

A  
**GENDER SENSITIVE  
MEDIA  
TOOL KIT**



**Making It  
Easier to  
Report  
on  
HIV/AIDS**

**Prepared by**



Uka - A Research, Resource  
& Publication Centre On Women and Media

In collaboration  
With



**CIDA-pakistan**

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Canadian International  
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## List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
GIPA	Greater Involvement of People living with HIV/AIDS
HAI	Health Action International
HIPC	Heavily Indebted Poor Country
HIV	Human Immunodeficiency Virus
ICPD	International Conference on Population and Development
IPS	Inter Press Service
NIH	National Institute of Health
NCAP	National Aids Control Programme
NGO	Non Governmental Organisation
PACP	Provincial AIDS Control Programmes
PLWHA	Person Living With HIV/AIDS
PRSP	Poverty Reduction Strategy Paper
STI	Sexually Transmitted Infection
UN	United Nations
UNGASS	United Nations GENERAL ASSEMBLY SPECIAL SESSION
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNIFEM	United Nations Development Fund for Women
VCT	Voluntary Counselling and Testing
WHO	World Health Organisation

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## Executive Summary

In many parts of the world, HIV/AIDS continues to be a subject of serious misconception, misunderstanding, ignorance and fear. Pakistan is one of such countries. There is an urgent and ongoing need to present facts about HIV/AIDS clearly, unambiguously, to reduce the fear, stigma and discrimination associated with HIV/AIDS, and to provide practical advice on how to minimise the risk of being infected and how to provide care and support to infected and affected people. The media has a vital role to play in this educational and “life-saving” challenge.

Uks has a strong network with the media in the whole country particularly Islamabad and Karachi. It has built a forum for debate, discussion and its implementation. Uks has been an active member of the Legislative Watch Group as well as a part of the Committee for the Repeal of the Discriminatory Laws and the Beijing +10 review process. Most recently Uks has networked with media and Civil Society Organisations throughout the country for the British Council funded Gender Equality Project aimed at the Formulation and Implementation of a Gender Sensitive Code of Ethics for the Print Media in Pakistan.

Uks also conducted a series of trainings featuring media professionals as well as social activists on how best to enlighten the public on how HIV/AIDS is an issue of pressing concern. In this regard, a project on HIV/AIDS awareness for indigenous media in Pakistan was implemented by Uks-Research, Resource and Publication centre on Women and Media. The project was carried out in six locations: Islamabad, Peshawar, Kohat, Gilgit, Skardu and Hunza. The duration of the Project was 3 years, April 2004- April 2007 but was extended till June 2007.

During the three year period, a number of dialogues and on desk trainings were held with the media (print/electronic) in all the project locations. Focus Group Discussions were conducted bringing on board media professionals with various people and at various locations. A comprehensive content analysis of all major daily newspapers including both English and Urdu language dailies was carried out. The results of the data were compiled in a table.

This media tool kit is an attempt to put together the outcome of the undertakings in the last three years. The tool kit—it is hoped-- will not only give an insight into the project but also provide much needed guide line to the journalists covering HIV and AIDS on how to report/write about this pandemic more sensitively. This document has been divided into many sections, each dealing with an important issue/s be it gender sensitization or use of alternative words associated with HIV& AIDS

It is being compiled after numerous meetings with journalists and discussing the constraints they have been facing in reporting on a sensitive issue like HIV/AIDS.

Uks hopes that this tool kit will be used with same commitment with which it was prepared.



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## CHAPTER 1

### Introduction

*“When you are working to combat a disastrous and growing emergency, you should use every tool at your disposal. HIV&AIDS is the worst epidemic humanity has ever faced. It has spread further, faster and with more catastrophic long-term effects than any other disease. Its impact has become a devastating obstacle to development. Broadcast media have tremendous reach and influence, particularly with young people who represent the future and who are the key to any successful fight against HIV& AIDS. We must seek to engage these powerful organisations as full partners in the fight to halt HIV&AIDS through awareness, prevention, and education.”*  
(Kofi Annan, Ex United Nations Secretary General)

People need accurate and specific information, and given the level of trust of the population, media organisations are well placed to respond to their needs. According to the “Gallup International Voice of the People” survey commissioned by the BBC World Service in 2005, Pakistanis were asked to rank the public figures they trusted most.

- Religious leaders came out on top with 55%
- Journalists came second with 42%
- Politicians came third with 31%

This tool kit has been devised to enable media practitioners to become key activists in the battle against HIV/AIDS. While many journalists are likely to say they did not go into journalism to change lives and that their job is to report the facts, it needs to be acknowledged that HIV/AIDS is being treated differently to other topics because of the stigma attached to it. Journalists at least need to be sure that they do not contribute to the stigma.

Meaningful media coverage of AIDS needs to look not just at the epidemic itself but at the underlying causes and outcomes. There are several challenging questions for the media to address, including:

- Why is sexual behaviour so difficult to change even when people know the risks?
- Why is sexual behaviour so difficult to change even when people know the risks?
- How does AIDS impact on the family, the community, the health system and the society at large and who carries the burden of the epidemic?
- How can negative cultural attitudes and practices be challenged while beneficial traditional values are supported?
- And
- What can be done to eliminate blame, stigma and discrimination?

Perhaps the most serious enemy in dealing with HIV/AIDS is the helplessness generated at all levels from individual to government. Therefore, it is necessary to look at how the media can contribute to generating motivation and **capacity** for action and equip them with the necessary means.

Uks brainstormed with media experts who recommended the development of training workshops and a **guideline of** rules to follow. Hence the need arose for this media tool kit.



## **THE PROJECT**

### **PROJECT INFORMATION**

**Name of Project:**

Networking & Advocating for HIV/AIDS Awareness in the Indigenous Media in Pakistan

**Funded by:**

CIDA (Canadian International Development Agency)

**Name of Implementing Organization:**

Uks Research, Resource & Publication Centre on Women & Media

**Project Duration:**

Three Years -2004-2007

**Manager Responsible:**

Ms. Tasneem Ahmar

#### **Networking and Advocating for HIV/AIDS Awareness for the Indigenous Media in Pakistan**

Working together to bring about change in the media does not have to be a “mission impossible” as Uks and other groups have learned. Approaching media owners, publishers, editors, advertisers, journalists with findings, which reflect the mirror back into the media itself, can open the door to change.

Being a resource centre, Uks possesses a database whereby newspaper clippings on all issues concerning women are preserved through the cut and paste method. Ten to Twelve, English and Urdu language daily, weekly and afternoon newspapers are regularly scanned with the office bearing a comprehensive record since 1998. The team is also keeping track of all newspaper items (stories, articles, features) relating to HIV/AIDS and has segregated the coverage into supportive and non –supportive based on content, style, language, headline and gender sensitive treatment or lack thereof. The data is essentially invaluable to the Uks team in facilitating our study of emerging media trends and public perception on HIV/AIDS. Moreover information was obtained from Pakistan Television and Pakistan radio which determined the marked absence of any programming relating to HIV/AIDS other than air time awarded to AIDS campaigns.



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## **Summary of the projects activities**

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April-July 2004

Focus Group Discussion

Telephonic interview with doctors at the NIH (National Institute of Health)

August-October 2004

Desk trainings held with media (print/electronic) Peshawar

Focus Group Discussion

Content analysis of all major daily newspapers (English & Urdu) compiled in a table

October- January 2005

Consultative meetings with media and organisations working on HIV/AIDS Peshawar and Kohat

Desk training with Radio Pakistan World Service & Campus Radio Peshawar University, Daily Statesman and Daily Mashriq

Focus Group Discussion

Content analysis of all major newspapers during this period compiled

January-March 2005

Consultative meeting with female radio produces at Fatima Jinnah Women's' University

Focus Group Discussion

Content analysis of all major newspapers during this period complied

April-June 2005

Consultative meeting with desk staff and reporters of daily The Nation, Islamabad

Focus Group Discussion at SACHET

Media Watch Committee meeting

Content analysis of all major newspapers during this period compiled

July-September 2005

Consultative meeting with staff of advertising agency Midas

Consultative meeting with desk staff and reporters of Daily Ausaf, Islamabad

Focus Group Discussion at Daily Jang, Islamabad

Media Watch Committee meeting

Content analysis of all major newspapers during this period complied

October-December 2005

Consultative meetings with media in Gilgit and Skardu

Pre survey forms sent to media organisations in Peshawar, Skardu and Islamabad

Content analysis of all major newspapers during this period compiled

January–March 2006





Media Watch Committee meeting, Islamabad

Consultative meeting with senior media professional representing leading Urdu daily Pakistan  
Newsletter for HIV/AIDS published in March 2006

Content analysis of all major newspapers during this period compiled

April-June 2006

Media training in Peshawar, Gilgit, Skardu, Hunza, Karak and Kohat

Media Watch Committee meeting, Islamabad

Consultative meeting with Director and Radio Producer, FM station, Power 99

Content analysis of all major newspapers during this period compiled

July-September 2006

Media Watch Committee meeting, Islamabad

Focus Group Discussion with the media, Islamabad

Fourth Edition of the Newsletter

Content analysis of all major newspapers during this period compiled

October-December 2006

Media Watch Committee meeting, Islamabad

One-day workshop with the media, Peshawar

Fifth Edition of the Newsletter

Content analysis of all major newspapers during this period compiled

January-June 2007

Media Watch Committee meeting, Islamabad

Media Watch Committee meeting, Peshawar

Consultation with media manager, Islamabad

Two-day national workshops, Islamabad

6th edition of the newsletter

Content analysis of all major newspapers during this period compiled

## PROJECT ACTIVITIES THROUGH PHOTOGRAPHS





## OBJECTIVES

This toolkit seeks to de-mystify the media and gender and media advocacy by illustrating through concrete steps, case studies, pointers, tips and information, that we can all take action to change gender representation and portrayal in and through the media. It is often said that the media holds a mirror up to society. How often women are seen in the mirror and what they look like when they do appear or speak has been the focus of a growing movement focused on change in the stereotypical representations and portrayals of women and men in the news.

Denial about the virus exists on both personal and societal levels. Many continue to believe that HIV/AIDS is an issue for “others”. Equally damaging to the effort to disseminate factual information about the epidemic is the widespread belief that contracting HIV/AIDS is something that happens to people who are immoral and socially deviant. Given the influence of the media, it is essential for media organisations to have a clear understanding of ethical approaches, attitudes and language necessary for responsible reporting on HIV/AIDS. This project aims to provide guidelines and framework for this.

