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## Is media fatigue hurting the fight against AIDS?

By Issa Sikiti da Silva

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Managing HIV and AIDS in Africa, and anywhere in the world, requires the efforts and participation – in one way or another – of every sector of the population and business, including the media.

In sub-Saharan Africa, where the epidemic is centred, the media – as a powerful institution – needs to speak out on important issues such as the lack of substantive AIDS policy, lack of access to antiretroviral drugs for many, discrimination of people living with HIV, forced and arranged marriages of young girls, unhealthy and illegal traditional circumcision and many more.

However, there seems to be constant media fatigue on AIDS, with the reporting on the disease only peaking around June and December each year, to the dismay of experts and observers who believe that the media is failing communities and faltering in its role as an integral component of AIDS management.

“Every year there are two specific times when HIV and AIDS coverage peaks – these are the annual HIV conference in June and World AIDS Day on the first of December,” Sandra Roberts, project manager of the SA Media Monitoring Project (MMP), said.

“On these days, you get informative coverage of the issues and an idea of the latest research. Other than that, the coverage tends to be almost all political and legal, like the health minister’s statement and, or, a lawsuit by the Treatment Action Campaign,” Roberts explained.

“There is also sometimes increased coverage when drug trials are happening. HIV also appears indirectly in stories covering celebrities doing good works and visiting orphanages, or stories that attempt to raise

funds or awareness of the plight of children.”

Many journalists interviewed blame gatekeepers (news editors and managing editors) for this kind of attitude, which they believe is seriously hindering the response to HIV and AIDS.

“Gatekeepers must take blame for this media fatigue. AIDS does not wait for June or December to strike,” one journalist, who declined to be named, said.

“It does damage every minute and every day and everywhere, so as the media, we also need to cover AIDS-related issues on a regular basis to create a sort of a permanent awareness on people’s minds. You don’t stand a chance to see your story published if it is not submitted around the first of December, unless it is really a ‘bomb’, which I believe is a travesty of responsible journalism.”

MMP’s Roberts said that media AIDS fatigue may also be the result of a standardised method of reporting that people have become tired of.

But what can journalists and editors do to remedy the situation? “Be imaginative. Give people information that they need, for instance stories about care and treatment,” Roberts advised.

There is a wealth of untold stories around children and HIV, but also around gender-based violence and HIV. Recent research found that 50% of South African men admit to sexually abusing women. That is newsworthy and clearly has implications in terms of HIV and AIDS.

But HIV and AIDS can be better mainstreamed into coverage on matters. For instance, food price hikes affect HIV-infected people differently. Personal stories such as of people who have been through a lot from HIV, but are still hanging on, by living positively or getting better on ARVs are equally important. Speak to those who are infected or affected.

## In Touch...*with the media*

Welcome to our second edition of In Touch, a publication of the SAfAIDS Media Resource Desk (MRD) - a one stop shop for journalists and other media practitioners who wish to access quick, accurate and user-friendly information on HIV and AIDS prevention, care, treatment and support. The desk serves as a focal point for all HIV and AIDS information queries from the media.

The purpose of this publication is to showcase how, through diverse fora, the MRD interacts with the different media in the region and to advise the media on how they should best tackle certain issues. It serves to showcase too, the areas of SAfAIDS' work and will hopefully help bridge the gap between the media in different countries, and between the media and SAfAIDS.

In this second issue, we focus on the triumphs and challenges faced by health journalists in different countries. We take a closer look at the people behind the AIDS beat. There are some special features on lessons learnt from the International AIDS Conference held in Mexico in August. Look out for "Eureka! The National Dress, a satirical piece about the condom.

Don't miss too, our "forthcoming events" section where you will find information about the fast approaching 16 Days of Activism Against Gender Based Violence: a busy time for health journalists across the world.

If there are any events or training activities lined up in your country, please send them through and they will be included in the next edition.

Please remember that if there is anything happening in the

media in your country, that you would like the wider audience in the region to know about- this publication is for you. Feel free to have your say through this publication. Send any comments and views to [mediadesk@saf aids.org.zw](mailto:mediadesk@saf aids.org.zw)

Regards!

The Media Resource Desk Team

### Some services the MRD offers:

- Exciting and in-depth articles
- Access to well-informed resource desk staff
- Latest and most accurate statistics relating to HIV and AIDS
- Latest research findings
- Information on key HIV and AIDS events
- Media briefs on topical issues
- Media Website
- Regular information bulletins
- Award of Excellence for best reporting on HIV and AIDS

## Cultural practices still pose threat to HIV and AIDS fight in Malawi

By Wezie Nyirongo

Studies have indicated that in most parts of Africa, including Malawi, the HIV and AIDS pandemic still bears a woman's face, with more than 60% of those living with HIV being women. According to statistics, Malawi's prevalence rate stands at 14.1% in a nation of about 12 million people.

