIV/AIDS. Today there are many faith-based initiatives to address HIV/AIDS. Even the private sector has started to become an active partner in offering support.
- Some HIV infected persons are confident to share their story with the public. Their main message is that having HIV does not mean the end of life or usefulness in the community. They overcame stigma, discrimination, shame and secrecy earlier associated with HIV/AIDS, and inspired many to live positively. The media has already highlighted some cases of HIV positive people and should continue to do so.

Suggestion for reporting

To make HIV/AIDS stories more inspiring, reporters should:

- Avoid repeating the obvious and look for new information about the subject from experts
- Challenge those charged with the responsibilities in HIV/AIDS activities and find out what they are really doing; give critical evaluation of their performance
- Highlight cases of success and failure on their own merit without generalization
- Suggest new initiatives to the editors. There is a lot of good work going on in NGOs
- Give HIV/AIDS a holistic approach by looking at it from the social, economic and political dimensions as well as emotional, physical and spiritual perspectives. This can include questions like:
 - o Are there examples that sexual behaviour is changing in the communities?
 - o Are there any youth-out-of school activities to reduce poverty and develop a sense of responsibility to avoid contracting HIV?
 - o How have communities overcome elements of stigma, rejection or discrimination? Are there any changes in myths or cultural practices that indicate a change of attitude?

- o What made community members accept persons living with HIV? Which efforts were made to create a new environment, in which people living with HIV/AIDS no longer feel discriminated?
- o Are there examples of enhanced community solidarity in facing the HIV/AIDS epidemic? For example, are people joining hands to collect food, clothes and provide support to the infected and affected?
- o Do the communities have voluntary counselling and testing of HIV (VCT) services and programmes to prevent mother-to-child transmission? What do community members feel about them? Do they make a difference to them?
- o Are there any support services for community members: post-test clubs that help change personal risk behaviour; home-base care; counselling services and hospices for those suffering from AIDS?

Language use in reporting HIV/AIDS

Language determines the message passed to the media audience. It determines whether the message is clear and understandable, and the value it carries.

The sole objective of journalism practice is to communicate, and basic journalism lectures therefore underline the importance of using simple language devoid of jargon, clichés, vague terms and value-laden stereotypes. Journalists must not lose sight of this primary purpose of their profession and must resist the temptation of exhibiting language proficiency at the expense of the message.

For effective reporting of HIV/AIDS however, journalists first and foremost need to examine their own attitudes and values. They need to sensitize themselves against prejudices and discriminatory attitudes found in statements and messages from many of their sources. They must consciously guard themselves from adopting them uncritically and indiscriminately. Once adopted, such values advance collective misperceptions, prejudices and discriminative attitudes, which militate against a positive response towards HIV/AIDS.

Below is a compilation of frequent misleading, value-loaded or judgmental statements that should be avoided in effective HIV/AIDS reporting, and how they can be corrected:

Statement/phrase	Criticism	Suggestion
Prostitute	Demeaning and stigmatizing	Sex worker
Gays	Not accepted in Africa	Men who have sex with men
Risk group	Refers to the person more than the behaviour and suggests that risk is inbuilt	Risk behaviour
HIV/AIDS patient	Misleading; refers to the sick in hospital	Person living with HIV/AIDS (PLHA)
AIDS victim	Implies helplessness	Person living with HIV/AIDS
Innocent victim	Implies that some choose to have HIV/AIDS	Omit
Safe sex	Guarantees 100% safety	Safer sex
Scourge	Implies panic and hopelessness	Epidemic, disease, illness
HIV and AIDS	Implies they are two different diseases	HIV/AIDS
Catch AIDS	Wrong; it is the virus that is transmitted	Catch / contract HIV
<i>Mukingo, Slim, Ukimwi, Kang'ei, Kamdudu, Ngwang, Fango, Kaguju, Mukaburia</i>	Suggests that HIV/AIDS is a black man's disease	For reports in English language, use HIV/AIDS

The presentation of a story is equally important. It influences what value the news are given, how attractive and interesting the story is, and whether the message connotes undesired values such as blame, despair, careless attitudes or helplessness.

