

Summary of key data from the findings of the HIV and AIDS and Gender Baseline Study in Namibia

QUANTITY OF COVERAGE	% NAMIBIA	% REGION
HIV coverage compared to total	4	3
HIV mentioned	42	36
HIV central focus	58	64
WHO SPEAKS		
Women and men - all topics	42 (F) / 58 (M)	39 (F) / 61 (M)
Person affected by HIV	5	4
Women and men affected by HIV	71 (F) / 29 (M)	59 (F) / 41 (M)
People with HIV	1	4
Women and men with HIV	0 (F) / 100 (M)	44 (F) / 56 (M)
Traditional & religious groups	5	5
Women and men traditional and religious groups	14 (F) / 86 (M)	18 (F) / 82 (M)
Civil society, NGOs, INGOs	36	28
Women and men in civil society, NGOs and INGOs	61 (F) / 39 (M)	47 (F) / 53 (M)
Experts	6	12
Women and men experts	29 (F) / 71 (M)	36 (F) / 64 (M)
Officials/UN agencies	36	42
Women and men officials/UN agencies	21 (F) / 79 (M)	31 (F) / 69 (M)
Other	6	5
Women and men other	71 (F) / 29 (M)	40 (F) / 60 (M)
TOPICS		
Prevention	52	41
Who speaks on prevention?	39 (F) / 61 (M)	42 (F) / 58 (M)
Treatment	10	16
Who speaks on treatment?	37 (F) / 63 (M)	37 (F) / 63 (M)
Care	18	13
Who speaks on care?	33 (F) / 67 (M)	52 (F) / 48 (M)
General	13	19
Who speaks on general?	30 (F) / 70 (M)	27 (F) / 73 (M)
Impact	6	5
Who speaks on impact?	18 (F) / 82 (M)	35 (F) / 65 (M)
TYPES OF STORIES		
News & briefs	62	78
Cartoons, images, graphics	4	2
Editorial & opinion	2	4
Feature & analysis	26	10
Feedback	5	3
Interview, profile & human interest	2	3
WHERE DO STORIES COME FROM?		
International	10	13
Regional	13	8
National	68	54
Provincial	0	6
Local	9	19
WHO TELLS THE STORIES?		
Original story	71	77
Guest writer	7	5
Agency	22	18
WHO REPORTS ON HIV and AIDS?		
Overall	58 (F) / 42 (M)	45 (F) / 55 (M)
Who reports on what?		
Prevention	63 (F) / 38 (M)	39 (F) / 61 (M)
Treatment	67 (F) / 33 (M)	56 (F) / 44 (M)
Care	43 (F) / 57 (M)	57 (F) / 43 (M)
General	67 (F) / 33 (M)	39 (F) / 61 (M)
Impact	43 (F) / 57 (M)	39 (F) / 61 (M)
Other	0 (F) / 100 (M)	50 (F) / 50 (M)

NAMIBIA

HIV and AIDS and GENDER BASELINE STUDY



The Southern African Media Action Plan



on HIV and AIDS & Gender

The Namibia HIV and AIDS and Gender Baseline Study is part of the Media Action Plan (MAP) on HIV and AIDS and Gender, led by the Southern African Editors' Forum (SAEF). A team of local consultants led by Emily Brown of the Polytechnic of Namibia and Sarry Xoagus-Eises of the Gender and Media Southern Africa (GEMSA) Network conducted the monitoring. The MMP, which leads the monitoring sub-sector of MAP analysed the data and produced the quantitative results. Gender Links (GL), which leads the policy sub-sector of MAP edited the qualitative research and wrote the report.

In Namibia, AIDS has significantly contributed to poor health and the low life expectancy. Hospitalisation and deaths due to AIDS-related complications have steadily increased, thus placing additional strain on the health system. Since 1996, AIDS has been the leading cause of death in Namibia. The Government of Namibia has in place a detailed, multi-sector strategy for combating HIV and AIDS, which recognises the epidemic as the most serious challenge to the development of the country. The national response to HIV and AIDS aims to reduce transmissions to below epidemic levels and to mitigate its impact across individuals, families, communities and sectors.

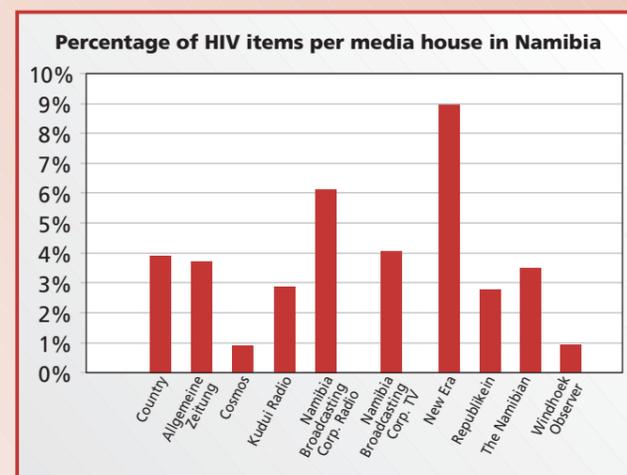
The monitoring included 118 media houses in eleven Southern Africa countries, for a total of 15 days staggered over a period of one month between October and November 2005. Monitoring in Namibia covered 9 media houses. The key findings are summarised in the table at the back of this pamphlet.

KEY FINDINGS

The coverage of HIV is extremely low: In Namibia, only 4% of stories in all media monitored focused on or mentioned HIV; only slightly higher than the regional average of 3%.