Although the Government and stakeholders have made relentless efforts in fighting the HIV and AIDS pandemic, some gender-insensitive cultural practice remains a major threat to the fight.

Despite intensive sensitisation on the dangers of some cultural practices which encourage the spread of the pandemic, it has been established that such practice continue to be honoured in most communities.

One district where such practices are still being conducted is Mchinji, in the central part of Malawi, which is also a border district to Zambia.

An investigation carried out by this reporter in some selected villages revealed that some chiefs in the district continue to 'enjoy' a popular cultural practice called

*kabulangete ka mfumu* (a chief's blanket) where elders arrange a young girl to sleep with a particular chief whenever the chief travels away from his village or territory.

"It is very difficult to accept such a practice because it involves chiefs who are supposed to be at the forefront of discouraging such practices if the battle against HIV and AIDS is to be won in our area," worried one of the villagers who opted for anonymity for fear of being persecuted by the elders.

He added, "The other problem is that chiefs would not be interested in stopping such a practice because it has been there since their ancestors and doing so would mean demeaning cultural values."

According to the villager, who is in his late 70s, the practice is regarded as an honour to the chief whenever he is visiting another village, whether for a visitation or funeral purposes.

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He said the idea behind the practice is that the chief is not supposed to carry along a blanket whenever he travels as he is given a young girl to sleep with each time he is visiting another village, whether for business or social purposes.

“We are very concerned because our young girls are forced into sleeping with older men at the expense of honouring cultural values,” another woman only introduced as Naphiri retorted. “Sometimes we as parents do not even know what is going on and even if we are made aware it is impossible for us to confront the chiefs about stopping this practice.”

Naphiri adds that in such circumstances, chiefs do not even bother using condoms thereby often either impregnating the girl or infecting her with HIV.

Apart from the ‘kabangete’ practice it has also been established that girls are often forced to sleep with an older man for cleansing purposes known as ‘kuchotsa fumbi’, after undergoing an initiation process.

It is also clear that during such acts, no condoms or other protective methods are used to protect them from the pandemic and Sexually Transmitted Infections (STIs).

A number of young girls approached by this reporter to confirm whether they have been approached by elders to perform such an act or have actually been involved in the practice refused to be interviewed saying that according to their cultural values, they are not supposed to disclose any information as it is a sensitive issue.

In a bid to defend their stance, one of the girls disclosed that when they undergo an initiation ceremony they are vehemently told not to disclose any sensitive matter because they are now grown-ups.

One of the organisations engaged in HIV and Aids activities, the Malawi Network of Aids Service Organisations (MANASO) confirmed reports that such practices are still happening in the district.

MANASO policy officer, Ishmael Nkosi, said in an interview that the practice are being implemented in most of the villages in the district.

Nkosi therefore urged young girls and parents not to withhold vital information relating to exposing the culprits so that the practice could come to an end.

He explained that faith leaders, chiefs and villagers should join hands and work together towards protecting young girls from contracting HIV.

Another practice which is discriminating against women is *Chokolo* where a widow is forced to marry a relative of her late husband, often without consideration of what disease led to the death of the husband and also without HIV tests before marrying.

In most cases women have no right to turn down such arrangements for fear of being labeled as prostitutes or regarded as having deliberately killed the husband to take over his wealth if any.

In an interview, one of the parliamentarians for the district, Henry Fwataki, who represents Mchinji West Constituency, disclosed that his area is largely affected by the pandemic and that young girls and women are the most vulnerable groups.

“Due to the escalating rate of the pandemic in my area, the number of orphans and other vulnerable children is increasing each day,” added Fwataki. Who disclosed that his area has about 610 orphans.

“Some chiefs in the district continue to ‘enjoy’ a popular cultural practice called *kabangete ka mfumu* (a chief’s blanket) where elders arrange a young girl to sleep with a particular chief whenever the chief visits another village or territory .”

## What makes an AIDS Reporter?

By Beatrice Tonhodzayi

It goes behind producing yet another article and writing as much as possible so as to get writers’ fees.

Writing or producing a news story is fulfilling and a journalist is filled with a sense of achievement when their story is on the front page, or in the headlines.

But nothing could beat the satisfaction that comes with producing yet another thought-provoking, controversial, life-altering and accurate AIDS story.

I have been practicing journalism for nine years. For the past four years, however, I have been writing on AIDS and TB and health issues. Nothing beats the satisfaction that comes from this. From the “sad and heartbreaking angles” to the testimonies of survival that I have been privileged to hear during this journey-I have loved it.

What has been especially important about writing the AIDS story is that in a world when so many are occupied with facts and figures- I have been fortunate enough to write about people and their lives.

By doing my job, which is to produce information and share it with the world, someone’s life has been changed, at times changed for the better. The knowledge that through my pen, a life could change, has only served to make my resolve stronger.

Over the years, there are stories I have done that have touched me more than the other ones and some, which have been more involving and difficult compared to the others.

