INTRODUCTION

The earliest reported case of the Acquired Immune Deficiency Syndrome was in the United States of America (USA) in 1981. Since then, medical experts and researchers, social scientists, psychologists, and recently the media have been galvanized in efforts aimed at preventing and managing the disease. For Africa, this has been termed as the greatest medical challenge in recent decades; while a cure remains elusive, the delicate and fragile social, economic and political context presents peculiar obstacles in the prevention and management of HIV/AIDS.

This is unlike in the developed countries, where the new combination therapies, buttressed by intensive mass educational campaigns, have succeeded considerably in offering a window of hope for those suffering from the disease and for those who are involved in its management and prevention (Piot, 1997). For those involved in HIV/AIDS prevention and management, the picture at times appears to be gloomy and disheartening.

The figures on the spread and prevalence of HIV/AIDS as well as on the number of people who have died from the disease (see Introduction) may not mean much to those who have remained untouched in the sense of not knowing anyone close who is either infected with the AIDS virus, or who has developed full blown AIDS. This is one of the most significant categories of people who should be the focus of prevention strategies because the incubation period of the HIV virus makes everyone vulnerable.

One infected person who appears healthy and who has not been tested for the virus has the ability to cause enormous potential damage in communities such as those in East and Southern Africa where the message of prevention has not become engrained. This potential is best looked at when one pictures the infection pattern of the HIV virus as a chain: it starts with two people, but if either one of them is not careful in his/her sexual behaviour, up to hundreds or thousands of people can be infected over a period of time. Indeed, some researchers have contended that the world is divided not into those suffering from AIDS and those not suffering from AIDS, but into those who know they have AIDS and those who do not know (Berer and Sunanda, 1993).

The focus on HIV/AIDS is further justified by the fact that most of those affected by it in some countries of East and Southern Africa, are aged between 15-45 years (Sessional paper No. 4 on AIDS in Kenya, 1997, AIDS CAP, 1996). Indeed, this should accelerate the efforts towards HIV/AIDS prevention and management as this is the most productive cadre of people and their deaths affect their families (particularly if they are the sole breadwinners) and the economy as a whole.

In the bid to combat the epidemic and its threat to the survival of the human race, researchers and programme/project personnel are intent on developing the most innovative and creative strategies. The search for alternatives has highlighted the crucial role of communication and media in the support of these efforts. The mass media in particular have attracted great interest because of the perception of its role as a powerful and influential tool. Towards this end, several countries have initiated and maintained mass media projects.

This chapter examines the functions of the media in HIV/AIDS prevention and manage-
ment and includes the general impact of HIV/AIDS which presents an outlook on the background on the magnitude of the illness: a brief discussion on the role and functions of the media in development; examples of current approaches on media and HIV/AIDS; and proposes some strategies that can be adopted.

THE IMPACT OF HIV/AIDS

Sceptics in the media may be tempted to ask why there is so much fuss about HIV/AIDS. This necessitates a look at the impact and future projections of the epidemic. Studies of the epidemiology of HIV/AIDS underscore the statement that it is one of the most important challenges that Africa has faced, especially in the post independence era. The figures continue to escalate; the World Health Organization estimates that by the end of 1999, about 30-40 million people would have been infected with HIV, and that the rate of new infections is 8,500 daily. This raises the issue of the potential negative consequences of multiple infections particularly in sub-Saharan Africa where the trend of testing for HIV has not become deep rooted.

Studies indicate that the highest proportion of AIDS cases are between 14-39 years and that adolescents are becoming sexually active at a younger age, meaning that the risk of AIDS is higher among this group. Further, there is concern about the fact that the reported cases do not represent the real picture of the magnitude of infection as some people are unable or unwilling to seek medical care or to go for testing. It is important that accurate documentation is carried out as this underlines the need to intensify efforts on HIV/AIDS prevention and management by presenting a true picture.

For the media to present a clear and representative picture of the disease, it is necessary that all facets of its impact be well understood and studied. On the economic front, public expenditure on health and welfare will be devoted to the control and management of HIV/AIDS. In Kenya, for instance, it is estimated that expenses related to HIV/AIDS is about Kshs 3,800 million. In 1992, as much as 15 per cent of all hospital beds were occupied by AIDS patients.