In the table below, news values are highlighted and suggestions are given on how to use them in effective HIV/AIDS reporting:

News value	How NOT to do it	How to do it
Conflict	Reports are not put in context or related to each other	The resolution of conflict is enhanced, and all developments related to it to capture its extent and intensity
Triumph	HIV/AIDS is portrayed as fatal and a forgone conclusion leading to death	Highlighting initiatives against HIV/AIDS, of increasing numbers of people living positively, who do not necessarily die of AIDS
Disaster	The HIV epidemic is reported as wasteful, and human beings as helpless	Persons living with HIV are not helpless, but fighting back with success. They have refused to waste away.
Consequence	The effects of the epidemic are disastrous	The epidemic has set free in people new motivation, creative energies and approaches to overcome their socio-economic problems
Eminence	The story is hidden in the inside pages, or placed at the last minutes of the news broadcast	The report is placed on the front pages and/or in the prime time of the news broadcast bulletins
Novelty	The same tired story is told over and over again; there is nothing new	New, innovative angles are used to tell the story
Human interest	Figures and trends are not linked to human beings	The report covers the physical, emotional and spiritual aspects of life
Timelessness	HIV/AIDS is reported as if it has always been there	Highlighting the freshness, newness and proximity enhance relevant local appeal
General other interest	Stories portray HIV/AIDS as if it were unlinked to other aspects of life, such as social, political or economic	Stories link HIV/AIDS to issues of general community interest

How to get the Facts: Research and Verification

Journalists must research their facts and figures thoroughly to avoid misleading their audience. If we cannot understand or believe what we report, we cannot expect the audience to do so. Where the wrong information has previously gone out, correction is necessary. Facts and figures should be deliberately repeated to send home the correct message. These should include such concerns as to the mode of transmission and symptoms of HIV/AIDS. The media should also encourage voluntary testing and counselling of HIV.

Suggestions for reporting

In reporting well-founded, factual information on HIV/AIDS, the general principles of good reporting apply.

They are:

- Read widely on HIV/AIDS and make reference to authoritative documents. By doing so, give figures and facts, such as the period of reporting, the groups affected and the reasons advanced
- Follow up statements to establish their authenticity
- Verify whether what is alleged is happening elsewhere, and if not explain why
- Find out what action, if any, has been taken
- Investigate the magnitude of HIV/AIDS in other sectors, professions or areas and establish whether the reasons suggested tie in with the general trends
- Single out sensational statements and avoid them
- In case you are not sure, do not report but do further research and inquiries

Sources of information

Speeches

For journalists reporting HIV/AIDS, or health issues in general speeches are by knowledgeable people on the subject are rich sources of news stories. Techniques of developing stories from these sources are therefore very essential.

Journalists must be on the lookout for occasions where newsworthy statements may be made. In determining newsworthiness, the following elements are important:

- (i) the principal theme and supportive arguments,
- (ii) the speaker and his/her position in society, and
- (iii) the occasion where the statement takes place.

Therefore, a reporter must be able to gauge the importance of the statement with the speaker and the gathering. During a *formal speech* at a function of stakeholders such as doctors or visiting ministers, the remarks, the speaker, and the occasion are equally important. The reporter must feature each, including the audience, due to the impact the remarks are likely to make.

In contrast, an *impromptu statement* by the same person on the same topic by a roadside to local residents has a much lower level of newsworthiness.

Suggestions for reporting

- Make sure you obtain the formal speech and are present during the occasion.
- Take down the running story – the sequence, the salient points, the quotes and take note of controversial matters
- **Critically analyze the content: beware of cosmetic policies being advanced as a genuine programme. Be also on the lookout for inconsistencies, gaps, obstacles, strengths and relevance of policies / programmes to the HIV/AIDS epidemic**
- Place the speech on HIV/AIDS programmes into the context of its intended beneficiaries in reporting its success or failure. For example, find out how many people living with HIV/AIDS or orphans benefit from it, and in what period; or

- what proportion of the whole population would be in need of such a programme
- Avoid quoting obvious, discriminatory or alarmist statements by the speaker e.g. “The President said HIV/AIDS will exterminate Africans” or “Unless the Maasai change their ways, HIV/AIDS will wipe them out.”