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That is the life of a journalist on the AIDS beat. I will never forget the face of the little boy (now late) whose mother could not understand why her little one was always ill and was just not growing at the same pace with his colleagues. The journey this family took from the time their little boy became sick to the time they went to get him tested until the day they buried him touched and changed my life.

Advocating for treatment for children living with HIV in Zimbabwe, through my pen, after meeting this family became my life's mission and to this day, I will continue.

Advocating for access to testing and counselling services for children and adults is my mission since the time my first article about the little boy went to print.

There was of course, the story about the woman whose husband chased her out of their matrimonial home after she dared come in and declare that she had gone for an HIV test and the result was positive. And the other one about small houses, which got the whole country talking and writing in to have their say.

Achievement really set in when government made sure drug stocks improved at anti-retroviral sites after many journalists, including myself went to town about the sad situation most people on treatment were finding themselves in as a result of erratic ARVs supplies in the country.

It really set in when many readers said they had gone to get tested after realising (through media coverage) the importance of knowing one's status and when women confided that they had realised that they should protect themselves by using the female condom.

When young people said they had realised the merits of waiting until marriage and an HIV test, or using condoms if one could not wait, the real impact of my work was revealed

to me.

It has not always been like that though. It is almost like a love story. It is such a roller coaster ride. One day you are happy and cannot wait to see the next person. The next moment you are so mad that you could almost throttle them.

Telling the AIDS story has been like that at times. When there is just no progress where it is overdue like in the research and trials of microbicides, I have often felt like weeping.

Where the numbers of people requiring treatment in Zimbabwe (500 000) and those actually accessing it (110 000) are just not adding up, tears of frustration at times sting at the back of my eyelids.

Media books tell us that a journalist is not meant to be involved. He or she should look at both sides of the story and remain outside of the parties being reported on.

But you just cannot afford to remain uninvolved when you can see people wasting away unnecessarily because there is no treatment. Your articles and reports take on a deeper tone when you are involved, which is not necessarily a bad thing.

I have been humbled when People Living with HIV have approached me and asked that I share their story. Their faith in the media during such instances has spurred me on.

"Please highlight this and maybe, there can be change," they have said. As I said at the beginning, telling the AIDS story goes beyond anything that I have ever done.

By doing this, I have played my part towards helping to stop the spread of HIV and reducing the impact of AIDS. By doing this, I have honoured the brother I lost to AIDS, the friends, colleagues and fellow human beings who died. I have and continue honouring those wonderful and brave people who are living positively with HIV.

## Eureka! The national dress found

By Robert Mukondiwa

Since the turn of the century and even earlier with the advent of Independence, Zimbabwe has been battling to create a distinctive that marks the nation the world over - something either produced, or perfected by Zimbabweans, that can be regarded as Zimbabwean first and belonging to the world later.

The two major things being sought in this cultural quest are a national dish and a national dress. But Zimbabwe already has several fabrics that are, if a pun should serve us well, part of the social fabric.

The list includes georgette, crimpline, nylon, satin, tereline and even the odd so-called 'glass shoe' that complemented the viscose in the early nineties!

Then comes the ultimate fabric. Great staying power. Used before independence and growing into everyday culture. Glorious latex simply called-the Condom!

Yes if there ever was a search for a national dress for Zimbabwe, it should end dead at the door of the condom.

Apparel designed for the man and the woman and worn by both with almost equal zeal and determination. Passing hands faster than currency amongst the youth, and still the most affordable product in Zimbabwe-arguably.

And the rules of economics as textbooks would have them are shattered. Supply and demand? Hogwash! High demand matched by high supply and none selfish that they may want to cause a shortage and profiteer. We all need latex and latex we will get is the spirit amongst those who supply the nation with this precious apparel!

Pathisa Nyathi, the great Zimbabwean scholar and satirist was right. Years ago he remarked that because of the number of condom advertisements being shown on television, it may just be a sign that Zimbabweans are 'very loving people' in whatever sense of the word he meant and pun surely intended!

And news from behind the pulpits may just suggest they are finding their way into seminaries. Never mind the moral

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debate, celibacy, thou shalt not covet, commit adultery, et-cetera, the condom- our national dress- rules even among some clerics! Some have adopted a hear no condom, see no condom, speak no condom but wear condom in private approach.

The moral debate on our newfound obsession, the national dress, however has ruffled feathers but the debate has been merely glossed over. What should we think of ourselves? Does the condom culture reflect that we are highly educated people who now value our lives and have therefore declared the condom our national dress in the comfort of our bedrooms, or does that reflect that we are immoral sex crazy perverts?

Ambuya Katsande, a traditional healer, whose son I was privileged to have been schooled alongside has her views on whether it is traditionally right to have the love affair we have with the condom. She seems to share the Catholic view. And for somewhat similar reasons.

