Media, Social Movements and the State: Competing Images of HIV/AIDS in South Africa

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Abstract: South Africa's mainstream print and broadcast media have attained a central role in shaping the discourse about HIV/AIDS as a result of their elevated role in politics after apartheid. Studies of media coverage of HIV/AIDS, however, have shown that despite the horrific impact of AIDS in South Africa, until recently national media coverage (both the extent as well as the content) -- with few exceptions -- does not reflect the urgency of the crisis. Instead, media coverage focuses primarily on conflicts around HIV/AIDS policy. In this essay we want to explore some of the reasons for this as well as the consequences this has had for AIDS politics. We show that while it is true that often lack of resources, "AIDS fatigue", racial tensions in newsrooms, and the conflict frame (between the state and AIDS activists) are relevant explanations for the deficient coverage of HIV-AIDS, they don't tell us much. Instead, we suggest that the concept of framing can provide us with more insight into the why of coverage. Coverage of AIDS disproportionately deflects to the political battles and blunders that have accompanied the disease's spread. When it does break with that frame, the crisis is often defined very narrowly as a health issue rather than an issue of socio-economic inequality. We suggest that President Mbeki's framing of the crisis has a censoring effect on the media, while TAC's complex relation with the media means there is often a disconnect between what TAC is saying and how its demands are being represented in the media, resulting in little effort having been given to reporting and analyzing AIDS' devastating political economy.

Introduction

South Africa has been one of the countries hardest hit by the HIV/AIDS pandemic, with approximately 5.5 million South African adults and children living with HIV/AIDS at the end of 2005.¹ AIDS in South Africa has drawn considerable public debate and media attention, not only because of its high rates of infection but also as a result of the South African government's

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© University of Florida Board of Trustees, a public corporation of the State of Florida; permission is hereby granted for individuals to download articles for their own personal use. Published by the Center for African Studies, University of Florida. ISSN: 2152-2448 response to the crisis and the pivotal role played by South African AIDS activists. Central to these debates have been efforts by various actors to frame the epidemic and society's response to it in particular ways. The media, AIDS social movement organizations (particularly the Treatment Action Campaign or TAC), and the state (particularly President Thabo Mbeki and his health minister Manto Tshabalala-Msimang) have been key actors in this regard.

This paper analyzes the place of the media in AIDS policy discourse and activism in South Africa. It discusses the relationship between the news media, TAC, and the state using the concept of framing as a lens through which to analyze the roles and impact of news media as a space of interest articulation and deliberation, and in mediating democratic debate in the public sphere. We argue that the discourses in the South African media around HIV/AIDS have limited the type of information that is presented to the public as a whole, as well as put constraints on the kinds of democratic debate taking place over an effective societal response to HIV and AIDS.

South Africa's media, especially the country's mainstream and print media, have attained a central role in shaping the discourse about HIV/AIDS as a result of their elevated role in politics after apartheid. Studies of media coverage of HIV/AIDS, however, have shown that despite the horrific impact of AIDS in South Africa, until recently national media coverage (both the extent as well as the content) -- with few exceptions -- does not reflect the urgency of the crisis. Instead, media coverage focuses primarily on conflicts around HIV/AIDS policy.

In this essay we want to explore some of the reasons for this as well as the consequences this has had for AIDS politics. We will do so by first outlining the main frames through which AIDS are constructed. We will provide analyses of the frames utilized by the TAC and by President Mbeki (as the most senior representative of the South African state). The essay will then summarize the main findings from existing studies on media coverage of the epidemic. Finally, we will speculate on the frames that are excluded from coverage. We argue that while it is true that often lack of resources, "AIDS fatigue", racial tensions in newsrooms, and the conflict frame are relevant explanations for the deficient coverage of HIV/AIDS, they don't tell us much. Instead, we suggest that the concept of framing can provide us with more insight into the *why* of coverage. Coverage of AIDS disproportionately deflect to the political battles and blunders that have accompanied the disease's spread. When it does break with that frame, the crisis is often defined very narrowly as a health issue rather than an issue of socio-economic inequality. Below we suggest that President Mbeki's framing of the crisis has a censoring effect on the media, while TAC's complex relation to the media means there is often a disconnect between what TAC is saying and how its demands are being represented in the media, resulting in little effort having been given to reporting and analyzing AIDS' devastating political economy.²

MEDIA AND MOVEMENTS FRAMING POLITICS

There is general agreement -- both among scholars, journalists and editors as well as political actors -- that media play a central role in interest articulation and deliberation in democratic society; in particular "how ideas emerge, diffuse, and affect policy."³ Some scholars have identified this process as "mediated deliberation."⁴ According to this view, "professional communicators" are at the heart of deliberation. These professional communicators are

identified as journalists and reporters, writers, commentators, and television pundits, as well as public officials and selected experts from academia, think tanks, and civil society organizations. They ".not only help policy experts communicate with each other, but also assemble, explain, debate, and disseminate the best available information and ideas about public policy, in ways that are accessible to large audiences."⁵

The key issues for mediated deliberation are: "How well do professional communicators represent and serve the public? Do they convey information and ideas the public needs for developing informed policy preferences? Or do they, to a significant extent mislead citizens and distort public opinion?"⁶ Linked to ideas about interest articulation and deliberation is the concept of "framing."⁷ What we term the "news" is never a clearly and previously defined object of which the media present a straightforward, unproblematic transcription. On the contrary, the "news" is a construction. It is constituted by its presentation in the media. To be reported as news, actions have to be translated into events, and then into a "story." Recognition of an issue as newsworthy, the selection of specific events and topics, the context explicitly present or assumed, and the positive or negative judgment implied by a news report all emerge from media coverage rather than being inherent in behavior and reported word for word.⁸

A journalist writing a news report operates on the basis of background assumptions of knowledge and evaluation, commonly referred to by scholars of the media as a frame. The concept of frames, derived primarily from the work of Erving Goffman, denotes "schemas of interpretation" or "action-oriented sets of beliefs and meanings" that enable individuals to render meaningful occurrences in their life and the world at large.⁹ Frames were first applied to the analysis of the news media by Gaye Tuchman (1978), and have been used by media scholars to describe the background of news stories.

Using a frame, a journalist can represent events as part of a coherent larger reality within which readers and viewers can comprehend them. The frame adopted in a media account shapes the way particular details are presented and provides the broader context for the story. Frames are often presented in media analysis as something adopted relatively unreflectively by journalists and shared by their audience.¹⁰ They do not appear to either journalists or audience as social constructions but as primary attributes of events that reporters are merely reflecting. News frames make the world look natural. They determine what is selected, what is excluded, what is emphasized.¹¹ For media scholars, frames provide a reflection of reality but are not viewed as the product of the active construction of reality.