### **Project Beneficiaries:**

So far, approximately, 100 journalists, editors, television and radio news producers have been consulted and trained in the NWFP on how and why a gender perspective is relevant to HIV/AIDS reporting. Around 65 journalists and producers have been contacted and sensitised on the issue in ICT. Furthermore, almost a dozen NGOs working in this area have been approached for their feed back on media requirements and responses. The indirect beneficiaries are the general public that comprise of the readership of various national and local newspapers through the effort of our Media Watch Committee members initiatives who have started writing on the issue after our consultations. Our newsletter “AIDS and US” has also been instrumental in raising awareness on the issue.



## **Activities planned**

### **HIV/AIDS Awareness for Indigenous Media in Pakistan**

#### **Activity Chart:**

1. 18 meetings over three years with editors, newspaper owners, proprietors, television and radio news producers, etc. will be held to strengthen linkages and networking among various news agencies (in print and electronic media) for checking the contents and accuracy as well as gender sensitivity in reporting on HIV/AIDS.
2. A four monthly newsletter will be published in Urdu and English on various aspects of HIV/AIDS and gender issues. This newsletter will be widely disseminated among civil society organizations and research and advocacy institutions working on HIV/AIDS. However, special audience for this newsletter will be departments of mass communication and journalism at various educational institutions, relevant ministries such as health and population affairs, provincial and federal press information departments, newspaper offices and press clubs.
3. An updated media resource book will be developed and printed in Urdu and English for print and electronic media personnel. Through a formal launching ceremony in Islamabad to share the resource book with the general public & professional organizations & government institutions for their reference.
4. A pre and post survey will be conducted to measure the changes observed in the reporting of indigenous media personnel before & after completing the on-desk training.
5. A Media-Watch Committee will be formed comprising of approx. 15-20 journalists, reporters, readers' representatives, and other stakeholders to act, as a watchdog for monitoring reporting on HIV/AIDS in the print and electronic media will form this committee. The committee will hold quarterly meetings in Islamabad.
6. An annual report of the Media-Watch Committee will be published to highlight key issues and recommendations on policy reforms for media's role in dealing with HIV/AIDS issues in a gender sensitive manner.
7. Qualitative and quantitative content analyses will be done to assess number & types of reports, the format of coverage, sources of information, placement and level of gender sensitivity. This analysis will be compiled in the form of a report a key output of the media-watch committee that will be published and widely disseminated as an awareness-raising tool. Uks will collect information from printed news item from approx. 12 newspapers, magazines & weekly newspapers from national dailies and local newspaper.
8. Six 4 day on-desk training workshops will be held for all tiers of media i.e. owners, proprietors, editors, desk personnel, field reporters and photographers, etc. in their respective offices. These workshops will be held in Islamabad; Peshawar, Kohat (NWFP); Gilgit, Skardu and Hunza (FANA) attended by approx. 25-30 participants in each workshop. Uks will organize & facilitate the workshops. In addition, six 2-day follow up workshops will be held in the same locations as the on-desk trainings.
9. Six 1-day focus group discussions will be held on various aspects of gender sensitive reporting on HIV/AIDS in Islamabad; Peshawar, Kohat (NWFP); Gilgit, Skardu and Hunza (FANA). Civil society organizations, government institutions, national project personnel, electronic and print media officials, etc. will be invited to these discussions to formulate policy recommendations for the print and electronic media leadership & the government institutions.



## **MEDIA RESPONSES AND REQUIREMENTS**

In order to gauge the requirements and difficulties facing the media Uks Research Centre conducted a Focus Group discussion with the print media in Islamabad and Rawalpindi in September 2006.

Some excerpts from this meeting are:

- One participant felt that poverty is a factor leading to commercial sex trade rise and this is causing the spread of HIV and AIDS and proper steps should be taken to deal with this problem. Tasneem expressed her concern over the vulnerability of women to all sorts of violence in the society. She also shared the interventions by Uks for raising voice on the silent and marginalized elements i.e. women and children.
- Fauzia Shahid said that it is difficult to report on HIV and AIDS as the official figures have remained the same for many years now and the editors feel that there is no news value in the reports without latest figures. Tasneem debated that this sensitive issue is not a numbers' game and should be treated in different ways such human interest and developmental issues. The news reports should contain columns and articles of people living with HIV and AIDS (PLWHAs).
- It was also discussed that media has to play its role in this regard effectively and efficiently. Media can educate people that how they can prevent themselves from AIDS and how to behave with the people living with HIV and AIDS (PLWHAs).
- A reporter shared that the blood screening system is not prevalent in Pakistan. People come from abroad, they are not being checked at the airports which may also be an important factor in the spreading of HIV and AIDS. Tasneem said that it's the media persons responsibility to raise these kind of issues in media .Uks is conducting meetings with media persons to convey this message and now it is their duty to spread it through media.
- One of the participants shared a story of a person that came from abroad. He was an HIV positive. People asked his wife to get a divorce from him but she refused and keep staying with her husband .Now she and her child are also HIV positive.
- It was also mentioned that media journalists of large cities should cooperate with the journalists of smaller cities and towns so that awareness and education regarding this disease could reach everywhere.
- Another journalist moved the discussion towards the issue of lesser space being given to HIV and AIDS in the newspapers .He said that numerous news are published on topics which are non-issues or do not impact Pakistan directly, but when it come to AIDS suddenly there is lack of space. As a result, one can only read news on this important issue only once in a month or sometimes no news in the whole month .He also said that comprehensive facts and figures regarding HIV and AIDS patients are never released by the authorities.

*Excerpts from the Media Watch Committee Meeting, August 2006:*



- Uks research team members Saadia Haq and Qudsia Mehmood shared their experiences of conducting the trainings in Karak, Kohat and the FANA regions. The lessons learnt from these trainings have been very useful especially for responding to donor concerns on the slow pace of the activities in the project. Uks team was able to attract a large number of the local and regional media including the print, television and radio in these areas. The journalists hailing from these areas are aware of the dangers of the HIV and AIDS but there are many obstacles in reporting. The current events, political unrest and lack of training on gender sensitive reporting such issues make their jobs more difficult. High level of interest and keenness was observed throughout in all the project areas. More ever in Kohat and Karak regions the journalists were reluctant to discuss the HIV and AIDS issue with female trainers such as the Uks research team. It took a lot of effort by the Uks team and the focus person Kausar Salim Bangash to draw them out of the silence and discuss the issue. Once the journalists felt that Uks is advocating the issue in a holistic manner by not offending their rigid religious stance they opened up and discussed the hurdles in writing and reporting on the HIV and AIDS issue. In these regions the male-to-male sexual relationships are common and it is not something of concern in the area, although this might be a possible way of transferring the deadly disease.
- Kausar Salim Bangash shared that journalists and reporters hailing from his region are not devoted full time to the field of journalism. Also they are not very keen on attending trainings conducted by NGOs, as they perceive it a hidden donor driven agenda. It took a lot of effort on his part to gather a large number of media at the Uks media training, they inquired about the trainers and when they were told that the trainers were two women, they were shocked, shy and hesitant in the beginning of the training. These journalists were then made to stay and attend by telling them that this event would be telecasted from GEO TV. He appreciated the Uks trainers in their patience and competency in handling the big group and making the media training a huge success. Later on the media community inquired whether Uks would hold further trainings in the future digressing that they found it very interesting and useful for writings.
- Further the committee discussed that accurate information and numbers are very important for justifying the articles and columns on HIV and AIDS. Sadly the government websites do not quote the correct facts and figures, which makes their work more difficult and is a cause of interest loss in the media. Also the access to information on the disease is near to nil and this also hampers the work. Committee members felt that story telling done is an art and journalists must be creative and find new ways to raise the issue.





## CHAPTER 2

### KEY ISSUES AND LESSONS LEARNT

One of the most obvious roles of media is to open channels of communication and foster discussion about HIV/AIDS and interpersonal relationships. There has been a lot of training on how to report but generally media practitioners do not carry it out. As a result, journalists become aware of the issue but don't necessarily know how to operationalise what they have learnt.

- There must be a link between GENDER, HIV/AIDS and RIGHTS. Establishing these links offers new ways of reporting the issues beyond the “health” and “care” mode. This perspective would introduce journalists anew to their potential social role as change agents.
- Reporting on HIV/AIDS requires the use of new terms and language.
- Revised interview techniques for situations where people are silent because of stigma and discrimination or through not wanting to deal with the issue.

In Africa, journalists are likely to have had some training in reporting on HIV/AIDS.

In India, HIV/AIDS is not really viewed as an issue of concern so the media has shown little interest.

In Pakistan the privatisation of the media has brought about a positive change in reporting on HIV/AIDS and training media personnel on this issue.

*“Journalists should take up the issue in different aspects and context of gender, economics, child and health issues etc and deal with the social issues rather than focusing on the numbers. Some journalists are only interested in knowing where the disease ratio is increasing and quoting the NACP figures for that particular area, this leads to more stigmatisations of the area. This is a very sensitive and serious issue and must be dealt with a lot of care”.*

**Huma Khawar, a freelance journalist, 12 Sep, 2005, Islamabad**



## EXPLAINING HIV/AIDS

It is the foremost task of the media to educate the public about the HIV/AIDS pandemic in a sensitive way. There are 38.6 million people living with HIV/AIDS globally. (UNAIDS end 2005 global estimates) In Pakistan registered HIV/AIDS cases are 3198 but is actually estimated to be between 70,000-80,000 or 0.1 of the general population. (NACP, MoH, UNGASS 2005 Report) Although Pakistan may be low prevalence, it has a concentrated epidemic in some populations with high-risk behaviours for HIV transmission like injecting drug use. Given the infancy of the epidemic in Pakistan the way in which it is reported on become critical in order to keep stigma and discrimination at bay, and to ensure access to services for those who most need them.

HIV and AIDS, A Concentrated Epidemic.

*“Medical education on HIV/AIDS is also lacking, people need to be educated. The advertisements in the print and electronic media should not be vague.”*

Mr. Zahir Shah Shiraz: Satesman, Peshawar,  
04 Nov, 2006, Islamabad

### Issue

Pakistan is a concentrated epidemic; meaning prevalence rates are over 5 percent in some sub-populations such as injecting drug users (IDUs) and commercial sex workers. HIV prevalence among IDUs is over 26 percent in Karachi.