Interviews

Interviews are another major source of news. HIV/AIDS has not been openly discussed at all levels been. Journalists must therefore be ready to go an extra mile in getting hold of newsworthy information. In this regard, interviews come in handy because they will help add significance to public knowledge or understanding of HIV/AIDS issues, enlighten and expose views not yet in the public domain.

The success of an interview depends on how the journalist handles the interview and its sequence.

Some basic principles of a good interview are as follows:

- Prepare for the topic
- Seek as much background information as possible
- Ensure you are in charge of the interview: Retain focus and do not let the interviewee waste time on irrelevant issues
- Be suspicious of those seeking to be interviewed. Such persons may have their own agenda, such as claiming they can cure the disease, or they represent various persons infected or affected by HIV/AIDS.
- Ask good and intelligent questions: What you get depends on what you ask
- Clear all doubts before leaving for the newsroom
- Write down all contacts, including mobile telephone numbers of the news subjects and let them know you may be calling them any time, in case there is need for clarification

In addition to a clear structure and agenda, the success of an interview also depends on the rapport between the interviewer and the interviewee, and the types of interviewing techniques that are applied. This is particularly true for an interview about HIV/AIDS.

Rapport is the level of harmony or common ground between the two persons and the extent to which the reporter is perceived as appreciating the interviewee. It depends on what the reporter knows about the individual and the type of expectations they have. He/she could be a sex worker, a person living with HIV, or a relative or friend and expect understanding.

Past experiences on how they were handled by the reporter or the media in question will determine the level of response and co-operation of an interviewee. In some cases the reporter may have to be extra-patient or use people known to the source to build his/her own reputation. In case of a rebuff, the journalist has to avoid rude or arrogant statements in the report, like: “When approached the chairman told off journalists”, or “The interviewee refused to take our calls”. Such statements are not useful in building rapport or in reporting HIV/AIDS-related matters.

In the following, some important points on rapport building and interview techniques are outlined.

- Aim for a one-to-one interview in a quiet place. Seek to create a relaxed atmosphere to make the interviewee feel comfortable
- Ask specific, open-ended questions. Ensure the questions pertain to HIV/AIDS, and bring out the interest of the audience in the topic
- Ensure that questions are timely in view of the latest developments in HIV/AIDS, and relevant to the local situation
- Ask questions in a logical sequence. The respondent gets irritated if questions are unrelated and the reporter appears jumpy and inconsistent
- Avoid jargons and vocabulary that could lead to misunderstanding or misinterpretation of the questions. Use simple language and ask if you do not know
- Be sensitive to mannerisms such as nervousness, which may be prompted by fear that the truth will be exposed. For example, a person living with HIV may fear that his/her status may be disclosed to previous sexual partners without his/her consent.
- Look out for intentional falsehood, and interpret it accordingly. This may happen to cover embarrassing situations or socially unaccepted behaviour
- Take part in the conversation, but do not lecture the respondent
- Thank the respondent for sparing his/her time, and end the interview on a friendly

note. Keep the address of the respondent and indicate you may have to call or come back

Publications

Many journals are a source of straight news stories. National or international scientific and medical journals contain accounts of various developments in medicine. The journalists will find that the reports are not evaluative and will have to follow general guidelines of reporting HIV/AIDS to inform the audience.

HIV/AIDS-related training and self-development

Training of journalists in HIV/AIDS reporting is a continuous process. But even in the absence of training programmes, individual journalists can take initiatives on their own to develop skills, raise standards of reporting, and make them more interesting, authoritative and effective.