The concept of frames found its way into studies of social movements also following Goffman's formulation, but has been adopted more widely by social movement scholars than by media scholars.¹² Within the social movements literature, collective action frames serve to organize and simplify experience, to motivate action on the part of potential adherents and constituents, to demobilize antagonists, and to justify the movement's agenda. Taking into account cultural frames, including shared meanings, symbols, and discourses allows social movements to be viewed not merely as carriers of ideas and meanings drawn from existing ideologies or structural arrangements, but as signifying agents actively engaged in the production and maintenance of meaning for constituents, antagonists and observers.¹³ Snow et al., show that this productive work may involve the amplification and extension of existing meanings, the modification of old meanings, and the generation of new meanings.¹⁴

While social movements adopt the task of framing issues for their constituents and target audiences, the media play the double role of framing the issues and framing the social movements promoting the issues. Many potential recruits and sympathizers among the public become aware of movements and their issues primarily through the media. The media not only provide information but also create for them the frame within which they perceive and perhaps assimilate a movement's message. Media framing of the issue can support or undercut the legitimacy of a movement's claim by the way it presents the issue, and media framing of a movement's claim by the legitimacy of those actors to press the claim.¹⁵

For these reasons, few movements can afford to ignore the media or disdain their attention but it is almost always a fraught relationship. Even if a movement succeeds at getting the media's attention, it has no guarantee that a story will present its own view of its cause or of its activists. News reports rarely present the background or structural causes of problems, but rather center on events and individuals. They often present a movement through portraits of colorful and articulate individuals. As Charlotte Ryan explains, such portrayals can fail to convey the movement's message for at least three reasons: they may make the movement appear smaller than it is, involving only a few people; the more articulate or colorful activists ("media stars") may not be representative of the constituency the movement claims to mobilize; and an account concentrating on individuals is not likely to address a problem's systemic causes.¹⁶

Because they are weaker participants in such cultural contests, movements cannot normally expect that their message will be reflected unquestionably in the media's frame(s), but can only hope that it will be presented at all. At best, they can hope that they will succeed in moving the discourse to a point where their frame is admitted as a contender and the dominant frame is recognized as susceptible to challenge.¹⁷

SOUTH AFRICAN MEDIA AFTER APARTHEID

By any mainstream standard, post-apartheid South Africa has a well functioning and diversified media. A wide range of choices for radio, television, and print media are available to an impressive majority of South Africans. Specifically, radio covers ninety per cent of the population and broadcasts in all official eleven languages. The public broadcaster, SABC, operates 20 radio stations, and in addition there are about 15 private radio stations. Over a tenyear period, South Africa's media regulator, the Independent Communications Authority of South Africa (earlier known as the Independent Broadcasting Authority) has awarded a total of 94 community radio licenses. As for television, coverage is lower but still very significant. Over sixty per cent of the population has direct access to television services. By 2007 there were 3 terrestrial and one satellite public television channels; one terrestrial private, free-to-air television station (known as ETV); a subscription-based cable service M-Net; and a digital satellite television service that dominates satellite television broadcasting in the rest of the continent. In 2007, the Government Information Service estimated that the public broadcaster's television stations reach a daily audience of almost 18 million people, ". the largest television audience in Africa."¹⁸ Only SABC and ETV produce news broadcasts.

For its part, mainstream print media includes seventeen daily newspapers. In addition, seven Sunday newspapers and twenty-four weekly newspapers publish nationally or regionally. Their circulations are modest (the largest Sunday newspaper, the *Sunday Times*, averages a weekly circulation of 500,000. Since 2002, a number of mass-based tabloids aimed at the previously neglected black consumer market, including one in the Zulu language, have emerged and have generated record increases in circulation.

Despite a number of legal reforms, changes within newsrooms and market restructuring (as noted above), the South African media is still highly concentrated and not very diverse in terms of race and class. This has consequences for their audiences, advertisers and readers. Guy Berger, a former newspaper editor and now journalism professor at one of the country's leading journalism schools, underscored this point as late as 2004 (10 years after the first democratic elections): "Wealth remains, however, largely among whites and advertising is still placed by white-staffed agencies. As a result, most media institutions stick with upmarket audiences, although some strides are belatedly made with tailored newspapers at the working-class level."¹⁹

Two points about South African media are important for the arguments below. The first is that a very small slice of the mainstream media, one that caters to a comparatively small, elite section of society, really "counts" in terms of opinion formation and key policy issues in South Africa. That media can be classed as the "elite" or "opinion-forming media." Without exception, all major political and social actors recognize this set of media as such.²⁰ The rest of the mainstream media (both regional broadsheets and the new tabloids), to the extent that they cover policy at all, often rely on the opinion-leading or elite media for news agendas and much of the tone of their coverage. The result is that while they do feature some coverage that is distinct from that in the opinion-leading media, in crucial ways they take their lead from the top tier media. Not surprisingly, data from elite surveys of opinion-leaders in the society - most notably politicians, business leaders and policy-makers - as well as anecdotal evidence, confirm that they get their news almost exclusively from these top-tier media.²¹ Also not surprisingly, they focus on issues of interest, and perspectives common to their comparatively well-off and politically connected readership.

The second is that South African media increasingly operates as an autonomous power center, to a large extent independent from the state, a rare distinction in Sub-Saharan Africa.²² As a result, since 1994 mass media has developed a separate political identity, and one that is very powerful. The actions of the news media have profound consequences for political contests.²³ This is very well illustrated in the ANC and the post-apartheid government's newfound appreciation for the media. The former liberation movement had proved historically ambivalent to media. However, its leading members - including Mandela and Mbeki -very soon after taking power note the media's new power. By the end of the 1990s the mainstream media had assumed such importance for the ANC government that by 2000, Joel Netshitenze, a senior government and ANC official, declared in front of journalists: "The democratic movement as led by the ANC should proactively engage with media issues so as to ensure a proper reflection and representation of the complex democratic transformation process in order to mobilize the masses of our people to act in unity as shapers of their own destiny."²⁴

At the occasion of the ten year anniversary of the 1994 democratic elections, the Office of President Mbeki - alluding to mainstream media - identified a dichotomy between "power and influence" as having a profound impact on government policy success.²⁵ It is also significant that since 2000 President Mbeki has written a regular weekly column for the ANC's online newsletter "ANC Today", and column topics disproportionately focus on the news media.²⁶

Similar revelations have been made by key social movements. Zackie Achmat told South African political researchers Steven Friedman and Shauna Mottiar: ".winning and retaining public opinion matters more than during the anti-apartheid struggle when support could often be assumed." According to Achmat, speaking at the time of a civil disobedience campaign mounted by TAC, the organization is very aware of the power of media frames: "TAC is not a numbers game. It is more about the ability to create a moral consensus. The button we are aiming to push (in planning civil disobedience) was that the government is morally weak."²⁷ Key to this strategy is getting the media on its side.

FRAMING AIDS MOBILIZATION AND HUMAN RIGHTS

Human rights as a collective action frame have been an important aspect of social movement mobilization around AIDS since the beginning of the epidemic twenty-five years ago.²⁸ By the 1990s, the mobilization of an AIDS movement in the United States and other industrialized countries in many ways set the scene for AIDS activism in South Africa and elsewhere.²⁹ Building on the preexisting organizational foundations as well as cultural capital and social movement history of the gay movement as well as others, the AIDS movement was not only able to push for the protection of the civil rights of people living with AIDS, but through its engagement with the medical profession and the political establishment over access to drugs, also able to insist on a correlation between health and human rights.