- 0.1 percent of the general adult population in Pakistan is HIV positive.
- There are between 70,000 and 80,000 Pakistanis living with HIV and AIDS.
- Men infected with HIV outnumber infected women by 7:1.
- Most infections occur between the ages of 22 to 44 years.
- The main modes of transmission of reported cases are: 37 percent heterosexual and male-to-male sex; 21 percent injecting drug abuse; 6.7 percent contaminated blood and blood products; 1.3 percent mother-to-child transmission. However, given the trend of the epidemic, the majority of cases including reported and unreported are through injecting drug use. In a third of the reported cases, the mode of transmission is unknown, probably due to stigma and lack of awareness.

*“Issues like MSM and sexual abuse of children must be highlighted so that the media can increase awareness”.*

Ms. Fazila Gulrez: SPARC, 12 Sep, 2005, Islamabad



## Action

- UNICEF works with the Pakistan National AIDS Control Programme (NACP) and Provincial AIDS Control Programmes (PACPs) and local NGOs to:
  - Empower adolescents and young people in schools, homes, prisons, youth centres and drop-in centres for street children with the knowledge and skills to protect themselves from HIV infection, sexually transmitted illnesses (STI) and drug abuse, and ensure referral mechanisms into other services.
  - Prevent parent-to-child transmission of HIV.
  - Develop care and support mechanisms for infected and affected children and their families.
  - Establish guidelines with the NACP and protocols for the treatment, care and support of HIV positive children.
  - Establish guidelines with NACP on HIV counselling for children and young people.
  - Assess gaps and quality of services for most-at-risk children.
  - Assess protection mechanisms for children infected and affected by HIV and AIDS.
- 
- Advocate around HIV prevention and stigma issues through partnerships with religious leaders and the media.

## Results

More than 130,000 adolescents have been trained in life skills, including HIV and AIDS, STI and drug abuse prevention.

Nearly 500 religious leaders and media representatives have been trained in HIV and AIDS awareness.

UNICEF supported the government to develop a National Prevention Strategy for Young People.

UNICEF supported the government to develop protocols and implementation guidelines for Prevention of Parent To Child Transmission and paediatrics AIDS treatment.

The popular Pakistani pop band Strings was named National Ambassadors for HIV and AIDS and UNICEF supported several awareness-raising initiatives such as a community documentary on life skills-based education for HIV prevention, and two public service announcements addressing stigma and discrimination of young people living with HIV.



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## **FAQS ABOUT HIV/AIDS AND MEDIA COVERAGE**

### **Frequently asked questions (FAQS)**

#### **What is HIV?**

HIV stands for Human Immunodeficiency Virus. HIV destroys certain blood cells called CD4 or T cells. These cells are crucial to the normal function of the immune system, which defends the body against illness. When the immune system has been compromised by HIV, a person typically develops a variety of cancers and viral, bacterial, parasitic and fungal infections.

#### **What is AIDS?**

AIDS stands for Acquired Immunodeficiency Syndrome. It occurs when the immune system is weakened by HIV to the point where a person develops any number of diseases or cancers. A person without these diseases or cancers can still be diagnosed with AIDS if a laboratory test shows a severely damaged immune system.

#### **How is HIV detected?**

HIV is detected through an HIV anti-body test. A blood sample is taken and tested and if it contains HIV antibodies, the person is HIV positive.

#### **How is HIV transmitted?**

HIV is primarily transmitted through:

- Unprotected sex (vaginal, anal and oral sex).
- Body fluids (blood, blood products, semen, vaginal secretions and breast milk)
- Contaminated needles or other sharp instruments
- Mother to child

#### **How is HIV not transmitted?**

HIV is not an easy virus to pass from one person to another. It cannot be transmitted through casual or everyday contact such as shaking hands or hugging. Sweat, tears, vomit, feces and urine do contain small amount of HIV but they have not been reported to transmit the disease. Mosquitoes and other insects do not transmit HIV.

#### **How can HIV transmission be prevented?**

The surest way to avoid transmission is to avoid identified high-risk behaviours. For prevention of transmission through sexual contact, the only effective tool is using latex condoms. HIV-positive pregnant women can reduce transmission to their children through antiretroviral prophylaxis (anti-AIDS) treatment. Also, intravenous drug users should not share needles.



### **How long does it take for HIV to become AIDS?**

The length of time varies from person to person and depends a great deal on whether there is access to treatment. Generally, for those getting drug treatments, there can be a period of ten years or more for HIV to become AIDS. UNAIDS estimated that in countries here there is little or no access to treatment the period of time for the majority of people is eight to ten years.

### **What is the link between HIV and Tuberculosis (TB)?**

HIV weakens the cells in the immune system that are needed to fight TB. An estimated one-third of all people living with HIV/AIDS worldwide are co-infected with TB and TB is one of the leading causes of death among those infected with HIV globally.

### **What is the link between HIV and Sexually Transmitted Diseases (STDs)?**

People with sexually transmitted disease are far more vulnerable than others to becoming infected with HIV. For example, genital ulcers caused by herpes create an entry point for HIV. HIV positive people are far more vulnerable to acquiring additional sexually transmitted diseases, their immune systems are compromised and so the body has more difficult time fighting off infection.

### **Is there a cure for HIV/AIDS?**

There is no known cure for HIV/AIDS. There are medical treatments that can slow down the rate at which HIV weakens the immune system. Researchers are testing a variety of vaccine candidates, but it is likely that a successful vaccine is years away.

### **How many people have HIV/AIDS?**

The United Nations Joint Programme on AIDS (UNAIDS) estimates there are 40.3 million people worldwide living with HIV/AIDS. International scientists estimate that without stronger prevention measures there could be a total of 45 million cases of HIV/AIDS by the year 2010.

### **Which HIV/AIDS statistics are the most reliable?**

Accurate figures are usually not available, but the epidemiological estimates are considered to be the more accurate are accepted globally. UNAIDS provides the most extensive set of statistics related to the global epidemic at .

### **What is drug resistance?**

Drug resistance is the ability of an organism (e.g. a virus, bacterium, parasite or fungus) to adapt, grow and multiply even in the presence of drugs that usually kills it. It reduces the ability of ARV (antiretroviral) drugs to block the replication of HIV. In some people on HAART (highly active antiretroviral therapy), HIV mutates into new strains that are highly resistant to current drugs.

### **What is ABC?**

**ABC stands for abstinence, being faithful to a single partner and condom use.** It is an approach to prevention that **certain** organizations and governments promote as a means to stop the spread of HIV.



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## **Frequently asked questions about media coverage for HIV/AIDS**

### **Is there really a difference between reporting that someone has AIDS or is HIV-positive?**

Yes, HIV-positive means someone is infected with the virus and it is possible that the person will not be showing any symptoms and may or may not have progressed to an AIDS diagnosis. Someone who has AIDS has a severely weakened immune system. It is better to be specific about the stage of illness.

### **How important is confidentiality in reporting on HIV/AIDS?**

The identity of a person with HIV/AIDS should not be disclosed without the explicit permission of that person. It is the reporter's responsibility to make sure the person understands the potential consequences if they agree to be identified.

### **What are the common stereotypes that slip into HIV/AIDS reporting?**

The HIV/AIDS population is diverse and your reporting should reflect that. The goal is to be objective and factual. A common stereotype involves what types of people become infected. High-risk behaviour is certainly a significant factor. But there is also a complex array of factors including social and economic circumstances that cause vulnerability to HIV infection. Another common stereotype is to assume if someone is in a high-risk population group, they are very likely to become infected.

### **What words do you want to be cautious about using in the context of HIV/AIDS?**

Refer to the list what we have assembled. But, in general, do not use words that incorrectly stereotype or stigmatise people with HIV/AIDS, perpetuate myths about the disease or carry value judgments. Do not use terminology that general audiences cannot easily understand. This is especially important when reporting on medical stories. The goal is to be precise without being so dense your audience will not understand what you are reporting.

### **What are the pitfalls when reporting on treatments for HIV/AIDS?**

It is easy to confuse a cure for a disease related to HIV infection, as opposed to a cure specifically for AIDS. There is no cure for AIDS. It is also easy to describe the drugs known as antiretroviral used to slow the growth of the virus as a cure, but it is not a cure it is only life-prolonging treatment.

### **Is it accurate to say that someone died of AIDS?**

AIDS is a syndrome that can be defined by any number of disease and cancers. There is no singular disease that is called AIDS.



## PROJECT ACTIVITIES THROUGH PHOTOGRAPHS





## **INFORMATION AND NEWS GATHERING**

To be effective, messaging about HIV/AIDS must be both educational and entertaining. These two goals need not be mutually exclusive, however. A number of programs have served to inform their audiences about the virus while, at the same time, achieving market success as viable entertainment.

In Pakistan in the early 1990's the mini drama serial "Kal" was produced and directed by Jamal Shah and telecast nationally on Pakistan Television. This play dealt with the stigma and discrimination faced by an HIV positive migrant worker deported from the UAE.

Pakistan Television also produced a mini drama serial in Urdu titled "Aahat". "Aahat" demonstrated that in order for a show to be both educational and entertaining, messages need to be disseminated through situations to which viewers can relate.

Another key dimension of media involvement in HIV/AIDS is ensuring that the topic is placed and kept on the top of the news agenda. In ensuring that HIV/AIDS remains "headline news", broadcasters play a vital role in encouraging world leaders and policy-makers to take the epidemic seriously and provide the resources necessary to fund adequate prevention, care, support and treatment programs.

Successful partnerships need not necessarily be with other media outlets. Broad, symbiotic alliances with NGO's, government departments and foundations, for instance, can provide significant benefits for both parties. Broadcasters can trade resources with campaign partners, such as access to airtime, in exchange for the expertise that partners have to offer on HIV/AIDS advocacy. Creative teams on drama series can be briefed about useful messages and how a specific audience might be reached, while editors, producers, and reporters can be advised about the most persistent and relevant aspects of the HIV/AIDS issue from a new perspective.