One of the most severe consequences of the disease is the loss of young adults in their most productive years, which translates into the loss of the most well educated and professional category of the population. Conversely, this affects human resource development, the size of the labour force, productivity and it negates huge investments in education and professional development. Productivity is affected by time spent on medical care as sick leave, higher medical expenses and the care of those affected by HIV/AIDS, as well as attendance of funerals. It is estimated that about 6,000 funerals are taking place daily in Africa as a result of AIDS (The Sunday Nation, Sunday June 13, 1999). At the community and household levels, AIDS at times claims the lives of productive people who have been contributing to the household budget or who have been breadwinners, which propels the households into poverty.

The effects of HIV/AIDS on the social fabric of African society, though difficult to quantify, are no less explosive than the economic ones. The stigma attached to the disease has led to discrimination and even violence against some women when they disclose their HIV status to their husbands. In addition, structures established for the care of the sick are over-stretched and women are increasingly burdened as they are traditionally charged with the care of the sick and ailing. For the girl-child, their future is jeopardized as they are sometimes withdrawn from school to help care for those who have AIDS and are at home. This is besides the fact that the number of orphans has increased and is set to increase if the epidemic is not arrested and managed effectively.

The media fraternity is not immune to HIV/AIDS as people who are potentially vulnerable to infection and as relatives and friends of those who become infected. Thus, they should be well advised like all sectors of society, to use existing tools (such as communication channels) to support efforts to prevent and manage the illness.
COMMUNICATION AND HIV/AIDS

The absence of a cure or vaccine for HIV/AIDS and the urgent need to reach people on the impact of the disease as well as the need to prevent it have resulted in the emphasis on mass education of populations. This inevitably means that effective communication approaches and strategies should be identified and applied to reach people in a way that affects them emotionally and motivates them to change their behaviour. Changing human behaviour is a concept and goal that has long eluded researchers and programme/project officers, since human beings are individually affected by different factors in terms of changing attitude and their behaviour.

It is crucial for the media and for those involved in media and HIV/AIDS prevention to understand the relationship between communication and HIV/AIDS. Various organizations have developed different communication models which they have used in training medical and social workers, programme/project officers, outreach and community workers, peer educators and counselors. In the AIDSCAP/FHI experience (1997), an effective communication model which affects behaviour change involves five steps: awareness of the problem; gathering of knowledge and skills by the target audience; motivation to take action; preparation for trial of the new behaviour; and the sustenance of the new behaviour.

In spite of the lack of consensus on how communication affects behaviour, a discussion on the subject is important, given the severity of the impact of HIV/AIDS and the centrality of the mass media as part of the communication process (Parrish-Sprowl, 1998). This discussion of necessity must lay emphasis on the fact that most communication efforts in development have not been as effective as desired because communication has not been integrated as a primary process at the level of conceptualization as noted by Parrish-Sprowl. The reality has been that communication is referred to as a last resort and it is frantically applied in the form of mass media campaigns without due regard to proper planning, implementation, monitoring and evaluation, and in total disregard of the need to make participation integral to the whole process. The existence of high awareness levels of HIV/AIDS in the absence of behaviour change indicates that effective communication approaches and strategies have not been developed and applied to support programmes and projects on attitude and behaviour change.

Attention in the planning and implementation of communication approaches and strategies is critical, given the sensitive nature of HIV/AIDS education, which requires that reference be made to sexuality. This complicates the process of education on HIV/AIDS generally and communication on the same in particular, because it demands an understanding of the reasons and motivation for specific sexual behaviour and relationships of different groups of people. For the mass media, the issue is even more delicate given the fact that the channels used are open to the public and the need to refer to cultural factors and good taste, especially with regard to adolescents and youth.

BACKGROUND OF THE MASS MEDIA IN EAST AND SOUTHERN AFRICA

Various organizations in Africa have launched media programmes and projects using different channels, including the mass media and alternative media. It is important to study the history and context within which the mass media have operated to understand their performance so far. The mass media have attracted the attention of many practitioners of development because of their wide reach and in the case of broadcasting, their immediate reach. The first radio station was established in Kenya in 1924 in wireless service form and in 1953, the African Broadcasting Service was started with programmes in Kiswahili, Arabic and local languages. Broadcasting served the interests of the settlers and was an extension of what was happening in the “mother” countries.

The situation was different with regard to the print media where publications in English, Kiswahili and local languages proliferated in the 1930s, buttressing the nationalistic spirit and activities. In 1959, the East African newspaper...
was launched by his highness the Aga Khan, while *The Kenya Times* newspaper was started in 1983 by the Kenya National African Union (KANU). *The East African Standard* had been established by the settler community in 1902.