AIDS rights activism in South Africa is comprised of diverse groupings that have roots in various national and international rights struggles and locally within the anti-apartheid struggle and the mass democratic movement of the 1980s. Such groupings were linked to anti-apartheid health sector organizations that addressed AIDS in the context of broader political and economic struggles. Simultaneously, they were also impacted by the debates about human and legal rights discourses present at the time. Groups such as the AIDS Consortium, the AIDS Law Project, and the National Association of People Living with AIDS, form part of this tradition.³⁰ Activists in these organizations have focused on issues of legal and social equality (including gay rights) and were instrumental to the inclusion and retention of sexual orientation as one of the grounds for non-discrimination in the new South African Constitution.³¹

Like their U.S. counterparts, these groups initially tended to be dominated by gay, white, middle-class men who became highly knowledgeable commentators on AIDS and were able to formulate successful targeted campaigns. Directly influenced by American organizations such as ACT-UP (AIDS Coalition to Unleash Power), the content of such South African AIDS activism has focused on treatment and obtaining access to drugs, and their campaigns have drawn from lessons learned by AIDS activists in the West. However, South African AIDS activism crucially extends and link itself to struggles for affordable care and a working public health system, as well as to socio-economic struggles. While all these struggles connect with

anti-apartheid activism (racism persists and activists see parallels between racial oppression and the worsening unequal economic relations and access to AIDS treatment drugs), such activism also links with new activism by "new social movements" that trace these crises to the nature of post-apartheid governance (broadly defined as neoliberalism) and the negative local effects of globalization.

Organizationally, the AIDS rights movement in South Africa is centered around the Treatment Action Campaign (TAC) which was launched on International Human Rights Day in 1998, to "campaign for greater access to treatment for all South Africans, by raising public awareness and understanding about issues surrounding the availability, affordability and use of HIV treatments."32 TAC gained renown and notoriety domestically and internationally as a result of the pivotal role it played in a 1998 court case brought against the South African government by the Pharmaceutical Manufacturers Association (PMA), and more recently its landmark constitutional court victory in 2002 over the South African government pertaining to the provision of anti-retroviral treatments to prevent mother-to-child transmission. TAC is seen by many as a model for social movements around the world, a "champion" of demands for social equity and the rights promised by democratic citizenship. TAC has successfully developed a rights frame that has not only attracted a solid (cross-class) constituency domestically, but also resonates with global AIDS rights struggles focused on the issue of treatment access and more recently with broader, global socio-economic rights struggles. Finally, TAC has gained mainstream respectability. Its leader Zackie Achmat has been nominated for a Nobel Peace Prize, was included in Time magazine's list of "Heroes" (2003) and was described by The New Yorker magazine as South Africa's "most important dissident since Nelson Mandela."33 More recently Vanity Fair profiled Achmat in its "Special Africa Issue" (June 2007) as one of a dozen activists, business and entertainment people, and a handful of government officials representing the "Spirit of Africa."

Framing the fight against AIDS as a human rights issue has facilitated links between TAC and transnational advocacy networks sympathetic to its cause and able to provide a receptive international political venue for its message. The human rights frame offers a collective reservoir of meaning and symbols that served to bridge gay and AIDS advocacy struggles in the industrialized countries with AIDS struggles in Africa. TAC's focus on the right to treatment, a driving force of the AIDS movement since the early days of the epidemic in the United States, strongly resonated with groups such as ACT UP and the Health Gap Coalition, but also with civil society groups more generally who are not usually associated with AIDS or health issues. For example, the very influential, and largely mainstream, international non-governmental organization CIVICUS included TAC as the ideal "case study" in an activist manual on ".how to run a local campaign linked to an international movement."³⁴

Adopting a human rights frame also afforded TAC's leadership, which initially (with the exception of Achmat) was primarily white, middle-class and male, an opportunity to build domestic support among its potential membership and base comprised overwhelmingly of poor, blacks.³⁵ Crucially, as the membership grew so did the leadership change, with a number of black women emerging as forces within the movement.

The notion of rights adopted by the AIDS movement in South Africa derives its strategic value not only from its importance during the anti-apartheid struggle, but also because of its

importance in the democratic transition and the forging of a new democratic political culture.³⁶ The success of TAC rests on 'frame bridging' whereby AIDS activists are able to link the struggle against AIDS with the anti-apartheid struggle for democracy and equal rights, highlighting the ideological congruence between the two frames. Similarly, the coincidence between South Africa's transition to democracy and the intensification of its AIDS epidemic allowed activists to bring HIV/AIDS into national debates on constitutionalism and defining the content of democratic rights in the new dispensation. AIDS activists have successfully engaged in 'frame amplification' that sought to clarify the meaning of South Africa's new bill of rights while invigorating a particular interpretation of those rights, and the responsibility of government to uphold them.³⁷

This is often expressed in TAC's grassroots mobilization and advocacy strategies that tap into the experiences, tactics and slogans of the anti-apartheid struggle. These include publicly confronting government ministers (for example creating the "Wanted for Murder" poster campaign against the ministers of health and of trade and industry), marches, challenging the police to arrest TAC activists, and the illegal (but very open) importation of AIDS drugs into South Africa. TAC campaigns such as the Christopher Moraka Defiance Campaign (around drug patents) not only recalled the "Defiance Campaign" of the early 1950s, but also the internationalism of the anti-apartheid campaigns.³⁸

THABO MBEKI AND AIDS AS A DISEASE OF "POVERTY" AND UNDERDEVELOPMENT

Since 2003, the South African government has slowly begun implementing a comprehensive HIV/AIDS Care, Management and Treatment Plan, which includes the world's largest public sector antiretroviral rollout program. Many local and international observers, as well as TAC, lauded the government's stated policy change and Mbeki has ceased making controversial public remarks about the epidemic. But by mid-2007, the government's AIDS policy was still accompanied by mixed messages on the part of political leadership and dragging its feet on treatment programs. Minister Tshabalala-Msimang has publicly endorsed discredited AIDS "treatments" such as that of Tine Van der Maas, a Dutch nurse who promotes garlic as a "remedy" for HIV, and Mathias Rath, a German "vitamin entrepreneur" who claims ARVs are toxic and that people living with AIDS should take vitamins instead.³⁹ In 2006, Stephen Lewis, the United Nations Special Envoy for HIV/AIDS in Africa, told the International AIDS Conference in Toronto that the South African government's AIDS policy was ".obtuse, dilatory and negligent." As Lewis reminded the conference: "Between six and eight hundred people a day die of AIDS in South Africa. The government has a lot to atone for. I'm of the opinion that they can never achieve redemption."⁴⁰

Thabo Mbeki became President of South Africa in May 1999. Up until that time, Mbeki's record on AIDS had been fairly low-key, and his public view -- with one exception -- had been in line with the orthodox responses to the epidemic. Mbeki had impressed AIDS activists later associated with the TAC while still Deputy President by condemning stigma against HIV-positive South Africans when a leading AIDS activist who had declared her status was stoned to death. In this case, Mbeki pleaded with South Africans not to treat people with HIV "as if they have an illness that is evil." Mbeki supported TAC's 1999 campaign for the drug AZT as

treatment for HIV-positive pregnant women (to diminish the likelihood of their children being born with the virus). Most crucially, Mbeki and TAC agreed in fighting the high prices of AIDS drugs and the resultant profits for multinational pharmaceutical companies. The only indication that Mbeki had unconventional views about the causality of AIDS and the efficacy of AIDS drugs was when he promoted "research" in 1997 into the use of a toxic drug, Virodene (it contained an industrial solvent that caused severe liver damage).

