

## **Reporting HIV in the Pacific: Is it time to widen the coverage?**

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‘AIDS is boring to report, so let’s try to make it more interesting’. The quote is from Anna Solomon, a highly respected former PNG journalist whose reporting career in the Pacific spanned more than thirty years. She recognised the seriousness of the unfolding HIV epidemic in her country and urged her fellow journalists to use imagination, initiative and sensitivity to cover the disease. This is not an isolated viewpoint because interviews with editors and journalists from PNG and Fiji in 2000, 2003 and 2005 raise a similar concern – how do you present fresh angles and material about a disease that has been around for 25 years? This paper attempts to tackle this question by analysing research on press coverage of the AIDS epidemic in PNG and to highlight what proved effective in terms of reporting styles and content. PNG was singled out because it has the highest number of HIV infections. In fact, the country has more cases than the total of all HIV infections in the other 21 Pacific countries and territories. The research reveals that there has been a disproportionate emphasis on reporting infection rates, international funding and regional workshops with little in-depth analysis of the disease or educational content. And while the language and tone of HIV stories show more sensitivity to people living with the AIDS, there is an urgent need to widen coverage and report AIDS as a story with medical, political, social, economic, cultural, religious and relationship aspects. Also, to report in a way that lessens fear and stigma, two key factors that act as major barriers to promoting openness and debate about the disease.

### **Confirmation of the HIV/AIDS epidemic in PNG**

Clement Malau, former director of the National AIDS Council Secretariat in Port Moresby, insists the massive epidemic of HIV/AIDS in many Sub-Saharan African countries, such as Zambia, Malawi and Zimbabwe — where HIV infection rates are as high as 25 per cent in each country — could be repeated in PNG. ‘Given the current situation in PNG, we could go the same way as many Sub-Saharan African countries. So there’s need for a more aggressive lead from government to fight this disease. Innovative long-term strategies must be found and implemented’ (Malau, 2005). And speaking to a group of Papua New Guinean parliamentarians in the country’s capital, Port Moresby, in mid-February 2005, Dr Peter Piot, Executive Director of the United Nations Program to combat the spread of HIV (UNAIDS), re-emphasised Malau’s plea for strong and committed leadership:

There should be a united front that cuts across all boundaries in the fight against the AIDS epidemic as it is about the survival of your nation... And the choice for you is also clear to me. You have an emerging epidemic and it is either you act now and stop the epidemic in its infancy, or pay a very high price much later (Piot, 2005).

Piot's remarks re-echo an earlier statement he made on HIV/AIDS in PNG in 2004:

The history of the AIDS epidemic has taught us that once things start moving, it's like a snowball and it's going to get worse and worse... PNG needs a very vigorous response otherwise, it will go the African way. And PNG has everything that's wrong - lots of migration within the country, family disruption within the towns and villages, a lot of sexually transmitted diseases and a sexual culture that makes HIV spread very rapidly (Piot, 2004).

These remarks challenge not only politicians but also business, religious, medical, media, legal, civil leaders and non-government organisations to find appropriate responses to this rapidly expanding public health epidemic. While certain individuals and organisations have spoken persistently about the dangers of the epidemic and called for an urgent and determined response, there is need for a larger multi-pronged approach that involves all sectors of society. And promoting prevention is seen by the WHO as a key approach in attempts to limit the worrying rise of HIV infections throughout PNG and in several other Pacific countries. But this has proved extremely difficult to implement.

### **Current figures for HIV infections.**

Editors tend to prefer hard data rather than broad estimates or predictions. Terms such as 'potential epidemic' or 'emerging crisis' are too vague and editors may be influenced by what media researcher, Mayer (1964), referred to as the quantitative view of importance. In PNG, however, it is difficult to give the exact number of infections. One reason is the lack of an adequate national surveillance system. This was discussed at a workshop in Port Moresby in mid-November 2004, which brought together more than 80 medical and health officials from around the country. The participants asked for the establishment of HIV surveillance programs in seven more provinces and to test at least 700-800 people at higher risk in key locations. There was widespread concern that the existing system still left substantial uncertainty about the HIV/AIDS situation, thereby hampering efforts at advocacy, resources allocation and program monitoring and evaluation (Consensus workshop, 2004).