*"Unless the media paid attention to this issue, general awareness would not increase. I agreed to take up this issue with my colleagues and would also help Uks identify relevant persons to join the core group of media persons".*

*Ms. Asma Shirazi, reporter of GEO,*



## CHAPTER 3

### WHY GENDER AND MEDIA?

#### COMMUNICATING GENDER

Communicating gender requires journalists and other media practitioners to observe the ways people may be marginalized because of their gender (their defined social role in society) as well as race/ethnicity, class/caste, age and other such factors. Who gets coverage? From what perspective? Through which lens? Reflecting which stereotypes about people from different gender, race/ethnic, class/caste and other groups? Are stories helping to advance gender equality and equity in society or are they angled in a way that upholds traditional attitude and values? Are women's or men's concerns being separated from the concerns of society in general?

Source: Gender Mainstreaming in Information and Communications, Joan Ross Frankson, Commonwealth Secretariat, May 2000

The media performs a service in the public interest and it is important as consumers of the media that the public keeps “watch” on which public the media actually serves and reflects in its content.

*“Even though there are many organisations; on paper, shown as working for awareness of HIV/AIDS, no work is done. Even when workshops have been arranged for the media, journalists do not attend. The Statesman is the first newspaper to have highlighted the human side of HIV/AIDS by covering personal stories of PLWHA, highlighting the gender perspective by publishing reports and features on how women suffer twice as much as men if inflicted with the disease”.*

*Mr. Zahir Shah Shirazi: Statesman, Peshawar, 12 Sep, 2005, Islamabad*

Journalists and editors need to increase their gender awareness and use an analytical framework that enables them to implement changes in news and information gathering and to analyse coverage issues for a gender perspective. Journalists should be trained in how to “ask the right” questions, which is a critical skill for getting behind the news and writing stories that go beyond the Who, What, When and Where to Why and How. Learning and using a gender framework not only enhances a journalist's ability to focus competently on **gender-specific** stories but also enables the journalist to **mainstream gender** into any area of coverage.



## Gender Analysis Framework For The Media

### Checklist Of Key Questions

#### Gender Representation In The Media

1. **Count the women and the subject areas in which they appear.** Are they evenly distributed, or is the balance skewed?
2. **Women speaking.** Are they represented in a way that allows them to speak with dignity and authority? What is the sex of the spokesperson or voice of authority?
3. **Gender roles.** Are traditional gender roles reinforced- for example in relation to portrayal of family life or occupation outside the home – or avoided?
4. **Superwoman stereotype.** Are active, independent women represented as if they are “superwomen”?
5. **Natural woman stereotype.** Does the content reinforce the stereotype of women as innately docile, emotional, non-analytical, technically, inept, etc?
6. **Sex-object stereotype.** Are women represented primarily as objects of male desire?
7. **The beauty myth.** What physical attributes apply to male and female participants- for example in relation to age, body weight, skin tone, clothes?
8. **Violence against women.** Does the material normalise violence? Does it suggest that women accept or enjoy violent treatment? How are female survivors of violence portrayed?
9. **Multi-dimensionality.** Does the representation encourage readers to understand women’s many dimensions in terms of personality, capabilities, tastes, preferences, etc?
10. **Diversity.** Does the material reflect the diversity of age groups, social classes, ethnic groups, physical characteristics of women and men in the community as a whole?

*“Women and girls must be provided with awareness on HIV/AIDS, as their awareness is very low and this leads to a danger of being infected through the men in their lives. After the October Earthquake investigative journalism must take off in the affected areas and the reporters and journalists have a big responsibility on their shoulders”.*

*Saadia Haq: producer and research associate, Uks, 12 Sep, 2006,*



## UNCOVERING GENDER (in) SENSITIVITIES OF MEDIA IN HIV REPORTING

Mass media is clearly vital in the world's fight against the virus. Broadcasters are already undertaking impressive work on HIV/AIDS, but much more needs to be done. The media can make HIV/AIDS programming a key part of their output and, indeed, their corporate strategy. This can be done in a number of ways, including the following:

- ✗ Giving the epidemic prominent news coverage
- ✗ Dedicating airtime/space to HIV/AIDS public service messages
- ✗ Supporting the broadcasting of HIV/AIDS special programming
- ✗ Making public service messages and original programming available to other outlets on a rights-free basis

The task at hand requires vision, dedication and, above all, creative programming that truly engages audiences. Broadcasters can talk to listeners and viewers about HIV/AIDS in a language they can understand, appreciate and find entertaining. They can build partnerships and alliances. They can put pressure on the powerful to take the disease seriously and give people the information they need to protect themselves and those they love. In short, the media have an essential role to play in reversing the progression of HIV/AIDS.

- ✗ Language should be Value Neutral, Gender Sensitive and Empowering
- ✗ Around the world women are increasingly at risk for HIV/AIDS and bear the brunt of stigma and discrimination
- ✗ Women are individuals most infected and affected HIV/AIDS, and media should be aware of this gender dimension
- ✗ Gender relations affect every aspect of the epidemic, from prevention to transmission, care, support and treatment, and this should be reflected in media reporting
- ✗ Media should also be aware of gender- based assumptions and prejudices and guard against continuing the negative stereotyping

*"It was felt that societal attitudes towards sex and sexuality have changed but attitudes towards such matters are largely hypocritical. It is difficult to strike a balance between education that is balanced and yet not provocative. The media could either go for a radical bare-all approach which might initially shock but might settle well in a few months".*

*A comment from Focus Group Discussion:  
April 2005, Islamabad*



## ANALYSING LINKAGES BETWEEN GENDER, HIV/AIDS AND RIGHTS

*“Gender in the media is an uncharted path- exciting but also frightening. Frightening because when you dare to challenge the lion in its den, you are likely to encounter extreme difficulties. The world over, the media has defined itself, successfully so, as a “law unto itself”. If it is challenged all hell breaks loose- from claims of media freedom, objectivity and neutrality being infringed, to the need to search for hard news.”*

Thenjiwe Mtintso, Chairperson, Gender Links Board.

Integrating a gender perspective into HIV/AIDS work requires on-going awareness and efforts - it is not a one-time action or simply a matter of using correct terminology.

Journalists tend to flip through the information that is available and pick a single story from that. But there is a great need for new stories. Many of the stories around HIV/AIDS have been told so many times that the phenomenal has come to be seem normal. In Uganda, Senegal and Thailand, the rate of new HIV/AIDS infections has dropped and an accepted wisdom has grown up around at least the case of Uganda and Thailand. Journalists will have to look at today’s headlines to believe that HIV/AIDS affects every person in Africa every day, and because women make up more than half of those affected every story has a gender component as well. When journalists come to believe that gender infuses everything about HIV/AIDS it become possible for them to start really scrutinising the information.

When one talks about Gender and HIV/AIDS, it is necessary to question authority and look beyond the status quo. There is a belief that this might not sell but, if a journalist is not getting their stories published, it is probably an indication that they are not looking for them in the right place, that they are not good enough or that they are not current enough. It is suggested that, in every story, the HIV/AIDS dimension be found first and the gender dimension drawn from this.

Journalists may not be aware of how to make the links between gender, HIV/AIDS and rights of their own. The focus has been on HIV/AIDS and gender without specific mention of the fact that rights are implicit in these. Specific rights arising from the gender and HIV/AIDS discussion are the right to an identity, dignity, basic necessities, choice and digestible information. The interrelationships between different forms of discrimination and marginalisation must be examined and dealt with.

*“Ignorance, illiteracy, misperception about the issue, is due to the fact that our religious and cultural sensitivities do not allow for an open discussion on the issue. “Our society likes to hide things under the carpet”.*

A comment from Focus Group Discussion:  
August 29, 2005





## ADDRESSING WOMEN'S RIGHTS AS HUMAN BEINGS

The 1994 “Women Empowering Communication” conference in Bangkok, which brought together 400 feminist activists, researchers and media professionals from across the globe, has become a landmark event for many reasons. One of the most significant outcomes of this gathering is the Global Media Monitoring Project (GMMP), which has given women a tool with which to scrutinize their media in a systematic way, and a means for documenting gender bias and exclusion.

International media consultant and researcher Gloria Bonder says that the GMMP is one of the most successful illustrations of the links that media monitoring presupposes between research, informed citizenship and action. (*Ibid*)

A framework of International Human Rights instruments to assist the media on understanding and reporting on Women's rights are:

- The United Nations Charter (1945)
- The Universal Declaration of Human Rights (1948)
- The Convention on the Elimination of all forms of Discrimination Against Women (1980)
- The Convention on the Rights of the Child (1989)
- The World Conference on Human Rights (1993)
- The Fourth World Conference on Women and the Beijing Plan of Action (1995)

Women constitute 52% of the world's population; yet make up only 21% of the people featured in the news. Women are most underrepresented in radio where there are only 17% of news subjects as compared with 22% in television and 21% in newspapers. Uks held an interactive dialogue with Radio Pakistan World Service in December 2004. Discussions were held on how to:

- Enlighten Pakistanis living abroad and immigrant workers, at high-risk group, on the hazards of HIV/AIDS
- Incorporate an Islamic angle into radio campaigns about HIV/AIDS
- Start a campaign that succeeds in waking the public up to the prevalence of the disease in Pakistan.
- Training radio producers in different techniques on how to convey messages through images, which are difficult to translate orally.

The marginalization of women's voices and perspectives in and through the media has been documented in several **ways**. The earlier generation of media content researchers coined the terms “symbolic annihilation” (George Gerbner and **Gaye** Tuckman, 1978) to describe the claim that powerful groups in society suppress the less powerful by **marginalizing** them to such an extent that they are rendered virtually invisible (and voiceless) as a representable group. (*Media and Gender, Cynthia Carter and Linda Steiner, Open University Press, 2004*).



It is suggested that, if journalists were to focus on HIV/AIDS, their focus in terms of rights instruments would need to be on reproductive rights. Reproductive rights of women encompass both the right to reproductive health care and the right to self-determination, and include :

- The right not to be subjected to torture;
- The right to be free from gender discrimination;
- The right to modify customs that discriminate against women;
- The right to privacy
- The right to marry and to found a family;
- The right to decide the number and spacing of children;
- The right to be free from sexual assault and exploitation; and
- The right to enjoy the benefits of scientific progress

The absence of any one of these rights places a woman at a greater risk of contracting HIV/AIDS.