"Traditionally, people marry in order to reproduce and have children who will further the name. Anything that will impede procreation is therefore not encouraged," she points out. However, she is quick to admit that she thinks the condom has also done wonders for the nation by saving a lot of lives from the perilous sheme that Aids has in store for mankind.

So would she let Tonderai wear one and potentially save a life or would she want him to procreate to his potential detriment? To wear or not to wear, that still remains the question.

"That is why we side with the National Aids Policy. We also know that testing and counselling is needed and decisions on procreation should therefore be made from those results," she authoritatively says.

And the people of the cloth should have their word.

## A tapestry of positive living

PlusNews, the United Nations HIV and AIDS news service, has been reporting on HIV and AIDS for almost 10 years. The stories we have told followed the pandemic - the rollout of treatment, the rise and fall of prevalence rates, and the search for new prevention strategies - but as the pandemic and our epidemics in southern Africa continue to evolve, so too do the stories we tell.

Although gaps exist, the days are gone when treatment was out of reach for most people. AIDS is not the death sentence it once was and people who are living with HIV are falling in love, building families, living.

At PlusNews, letting AIDS fall off the map was never an option, but the challenge has been how to retain and attract readers. Immersed in the industry and community of HIV and AIDS, we've been fortunate enough to become aware of the nuances and complexities of the AIDS story, and our coverage has constantly changed to reflect these.

In 2006, children affected by HIV and AIDS became a PlusNews key issue. Our reporters went across southern

As a pastor, Pastor Kapachawo, who is known to be HIV positive, actively endorses condoms. He has not said he does as a matter of fact, but being the face of the condom marketing campaign in Zimbabwe hardly is a vote of no confidence now is it? So he endorses the condom, his pious smile and all, as the national dress of number one choice in Zimbabwe.

But not all is bliss and commendable in Zimbabwe's massive use of their national dress. A recent story from Matabeleland region in Southern Zimbabwe made for distasteful reading when a father was discovered to have repeatedly sodomised his four-year-old son- wearing a condom.

His rationale? "I cared for my son and did not want to infect him with any sexually transmitted infection in case I had one," he was quoted in the media as saying. Talk about a lesser sin. Here is just one case when latex is an accomplice amongst sick perverts who are morally corrupt.

Zimbabwe is highly regarded as a Christian country, and many among these are Catholics, who are not allowed to use contraception. If a significant percentage of Zimbabwean Christians are Catholic and are avoiding joining the 'condom-as-a-national-dress' crusade, then that may suggest we have an active Christian population.

Have Catholics strayed from the 'no contraception' rule to hold onto dear life in the face of HIV? That well could be the case.

After all is said and done, the national dress has been found. The condom rules the roost, whether it is okay to don it or not is another case.

Whether pious or not, this is one piece of dress we wear with a passion and if figures of AIDS prevalence are anything to go by, then we are ultimately saved by the controversial tube.

National dress? Eureka! And now for the national dish, that is a battle to be fought another day.

**By Laura Lopez Gonzalez**

Africa to report on children living with HIV and AIDS, and give some of them the opportunity to tell their own stories, with the work culminating in the book, 'Our World: AIDS and childhood in southern Africa'.

Some of the stories PlusNews reporters heard were tragic, but many more were inspiring in their normality - and they challenged what our conceptions of life with the virus meant. Yes, children were HIV-positive but many were on treatment and growing up; memory books were no longer just about remembering someone no longer there, they were about celebrating life.

'Our World' stood in sharp contrast to the media's often one-dimensional portrayals of children and families affected by HIV. Life happens - with or without the virus - but until recently this has been overlooked in a mainstream media, where "the AIDS story" has often been monopolised by treatment or testing figures, or policy or politics. An absence of life is noted by many people in our own

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communities, in activism circles and amongst donors. The South African Broadcasting Corporation's Ida Jooste highlighted this in AIDS reporting as early as 2004, when nearly 100 percent of those she surveyed in the Cato Manor informal settlement outside Durban said they wanted more news on HIV and AIDS, "more about people like us".

Alongside 'Our World', one of our most successful coverage innovations was a recent series on love. Published just in time for Valentine's Day 2008, the series focused on the love lives of people living with the virus, and was launched with our 'Positive Guide to Dating', in which three positive people told us about how their status has affected their love lives. This is how we introduced the series:

"Relationships are hard enough: finding the 'right' person, getting used to each other's strange habits, and sticking around for the highs and the lows. But dating becomes even more complicated if one or both of you happens to be HIV-positive."

Within two days of launching 'Love in the Time of HIV', readership on [www.plusnews.org](http://www.plusnews.org) shot up by 51 percent. The only thing read more often than the 'Positive Guide to Dating' that month was our home page. Follow-up articles on sex, sexuality, pregnancy and dating preferences have made the series a constant favourite, and reader response continues to be overwhelmingly positive:

"Great idea! And very good to clearly separate the dry-facts journalism from this more emotional style of life-style reporting.