Two years later, Mbeki told the country's National Council of Provinces that the antiretroviral drug AZT was probably toxic, and began corresponding with so-called "AIDS dissidents" (mainly United States-based) who dispute that HIV caused AIDS. In 2000 Mbeki convened a presidential AIDS panel to "shed light" on the causes of AIDS. The panel comprised scientists who believed in the causal link between HIV and AIDS as well as so-called "dissidents" who did not. Mbeki went on to question whether HIV causes AIDS, further promoting the cause of the "dissident scientists".⁴¹

Responding to international pressure and condemnation, President Mbeki then wrote a letter to various heads of state, outlining the case for his "uniquely African" reading of the AIDS epidemic:

Whereas in the West HIV-AIDS is said to be largely homosexually transmitted, it is reported that in Africa, including our country, it is transmitted heterosexually. Accordingly, as Africans, we have to deal with this uniquely African catastrophe.It is obvious that whatever lessons we have to and may draw from the West about the grave issue of HIV-AIDS, a simple superimposition of Western experience on African reality would be absurd and illogical.⁴²

What is important to note is that Mbeki combined his very public association with denialist science with an "extremely intelligent social critique" about the relationship between AIDS and poverty.⁴³ At the 13th International Conference on AIDS in Durban, where he continued his doubts about the causality of AIDS as well as alleged the toxicity of AIDS drugs, Mbeki highlighted the relationship between poverty and illness, specifically AIDS, and concluded that "the world's biggest killer and the greatest cause of ill health and suffering across the globe, including South Africa, is extreme poverty."⁴⁴ Mbeki also combined his poverty-AIDS link with a critique of multinational pharmaceutical companies.

That there is a relationship between poverty and illness is indisputable, and rather uncontroversial. There was nothing confusing about pointing out the obvious correlation between good health and wealth on the one hand, and poor health and poverty on the other. Medical researchers, doctors and activists share this view.

If AIDS is redefined as a disease of poverty, then the socio-economic conditions in which one lives becomes as relevant a factor as sexual practices and behavior, in understanding the spread of AIDS. If AIDS is redefined as a disease of poverty, then one is compelled to confront the reality that the overwhelming majority of people killed by the epidemic worldwide and in South Africa, have been poor, exclusively black, Africans. Indeed, redefining AIDS as a disease of poverty shines the spotlight on the fact that Africa's underdevelopment, created and maintained by racism in the interest of Western countries and the profit motives of multinational pharmaceutical companies, debilitates the health of its citizens.

This is a position that TAC has also publicly taken, linking it to the lack of access to antiretroviral medicines. In fact, in 2003 Achmat had stated: "The only reason we don't have this

medication in South Africa is because we are poor, not because it does not exist."⁴⁵ That same year Achmat would also write:

The vast majority of people who die avoidable and predictable AIDS-related deaths are black people who use the public health services. People who have access to medicines are predominantly (black and white) middle-class people who have access to private health care. The continued denial of anti-retroviral and other essential medicines reinforces the suggestion that black lives have no value to those in power. It suggests that the lives of the majority of people living with HIV/AIDS are expendable. ⁴⁶

Mbulelo Mzamane, a South African scholar and activist, makes the point more forcefully:

The countries that are responsible for, and that profit from, underdevelopment also find ways to capitalize on the poor health it causes. We also know for a fact that they then sell overpriced drugs - often surplus, sometimes banned from use in their own countries because of harmful side effects - to the developing countries. Newer or patented drugs (such as AZT) are proffered at exorbitant prices, often unaffordable to developing economies.⁴⁷

If we were to focus on the broader political issues that such a perspective raises then debate would necessarily have to turn to topics of international patent laws and other structural barriers that contribute to global socio-economic and health disparities and to specific inequalities of race and class inside South Africa with consequences for sexual taboos, the access to treatment of people with AIDS or the vulnerability of certain populations (migrant workers, sex workers, poor and mainly black women).

However, Mbeki's "denialism" fundamentally changed the meaning or at least the practical consequences of this rhetorical move. According to researcher Mandisa Mbali, the case for a link between poverty and AIDS "cannot be made, in a denialist way, to the exclusion of mainstream scientific explanations of the viral cause of AIDS in the body of HIV-infected individuals."⁴⁸ Dr. Malegapuru Makgoba, former president of South Africa's state-supported Medical Research Council, who publicly rebuked President Mbeki's denialism, noted in a speech to the Nobel Symposium: "All diseases are made worse by poor social conditions. This is so obvious that you would not find a doctor who would say otherwise. However, to conflate this factor with causation by clever wordplay is very dangerous."⁴⁹ The result of Mbeki's convoluted public utterances on HIV/AIDS was therefore that the link between poverty and AIDS became overwhelmingly associated with denialism.

The case may also be made that denialism also deliberately obscures and/or complements the prevailing ethos around economic policy within government. In this regard, denialism is a "convenient clause to avoid the drastic increases in public spending that would be required to roll out combination HIV treatment."⁵⁰ The South African government's economic policy -- despite rhetoric to the contrary -- promotes, privatizing (officially refered to as "restructuring") essential basic services (such as water and electricity) and reducing spending on services such as health. This is a particularly important factor in the context of an inherited public health sector that was and is still severely under-resourced for services to the poor, black majority -- now also the bulk of those affected by HIV/AIDS. Neoliberal economic and social policies reduced the amount of state resources available to spend on AIDS programs. According to Johnson, "more importantly, they slowed the pace of transformation in the health sector, thus

continuing apartheid era institutional and economic legacies and prolonging bureaucratic incapacity to implement AIDS programs effectively."⁵¹

What this meant for health policy -- and crucially for AIDS policy -- was that all social policy now had to comply with the restrictions of government expenditure in accordance with the new economic framework, the Growth, Employment and Redistribution policy (GEAR) adopted in 1996.⁵² So for example, while the Department of Health proposed de-emphasizing a focus on "first-world curative facilities" that serve a few to a system that emphasized primary health care closer to the majority of people, even then any positive effects that transformation might have engendered have been retarded, primarily because "of fiscal constraints imposed by GEAR, and neoliberal, market-oriented precepts demanded by world trade."⁵³ How this economic policy framework constrains government policies on AIDS is obscured by a discourse highlighting greed of pharmaceutical companies or de-emphasizing the medical aspects of AIDS.⁵⁴ The remainder of the paper will discuss the media coverage of AIDS, summarize what frames are included and speculate on what is excluded and why.

MEDIA FRAMING OF THE AIDS CRISIS

In general, South Africa's mainstream media coverage of HIV/AIDS has been characterized, with few exceptions, by indifference or a lack of urgency as to the epidemic's impact, a failure to systematically examine the reasons behind stigma and denial, and not adequately engaging with or seeking out the views of people living with AIDS, who if approached are presented as victims or denied any agency.⁵⁵ Coverage is also characterized by "the virtual absence of the voice of the people, the individuals living with HIV/AIDS or those immediately affected."⁵⁶ Reporters seldom interrogate the "big picture" context, particularly the impact of changes in economic policies (discussed above) on the ability of state structures to implement a comprehensive AIDS treatment and prevention program or how larger debates about the right to public health care services would impact any large-scale societal response to the epidemic.