Historically, most African governments took the opinion and model that the media were too important a resource and tool to be left in the hands of private investors. Thus, the media were viewed as being important to national integration and development as exemplified by Kwame Nkrumah’s statement:

“It is part of our revolutionary credo that within the competitive system of capitalism, the press cannot function in accordance with a strict regard for the sacredness of the facts and that the press, therefore should not remain in private hands.”

(Gadzekpo, 1997).

Although this goal is commendable, it has led to the shackling of the media through direct and indirect control by governments in most African countries. Until recently, most of the broadcast media in Africa were under the complete control of governments and the private press has had to deal with threats of de-registration, sedition and defamation cases and the destruction of equipment like cameras and printing presses. It has been noted that journalists have had to undergo arrests, detention, beatings, and confiscation of their publications. The legal and political environment under which the media operate has often been hostile, lacking in freedom, and thorny which further constrains their work (Mwagiru, 1998).

The prevailing scenario where the mass media are still under the control of the government is pathetic given the potential reach of the media. In Kenya, the highest selling daily the Nation, has a circulation figure of 180,000-200,000 with a reach of about 2 million readers (it is estimated that 10 people read one newspaper). Estimates of radio listeners in Kenya have been put at about 21 million making the radio an ideal medium for mass education and communication (Kiai, 1999).

The media also operate in the background where communication policies have not been developed or even defined. This means that most countries have not given thought to what priorities they should have as regards communication or what communication agenda they should establish. This has given rise to a situation where populations, especially those in the rural areas, have limited access to media channels, and where most people are not conversant with the way media operate and function.

In Kenya, political interference has for long haunted the media. While the restrictive single-party environment was reversed when Section 2 (A) of the Constitution was repealed in 1991, freedom of the press is yet to be fully achieved. The government still has recourse to laws and policies that enable it to threaten the press: such laws include high fines in the case of defamation, and room to disable printing presses. Human rights activists and media practitioners have over the last seven years been pressurizing the government to release its stranglehold on the broadcasting media. To some extent, some milestones have been achieved with the licensing of private radio and television stations. It has been observed, however, that those who obtain licenses are usually ‘politically correct’.

Great discontent has been expressed at how the media cover development issues and this includes coverage of HIV/AIDS issues. Much of this can be attributed to a lack of awareness and knowledge on how the media operate and the constraints within their working operations. Musa (1996) has discussed the need to review and redesign the structure and ownership of the media. In his opinion, the structural areas of routine professional practices, profitability and survival have constrained majority empowerment by the media. These include time constraints and strict adherence to deadlines, as well as the notions of “impartiality” and “objectivity”. Other obstacles include lack of adequate training facilities and the curricula in operation as well as ownership which set specific priorities and which demand a certain profit margin. The latter factor has led to a skewed emphasis on politics on the part of the media.
FUNCTIONS OF THE MEDIA IN HIV/AIDS PREVENTION AND MANAGEMENT

The primary aim of current mass education on HIV/AIDS is to reach those whose HIV status is negative to encourage them to retain this status; to support those whose status is positive to urge them to be careful so as not to spread the virus and to maintain hope through positive living; and generally to educate society as a whole to develop sustainable structures that will contribute to the prevention and effective management of HIV/AIDS. In communication, the focus has been on identifying methods of communicating messages on HIV/AIDS that will motivate individuals to change their attitudes and behaviour. Ways in which the media can support educational efforts on HIV/AIDS prevention present a vital question in these educational efforts.

The media have been viewed as being influential in building awareness across different sectors of society on HIV/AIDS and the importance of being careful in sexual behaviour and practices. While the media have been termed as having limited effects in attitude and behaviour change, there are experiences which have shown that their contribution can be invaluable and indeed highly powerful in determining behaviour change. The main strength of the media has been viewed as that of agenda setting, meaning that the sustenance of a topic for long in the public forum will lead to extensive and hopefully intensive discussions that spur some action on a given topic. This strength has attracted enormous attention in Africa, partly given the need to democratize authoritative structures and to redesign society for effective development. Besides the traditional role of the media, other functions can be categorized as:

- Providing accurate, factual information on HIV/AIDS on a regular basis:
  Although research has shown that there are high awareness levels on the existence of HIV/AIDS (over 90 per cent in some countries), some misinformation exists on the transmission patterns (for example, that mosquitoes can transmit the HIV virus), and on prevention methods. In Africa, one has to deal with myths and interpretation of the disease as a curse. The media can assist in correcting this by consistently referring to the transmission patterns of HIV/AIDS and the importance of going for testing and proper care of those who are infected with the virus. This is a method that has been adopted by the Kenyan press in the coverage of road accidents, which are especially high. Readers are always updated on how high the figure is and that this issue has not been dealt with effectively. As a standard procedure, articles on HIV/AIDS prevention could contain essential information and data as background, including information on where to seek assistance such as testing and counseling.