Love it!" - said Marwin, who works for an international aid organisation.

"This looks like it will be a great series, dealing as it does with real people struggling with real-life issues. Congratulations!" - Rosemary

In June 2008, PlusNews followed 'Love in the Time of HIV' with an innovative look at the pandemic through the lens of language. 'Mind your language - a short guide to HIV and AIDS slang', showed readers how people really talk about the virus on the continent, in languages from the Zulu of Johannesburg's townships to the pidgin of Lagos streets.

In the first 24 hours after publication, the number of people logging onto PlusNews increased by almost 75 percent. In the following month, 'Mind your language' was again the only page on our site read more often than our home page. Readers participated by sharing related slang from their own communities.

The PlusNews team credits three main reasons for the success of these initiatives: 1) they were much more about how people, couples and communities have come to live with the virus; 2) they gave people affected by HIV and AIDS a chance to speak in their own words; and 3) a broad audience could relate to the stories, whether seen through the eyes of a child, about the difficulties of dating, finding love or dealing with daily life.

## HIV and AIDS reporting outside the newsroom

By Frederick Ogenga

I have been involved in years of HIV and AIDS reporting and from my experience, I have learnt that many concerns about AIDS reporting have been mainly focused on journalists working or practicing in a busy newsroom. This perhaps has limited the amount of important information that otherwise might come from journalists.

There is no doubt that HIV and AIDS reporting has to be treated carefully based on the scientific knowledge that journalists must have, coupled with the sensitivity to issues of identity along gender and racial lines, which are the most dominant issues associated with HIV and AIDS.

I don't want to focus on the origins of HIV, but it has been generally agreed that it has a western gay origin. However, HIV has increasingly been seen differently, arguably, based on the measurement category that explains its existence. If you take the race category, then most people argue, and enough research has been conducted to support such arguments, that the black population is more affected than any other population in the world.

Since the black population is predominantly found in Africa, then it follows that AIDS is predominantly an African pandemic. Similarly you can use the gender category and you will find arguments reaching to the conclusion that women are generally more vulnerable to HIV than men because of factors ranging from biological to economic ones. Then you can simply conclude that black-African women are more vulnerable to

AIDS.

This being the case, the HIV epidemic has invited a lot of debates based on these issues and many African countries have heard their fair share of such debates. In South Africa, former President Thabo Mbeki continuously questioned the links between HIV and AIDS, and the scientific regimens safe for treatment. In his debates, he has contested the association of HIV and AIDS to the black population.

The race rhetoric on one hand, and the association of HIV and AIDS to the black population, has perhaps been associated to the increasing vulnerability of the white population. The common perception is that this racial group is generally not at risk as very few whites make themselves accessible during HIV/AIDS researches.

On the other hand, the gender rhetoric has led to the increase in men's vulnerability to HIV and AIDS as all efforts towards addressing the disease are focused on women and their vulnerability. This has created serious gaps in HIV and AIDS programming and needs to be addressed urgently.

On other occasions, journalists find it difficult to cope with their scientific sources. Last year, I attended a two-day health care media exchange seminar at Hackle Brooke in Craig Park. The exchange was sponsored by Medscheme and supported by Africa Media Assignments, Perinatal HIV/

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AIDS Research Unit (PHRU) and the Wits HIV and /AIDS and the Media Project. What fascinated me about the exchange is the level at which scientists and journalists find it difficult to speak the same language about health issues particularly HIV and AIDS, with their audiences.

Often, these two groups of people are suspicious of each other. Kanya Ndaki from IRIN Plus News briefly described it as “mistrust between the scientific community and journalists”. She said journalists find it difficult to deal with people who don’t trust and respect them. She however accepted that journalists have a problem in understanding science. This results in overstating, dumping down statistics and figures.

Journalists therefore are at pains to accommodate the ‘source-politics’ associated with HIV and AIDS reporting within their own institutionalised politics in the newsroom. This brings up issues on the manner in which such reporting should be done in terms of the use of language, direct quotes, accompanying photographs and the like. Little wonder most HIV and AIDS stories, no matter where they are published, have a certain degree of commonality due to the institutional practices of reporting that seem to be homogeneous.

From my experience working outside the newsroom, I have enjoyed the freedom of not being subjected to a frame of

mind that will influence my reporting without, however, the misinterpretation of HIV and AIDS scientific facts. Being difficult to get my articles published in the mainstream newspapers has forced me to rely on my blog to share my articles with the rest of the world.

After all, the internet has a more global reach and therefore, as more and more people resort to blogs for stories, more and more people can reach some commonalities and share fresh ideas on how to combat HIV and AIDS beyond the usual politics of race and gender. I think editors should actually source and publish relevant HIV and AIDS experiences from internet blogs to have a holistic multimedia approach to the epidemic.