Human Rights Watch concluded that,

*The universality of women's rights and the invisibility of those rights for all practical purposes was for most women little more than a dream.*

*“The media is not addressing the issue of high-risk groups like taxi and truck drivers, there is a need to develop culturally accepted slogans for HIV/AIDS particularly for truck drivers and there is a need to develop bold messages to teach the practice of safe sex”.*

*A comment from Focus Group Discussion:  
April 2005, Islamabad*



## CHAPTER 4

### THE ETHICAL GUIDELINES

The media has a pivotal role to play in the response against HIV/AIDS. Many media organizations are rising to the challenge of educating the general population about HIV/AIDS by promoting awareness and understanding of HIV/AIDS and educating listeners and viewers about the facts of the epidemic and how to stop it.

Beyond the lack of information, the issue of denial is also problematic. Denial about the virus exists on both personal and societal levels. This attitude towards HIV/AIDS fuels both official and unofficial discrimination. Infected individuals, or those who are perceived to be at risk, have repeatedly been shunned by their communities, denied access to services or health care, and have lost their jobs. Clearly the results of stigma and discrimination can be far reaching. Given the influence of the media it is essential for media organizations to have a clear understanding of ethical approaches, attitudes, and language necessary for responsible reporting on HIV/AIDS, globally as well as in Pakistan.

*“The national level journalists should send their reports etc to the International media so that they have information about the Pakistani scenario related to HIV/AIDS”.*

*Ms. Fazila Gulrez: SPARC, 12 Sep, 2005, Islamabad*

The ethical guidelines to follow are:

- Challenging Stigma and Discrimination
- Attentive to the rights of the people living with HIV/AIDS
- Sensitive to Gender and HIV/AIDS
- Attentive to the rights of children infected and affected by HIV/AIDS
- Sensitive attitude while reporting on people living with HIV/AIDS (Language)
- Create a supportive and enabling environment

*“The basic aim of an advertising campaign is to bombard people with certain images in such a manner that after the campaign has been concluded, the message enters the public's consciousness and becomes the norm rather than the exception”.*

*A comment from Focus Group Discussion:  
September 30, 2004 Islamabad*



## **FREEDOM OF EXPRESSION:**

### **MY RIGHT, MY RESPONSIBILITY**

The right to privacy and confidentiality is recognised within the constitution of the Islamic Republic of Pakistan and applies to all persons. Chapter One of the Pakistan Constitution, entitled “Fundamental Rights” lays out the following rights related to privacy and confidentiality.

*12 (1) No law shall authorize the punishment of a person:*

*(a) for an act or omission that was not punishable by law at the time of the act or omission*

*14. (1) The dignity of man and, subject to law, the privacy of home, shall be inviolable*

### **Privacy**

Media reporters should note that:

- ✗ The HIV status of an individual is private and should remain confidential.
- ✗ All individuals have the right to control personal information, even where such information is already contained in public/semi-public documents
- ✗ Children have a right to privacy

### **Confidentiality**

The name or photograph of an individual with HIV should not be published without that individual’s expressed informed consent.

### **Informed Consent**

- ✗ To obtain informed consent, journalists, photographers and camerapersons should:
- ✗ Clearly identify themselves when requesting to interview or photograph people living with HIV/AIDS
- ✗ State the purpose of the interview/photograph, the context in which these may be utilized, and the potential ramifications for the individual, their children and other family members
- ✗ Consider whether the individual person living with HIV/AIDS is in a position to provide informed consent
- ✗ Ensure that the person being interviewed has disclose their status to their partners and families
- ✗ Seek to obtain informed consent in the individual’s home language whenever possible
- ✗ Remain sensitive to the dangers of implying, or placing a person in a situation that may imply, HIV status
- ✗ Avoid promises that cannot be upheld

Ethical guidelines for reporting HIV/AIDS. (NACP)National Institute of Health, Pakistan



## MEDIA LAWS AND REGULATIONS- ISSUES OF CONFIDENTIALITY

Media practitioners should note that:

- Access to information is constitutionally guaranteed, especially where such information is deemed to be in the public interest. This is specifically relevant with regards to obtaining information from the government on the HIV/AIDS epidemic in Pakistan and does not apply to obtaining information on HIV/AIDS positive individuals and their families.
- Advocacy journalism, where a journalist or media organization motivates its own views, is a duty and a responsibility especially where the actions of stakeholders are viewed not to be reasonable and objective. However, it is important for journalists to be self-regulating and to guard against twisting the facts.
- Conflicts of interests should be declared. Individual journalists should disclose for example, whether they receive gifts or sponsorships from organisations, institutions and corporations. Journalists should also disclose any prejudice or discrimination they themselves felt during their reporting.
- Independent analysis should be maintained when obtaining information from activists, the government, and other stakeholders to avoid compromising independence and judgement.
- Accuracy should be ensured by keeping informed of current information on scientific and social interventions relating to HIV/AIDS, and by participating in training programs. Unclear facts should be verified with expert assistance.
- Informed reporting should be provided by including context. For example, statistics should be placed in context by acknowledging the underlying historical, ethnic, cultural, gender and social-economic factors that fuel the epidemic and the impact across all sectors of society should be considered.
- Balance should be maintained in content and placements of stories, and between positive and critical reports.
- Sensationalism should be guarded against in language used for headlines, captions and banners, especially where such headlines may appear to be offering false hope of cures or perpetuating stigma and discrimination.
- Sources should be properly used. At least two sources should be consulted per article and their identity should be protected if required.
- Diversity and non-discrimination should be encouraged, and the portrayal of HIV/AIDS in the media should take into account cultural norms and values.



**MIND YOUR LANGUAGE, PLEASE!**

*Language and words matter.* Journalists need to undertake a two-step process in dealing with HIV/AIDS language and jargon. They must understand the language themselves; and make it comprehensible to the public.

The following table includes a list of language to be sensitive to when reporting on HIV/AIDS.

PREVALENT LANGUAGE	ALTERNATIVES
HIV/AIDS	HIV positive
AIDS Orphan	Orphans, children affected by HIV/AIDS
AIDS Patient	People living with HIV/AIDS
AIDS Test	HIV (antibody) test
AIDS Virus	HIV, the virus that causes AIDS
Body Fluids	Specify the fluids (e.g. blood)
“Catch AIDS”	Contract HIV, become HIV+
“Died of AIDS”	“Died of an AIDS/HIV-related illness”
Drugs for AIDS	Anti-HIV therapy, Aids-related drugs, OI
Full-blown AIDS	AIDS
Gay/homosexual	Men who have sex with men (MSM)
HIV-infected person	HIV-positive, Living with HIV
HIV virus	HIV
Prostitute	Sex worker (Female/Male)
Risk Group	Risky behaviour
Safe sex	Safer sex



## INTERVIEWS WITH PLWHAS ON MEDIA COVERAGE OF HIV/AIDS

PLWHAS, people living with HIV/AIDS, have the same rights to privacy and respect as any other citizens of a country. A disease with still so much stigma attached to it deserves to be handled with caution and extra care. The media have an added responsibility when reporting on such cases. The testimonies of PLWHAS living in Pakistan are further proof of the need for proper projection of their condition and what a positive role the media can play.

*“The media must be trained to report on this issue with a developmental and human-interest focus. People living with HIV/AIDS, their life stories and experiences must come out, and also the issues of prevention and information on safety measures should be the main highlight of the media coverage”.*

***Huma Khawar: Freelance journalist, 10  
September, 2005, Islamabad***

Here are some oral testimonies of HIV+ people, their perceptions of media coverage on the issue and a way forward.

### **Asim Ashraf**

**HIV +, declared status**

**Lower Social Economic strata**

**Lahore**

On Global Coverage on HIV/ AIDS; Asim felt that from the different campaigns he has seen from neighbouring countries, it is evident that global media is responding to the issue of HIV/AIDS within the context and gravity of the issue.

Responding towards the media coverage in Pakistan, Asim opines Pakistani media is trying to report in a sensitive manner on the issue and especially now stories related to people living with HIV and AIDS are published. But some powerful segments in the society are creating hurdles in their path. Some times this is due to personal grudges and jealousy against a PLWHA and they don't want a certain HIV+ to be highlighted by the media. On the other hand Government is forcing the hand of media on facts and figures.

Asim feels that certain leading newspapers portrayal is not empowering or even encouraging the PLWHAs, it is creating problems for HIV+ people.

**Does Asim** like any media campaigns or coverage's on the issue of HIV/AIDS; yes he opined that the recent National Aids Control Program's campaign is sensitive in its approach and is raising the awareness level of masses in the country. He felt **that now** NACP is giving out much clearer messages and readers and viewers do not get very confused as they did a few years ago.





He particularly likes the Red Ribbon Campaign and commented that now even his illiterate mother and aunts know to concentrate on a particular news item or advertisement carrying the Red Ribbon. He feels the Red Ribbon is a sensitive and beautiful symbol of informing people that the publication is related to HIV/AIDS.

Sharing his views on his dislikes on HIV/ AIDS media coverage, Asim felt he was lost for words for he cannot understand how terribly insensitive and gender biased the coverage is in Pakistan. He opined and blamed the media on over playing one fact; HIV transmission is through BAD SEXUAL ACTIVITIES AND RELATIONSHIPS. Media gives reasons to society for its discouraging and openly hostile attitude to the issue and infected persons.

Sex being the only way of HIV/AIDS transmission is the popular heading of any article in Urdu and also English newspapers. He quoted “Gandi Bemari Jo Bure Jinsi Kamun Se Phelte Hai”. (A bad disease spread due to dirty sexual acts).

He argues that this is causing FEAR in the common people and also the scared HIV+ people who refrain from coming out in the open for any treatment and rehabilitation. HIV + remain silent and are living with their SHAME and GUILT in isolation as they cannot bear to face the rejection of their families, spouses and community.

Asim suggests that airtime on television should be given to talk shows and discussions for breaking the silence and information sharing on HIV/AIDS, mass media campaigns must be given priority by the private and public television channels.

He suggested that HIV+ people and their families should be interviewed live on Television and Radio so that common people can see that these are normal people who have ordinary lives and are like any other human being.

Use of easy and simple language is also important while reporting in print media such as newspapers and newsletters having large readership.

Dawn TV, Lahore recently made a human-interest documentary on Asim and his life. He feels it a positive step and such documentaries and also family dramas should be made focusing on HIV+ and their lives. When a HIV + is shown doing ordinary mundane tasks cooking, driving a scooter and sitting with his friends or family members it helps to reduce the stigma and discrimination.