- Humanizing the statistics and demystifying the epidemic:
  As in most areas of specialized writing, media practitioners have to develop methods of putting a picture to the statistics that are being generated from epidemiological and medical research on HIV/AIDS. The bland presentation of the figures most of the time means nothing to the audience and particularly those who do not perceive themselves to be at risk. A case in point is that of a recent news article, which reported that out of 53 deaths in one parastatal organization, 40 have been from AIDS (The Daily Nation, June 9, 1999). A follow-up could be made on this kind of story by investigating how many organizations have similar experiences and placing this in holistic context to include the social, economic and cultural dimensions.

  For instance, discussing the global figure of those infected as more than 33 million people may be better imagined as the population of a country, or a city or a section of the population such as adolescents. This helps the audience to have a better picture of the magnitude and urgency of the situation and possibly to begin ruminat-
ting over what effect such statistics may have. This is an approach that is being adopted in the training of writers in areas such as economics and environment, where the prevalence of statistical data has often appeared to be bland, dull and technical to journalists.

- **Presenting the opinion of the public on the disease:**
Since the discovery of the disease, most governments have attempted to put in place programmes that will contribute to its prevention and effective management. These programmes have been established under the auspices of national AIDS and STD’s control bodies and there has been tremendous work aimed at improving the capacities of hospitals and clinics in testing for the virus and in intensifying and developing better educational projects.

The media can promote these efforts by frequently following up on cases of HIV/AIDS and on the experiences that individuals and communities have had in the programmes. As an example, there have been complaints raised in Kenya on the lack of counseling for those about to undergo testing and for those who are found to be HIV positive. Such sentiments can be discouraging to others who may understand the need to be tested but who then use this to justify their avoiding the test.

Questions such as the levels of public involvement in the formulation of public policies and the methods of implementation need to be investigated as it is now clear that the beautiful policies that African governments have developed often have only a cosmetic value. The need to translate these policies into local languages and to simplify the “officialese” is an issue that the media can be involved in as this holds the policies up for public scrutiny. Such scrutiny can assist policy-makers to understand the impact or effects of their policies as well as the strengths and gaps in the perception of the public.

- **Educating society on the need for community-based structures in HIV/AIDS prevention and management:**
Most governments in East and Southern Africa have medical care systems that have been inadequate in the care of HIV/AIDS. The medical communities have grappled for long with the control of diseases such as malaria and with the reduction of child mortality rates through immunization. The escalating figures on HIV/AIDS necessitates that other options be identified, developed and sustained since the health care systems are currently grossly inadequate for the care of HIV/AIDS patients.

The community-based approach has been viewed as a solid and sustainable method of many development problems and issues. Such an approach, in this particular case, would seek to empower communities to develop home-based care of HIV/AIDS patients. This approach is useful in that it brings the issue of HIV/AIDS closer and it seeks to equip the community with the requisite skills while challenging its members to take the responsibility of the care of patients. In addition, the patients convalesce in an environment in which they are familiar and where there is some comfort.

The media need to lobby for such approaches and to challenge societies to tackle HIV/AIDS head-on, rather than let people bury their heads in the sand. There is still a semblance of stigma attached to HIV/AIDS, and the media should be aggressive in supporting efforts to remove this stigma and in developing in the public the attitude that this is a disease like other disease.

- **Presenting a holistic picture of HIV/AIDS:**
Most of the information on HIV/AIDS in the media is statistical and related to public statements on the trends. This is based on the current media structures and news values that tend to give prominence to public personalities. As such, most of the stories are government pronouncements on
HIV/AIDS which are primarily warnings and information on the extent of the spread.

It is on rare occasions that the mass media critically analyze the impact of HIV/AIDS on the socio-economic front. This contributes to the invisibility of the disease and the public lethargy in attacking the problem urgently. Society should comprehend well the consequences of ignoring the impact of the epidemic, such as the threats to the socio-economic fabric and structures. The media are well placed to undertake such a task, but this needs to be a deliberate policy on the part of media organizations.