Current HIV infection figures show a continual upward surge. HIV infections rates in PNG have increased by around 30 per cent annually since 1997 and an estimated 60,000 Papua New Guineans are living with the virus. This amounts to a prevalence rate of 1.8 per cent. A report by the PNG National AIDS Council Secretariat (NAC) in May 2006 points to an infection rate of over 100,000 people. It predicts that the current HIV/AIDS epidemic sweeping the country will eventually match the massive infection rates seen in some African countries.

The effect of massive infection rates will have disastrous economic consequences. A report in 2002, entitled, *Potential economic impact of an HIV/AIDS epidemic in PNG*, published by the Centre for International Economics, paints a depressing future for PNG. The study estimated that by 2020, PNG's labour force would be between 13 and 38 percent smaller than projected without HIV:

If Papua New Guinea follows the low scenario, the working age population will be 13 per cent smaller than it would otherwise have been by 2020. If PNG follows the medium pathway, the working age cohort will be smaller than 34 per cent. If it follows the big scenario, it will be smaller by almost 38 per cent... The current measured HIV/AIDS prevalence places PNG in either the low level or concentrated phase (*Potential economic impact of an HIV/AIDS epidemic in PNG, 2002, pp. 8-9*).

Another report was published at the end of 2004 by Australia's department of Foreign Affairs and Trade. Entitled, *Papua New Guinea: The Road Ahead*, it continues the bleak outline of the 2002 report and analyses future economic and investment opportunities within the country. The section on demographic trends shows that PNG's population has almost doubled in size from 2.9 million at independence in 1975 to 5.5million in 2004, growing at an average rate of 2.5 per year. Forty one percent of the population is under the age of 15. On the same page, the latest figures for HIV infections in PNG are reported and analysed. In fact, there are three sets of figures for HIV infections in PNG, depending on whether the epidemic turns out to be on a low, medium or a high infection level. Therefore, the figures range from 0.9 percent of the population (25,000) to a medium range of 1.7 percent (45,000) to a worst-case scenario of 2.5 percent (69,000). Whatever figures are adopted, PNG still remains the country with the highest number of HIV cases in

the Pacific - higher than the combined infection rates of all the other Pacific countries put together.

The 2004 report makes the point that HIV surveillance in the country is poor and HIV infection rates across the country are almost certainly grossly underestimated. There is broad agreement that the incidences of HIV/AIDS in PNG have risen dramatically and on its current course, it will have a devastating economic impact on households, firms and the government. The authors of the report point to a possible collapse of the health system through massive increased demand on health sector resources. It describes the country's health system as chronically under-resourced and struggling to provide services at all levels. It is not equipped to deal with an HIV/AIDS epidemic. Lack of financial support is another hindrance. In 2003 and 2004 the direct contribution from the PNG government for HIV amounted to only K700, 000 (AS350,000). While the amount allocated for HIV/AIDS in 2005 is substantially higher, the government and ultimately the people may pay a high price for the serious lack of financial support in earlier years.

Political leadership has proved a vital component in the struggle to stem the rise of HIV infections in other parts of the world. This is clear from the decline of infections in Uganda, Senegal and the Gambia where all three political leaders spoke openly and constantly about the epidemic in their own countries. This helped to lessen the sense of fear and stigma about HIV/AIDS in the local communities, and it galvanized them into action as they defined the struggle against HIV as a national cause and campaign.

### **Press coverage of the disease in PNG**

PNG has only two daily newspapers and they provided the data for this study. The first, the *Post-Courier*, started in 1969 and is currently the largest-selling South Pacific daily with a circulation of 26,262 (*Post-Courier*, 2006). Murdoch's News Limited holds 62.5 per cent of the shares while private shareholders account for 27.5 per cent. The second newspaper, *The National*, began operating in late 1993 and is owned by a Malaysian firm, Monarch Investments, a subsidiary of timber company Rimbanan Hijau (Robie, 2005, p. 57).