As for what does get reported, the bulk of the coverage focuses on the conflict between government and AIDS activists over the causality of AIDS and the appropriateness of treatment. The media also provided space for the dissident "debate" around the causes of HIV and AIDS to flourish.⁵⁷ A recent study by the Perinatal HIV and Research Unit at the University of Witswatersrand Journalism Program showed that over fifty per cent of "the key messages" in media reports about the HIV/AIDS epidemic during March-May 2002 and in 2003 focused overwhelmingly on this conflict. The result has been that in the process "other key issues related to the epidemic" were marginalized.⁵⁸ The study indicated that mainstream coverage of HIV/AIDS is characterized by sensational reporting, especially when it comes to the science of AIDS or questions of the relation between AIDS, the law, "media freedom" and privacy.⁵⁹ The effect for public knowledge about AIDS is devastating. The controversy means ". most South Africans are left confused, bewildered and with no hope; but with the knowledge that only scandals such as Sarafina and the quackery of Virodene are what our government and science system are about."⁶⁰

A separate study conducted by Media Tenor reports that for the period January 2004 -August 2005 less than one percent of the coverage in leading print and electronic media reported on the epidemic.⁶¹ Coverage of other topics such as business, the economy, crime, politics, and education far surpassed that of AIDS. The media's leading focus in AIDS reporting has centered on issues of treatment (36% of all reports in 2004) and reports addressing prevention comprising 32.3%. In terms of treatment, the use of anti-retrovirals (ARVs) has by far been the leading issue (74%) with nutrition and traditional medicines being the other main topics. This is hardly surprising since the issue of ARV treatment has dominated the AIDS discourse in South Africa in recent years.⁶²

From the literature and utterances of journalists it is clear that the conflict "frame" shapes the way the media understand its information role with regard to the AIDS epidemic. Media coverage can be distinguished by what Helen Schneider describes as the very public disagreement and almost complete non-accommodation between senior politicians in the African National Congress and the government as well as a range of non-governmental actors in South Africa. "In a cycle established by early criticism of government around Sarafina II in 1996, public debate on AIDS has been dominated by a series of responses and counter-responses in which actors have competed to set the agenda for AIDS in South Africa," according to Schneider.⁶³ As a result, the coverage rarely highlights the stark reality that millions of South Africans are infected with HIV and will die within the next decade.⁶⁴

As for specific media, most observers agree that while the public broadcaster has been responsible for broadcasting a number of AIDS documentaries on its television and radio programs, incorporating AIDS education into its "lifestyle" magazine programming, and encouraging producers of soap operas and drama series to include AIDS themes, SABC's television and radio news coverage of the epidemic has taken the opposite tack.⁶⁵ In 2005, for example, SABC Africa (the satellite news channel of the SABC) broadcasted a documentary produced by Tine van der Maas.⁶⁶ At the same time, media researchers have pointed to a number of instances in SABC radio programming where denialist statements were uncritically re-broadcasted. These include incidents of "misreporting important scientific findings or facts, omitting to report important findings and promoting pseudo-scientific responses to the epidemic."⁶⁷

Private broadcast media has also not been exempted from promoting pseudo-science. Van der Maas was later given ample time to explain her remedies on one of the most popular talk shows in Johannesburg (on Radio 702) presented by Tim Modise, one of the country's most recognizable talk show personalities. In 2005, the presenter of a talk show on Khaya FM, a radio station in Johannesburg, told listeners that HIV is not sexually transmitted, that "ARVs are toxic and will destroy your liver," and "the reason people have been dying is because of bad nutrition and lifestyle and not HIV and AIDS."⁶⁸

In April 2006, the Johannesburg daily newspaper, *The Citizen*, ran a full-page opinion editorial by David Rasnick and Sam Mhlongo, two doctors associated with AIDS denialism claiming that HIV cannot be transmitted heterosexually and used the responses to the article's distortions (including Rasnick's false claim that he was affiliated to the University of California, Berkeley) to create "the impression that a controversy existed in the scientific community when in fact there is no such controversy."⁶⁹ When questioned about their actions, these media (and the Broadcasting Complaints Commission that hears public complaints of radio and television coverage) claim "free debate" and accuse those questioning them of being fanatical. For

example, when TAC confronted the investigative magazine *Noseweek* over its publication of an article by journalist Rian Malan (he had argued there was a conspiracy between UNAIDS and other AIDS researchers to inflate the size of the AIDS epidemic), the editor Martin Welz accused TAC's national spokesperson Nathan Geffen of intolerance.⁷⁰

Not all media, however, can be accused of these shortcomings or willful distortions. *The Sowetan*, which for a long time was one of only two regional newspapers reporting to a majority black readership, is credited with covering the epidemic most consistently.⁷¹ Its editors had also been the first to create space for a person living with AIDS to write about his experiences in a weekly mainstream newspaper column ("Just call me Lucky"). It is significant, however, that the salary of columnist Lucky Mazibuko was partly paid by the United Nations.⁷² Other newspapers such as *The Star, The Sunday Times* and *Mail & Guardian* have intermittently reported on the issues relating to implementation of AIDS treatment as well as humanizing (and granting agency to) people living with AIDS. The *Mail and Guardian* in particular prints an "AIDS Barometer" with the most important statistics on HIV infections and AIDS deaths.

While some of these papers have a dedicated health reporter (e.g. *Business Day, The Star*), where their reporting has strayed from the predictable conflict frame, the majority have relied for their content on the health news agency, Health-E News. Established in 1999, Health-E News, focuses on ". HIV/AIDS, public health and issues regarding health policy and practice in South Africa."⁷³ They provide print feature articles for newspapers and magazines (including investigative reports around AIDS) as well as broadcast packages for national and community radio stations. Articles are produced either on commission or through Health-E News' initiative. From its offices in Durban (the epicenter of the South African epidemic), Health-E News has provided probably the most consistent and nuanced reporting and analyses of the epidemic. Its reporting has won international prizes and its small team of journalists -- Kerry Cullinan, Anso Thom and Khopotso Bodibe -- is unrivaled when it comes to AIDS coverage. Nevertheless, Health-E News' editors complain of declining interest in AIDS stories on the part of most mainstream print and broadcast outlets.

So given that good AIDS reporting is actually readily available to editors, why do they not use it? For one, "news values" -- the value that a potential buyer or reader of news ascribes to any story -- may explain the dominance of conflict frames.⁷⁴ Journalistic news values place a high value on celebrities and prominent figures in society (in this case Achmat, Mbeki and Tshabalala-Msimang), as well as scandal, conflict, violence and controversy. "These values are often at the expense of the 'ordinary,' the 'marginal,' the 'everyday' (regardless of their importance) and the economically disempowered (the 'non-market')."⁷⁵

As for their independently produced content, reporters for most of the newspapers generally lack adequate resources and experience. Most dedicated AIDS-beat reporters are overworked, they operate alone (no newspaper or broadcaster assigns a team of reporters to cover HIV/AIDS), and get little support from newsroom managers. The absence of a dedicated AIDS reporter(s) at a number of news outlets, budget cuts in newsrooms, and the fact that experienced reporters have left the industry to work in government or the private sector, means that young cub reporters are often assigned to cover AIDS. These reporters are not always familiar with the issues, but - even more worrying -- are often ignorant of the basic science of HIV and AIDS with the result that they often uncritically report denialist viewpoints.⁷⁶ Because of time pressures and established patterns of "collecting" news, reporters who do occasional reporting of AIDS often merely "follow-up" on previous stories and the public statements or press releases of civil society organizations, public representatives or government officials in conflicts such as that of over the causality of AIDS. Researchers and scientists have complained that journalists rarely contact them to provide correct information on controversies related to AIDS.