**Context: The interview took place at Asim’s residence in Old Lahore city; here he lives with his parents and wife. It was over dinner that we exchanged information regarding the media coverage on PLWHAS.**



## **2. Rehana**

**HIV +, un disclosed**

**30, Chakwal**

**Belongs to lower social class and is married with two sons.**

Global Coverage on HIV /AIDS, Rehana does not have much information on how the global media is covering the issue of HIV/AIDS. She does how ever feel that HIV is the problem of very few countries in the world, countries like Pakistan and India face this problem due to the commercial sex trade across both sides of the borders.

Rehana was visibly unhappy with the role of Pakistani media in highlighting the issue in the country.

She opines that the journalists only write “mirch masala” (sensational) news reports, which serve in selling the newspapers while creating havoc in lives of PLWHAS, especially women.

She also felt that very few female PLWHAS have dared to come out in the public. She shared that if any such newspapers found out about her HIV + status then her family and community will throw her out of the home; everyone will think that she had an extra marital relationship due to which she became HIV+. Her husband’s relatives might get enraged to the extent of killing her.

Asked if she could recall any media coverage that she liked; she shared that now the latest television advertisements are more clear in their messages on HIV and AIDS and she can understand them much better then the earlier ones made by the government. NGOs especially those working on HIV and AIDS in rural areas are also making easy language brochures/ pamphlets and newsletters which give out relevant and comprehensible information to the rural communities.


She was able to share particular example of her dislikes such as daily Urdu newspapers Jang, Khabrain that publish the pictures of PLWHAS without their permissions. She recalled an article in some (could not remember the name of the newspaper) Urdu newspaper, which showed a dying AIDS patient along with a negative life story, this she feels is causing fear in the common people.

She lamented that people HATE not the infection but the affected person and alas media is helping this HATE grow.

There is growing silence is the PLWHAS who are now keeping silent and this way losing their chance for availing treatment.

Rehana feels Pakistan has a rich culture and the number of regional languages must be used for awareness raising on HIV/AIDS. Her suggestions for improving include making songs in our regional languages to help bridge the gap. Poor classes rely a lot of regional music for entertainment and there are many popular folk singers in the country that can be part of this campaign.

**She feels** that street theatre is another in expensive way of informing the rural people about the issue and can help in creating **an acceptance** in the illiterate masses.



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She also requested the media against publishing pictures and articles on PLWHAS; seeking their permissions is their basic human right. She feels Pakistani women already have no say in their lives and our media is narrowing the space for female PLWHAS to stay silent and face a lonely death.

**Context: This interview was agreed upon condition to maintain the confidentiality; we have changed the subject's name and age profile upon her request. She was transmitted the disease through her husband, a migrant worker in Hong Kong and is now dead.**

**3. Shukria Gul**  
**HIV +, declared**  
**Female 35 +**  
**Director, Pak Plus Lahore**

Shukria is highly appreciative of the global media response to the issue of HIV and AIDS especially USA, Nepal and India. She feels that portraying HIV as a developmental issue brings out encouraging coverage and also shows the priority of the international media to this serious issue.

She also opined that our neighbouring country India is doing extremely well in its AIDS campaigns for they have different campaigns and tools for targeting different groups such as house wives, youth, migrant workers, sex workers and so on and so forth.

When different groups view these campaigns they are able to relate and identify the one that targets their social dynamics and are also able to understand the knowledge relevant for understanding the issue.

Pakistani media she feels still has a long way to go in improving the media coverage on HIV/AIDS. She laments that even now media's messages are depressing and the coverage is depressive. She also feels very strongly that journalists are biased and only focus on sexual mode of transmission of HIV; this reflects in the story telling themes and fail to highlight the issue in a holistic approach.

She felt that our journalists by and large have pathetic level of awareness on HIV and its reporting and there is no ownership of the issue or the HIV+ population in the country.

Sharing her opinion on NACP media campaigns she feels that it is restricted and conforms strictly to the religious sects in our country so the messages are ambiguous and vague.

Does Shukria like any media campaigns; yes she appreciated the recent NACP media campaign due to its vibrant nature. In the recent years, she has had interactions with several Pakistani journalists; she felt they were mature and have captured her story positively.

She discussed the Indian media campaigns and films and appreciated Shabana Azmi and Shilpa Shetty, two **Bollywood** actors for performing real life roles of HIV + in films. Moreover she felt that now some English newspapers have **improved**



coverage on the issue with comprehensive reports on factors underlining HIV in our country.

She has suggested that INFOTAINMENT tools should be used for public service and information dissemination by the Pakistani media.

She feels that popular Pakistani actors, singers and pop bands, which are very popular with the youth, should be part of the HIV campaign and its time for a show of songs, jingles and even drama serials with favourite artists portraying roles of HIV+.

She had high praises for the pop bands who have recently made a song on Shukria's life that is full of positive energy and a hope for listeners of all cadres.

Upon inquiries I was unable to find the cassettes in the local markets at Lahore and elsewhere.

**Context: This interview was conducted in an open park space, Shukria and my self spent most of our time walking and discussing the issue of HIV and AIDS and her struggles in life. She blames her husband's secrecy and society's traditional values, which forced her to come out and fight her battle for survival and respect for herself and her children.**

#### **4. Rahat Nisa**

**HIV +, Undisclosed**

**Married with three sons and one daughter**

**Rawalpindi**

Rahat opines that globally she has seen and heard that there is coverage on the issue of HIV and also stories on PLWHAS. She feels that there is positive coverage and a lot of information on the internet and international newspapers.

Rahat shared that one-week earlier to this interview, in the Urdu Daily Jang there was a horrifying picture of a HIV + with a sordid life story revolving around her alleged relationship with Pirs (spiritual leaders) which have led to her getting infected with the infection.

She was extremely distressed to have read such an allegation filled report and graphic pictures of the sinful women. Language of the print media publications is objectionable and just adds to the stigma and is the cause of shame in people whose lives are affected.

In her opinion, everyone in the society has no right to judge others especially HIV+ people and the mode of **transmission** that led to their getting infected.



Rahat identified a Television advertisement on HIV and AIDS made by the Ministry of Health and NACP showing a man and woman together behind a shadow and fire burning with audio message that AIDS is dangerous and is transmitted through sexual relationship between man and a woman.

Fire is just a sure short way of scaring the already educationally handicapped and illiterate population in the country.

She pointed out that media again and again with the help of the government and fear of religious fundamentalists keep portraying HIV to be an infection that is largely spread through SEX. Although it is not true; Rahat got infected with HIV due to unsterile surgical instruments during a surgery years ago.

She is sad that her story will never be disclosed to the public for fear of discrimination and stigma enveloping her family life giving no room for her to continue her family life as before. This is a sad compromise that Amir (her husband) and she have made for their children.

She blamed the Pakistani media for negative and damaging highlights in their articles and pictures published in both Urdu and English newspapers.

She shared that even now after so much development in our country, there are mean and sensational news items that cause depression in the people especially those who have a HIV + in their families. She says she cannot look into the eyes of her children and would die if her children found out about their mother's status.

Sharing her thoughts on her likes, she feels that the most recent NACP media campaign is encouraging and shows the bright side of the picture. The THINK, UNDERSTAND AND PREVENT campaign is one that puts a smile on her face.

She opined it to be a sensitive and graceful way of raising awareness and public dialogue on the serious issue of HIV and AIDS in our country.

She also likes the Red Ribbon, a symbol of courage and fight the battle against HIV and opined that most of her HIV + friends and peers also think alike.

Would Rahat like to make any suggestions to the media; she certainly had many ideas for improving the coverage on HIV and one suggestion was the production of family drama serials on HIV and lives of + people to be aired from PTV and also private channels. Furthermore she recommended that the stories must have a positive ending and be interesting, excerpts from real live stories of the PLWHAS. If any one is a teacher, she or he must be shown teaching in classroom, mobility on public transport and sharing a meal with their family and friends etc.

Why she stressed on family entertainers is because our public likes to watch family dramas and she feels relevant information should be the content of such plays.

Context: The interview was conducted with agreement upon maintaining the confidentiality of the interviewed. **The** name and places have been changed.



## 5. Nazir Masih

**HIV +, declared**

**50 +.**

**Director, News Lights Aids Society, Lahore**

Reflecting upon the global media response, Nazir has mixed emotions, he was all praise for United States of America for opportunities on participating in the conferences related to HIV and AIDS and reporting mechanisms.

Indonesia, Thailand, Nepal and India too he felt have improved a lot in the communication strategy used for awareness raising campaigns. He felt that money works and international priority and funding are available for advocating for the rights of HIV and AIDS.

But on the other hand, he felt that even the international media tabloids and paparazzi are not above using the information about HIV persons and selling the newspapers through sensational news items. Both ways it's all about the money; Nazir says.

On digressing upon our Pakistani media and its current situation, he feels “*Rawaion ke Tabdeelian*” (*Behaviour Change Communication*) is the integral ingredient for the media and our media has so far not been receptive enough to make use of it in a constructive and efficient manner. Out of ten attempts only two or maximum three have some constructive and clear meaning for the audiences and drawing public attention to this issue.

During the course of our interaction, Nazir pointed out how different tools for behaviour change communication can actually bring a positive change in the mindset of the society. Over the years, he reminisces that acceptance has increased and now people would not leave the room in a huff and scuff if seated with a HIV+ person.

Urdu newspapers are very negative in their approach and it's all due to lack of proper training and professional training for journalists. He opined that Urdu dailies just add fuel to the fire resulting in narrowing the space for HIV + people due to stigma and discrimination. The print and electronic media overplay sexual mode of transmission mode, causing a deadly silence in the people infected and they are too scared to come out in the open.

Does he have any particular likes of the media coverage; yes he felt that Newsletters published by different NGOs and also some serious journalists working on the issue are encouraging and also impart clear and understandable message to the public.

Coverage in English magazines and newspapers is much better as compared to the Urdu and regional circulations. He recalled a news story by Daily Khabrian an Urdu daily, a story of a HIV + from Khanewal district with photographs, **whereby** causing upheaval in his life and the whole city.