The first content analysis of press reports of HIV/AIDS in the Pacific (covering 1987-1999) was conducted by Cullen (2000) who focused mainly on PNG because it had more than 90 per cent of all HIV/AIDS cases in the southern Pacific region. Findings from this research revealed that, while editors and journalists did cover the story, they preferred to report official figures for HIV together with news items on workshops, budgets and international donations. Educational messages on HIV prevention were omitted (Cullen, 2000, p. 233). This section deals primarily with the response of the press in 2005 and, in particular, whether reporting of the disease in the PNG press increased or decreased since the previous study by Cullen (2000). It also tries to discover whether certain types of news stories – HIV figures, workshops, budgets, donations – continued to be the major news topics or if the list increased to include news items on prevention and people living with HIV.

In health research, the methodology used to document media representations of disease is generally a quantitative approach. This study, however, opted for both a quantitative and qualitative analysis of all HIV/AIDS stories in PNG's two daily newspapers, *The National* and the *Post-Courier* in early 2005. Data collection included all news items on HIV/AIDS over a three-month period. The websites of both newspapers were used to collect data for the research and it was considered important to select a particular week in consecutive months so as to achieve some form of comparative study. Because it was difficult to retrieve online archival material, the author downloaded the stories on the actual day that they appeared online. Content analysis involved identifying each newspaper cutting on HIV/AIDS as an editorial, a letter, a local story, a foreign story, a front-page story or a feature. 'Foreign story' refers to news items about HIV/AIDS in foreign countries while 'local story' refers to news items on HIV/AIDS within PNG. These categories followed closely those chosen by Kasoma (1990 and 1995) and Pitt and Jackson (1993) when these researchers analysed press coverage of HIV/AIDS in Zambia and Zimbabwe.

## **Findings**

News coverage of the disease increased in both newspapers during the period of study. For example, compared to the previous research, *The National* recorded more news items in the three selected weeks in 2005 than the whole of the first three

months of 1999; 13 in 1999 compared to 19 news stories in 2005 (Cullen 2005, p. 145). The scope and focus of press coverage, however, did not change. Workshops, the latest figures for HIV/AIDS and 'harms' scored the largest number of stories, mimicking the results of Cullen's previous study (Cullen, 2000, p. 166). The category 'harms' refers to a news story that describes the consequences of contracting HIV, namely sickness, stigma and death. Attempts to humanise the story resulted in four stories on people living with AIDS (PLWAs) and four human interest stories about people caring for those living with the disease. News items on prevention and protection, however, did not appear in the 2005 study and only one such item appeared in the corresponding period in the first three months of 2000 (Cullen, 2005, p. 144). This is a significant finding – that none of the news items contained direct educational messages about ways to avoid infection. This is particularly worrying when considering that the number of HIV infections in PNG continues to show large increases in all 20 provinces and figures could reach Sub-Saharan African proportions in a few years. There were no feature articles in either daily newspaper, not even in the weekend magazine editions.

While current and former editors and journalists from the *Post-Courier* and *The National* newspapers should be highly commended for consistently tracking and reporting the spread of the disease for the past decade, it may be time to shift focus and to balance information with educational content. It is not a question of whether this approach is more effective but rather a recognition that both elements are an essential part of reporting the story regardless of their impact on reducing the rate of HIV infections. However, achieving a common consensus on the role and duties of the press in regards to reporting HIV/AIDS is still problematic. Nevertheless, it is evident from the data on press coverage of the disease in PNG that a disproportionate emphasis was placed upon reporting infection rates, international funding and regional workshops, with little in-depth analysis of the disease or educational content. And while the language and tone of HIV stories show more sensitivity to people living with the AIDS, there is a need to widen coverage and report AIDS as a story with medical, political, social, economic, cultural, religious and relationship aspects, and report the story in a way that lessens fear and stigma, two key factors that act as major barriers to promoting openness and debate.

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