**Writers Profile:** *Fredrick Ogenga has a Bachelors and a Masters degree in Media & Journalism studies. He is an independent media consultant and analyst, a freelance writer, , lecturer in Media & journalism and the founding director of Tazama media consultants closed corporate company. He is also pursuing a PHD in media studies at the University of Witwatersrand. His latest contribution on gender and HIV and AIDS can be found in the fourth issue of the 2008 media diversity journal at [www.genderlinks.org.za](http://www.genderlinks.org.za). He also runs his own blog [www.tazamamediaconsultants.blogspot.com](http://www.tazamamediaconsultants.blogspot.com)*

## Journalists honoured at the National Journalistic and Media Awards

Three Zimbabwean journalists were honoured this September for their commitment to telling the AIDS story under the National Journalistic and Media Awards (NJAMAs).

Arnold Mutemi of The Zimbabwe Chronicle, Bertha Shoko of The Zimbabwe Standard and SAfAIDS Programme Officer for Media, Beatrice Tonhodzayi who writes under the Let’s Talk About AIDS column in The Zimbabwe Herald, received the country’s top honours for reporting on HIV and AIDS in Zimbabwe.

The award, which was supported by the Joint United Nations Programme (UNAIDS) on HIV and AIDS, was given to journalists who have shown true passion and commitment to reporting on HIV and AIDS over the past year.

“From debating why there is low uptake of the female condom, to questioning policies that fail to adequately respond to the epidemic as well as creating a platform for every Zimbabwean to discuss HIV and AIDS issues- these journalists have done it and therefore, they deserve credit,” said the judges, who included media consultants, trainers and editors.



**Beatrice Tonhodzayi and Bertha Shoko (centre) receiving their awards from Hopewell Chingono and Edna Madzongwe**

The awards were held at a time when the media is being fast acknowledged as a key player in the response to HIV and AIDS within Zimbabwe and southern Africa. Zimbabwe has been in the limelight in recent years for its continued success in controlling the epidemic, which has seen the country’s prevalence go down by half in the last decade. They were held at a time when media experts are concerned at the depreciating journalism standards in Zimbabwe, which they blame on the country’s economic and political woes.

A team of media experts who judged the NJAMAs for 2007 told delegates attending the awards ceremony, who included the Speaker of Parliament, Mr Lovemore Moyo, the President of the Senate, Edna Madzongwe, members of parliament and of the diplomatic corps and journalists from several media houses, that the worsening economic and political climate in Zimbabwe over the years has seen media reporting deteriorating.

“Zimbabwean journalists no longer report as well as they used to a few years ago. This is because in the past few years we have

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had some of the most repressive laws in media industry in the form of the Access to Information and Protection of Privacy Act (AIPPA).

"We have also seen journalists' working conditions, especially their remuneration being eroded until they have lost their very zeal to produce good quality news," said Ms Elizabeth Karonga, a media consultant, with years of journalism experience.

AIPPA made media operations very difficult. Some journalists, especially those from the independent media left the country as a result of the difficult operating environment prevailing as a result of the act.

Poor remuneration at most media houses was also to blame for the increase in the number of journalists that sell copy to international and web-based media publications, which pay for articles in the much popular foreign currency.

To survive in Zimbabwe today, one needs foreign currency. The team of judges said the recent historic signing of an agreement amongst the country's three political parties should bring about change in the policies governing media operations in Zimbabwe as well as in reporting trends.

"We should begin to see the emergence of a media that questions issues, that articulates people's feelings and needs, which puts to task leaders about what they are doing for the people who put them into those positions.

Well-researched feature articles on people's livelihoods should be seen. AIDS and other critical issues must take the limelight so that they can be prioritised," she said.

This year's National Journalistic and Media Awards were held in Harare on the 26<sup>th</sup> of September 2008

## International AIDS Conference 2008 regional feedback meeting held

By Fungai Machirori

Harare – Southern Africa HIV and AIDS Information Dissemination Service (SAfAIDS) and the Zimbabwe AIDS Network (ZAN), on Monday 29 September, convened a regional learning and sharing event under the theme 'Universal Action Now: Global Thinking – Local Action'.

The event was held as a feedback meeting for the International AIDS Conference held in Mexico, and sought to provide AIDS civil society representatives who did not attend the conference an opportunity to learn about new developments and interventions discussed at this year's conference. Over 500 representatives of regional and national organisations registered to attend the learning event.

In his presentation, in the plenary session, on an overview of the Mexico Conference, Dr. Tapiwa Magure noted the great reception that news of Zimbabwe's national HIV prevalence decline received in Mexico City.

"I think despite our challenges, Zimbabwe stole the limelight," said Magure, the Chief Executive Officer of Zimbabwe's National AIDS Council (NAC).

In a speech read on his behalf, the Minister of Health and Child Welfare, Dr. David Parirenyatwa, stated the pride and satisfaction he felt at national efforts being taken to lower the prevalence rate of HIV within Zimbabwe. He also noted the importance of international conferences as a conduit through which learning and sharing of experiences could be facilitated.