A third reason cited for the inconsistent and occasional coverage is what journalists and researchers refer to as "AIDS fatigue." Editors sometimes use the explanation that readers and viewers are saturated with and turned off by HIV/AIDS and as a result they don't see the point of regular coverage. As Judith Soal, a former health writer for the *Cape Times*, points out: "Editors, like everyone else, often glaze over AIDS stories. Once they've done the shock horror stats story on World AIDS Day, that's enough for the year."⁷⁷

A fourth reason for the conflict frame stems from the tendency within the media to treat the state as a monolith and to treat the relationship between TAC and the government as one that is solely confrontational. There is a tendency to collapse the "South African state" into the public utterances and actions of President Mbeki and health minister Tshabalala-Msimang. This is despite the fact that a number of other national ministries play key roles with regards to AIDS policy and implementation (finance, trade and industry, for example). The same goes for the role of provincial governments, who are central to implementation of AIDS treatment and prevention strategies. Reporters seldom write about those provincial governments who have implemented treatment programs (e.g. Western Cape and Gauteng) and provincial administrations' relations to non-governmental organizations such as Medicins Sans Frontiers or TAC, or interrogate some of the issues related to implementation of such treatment programs and reveal the divergent politics over AIDS politics within government or the ruling party. In the case of the government-TAC relationship, TAC has insisted on "a political strategy that always preferred collaboration with government rather than conflict."⁷⁸ In fact, "TAC does not question the underlying commitment of the ANC to better people's lives, and there is, in fact, sympathy and appreciation for the governance challenges of post-apartheid reconstruction."⁷⁹ According to Heywood (a senior TAC leader) this has often brought the TAC leadership into conflict with its volunteers -- largely working class, poor, mainly black and often HIV positive -who insist that TAC "does not succumb to middle-class sensibilities or political loyalties."80

Finally, media research points to a more compelling reason for the conflict frame: the coverage reflects racial divisions within newsrooms and between news outlets.⁸¹ There is some basis for this argument. Black journalists, often sympathetic to the poverty-frame on AIDS and because of widely held racist beliefs about black people's sexuality, have accused their white colleagues of insensitive reporting. There is some truth to these claims. One white reporter has suggested her colleagues in the media see themselves as "outsiders" when reporting the epidemic as a disease of those who are poor and black.⁸² In fact, studies show that most South African audiences and readers, rather than being turned off by AIDS reporting, would welcome more reporting on the epidemic: "It may be that journalists, coming most often from that sector of society that feels relatively immune from the disease, are bored with the subject."⁸³ AIDS "fatigue" may say more about journalists themselves, as one (white) journalist opines: "Those

with private health care -- still mostly white -- are more able to conceal its effects or delay the onset of AIDS by taking anti-retroviral drugs and having healthy lifestyles."⁸⁴

There is also evidence that black journalists stay away from reporting on AIDS or don't report on other aspects of the epidemic for fear of alienating the new mainly black-run government. The ANC still enjoys considerable support among the black majority because of its central role in the struggle against white domination and many black journalists are no different.⁸⁵ It can also be argued that given the small size of South Africa's political and literary elites, some journalists are reluctant to personally offend people in government that they are close to.

White journalists in turn risk being labeled racist. The majority of reporters that consistently cover AIDS for the main news outlets (both broadcasting and print) are white. As a result, they are easy targets for charges of racism from the government. Minister Tshabalala-Msimang has accused critics (including journalists) of the President's handling of the epidemic of "bad-mouthing the black government," while some government officials have accused white journalists of being anti-government as well as racist.⁸⁶

The account outlined above is certainly valid as far as it goes, but it does not tell the whole story. For example, claims of lack of resources are conveniently absent when many news outlets assign well-resourced teams of reporters, including "investigate units," to other more "sexy" or circulation-friendly topics or issues.⁸⁷ Similarly, the claim that readers/listeners/viewers are tired of hearing about AIDS is contradicted by public opinion surveys and focus groups. Research among poor and semi-literate people in an informal settlement outside Durban reveals that "98 percent of people in the area would welcome more reporting on the epidemic in print and broadcast media."88 Finally, it may be true that newsrooms are racially divided, but it is also true that Mbeki's media critics have been both white and black. The Sowetan, the newspaper that is most often praised for comprehensive coverage of AIDS (in terms of column inches) and for initiating a genre-breaking column on AIDS, is ninety percent black-staffed with a mostly black readership. It is also true that the denialist stance is a not widely held among South Africa's black political and journalism class, but is the preserve of a small, very vocal and powerful group around the President. As a result, we argue that focusing on the conflict frame means that researchers miss a number of more compelling rationales for the coverage. We point to three of these below.

The first relates to the idea that President Mbeki may have been very successful in claiming "the symbolic copyright on discussions of poverty" around AIDS to the extent that discussions of poverty are automatically associated with denialism.⁸⁹ As a result, journalists may be reluctant to explore any relation between poverty and AIDS as this may be construed in a highly polarized environment as supporting Mbeki or Tshabalala-Msimang. This is clearly reflected in public remarks made by one of Health-E News' reporters, Anso Thom:

Yes, the President had made astute observations around the link between poverty and HIV/AIDS. He had managed to put this approach firmly on the agenda, but unfortunately he had also contributed to making it impossible for any further debates to take place. It had become a debate of you are either for anti-retrovirals or you are against anti-retrovirals in which case you are a dissident. This places us (journalists reporting on the epidemic) in a very difficult situation. I, for one, agreed with some of the statements the president and the minister

had made around poverty, nutrition and so on. But in their minds it was an either or. In mine it wasn't. It was distressing to watch how newspapers were keen to keep reporting on the epidemic purely driven by utterances from the health minister, who had by now been dubbed Dr. No or Dr. Garlic or Dr. Beetroot or Dr. Doolittle.⁹⁰

Secondly, we have suggested earlier that there is a strong case to be made that denialism may be a cover for the government to avoid confronting how its own economic policies will undermine any state-led intervention.⁹¹ Given that the bulk of elite media in South Africa have remained very supportive of the GEAR proposals, particularly in the way it removes certain key economic policy issues from the public realm and from political debate within the democratic process, one could argue that South Africa mainstream media may be reluctant to enter into any debate where a concerted response to the AIDS epidemic includes a discussion about economic restructuring, especially as it involves investment in (and major restructuring of) the health system.⁹² But it is also shying away from confronting a situation defined by Johnson as a one where welfare and social rights, for example, are no longer political issues addressed at the societal level, but are now individualized and "must be negotiated within the context of privatized economic relations."⁹³

Similarly the uncritical and insubstantial approach by the media to South African mining and industrial corporations (treated differently in coverage from multinational pharmaceutical corporations) and private health care providers also does not bode well for a systematic discussion of the epidemic, its impact, and the most appropriate response(s). According Achmat, there is currently no public debate about the responsibility of private sector employers, especially mining corporations, for their HIV+ workers or workers living with AIDS. Only by threatening to publicly embarrass these companies --- in one case TAC threatened to run a public campaign called "Killing Fields" to shame the mining corporation Goldfields for its slow response to implement a treatment program for infected workers --- do these companies react positively.⁹⁴ Reporters also seldom interrogate the social productive forces that flow from these corporations' role in the South African economy that drive the disease, such as migrant labor. This oversight in not interrogating corporations' role in the epidemic's spread, is suggested by Kerry Cullinan in a comment about journalists' understanding of "sexual culture" on the mines:

When [the media] does consider 'culture,' this is often a catch-all code word for attitudes seen to be barriers to behavior change, and it is usually the 'culture' of those who have little power. For example, we read . the 'culture of masculinity' of Carletonville mineworkers is to go to sex workers. But what about the 'culture' of the mining industry, which has been built on migrant labor, single sex hotels?⁹⁵

Our final point relates to the human rights frame and the way the media reports AIDS activism, in particular the activism of the Treatment Action Campaign. Evidence from media surveys, transcripts from journalist forums, and the reflections of TAC and (some) government spokespeople confirm that mainstream media are more sympathetic to activist groups, especially the TAC than to the state. Part of the reason for this is that TAC recognizes the media's logic, shortcomings and daily work patterns and is savvy about constructing media frames. "By creating *newsworthy* [my emphasis] events that cannot be ignored by the commercial media (public marches, confrontations with the Health Minister and the civil

disobedience campaign among them), it inverts a news agenda that has a focus on what the government does and does not do."⁹⁶