**Does he** feel there can be chances of improvements in the future? HIV + people must be given the space for role-play in **media** campaigns in the country. Such campaigns will be more effective and reach out to audience's sympathy and **concern and get more** people to join the fight against AIDS. Government must collaborate with NGOs and media for

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developing holistic campaigns that are culturally and contextually acceptable. Print and electronic media should also include HIV + people in designing the media and behaviour change strategies for the public.



Nazir felt that maybe he can easily accept being part of such campaigns because of the simple fact that he is a MAN. It is indeed different for a female HIV + to come out and be part of the public discourse.

He stressed that media agencies must at all times take permissions from HIV+ people before using their pictures and excerpts of life stories for making drama serials or theatre shows. The idea is to bring a constructive change in the society and not uproot the life of an HIV + person.

He was pleasantly surprised to be interviewed on suggestions for improving the media and appreciated the work of Uks Research Centre and its mission for raising awareness in the media on gender sensitive reporting on HIV and AIDS. BBC Saibeen radio service and FM stations in different parts of the country are the best medium for informing the large population segments in different regional languages about the issue.

Nazir has suggested a media policy for reporting on HIV/AIDS; it should be binding on all media agencies and journalists reporting on the issue, on ethical codes of respect and dignity to the human lives.

He would like to see action on this proposed policy by the NACP and Government of Pakistan for ownership to the issue and affected people. This way a positive change is possible in the future.

Alternate worlds are possible and sometimes even living in the possible world is impossible.

**Context: I contacted Nazir for giving time for an interview to which he readily agreed; thereby at the Lahore New Lights Aids Society Office we had an interesting conversation on HIV/AIDS and the partnership between media and PLWHAS. Majority of the staff members at the Lahore office are HIV + people but hesitant to talk with journalists.**

## **6. Musa Qazi** **HIV+, undisclosed** **22 years, haemophilia by birth** **Graduate student, Multan**

This intelligent young man is computer savvy; he is glued to the computer screen for most part of his free time and surfs international websites and blog sites to read information about health issues including HIV and AIDS.

Musa was haemophilic by birth; yearlong interactions with doctors and hospitals have inculcated an interest to **know** about health concerns resulting in an interest to know about HIV and AIDS.

He opined that Internet is the best source of information for the youth population as most of the **young people use this**





service on a daily basis on our country. Global media coverage is full of relevant and clear message to different audiences and one does not get confused when reading an international magazine or newspaper.

Upon inquiring about the Pakistani media coverage, Musa became visibly distressed. Till the time he was unaware that he had become infected with HIV, he did not pay much attention to what the media was writing. It has been three years now that he is aware of his status and it has changed his thinking, he has become very sensitive to the hostility reflected in articles and advertisements for the PLWHAS.

He is under pressure and also scared of getting exposed in front of his peers and friends, as the mind set is that immoral sexual behaviour leads to this infection and in his case it is not so. He resigned to the current scenario resulting in failure of fulfilling responsibilities for awareness raising and advocating the rights of the HIV + people in the country. He does not like the Urdu newspaper reporters who write very sleazy and biased articles on lives of PLHWAS. Asked if he could pinpoint any particular item, he shares Din, Khabrain and Jang newspapers portray derogatory stories causing hatred from people towards the affected people and their families.

He shares that English newspapers like Dawn and The News seems to highlight human interest stories on HIV + persons and also reflect on stakeholders responsibilities in this regard. The English media has been critically analysing the government and NGOS interventions in the country. Also there are now television talk shows on ARY One World by NACP, he says such programs are extremely well organized and such talk shows should not be limited to one episode on HIV/AIDS issue only.

Pak Plus an Ngo working in Lahore has published informative brochures and also newsletters, also Family Health International published humanitarian stories n HIV + people. These is positive coverage seen in the country and such efforts should be continued in the future.

Does this young man have any suggestions for improving the situation? Musa stressed that media and advertising agencies in the country producing the campaigns on HIV/AIDS such as Midas etc must include the opinion of the HIV + people in the content and concept team. The HIV positives from women, youth, migrant workers, male and female sex workers views should be collected in forms of survey and questioners and the results of such research should then reflect in the communication tools and awareness raising campaigns in Pakistan.

Folk and pop singers must be associated in song writing and composing music; this should be aired and made popular on local FM stations which otherwise are just focused on airing Indian film music. The HIV and AIDS media campaigns must be pilot tested on sample audiences such as screened and aired for both urban and rural populations, lessons learnt must be addressed and then final campaigns should be launched in the country.

**Context: this interview was facilitated by a HIV+. It was agreed upon maintaining the confidentiality; hence the names and places have been changed adhering to the subject's request. Musa was confident in talking with a journalist as long as the story would not reach his home especially his mother and siblings. He recieved blood transfusions that were unscrened by the Fatimid Blood Bank and resulted in Hiv transmission.**

**The series of these interviews have been conducted by Ms. Saadia Haq. Uksconsultant and freelance journalist.**



## **CHAPTER 5**

### **GLOSSARY**

#### **ABC**

A-Abstaining from sexual activity or delaying the age of first sexual experience

B-Be faithful or mutual monogamy with an uninfected partner

C-Correct and consistent condom use

#### **AIDS**

Acquired Immuno Deficiency Syndrome (AIDS) occurs when an individual's immune system is weakened by HIV to the point where they develop any number of disease or cancers. People who haven't had one of these diseases or cancers, but whose immune system is shown by a laboratory test to be severely damaged are also considered to have progressed to an AIDS diagnosis.

#### **ANTIBODIES**

Molecules in the body that identify and destroy foreign (unfamiliar) substances such as bacteria and viruses. Standard HIV tests identify whether or not antibodies to HIV (HIV antibodies) are present in the body. A positive HIV test signals that antibodies are present.

#### **ANTIRETROVIRAL THERAPY (ART)**

ART refers to any of a range of treatments that include antiretroviral medications. These drugs are designed to destroy retroviruses such as HIV, or interfere with their ability to replicate.

#### **GLOBAL FUND**

The Global Fund to Fight AIDS, Tuberculosis and Malaria was created in 2001 at the urging of UN Secretary General Kofi Annan. The Global Fund is a partnership among governments, the private sector and affected communities. It is an independent grant-making organization whose purpose is to help developing countries fight AIDS, tuberculosis and malaria.

#### **HIV TEST**

The standard HIV-test looks for the presence of HIV antibodies in the blood. HIV antibodies are molecules produced by the body once it detects the presence of HIV. The production of HIV antibodies does not happen immediately after exposure to the virus and the period after infection before production of antibodies is called the window period. During the window period, an HIV test may be negative. It is possible to test negative despite the presence of HIV in **the body**. There are several different kinds of HIV tests used to screen of the presence of antibodies.



## **HUMAN IMMUNODEFICIENCY VIRUS (HIV)**

The virus that causes AIDS. HIV can be transmitted through infected blood, semen vaginal secretions, breast milk and during pregnancy or delivery. There are two types of HIV, HIV-1 and HIV-2. Both are transmitted through the same methods/manners and result in progression to AIDS. HIV-1 is responsible for the overwhelming majority of global infections, whereas HIV-2 is less widespread and primarily found in West Africa

## **IMMUNE SYSTEM**

The body's system of defense against foreign organisms such as bacteria, viruses or fungi.

## **IMMUNODEFICIENCY**

A state where the immune system cannot defend itself against infection. HIV progressively weakens the immune system and causes immunodeficiency.

## **MOTHER-TO-CHILD TRANSMISSION**

This refers to transmission of HIV from an HIV-positive mother to her child during pregnancy, labour and delivery or breastfeeding. Transmission from mother to child is also referred to as prenatal and vertical transmission.

## **MSM**

MSM stand for Men who have Sex with Men. For assessing disease risk, use of the term "MSM" is often used instead of "gay" or "homosexual" or "bisexual" because it refers to a risk behaviour, rather than an identity that may or may not be tied to a behaviour. In many countries and cultures, men who have sex with other men may not perceive themselves as gay or bisexual.

## **PANDEMIC**

A worldwide epidemic; occurring over a wide geographic area and affecting an exceptionally high proportion of the population.

## **RISKY BEHAVIOUR**

This refers to any behaviour or action that increases an individual's probability of acquiring or transmitting HIV. Some examples of risky behaviours are having unprotected sex, having sex with multiple partners and injecting drugs. Alcohol use has also been linked to risky behaviour because of its effect on an individual's ability to make decisions and negotiate safer sex.

## **SEXUALLY TRANSMITTED DISEASE/INFECTION (STD/STI)**

Any disease or infection that is spread through sexual contact.



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## KEY POINTS TO REMEMBER

- Become conversant with the language and priorities of the subject
- Target media policy makers, media professionals and external policy makers for the development of gender policies, code and guidelines and regulatory frameworks.
- Cultivate allies, both women and men,
- Approach the subjects with more than opinions. Do your homework and research to present the facts and figures to illustrate the issues of concern.
- Do enough background work. Other wise journalists run the risk of putting words into the interviewee's mouth rather than allowing them space to speak for themselves.
- Journalists need to know what is a matter of national law, what is company policy and what is merely usual practice.
- Feature writing is the form that best lends itself to writing on HIV/AIDS.
- The journalist should become fluent in HIV/AIDS terminology and then use language that is appropriate for the journalist's audience.



## **GENDER/MEDIA AND HIV/AIDS CHECKLIST**

The aim of this checklist is to provide HIV/AIDS reporters with a tool to assess the gender sensitivity of their programmes and articles. Assessing gender sensitivity allows one to see if programmes, policies, and/ or organisations are identifying and catering to the needs of all genders. Gender sensitivity is an important concept, especially in HIV/AIDS prevention.

The term “gender” is used to describe the various characteristics assigned to women and men by a given society. The term “sex” refers to biological characteristics. Gender is socially constructed, learned, and can vary from culture to culture, generation to generation, and over time due to social changes. Gender roles reflect the behaviours and relationships that societies believe are appropriate for an individual based on his or her sex.

### **Checklist**

The list can be used as a guide to provide ideas how to enhance existing reporting as well as to assess the sensitivity of policies. Once the checklist is complete look over your answers to see how you might include more gender-sensitive components to enhance your reporting.

Does your reporting..

Yes    No

Provide access to information and knowledge about HIV/AIDS to all participants equally?

Yes    No

Encourage discussion about socially assigned gender roles affecting women, men adolescents?