"Global thinking in an evermore global village is a necessary strategy to ensure timely responses to a constantly evolving epidemic," Parirenyatwa's speech read. "Learning from best practices and successful interventions being implemented regionally and internationally can only ensure that our national programming around HIV and AIDS remains dynamic and relevant."

Last year, Zimbabwe's Ministry of Health and Child Welfare reported the new national seroprevalence rate of HIV infection in pregnant women attending antenatal clinics at 15.6% - an estimate of the prevalence rate among the adult population aged 15-49 years. Zimbabwe's HIV adult prevalence rate has

reportedly fallen 10% over the past five years and this has been largely attributed to positive behaviour change and greater coverage of anti-retroviral therapy in Zimbabwe. Magure said that 110 000 people living with HIV are on anti-retroviral therapy in Zimbabwe today. The national target for this year stands at 170 000.

While the prevalence decline was noted as a cause for celebration, it was also discussed that further efforts towards reducing Zimbabwe's national prevalence rate needed to be taken.

"We need to do more to ensure that we bring the prevalence rate down to a single digit," stated Dr. Owen Mugurungi, also of the Ministry of Health and Child Welfare. He added that the most important intervention group through which to decrease the rate of new infections was Zimbabwe's youth aged 15-24 years.

Other challenges towards an even more effective response to Zimbabwe's national epidemic were highlighted.

"What do you do to your ten-year-old sons or daughters in primary school when they were getting five percent and are now getting twenty to thirty percent?" asked Dr. Mutsa Bwakura in her presentation on children's research at the International AIDS Conference. "They are obviously still failing, so why are we rejoicing with a thirty four percent PMTCT rate?" she answered, using the example of the failing student to depict the country's failure in providing universal access to prevention-of-mother-to-child-transmission (PMTCT) services.

Children and their HIV-related issues took centre stage at this year's International AIDS Conference with a plenary session to discuss issues and concerns around paediatric HIV being held for the first time in the conference's history. There, as Bwakura observed, the importance of 'task-shifting' was highlighted with Malawi-based research findings showing the importance of the decentralisation of child care from medical staff to community-based initiatives.

In a video presentation from the conference, former United  
*Continues on page 9*

States president, Bill Clinton mentioned that three in four people living with tuberculosis (TB) worldwide is infected with HIV. As such, he noted the need to integrate TB and HIV services and “decentralise all kinds of healthcare” – a sentiment further reiterated within the plenary session presentations.

Pastor Maxwell Kapachawo of the Zimbabwe Interfaith International Network for Religious Leaders (ZINERELA) sobered the audience to the reality of HIV within the church. While he admitted to negative reactions to his HIV positive status as a religious leader, he highlighted the great potential that disclosure by strategically positioned people like himself have to reduce the stigma and discrimination associates with HIV.

“Religious leaders can involve people living with HIV in challenging stigma and discrimination and addressing the issue of sexuality, gender and religion,” observed Kapachawo, who added that the issue of condom use among faith-based organisations generated significant debate in the Mexico sessions.

Phyllis Kachere, a local journalist, voiced her disappointment at the fact there was a space unclaimed by Zimbabwean journalists at the conference.

“I feel that journalists should have been included in the budget lines to travel to this event,” Kachere said, directing this perceived oversight to both the government and civil sector.

For those sponsored to attend by various international organisations, she said their reportage of the conference was limited to those themes and areas deemed newsworthy to their funders.

One presentation which led to much debate and discussion was that presented by Mrs Lois Chingandu, the SAfAIDS Executive Director. Chingandu’s presentation centred on the criminalisation of HIV and AIDS, and gave reasons for why this new perspective on HIV transmission was likely to serve to only further reinforce stigma and negative attitudes towards those living with the virus.

“There is no public health rationale for invoking criminal law sanctions against those who unintentionally transmit HIV or expose others to it,” read Mrs Chingandu, borrowing her observations from a paper delivered by Justice Edwin Cameron at the International AIDS Conference. Further to this, she noted that criminalisation was only warranted in cases where a person sets out to intentionally infect another and achieves this aim.

The audience responded to this presentation by stating, among other suggestions, the need to increase the HIV literacy levels of judges and other law enforcement agents to ensure that criminal law against HIV – wherever implemented – is not abused.

Later in the morning, participants branched off into various breakaway sessions focusing on people living with HIV, children, clinical research, women and gender, faith-based responses, youth and workplace programmes.

As the day’s proceedings came to an end, one participant – speaking in the local Shona language – challenged the Ministry of Health on its response to the national HIV epidemic.