There is considerable difference between media houses: The weekly newspaper *New Era* had the highest coverage of HIV stories at 9% (compared to 1% in the case of the *Windhoek Observer*, other weekly newspaper monitored.) The daily papers

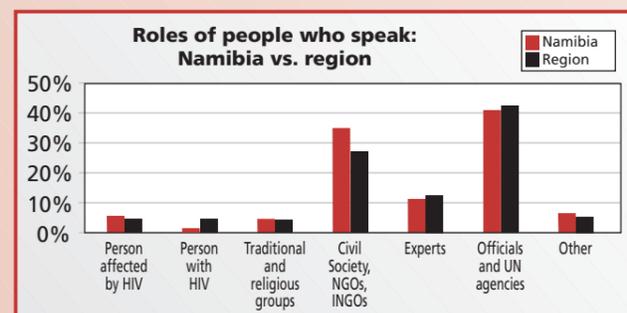
averaged between 3% and 4% HIV coverage. Of the electronic media, Namibian Broadcasting Corporation radio had the highest coverage (6%).



HIV and AIDS is better mainstreamed into coverage compared to findings from other countries: In Namibia, 42% of all the items monitored had HIV as the central focus of the stories, while 58% mentioned the issue. This suggests that HIV and AIDS is not only covered as a stand alone health issue, but is mainstreamed in all coverage.

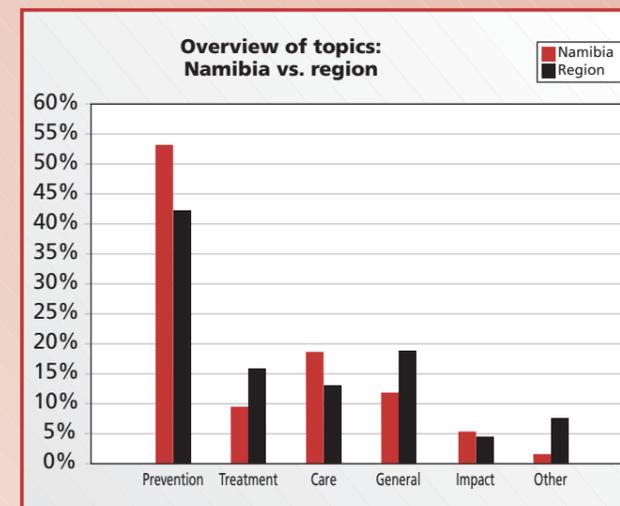
Male voices still predominate: Although there is a higher proportion of women sources in the HIV topic category in Namibia (40%) than in general coverage (25% in the latest Global Media Monitoring Project) male voices predominate in all areas of HIV coverage, except for prevention.

Voices of people with HIV are almost invisible in the media: People with HIV constituted a mere 1% of all sources (compared to 4% in the region) with officials, UN agencies, and experts; civil society, NGOs and inter governmental agencies constituting the majority of sources on HIV and AIDS stories.



Voices of women with HIV are totally missing in the media: In Namibia, men constituted 100% of all those living with HIV quoted by the media; in contrast to the rest of the region, where women with HIV constituted 52% of such sources.

Coverage of HIV stories in Namibia concentrates on prevention: Similar to the majority of countries in the study, most coverage of HIV and AIDS is on prevention, with this topic accounting for 52% of the total items monitored.



There is little coverage on treatment and impact: HIV stories on treatment and impact received 10% and 6% of coverage respectively. The topic of care and support had the second highest coverage at 18%.

There is more in-depth coverage in Namibia than in the region: Although in Namibia as elsewhere most HIV and AIDS stories are in the form of news, Namibia had the highest proportion of feature stories (26%) compared to the rest of the region (10%).

But there is need for more local stories: However, as elsewhere in the region, most stories in Namibia (68%) concerned national dimensions of the pandemic, with only 9% originating from local areas.

There is a relatively high level of original stories being produced: On the positive side, most stories on HIV and AIDS in Namibia are original stories (71%), reported by journalists within newsrooms, rather

than obtained from agencies and guest writers. This shows that newsrooms are investing resources in obtaining original stories on the pandemic.

There is better gender balance in reporting compared to the region: In Namibia women reported on 58% of the items monitored compared to 45% in the region. However, unlike the region, male journalists are slightly more likely than women to access women sources. This suggests that merely having gender balance in newsrooms is not sufficient to ensure gender balance and sensitivity in coverage. Both women and men reporters need to be trained in covering gender and HIV and AIDS issues.

Gender dimensions of the epidemic are not receiving sufficient coverage: this need is further reflected in the fact that despite the increasing gender balance in newsrooms, gender is not well integrated into HIV and AIDS coverage. Closer analysis of topics showed that:

- ◆ In stories about prevention, the sub-topics that examined cross-generational sex, and cultural practices, all significant drivers of the epidemic in the country and the region, received less than 5% each of the coverage. Prevention of mother-to-child transmission and the role of men and boys in prevention received no coverage at all;
- ◆ In stories about treatment, the prevention of mother-to-child transmission received no coverage at all;
- ◆ In stories about care, support, and the environment, the role of men and boys, home based care and legal rights received no coverage in Namibia.

Policies, training and access to information can help to improve the quantity and quality of coverage: Through the collaborative efforts of a number of organisations, MAP offers support to media houses that wish to develop HIV and AIDS and gender policies, as well as integrate these into the workplace and editorial practices. The training, ethics and information arms of MAP will buttress the policy support provided by GL and the Media Institute of Southern Africa (MISA).