Yes    No

Create awareness of the various social factors, such as economics, politics, and social structure that put women or men more at risk for HIV/AIDS?

Yes    No

Encourage discussion of how gender inequality affects HIV/AIDS prevention, transmission, treatment, and care?

Yes    No

Work to eliminate the power imbalances between women and men and between girls and boys?

Yes    No

Address the issue of violence against women and girls?

Yes    No

**Discuss** opportunities for women and girls to become empowered through HIV/AIDS education? (For example, enhance the self-confidence of women and girls by encouraging them to attain new skills, take on more responsibilities)



as desired, become local leaders in health promotion, etc.)

Yes    No

Address the double standard that exists between women and men in relation to sexual activity? (For example, men being allowed to engage in sex outside of marriage while women are not, men being expected to have sexual experience before marriage while women are not, etc.)

Yes    No

Address the issue of sexual abuse (rape, incest, etc.)?

Yes    No

Facilitate awareness in adults of the reproductive and sexual health needs of children and adolescents?

Yes    No

Address how HIV/AIDS affects how women and men make reproductive choices?

Yes    No

Encourage the involvement of both women and men in family planning?



## SAMPLES OF GOOD AND BAD REPORTING

As journalist gain new knowledge on how to cover ongoing issues in society, this knowledge has to be translated into stories for the media. The media principles of good reporting are:

- Accuracy
- Balance
- Clear and Concise Writing
- Well-focused
- Diversity of Sources
- Context

**Accuracy** is one of the hallmark principles of the profession. The journalist should always strive to present facts, and not his or her opinions and biases and prejudices, when writing news, news analysis and feature stories. Journalists should never bend, twist or create “truth”.

**Balance** is created through providing a **diversity of sources** in a story and by ensuring that the journalists’ own biases and interests do not influence what facts are included or excluded; and who is interviewed and who is not. Balance also means giving all sides of an issue, the dominant view, as well as conflicting or complementary views.

Getting the right facts, situating the issue being reported on within the local, regional or global situation and the use of relevant data are just some of the key ways of providing **context** to a story.

**Clear and concise** language helps the journalist to communicate the issue being reported. By understanding terminology and explain the “jargon” journalists enhance their writing skills by finding more effective ways to explain an issue to the public.

The journalist also needs to sharpen the skill of “questioning the conventional wisdom”. A journalist should begin to approach information with a healthy scepticism- “do I believe the basic premise?”- is a question the journalist should ask.

For example, gender, by definition, is a social construct, not an “absolute truth”, and can be changed. To talk of gender, or to consistently bring the gender perspective into stories is a way of challenging the conventional wisdom on men’s and women’s roles, while a constant scrutiny of gender relations in issues reported is way to challenge inequality. When a journalist also understands how gender infuses the HIV/AIDS pandemic, then he or she will begin to ask different questions about the information at hand and produce “new” stories.

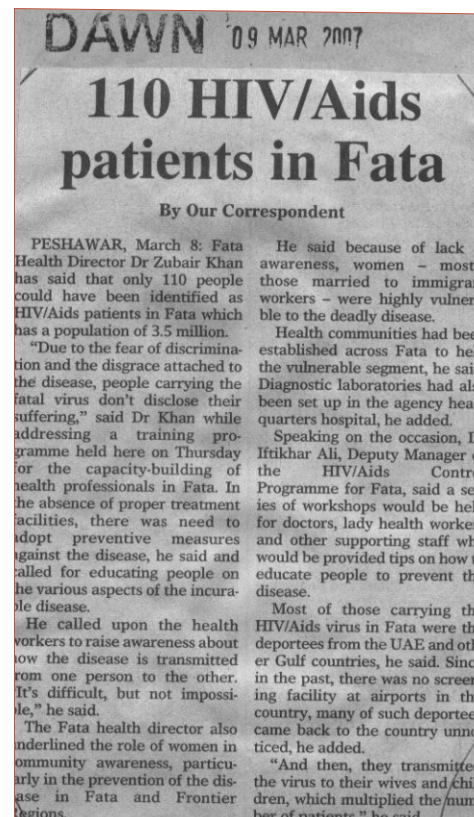
During the Media workshop on reporting HIV/AIDS in November 2006 in Peshawar Ms. Tasneem Ahmar Director Uks stressed that the media needs to act responsibly while reporting on HIV/AIDS. Areas and locations should not be **specified**. Naming the area where the number of PLWHAs is huge is an unethical practice. Because when a particular **area is named**, it becomes stigmatise and general perception about that are changes to negativity. She also urged the **media not** to let numbers and figures overpower the human face of HIV/AIDS.



During focus group discussions in Quaid-e-Azam University in December 2004 held by Uks with students from the Psychology Department some comments were:



- An example of how awareness can be effectively disseminated on serious issues can be seen in the example of the Bollywood production “Phir Milenge”.
- Media while reporting on HIV/AIDS should target labourers and factory workers most of whom migrate from villages to cities and are prone to engage in sexual promiscuity and visits to commercial sex workers.
- Research has proved that animated images hold the attention span of their audience longer than any other visual imagery. Animation is a tool that can be effectively employed for developmental purposes.





# 163 more AIDS cases in three months this year

ISLAMABAD - As many as 163 more HIV / AIDS cases have been identified in Pakistan during last quarter as the total number of the patients has raised to 2462, the health officials said here on Thursday.

Addressing newsmen Minister for Health Masir Khan said that country is at high risk of AIDS spread despite low prevalence of the disease at present.

Later, the officials told The Nation that the number of HIV/AIDS victims has increased from 2,299 to 2,462 in just three months of 2004 (April, May, June). They said the data about July, August and September is being collected from all the four provinces after which the number may further rise.

which the number may further rise.

for Health informed the media about the details of forthcoming First Asia Pacific Women, Girls and HIV/AIDS Best Practices Conference to be held in Islamabad from November 29 to December 1, under the auspices of Health Ministry in collaboration with Amal human development foundation.

The Manager National AIDS Control Programme Dr Asma Bukhari, Minister of State for Health Shehnaz Bukhari, Director General Health Abdul Majid Rajput and the other

The Minister said that the conference was a great initiative of Pakistan, which will send a very strong message to the world about the country's commitment for elimination of the deadly disease.

He said Asia Pacific region hosts 10 per cent of world population but it has 60 per

cent of the global AIDS victims

"The government is alive to the situation and we are taking all possible measures to ensure the eradication of HIV/AIDS," he added.

He said the strict adherence to Islamic principles of morality by the people would ensure the low prevalence of HIV/AIDS in the country.

Speaking on the occasion, Imran Rizvi of Amal said that the conference is a model initiative and a great opportunity for the improvement of efforts against HIV/AIDS in the country.

He said around 300 delegates have been selected for the conference which will produce agenda for change to be presented at three international forums.

He said the agenda produced in the conference would be presented in UN General Assembly and other regional forums.

## ایڈز کے خلاف ملک گیر مہم چلائیں گے، وزیر

میں شعور پیدا کرنے کیلئے اس جی اوز کے ذریعے روگرام شروع کئے جا

اسلام آباد (خصوصی نیوز رپورٹر) وفاقی وزیر صحت محمد خان، ملے جلے کچھ طبی اہلیات کے تیار اور فحش کرنے کی کسی بے ادبی کے متعلق نہیں بلکہ بھرے کچھ کام کیسٹ معیار ہونے والی اہلیات فوری طور پر بنائیں ورنہ ان کے سخت برائی کی ہوگی۔ ملک بھر میں ایڈز کی روک تھام 59: سین اڈا رفر کے چاہیے کہ 11 وزارت صحت  
بقیہ صفحہ 18 آخری صفحہ 6

[illegible]

## Association of people with HIV & AIDS launched

ISLAMABAD: On World AIDS Day, December 1st 2006 UNAIDS Pakistan and its United Nations Co-Sponsor Agencies proudly announced the launch of the Association of People Living with HIV and AIDS.

The establishment of this association could not have been possible without the commitment of people living with HIV themselves, support of national and international NGOs and Government, specifically the National and Provincial AIDS Control Programmes.

The launching ceremony was attended by Federal and

Provincial Government officials, diplomats and representatives from NGOs, People living with HIV (PLHIV), Mr. Salman Ahmed, UNAIDS Special Representative and the UN family. While the Honourable Federal Minister for Health was the Chief Guest at this launching ceremony.

The overall objective of the Association is to build capacity and empower People living with HIV in Pakistan. Stigma and Discrimination remain burning issues for PLHIV, which needs to be tackled on a priority basis. Currently most of the NGOs working on HIV and AIDS are concentrating on prevention.

There are only a few NGOs

supporting People living with HIV and AIDS some of which are being courageously run by PLHIV themselves.

The registration of the Association under the Voluntary Social Welfare Agencies (Registration and Control) Ordinance 1961 which took place on 17th March 2002 is a welcome step in giving the Association a solid foothold and reflects the Government's commitment in addressing the issue of People Living with HIV in Pakistan.

A meeting of the Board will be held in due of time in order to draw roadmap for the future course.



## LIST OF RESOURCES

- Networking and advocating for HIV/AIDS awareness in the mass media in Pakistan, Reports (Uks)
- Ethical Guidelines for Reporting HIV and AIDS. (NACP)
- The Kaiser Media Fellowships in Health (2004) Journalism Briefing on HIV/AIDS Reporting
- Mission Possible: A gender and media advocacy toolkit. (WACC)
- Gender, HIV/AIDS & Rights: Developing a training manual and module for the media (IPS)
- Gender, HIV/AIDS and Rights (IPS)
- Radio and HIV/AIDS: Making a difference, by Gordon Dam and Nicola Harford (UNAIDS)

*“In Pakistan, HIV/AIDS campaigns have lacked the continuity factor for a number of reasons: lack of funds, governmental procedures delay grants approvals, ignorance of people on basic hygiene issues. Most journalists have no more knowledge on the issue than the layperson. Hence the need for information dissemination material, workshops and seminars geared towards educating writers and journalists on the basics of HIV/AIDS. Campaign should avoid stereotypical projection of HIV/AIDS as being a disease, which targets mainly: truck drivers, commercial sex workers, drug users and blood sellers. The campaign should have more positive undertones focusing instead on how people can be equipped to fight the disease”*

*A comment from Focus Group Discussion,:*  
September 30, 2004 Islamabad