**Participants and presenters at the SAfAIDS/ ZAN learning and sharing event**

“You say HIV is a national disaster, yet the funds do not reflect this,” she said. “People are not getting cotrimoxazole and they do not have money for the exorbitant doctor consultancy fees.” She added that essential first line drugs such as Stalanev were lacking in the government ART programme and that access to second line medication through the public sector was a cause for concern for people living with HIV.

Dr Mugurungi admitted that the government was failing to access cotrimoxazole but assured that sufficient stocks of first-and-second-line ARVs were at hand for the public sector roll-out.

As an observation towards the 2010 Vienna International AIDS Conference, Mrs Chingandu emphasised the need for Africa’s civil society to use international conferences as a lobbying platform for their HIV programmes and interventions. This, she said, could be achieved through greater coordination of abstracts and poster presentations, as well as enhanced inter-organisational communication.

Chingandu noted that international HIV platforms are often dominated by other regions and the key issues and vulnerable groups which pertain to them - such as men who have sex with men, and injecting drug users. While she said that these were important HIV intervention groups, she added they seldom formed the primary focus of Africa’s response to HIV.

In summative retrospect, participants and presenters noted the need for effective policy to review the impact of HIV on marginalised groups and high risk communities such as commercial sex workers (CSWs), mobile populations and young people. The targeting of couples in PMTCT interventions was noted as a means of improving family responsibility for HIV, while the meaningful involvement of people living with disability in HIV-related interventions was also observed.

# 16 Days of Activism Against Gender Violence Campaign

The 60th anniversary of the Universal Declaration of Human Rights is a historic moment, recognizing the past six decades of work to secure the conventions and treaties that make up the human rights framework. The principles of the declaration also gave legitimacy to activists around the world who were calling for the realization of universal human rights.

On December 10, 2007, a civil society campaign was launched to celebrate the upcoming 60th anniversary of the [Universal Declaration of Human Rights \(UDHR\)](#). This project is pioneered by a group of notable activists known as "The Elders" and seeks to reclaim the principles in the UDHR through the message that Every Human Has Rights. The Center for Women's Global Leadership (CWGL) is proud to be a partner in this [UDHR60 NGO campaign](#), which comes at a time when the legitimacy of both women's rights and human rights are being challenged in too many settings.

Human rights cannot be universal without human rights for women. The UDHR60 campaign offers an opportunity to advocate for women's rights and the quest to end gender inequality, and to create a world free from violence, discrimination and injustice. These are critical to building a just, peaceful and sustainable world where human rights for all are respected.

Over the past 60 years, women have created groundbreaking global and local efforts to challenge gender inequality and feminist approaches to human rights are being developed and used around the world. Women's advocacy has brought about pioneering change in areas such as education, health, law, and political participation – and, in interpretations of the human rights framework itself.

The global frameworks for realizing women's rights have been spelled out in the [Women's Convention \(CEDAW\)](#), and in documents from other UN processes, such as the [Vienna Human Rights Declaration](#), the [Cairo Programme of Action](#), the [Beijing Platform for Action](#), the [Millennium Development Goals](#), and the [World Summit](#). Women have successfully demanded state political will to create meaningful change, but the implementation and resources to fulfill these promises are still lacking.

CWGL's focus in this UDHR60 campaign is not exhaustive, but what we will do is build on, celebrate and honor this global momentum, particularly in areas most closely related to our work on women's human rights. In addition, we will

## A Brief Background

dedicate the 16 Days of Activism Against Gender Violence Campaign 2008 to celebrate the 60th anniversary of the UDHR and to make demands to advance women's human rights. CWGL's primary areas of focus will be:

- \* Support Women Human Rights Defenders
- \* End Violence Against Women
- \* Strengthen Gender Equality Structures in the UN
- \* Expand Financing for Gender Equality



Recognizing that the 16 Days of Activism Against Gender Violence Campaign provides an opportunity to bring global activism around women's rights to the forefront of the celebration of UDHR60 on December 10 2008, we invite all to join in celebrating the anniversary of the Declaration and honouring decades of landmark women's rights advocacy. We encourage groups to focus their plans for the 16 Days of Activism Against Gender Violence Campaign 2008 on activities that address the many human rights challenges facing women around the globe and to celebrate the leadership of women in defending human rights.

### [Join the 16 Days movement!](#)

Create or join a community, campus, national or international activity for the 16 Days. Request a Take Action kit, join the 16 Days listserv, and use past 16 Days International Calendars of Activities (available online) to spark ideas for your activities or to find information about groups in your area. Submit your planned projects to CWGL for posting to the 2008 International Calendar of Activities and become part of the global 16 Days movement.

### [Join the 16 Days electronic discussion!](#)

Join the 16 Days of Activism Against Gender Violence email listserv discussion, which lets activists share work against violence, build partnerships with others worldwide, and to develop strategies and themes for the annual 16 Days campaign.

To join the discussion, visit [https://email.rutgers.edu/mailman/listinfo/16days\\_discussion](https://email.rutgers.edu/mailman/listinfo/16days_discussion)