As a result, TAC has successfully ratified its status as not only the privileged interlocutor for the AIDS movement but also about the AIDS pandemic. TAC not only provides much of the information for reports about them, but in media coverage AIDS has become fused with the organization, its aims and its spokespeople. In this regard, it is clear that groups such as TAC have cultivated the mass media and influenced the way their movement is framed. Indeed a sign of its success is the frequency with which movement leaders are quoted in the media, often to provide background or analysis. Achmat, Mark Heywood (TAC treasurer) and Nathan Geffen (TAC national spokesperson), have in the recent past become household names in treatment news because they can be cited in almost every HIV treatment piece.⁹⁷

According to Nathan Geffen, as a result the media has been a substantial resource in the success of the organization's campaigns. In 2003, TAC mounted a civil disobedience campaign that involved a number of illegal actions leading to arrests or publicly confronting government ministers. Despite its militant posture during this campaign, according to Geffen, "for the most part the media stayed on TAC's side." This was also true of other TAC campaigns, including one in which they publicly and illegally imported generic AIDS medicine into the country.⁹⁸

Yet, while TAC's image as an AIDS activist organization has been positively framed in the media, it is less clear that the wider issues and policy goals it promotes have been similarly portrayed. In fact, coverage of TAC often indicates a disconnect between what TAC is saying and how its demands are being represented. TAC's successful media image largely results from the media's framing of AIDS as a health issue, and not as an issue of socio-economic rights and social justice, which is how policy objectives are being increasingly defined within the movement.⁹⁹ For example, TAC founder Zackie Achmat has written that TAC "unashamedly pursues a social democratic, pro-poor and pro-human rights agenda."¹⁰⁰ Indeed, Achmat and other TAC leaders have been unequivocal about the class and racial nature of AIDS infections as tied up with South Africa's political economy (see earlier). Despite this explicit attempt to infuse race and class into media discourses of AIDS, coverage is still dominated not by the broader questions of access to health care but by clashes between TAC leaders and the ANC, particularly President Mbeki, which makes for good copy and headlines.¹⁰¹ Secondarily, media coverage focuses on the plight of AIDS sufferers as victims in need of help, but becomes uncomfortable when these same people make explicit demands: The media, Mark Heywood suggests, display "ambivalence . when the poor do away with decorum, display unmediated anger and break with the law."102

According to Heywood, the media's tendency to focus on people they are comfortable with, like Geffen and himself or Achmat -- white like most journalists or media-genic such as Achmat -- meant the media missed the "social significance" of TAC's mobilization: that "many more people with HIV who were poor and black" who had to deal with extreme forms of stigma and denial in their communities, had joined the movement to fight for access to affordable treatment. This new activist and leadership base provided the "social weight" and broad support that TAC needed to confront multinational pharmaceuticals companies and later the South African government, but also increasingly defined TAC's agenda. However, one would not know that from the media coverage.¹⁰³

In conclusion then, the media is sympathetic to TAC insofar as HIV/AIDS can appear as a sort of natural disaster and it can appear as a "loud and non-threatening" movement who opposed the government for opposition sake.¹⁰⁴ But when TAC presses redistribution and public responsibility for the welfare of South Africa's poor more broadly, its analysis is muted or shut out.

Conclusion

One of the key assumptions of this paper, based on our initial discussions of 'mediated deliberation' and framing, is that mass media (especially the country's mainstream press and broadcasting media) are key sites of struggles over who is a full member of the polity and struggles over the control and distribution of resources. As one of the authors have argued elsewhere, it follows that understanding the implicit and structural as well as explicit and intentional ways in which mass media help define the physical and human geography of the public sphere is essential for comprehending changing notions of citizenship, public goods and rights, as well as its implications for forms of political organization and democratic debate.¹⁰⁵

In this paper, we examined the attempts of various actors inside South Africa to frame the AIDS epidemic and in turn society's response to it. We focused in particular on AIDS social movements, the state, and the media, treating them as political actors in their own right. We argue that while it was inevitable that key leadership within the South African government's controversial stances on HIV/AIDS was bound to dominate media coverage the media not only trivialized coverage of the epidemic or encouraged sensational or factually incorrect reporting, but, more importantly, obscured and prevented public debate of the HIV/AIDS epidemic beyond a sensational, misguided conflict-driven "debate" between government and social movements over the causes of HIV/AIDS. What it exposed in the process is the real limits in the kind of information that is presented and the kind of debate that takes place in the South African mainstream media. And as we argued, these features are of course tied to the very inequalities and democratic deficit that media is expected to help correct.

Notes:

- 1. UNAIDS, 2006 Report on the Global AIDS Epidemic. <u>http://ww.unaids.org</u>. Accessed on June 20, 2006.
- 2. For a more comprehensive treatment of this debate see the Ph.D. dissertation research of Claire Decoteau (forthcoming).
- 3. cf. Page 1996; Swanson and Mancini 1996; Roselle 2002. In particular, Roselle 2002: 10.
- 4. Ibid.
- 5. Page 1996: 5.
- 6. Ibid., 6.
- 7. See also Johnson 2006.
- 8. Hammond 2004. "News values" also have a strong impact on how HIV/AIDS gets reported. The fact that conflict is a strong news value largely determines the type of coverage TAC is given when it confronts government.
- 9. Benford and Snow 1996: 614.

- 10. Hammond 2004.
- 11. Gamson 1985: 618.
- 12. e.g. Snow et. al 1986; Snow and Benford 1988.
- 13. Snow and Benford, 1998.
- 14. Snow et al. 1986; Gitlin 2000; Hall et al. 1978.
- 15. Hammond 2004; Bob 2005.
- 16. Ryan, 1991: 98-105; cf. Bob 2005. Individual framing often have ideological roots. For example, media underscores individual freedom and individual agency rather than that of communities, groups or social movements.
- 17. Ryan 1991: 70.
- 18. GCIS 2007: 142.
- 19. Berger 2004.
- 20. The elite or what could be referred to as the opinion-leading media refers to the daily publications *Business Day* and *Business Report*, and the weekly *Financial Mail* as well as the *Sunday Times*. The formerly alternative paper, the *Mail and Guardian*, is also part of this group of media, though it is not as central. Similarly, the SABC3 television news as well as the news bulletins and actuality programs of SAfm, the public broadcaster's flagship radio station, form part of the opinion-leading media (see Jacobs 2004; McDonald and Jacobs 2005).
- 21. Bruce 2007.
- 22. Nyamnjoh 2005.
- 23. Media's elevated political role is as much a consequence of favorable legal reforms, changing market conditions, the decline in mass political organizations linked to the apartheid political parties or the liberation movements, and the fact that the political decision-making in the new state and the politics of globalization, demanded or compelled "mediated" and elite-centered forms of governance and representation (cf. Swanson and Mancini 1996; Page 1996; Jacobs 2004; Jacobs and Krabill 2005).
- 24. Quoted in Duncan 2003: 1-3.
- 25. Duncan 2003: 4.
- 26. See http://www.anc.org.za/ancdocs/anctoday/. Accessed July 1, 2007.
- 27. Friedman and Mottiar 2004: 113.
- 28. Epstein 1996.
- 29. See Ernst 1997; Scheider 2002.
- 30. Schneider 2002: 157.
- 31. cf. Cameron 2005.
- 32. Friedman and Mottiar 2004.
- 33. Power 2003.
- 34. CIVICUS n.d.
- 35. Power 2003.
- 36. Friedman and Mottiar 2004.
- 37. Johnson 2006.
- 38. Robins 2004: 664-665.
- 39. Specter 2007.