These initiatives may include:

- Attending seminars, workshops or short courses at various institutions to acquire fresh knowledge and develop skills
- Developing rapport with experts to keep track of events
- Establishing inventories of organizations and individuals supportive of improvements in HIV/AIDS reporting
- Obtaining reference materials from libraries or resource centres started by NGOs dealing with HIV/AIDS, such as journals, cassettes, documentaries and minutes from public meetings. (see samples in appendix)
- Venturing into a more investigative, interpretative and analytical health journalism
- Forming a health reporters network; strike and cultivate rapport with relevant organizations and associations of HIV/AIDS reporters in other countries
- Associating with persons living with HIV, NGOs, research institutions and government departments involved in HIV/AIDS activities
- Showing interest in HIV/AIDS activities and getting involved in activities like the International AIDS Day Celebrations and the World Health Day

- Being vigilant and conscious about broader issues of life. Learn more on sexuality, pregnancy, child development, fertility, courting, marriage, parenting and questions of life and death
- Probing questions of daily life and vulnerability to HIV: poverty and health, promiscuity, sexual violence, early marriage, displacement, gender and the role of man in our society, and especially in prevention and control of HIV/AIDS
- Lobbying with editors for more space and time to HIV/AIDS stories, or even columns to regularly highlight issues on HIV/AIDS
- Being accessible – subscribe to the internet and have an e-mail address; buy a mobile telephone and acquire a post office box; carry business cards to meetings; develop an inventory of important contacts

Internet

Information technology has opened exciting opportunities for journalists interested in advancing HIV/AIDS reporting in East Africa and elsewhere. Many organizations have also started developing popular version of hitherto jargon-laden documents, and simplified them to everyday language. Journalists must be aware of these developments in newsgathering and processing, and make use of them. At any cyber café, and at reasonable costs, journalists can acquire skills of accessing updated information on any subject, and from all over the world. The annex of this manual contains an overview of useful resource organizations on HIV/AIDS and related areas. Given the variety and huge amount of information available through the worldwide web, this list can merely provide an entry point, from where the reporter will identify his/her own addresses of interest.

Specialized HIV/AIDS reporting

Developing a HIV/AIDS news beat

The news beat is an area a reporter develops competence in, through consistent hard work of perfecting knowledge, skills and contacts necessary to report and comment objectively on issues and events. Some reporters may stay in one news beat for many a long time.

Media houses favour specialised reports from particular news beats. However, the HIV/AIDS news beat, in spite of being full of good stories, has not attracted the same interest as other topics have. This partly because most journalists are social scientists and feel inhibited by the myth that one has to be a scientist to report on health issues. Laziness to start a new beat, as well as editorial policies are factors that have led to marginalization of HIV/AIDS, and health in general.

To develop a HIV/AIDS news beat, the reporter will need the following:

- Identify key players on the issue – the main HIV/AIDS organizations, funding agencies, and key individuals; the country's HIV/AIDS Policy; the impact of HIV/AIDS, etc
- Carry out extensive research to understand who does what, how it is done and who is achieving what results
- Develop contacts with the people involved
- Cultivate strong rapport with those working in the HIV/AIDS field, including research activities, drug companies, NGOs, key informants and herbalists
- Cultivate respect and confidence with all those involved in HIV/AIDS activities
- Acquire knowledge of the informal environment: politics, conmen, corruption cases and ongoing deals

Investigative HIV/AIDS journalism

Investigative journalism is one of the most important sources of good stories. HIV/AIDS has, since it was first reported in East Africa in the 1980's, accorded journalists great opportunities to carry out investigations into its ever-changing aspects. These opportunities have not always been utilized and it is upon on journalists to seize the rare chance to discharge their duty.

In summary, investigative journalism takes patience, courage, care and brilliance. All journalists venturing into investigative reporting must develop the following professional qualities:

- Be open minded and keep eyes wide open to detect useful tips
- Be tireless and patient in digging up the truth
- Be courageous, thorough and inquisitive

- Be interested in developments in HIV/AIDS as a whole
- Work in the public interest of overcoming the HIV/AIDS epidemic
- Develop a team spirit not only with your colleagues, but with other stakeholders in the HIV/AIDS
- Have an eye for private behaviour that goes unseen or is hidden. For example, sexual patterns are not openly discussed in East Africa. Men who have sex with men exist but there is denial; sex workers hide their trade, and incest is not discussed. Look for such trends that facilitate the spread of HIV/AIDS
- Avoid undercover methods of getting information and pictures like hiding your identity, invading people's privacy, and recording unsuspecting interviewees and sources without their knowledge

Most investigative stories start with a tip, usually offered by a contact or source. Therefore, a typical sequence of investigative steps for a reporter would be:

- Evaluate the tip carefully and identify the specific worthy issue to justify further investigation
- Watch out for tipsters but keep no grudge, for the tipster today may be an important reliable source another day
- Carry out preliminary investigations, test the theories offered; check for documents and avoid wasting time and money
- Assess the level of involvement and find out what support is needed, from what source as well as its financial implications
- Consult the editor, talk to senior journalists, HIV/AIDS experts and specialists in the specific aspect of the story, and decide whether you can do it and for what media
- Go ahead with the investigation and consult the editor regularly to brief him/her on the progress, challenges and obstacles
- Be open-minded and take note of all useful information and contacts. You may need help in the course of the work
- After the story is out, see your sources and send feelers for their responses. One investigative story may lead to the next

Annex

Organization	Topics / themes	Contact
World Health Organization	General health topics:HIV/AIDS Antiretroviral treatment Family planning Female genital mutilation Sexual / reproductive health	www.who.int
Centers for Disease Control and Prevention	General health information for disease prevention HIV/AIDS prevention, transmission & surveillance Vaccine research	www.cdc.gov
Reproductive Health Outlook	Reproductive health	www.rho.org
Johns Hopkins Center for Communication Programs	Reproductive health	www.jhuccp.org
United States Agency for International Development: Global Health	HIV/AIDSreproductive health	www.usaid.gov
Joint United Nations Programme on HIV/AIDS	Updated HIV/AIDS statistics, with country breakdown UN declarations on HIV/AIDS Best practices and background material to HIV/AIDS	www.unaids.org
International AIDS Vaccine Initiative	Updates on vaccine development	www.iavi.org
Population Council	Research-oriented: Reproductive health HIV/AIDS Biomedical research	www.popcouncil.org
Kenya AIDS NGOs Consortium	Local HIV/AIDS statistics and other related material	www.kanco.or.ke

Organization	Topics / themes	Contact
Southern Africa HIV/AIDS Information Dissemination Services (SafAIDS)	Produces several newsletters on HIV/AIDS Background material / fact sheets	www.saf aids.org.zw
International Planned Parenthood Federation (IPPF)	Reproductive health	www.ippf.org
Family Planning Association of Kenya (FPAK)	Reproductive health	www.fpak.org
Marie Stopes International	Sexual / reproductive health	www.mariestopes.org.uk
EngenderHealth	Sexuality and gender Reproductive health STI/HIV infections	www.engenderhealth.org
AIDS Analysis Africa	Impact of AIDS on organisations, business and economy	www.und.ac.za/und/heard/AAA/AAA.htm
Family Health International (FHI)	Reproductive health HIV/AIDS Youth	www.fhi.org
United Nations Family Planning Association	Reproductive health HIV/AIDS Youth Gender equality	www.unfpa.org
British Broadcasting Service	HIV/AIDS-related news Press releases	www.bbc.co.uk
Female Genital Mutilation Education and Networking Project	Female genital mutilation information and advocacy	www.fgmnetwork.org

Organization	Topics / themes	Contact
Panos Network	Information for journalists on critical issues of today	www.panos.org.uk
Food & Agriculture Organization of the United Nations	Agriculture, nutrition & HIV / AIDS	www.fao.org
International Labour Organization	Economic impact of HIV Policies Code of Practice for the workplace	www.ilo.org
Global Network of People Living with HIV/AIDS	Forum for HIV positive persons	www.gnppplus.net

Web sources for media networks

Organization	Activity	Contact
Newspaper Association of America	Supports growth and development of newspapers by strategically assisting in public policy, industry development and newspaper operations	www.naa.org
The Reporter Committee for Freedom of the Press	Provides free legal help to reporters	www.rcfp.org
Investigative Reporters and Editors, Inc.	Improves quality of investigative reporting.	www.ire.org
International Consortium of Investigative Journalists	Supports investigative journalism and provides working opportunities for journalists	www.icij.org
UNESCO HIV/AIDS and Investigative Journalism	Provides best practices in HIV/AIDS reporting, newsletters, documents, and fact sheets	www.aids-africa.org
Organization of News Ombudsmen	Network of journalists working as watchdogs, monitoring accuracy and fairness of their media	www.newsombudsmen.org