- 40. Stephen Lewis, Remarks to the Closing Session of the XVI International AIDS Conference, Toronto, Canada, 18 August 2006.
- 41. This summary relies on the chronology in Power 2003. See also Heywood 2004.
- 42. Mbeki 2000a.
- 43. Decoteau 2007.
- 44. Mbeki 2000b.
- 45. Ibid.
- 46. Achmat 2003. See also Friedman and Mottiar 2004: 24.
- 47. Mzamane 2003.
- 48. Mbali 2004: 108.
- 49. Makgoba 2001: 3.
- 50. Ibid., 110.
- 51. Johnson 2004: 108: 112.
- 52. See Heywood 2004: 20.
- 53. Ibid.
- 54. Mbali 2004: 108. See also Decoteau 2007: 8-9.
- 55. Cullinan 2004: 2.
- 56. De Wet 2004: 105.
- 57. For example, even the *Mail & Guardian* published an op-ed by David Rasnick, an American biochemist who disputed the idea that HIV causes AIDS (see Power 2003). It should be noted, however, that since the *Mail & Guardian* has consistently attacked denialism and the editor has taken a stance against promoting that "debate."
- 58. Panos Institute, 2006. This study is also discussed in Findlay 2004.
- 59. Geffen 2006; Cullinan 2001; Geffen 2006; Heywood 2007.
- 60. Makgoba 2001.
- 61. Media Tenor "SA Media's blind spot on AIDS," 2004 (accessed at <u>http://www.mediatenor.co.za</u>.)
- 62. Ibid.
- 63. In 1995 the ministry of health commissioned the playwright Mbongeni Ngema to produce a sequel to the musical/film *Sarafina*, but this time with an AIDS theme. Questions were raised by a range of critics (AIDS organizations, the media and parliamentarians) as to the commissioning process, the total payment to Ngema (approximately R14,3 million). The Office of the Public Protector was charged with investigating the process and funding for the play was later stopped. The minister of health at the time Nkosazana Zuma, despite all the criticism, remained in her portfolio. Schneider 2001.
- 64. Ibid.
- 65. Examples include *Take Five*, a teenage magazine program, and *The Felicia Mabuza Shuttle Show* (Levine 2003: 66). Drama and soap operas that have explicitly had AIDS storylines include *Soul City*, *Yizo Yizo*, *Tsha Tsha* and *Isidingo*.
- 66. Geffen 2006: 5.
- 67. Ibid.
- 68. Geffen 2006.

- 69. Ibid., 6-12.
- 70. Geffen 2006: 23. See also Findlay 2004.
- 71. Findlay 2004: 73-74.
- 72. Swarns 1999. See also the website of the 2003 documentary film *State of Denial* (directed by Elaine Epstein) in which Mazibuko's impact is discussed (http://www.pbs.org/pov/pov2003/stateofdenial/special_lucky.html).
- 73. http://www.health-e.org.za/about_us/index.php. Accessed on July 20, 2007.
- 74. Findlay 2004: 72.
- 75. Ibid.
- 76. See Treatment News, November 2006. See also Geffen 2006.
- 77. Soal 2000.
- 78. Heywood 2004: 19.
- 79. Ibid., 20.
- 80. Heywood 2004: 21.
- 81. Findlay 2004: 69.
- 82. Cullinan 2001.
- 83. July 29, 2004.
- 84. Cullinan 2001.
- 85. Heywood (2004) summarizes a number of instances where black journalists came to the aid of Mbeki. In July 2000, Mathatha Tsedu, who was editor The Star at the time wrote in an opinion editorial: ". [T]o understand why Mbeki is being so violently attacked. one has to look at the profiteers from this mess. Drug companies mounted a slick public relations exercise, backed by rent-a-demo props who thrust drugs forward as the solution" (p12; my emphasis). On March 10, 2002, Thami Mazwai, a former editor of The Sowetan and a board member of the SABC, criticized former President Nelson Mandela in the Sunday newspaper City Press (aimed at a predominantly black readership) for making negative comments about Mbeki's handling of the epidemic. In the same article Mazwai also smeared TAC, charging that TAC". which is leading the hysteria against the government, had full-page adverts in the national media about six weeks ago. Knowing what these adverts cost, where does this NGO get the fortune it spent on advertising and the legal battles against the government? Is it not that some major pharmaceutical companies are funding them?" Heywood also recalled the instance in April 2003 when The Sowetan (it had changed editors by then, but still carried the Lucky Mazibuko column) published an opinion article by a spokesperson for the ruling party's youth league equating TAC with PAGAD, a shadowy paramilitary group formed in 1996 who had committed acts of terror against government targets between 1998 and 2000. In the article TAC was also described as "just a harmless but very loud pressure group whose salaries are paid by Americans. This is a conglomeration of drug-dealers who serve as marketing agents of toxic drugs which are not even used where they come from, America" (quoted in Heywood 2004: 17). The ANC Youth League activist was the guest of a popular radio station's talk show (MetroFM) that same night where he repeated his allegations unchallenged to the host.
- 86. See Cullinan 2001: 3.

- 87. Findlay 2004: 69.
- 88. "Research dispels notion of 'AIDS fatigue'," Business Day, June 29, 2004.
- 89. Decoteau 2007: 15.
- 90. Thom 2004: 4.
- 91. Mbali 2004: 105.
- 92. Louw 1995; Peet 2002; Jacobs 2004.
- 93. Johnson 2006: 664.
- 94. Achmat 2004: 81.
- 95. Cullinan 2004.
- 96. Findlay 2004: 76.
- 97. HIV/AIDS Indaba, April 2005.
- 98. Geffen quoted in Friedman and Mottiar, 2004. See also conclusions of January 2003 MediaTenor media analysis: "The treatment of HIV/Aids dominates Aids-related issues in the media, who have taken on the treatment issue with great vigor, acting as a watchdog over government actions" (HIV/Aids and the South African media," Mediatoolbox.co.za, January 28, 2003. Accessed on December 12, 2004.). Other references include Treatment Action Campaign (2003).
- 99. It should be noted, however, that TAC has been accused by other social movement leaders of actively participating in this kind of framing. See for example the analysis of TAC by Friedman and Mottiar's (2004: 7). According to Dale McKinley of the Anti-Privatization Forum: "We link GEAR and its neo-liberal stance (e.g. privatization) to the problems we are highlighting. TAC never makes any mention of the macroeconomic framework" (Ibid). However, TAC's response can also be characterized as strategic: the movement is at pains to minimize tensions between its white "middle class" supporters and its black "grassroots."
- 100. Achmat 2004.
- 101. Panos Institute 2006; Stein 2000, 2003; Cullinan 2001; Soal 2000.
- 102. Heywood 2004: 22.
- 103. Ibid., 5
- 104. Heywood 2004: 22. Herman Wasserman (communication studies, University of Newcastel-upon-Tyne) has argued that the ". interpretation of democratic politics [in South African mainstream media understands] the public sphere as being about opposition and a certain type of contestation, that is "controversial" and "newsworthy" (Personal Communication, July 12, 2007).
- 105. Krabill and Jacobs 2005.

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