- **Advocating for accountability and responsibility in the HIV/AIDS prevention and management sector:**

The desperation on the part of HIV/AIDS patients in seeking treatment for their infection has given rise to a sharp increase in “medical experts” who claim to have a cure for the disease. These patients are vulnerable to unscrupulous experts who are out to gain from their plight. Some of the medical associations like the Kenya Medical Association (KMA) have been keen cautioning the public on seeking treatment that has not stood the test of rigorous examination by the medical and scientific fraternity.

The vulnerability displayed by HIV/AIDS patients indicates that a gap exists in the provision of treatment that society can trust or depend on. Thus, it is easy for some to exploit this gap. This raises the issue of the lopsided nature of treatment at the global level: those who are infected with the HIV/AIDS virus in the developed world have some hope and they live longer because of the new combination therapies. Those in the developing world have little hope because of the expense and inaccessibility of such treatment.

This highlights the issue of public health care systems and their management as well as the need to encourage local scientists to develop treatment that can be available to local populations. At the global level, the issue of lobbying for support for the provision of new combination therapies should be pursued in the media and sustained. When some “experts” announce that they have discovered new treatment, they should be held up to public scrutiny and their claims verified thoroughly. The media should analyze critically such trends and also bring into the public arena for public debate such issues.

For instance, it would be interesting to investigate whether pharmaceutical companies, which import combination therapy treatment, can be exempt from taxation by governments to make them cheaper for the public.

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**Experiences on media and HIV/AIDS prevention and management**

Various organizations have established programmes and projects on media and HIV/AIDS prevention and management; these experiences differ in terms of results and findings. In the Democratic Republic of Congo, for example, Population Services International (PSI) initiated a project in collaboration with the National AIDS programme and funded by USAID Kinshasa (PSI, 1992). The project targeted the youth aged 12-19 and prospective parents who were 20 to 30 years of age. The project was based on the country’s rich tradition in music and drama and sought to communicate the message of safer sexual practices. Thus, media materials were developed and messages conveyed through broadcast announcements, music, video, talk shows, interviews and contests.

Evaluation of the project indicated that positive attitudes evolved and that there was intention to practice safer sexual behaviour. There was evidence of increased awareness regarding asymptomatic carriers; increased acceptance and reported practice of abstinence and mutual fidelity and increased knowledge and accepted use of condoms for AIDS prevention.

In Tanzania, the World Bank initiated a project which focused on radio spots. The project included posters/calendars, cartoons, newspaper flashes, and counseling. Similar use of mass
media is evident in Malawi and Zambia with an emphasis on radio spots and use of radio programmes. In Kenya, a project was initiated based on a 1992 needs assessment by the National Council for Population and Development (NCPD) and the Family Planning Association of Kenya (FPAK) with support from John Hopkins University Population Communication Services (JHU/PCS), which targeted adolescents. The project, which was funded by USAID, featured media activities such as radio programmes, print media and a letter answering service. The radio programmes included a talk and the provision of a forum for the youth to question HIV/AIDS experts on the programme. The programme was designed as a variety show with the requisite musical background (Nduati & Kiai, 1996).

A media project that originated in Uganda and which has been adopted in Kenya is that of Straight Talk newsletter. This project was launched by the Ministry of Information, Uganda AIDS Commission, the Save Youth from AIDS, and UNICEF. The newsletter, which began in 1993 and which is issued once every month as an insert of The New Vision newspaper, initially laid emphasis on sexuality. This, however, broadened to encompass health and psychological issues (Nduati & Kiai 1996). The mushrooming of youth clubs in Ugandan schools has been attributed to Straight Talk.

Some of the constraints cited in the use of mass media include limited media coverage of radio programmes and structural difficulties in coping with issues raised by adolescents during radio programmes. This is because the programme usually has a particular focus, but the adolescents at times call in on a different subject requiring urgent assistance. Other needs identified have been on the need to use local languages, and for greater collaboration with media houses to ensure greater communication on HIV/AIDS prevention and management issues. In addition, there is a need for the incorporation of greater creativity and diverse structures in programming, and more effective cooperation with stakeholders such as parents, health officials and education officials.

PROPOSED STRATEGIES FOR MORE EFFECTIVE MEDIA EFFORTS ON HIV/AIDS PREVENTION AND MANAGEMENT.

While the media have been faithful in the coverage of issues related to HIV/AIDS prevention and management, deliberate and well designed efforts aimed at promoting better communication through the media have not been adequate. There have been meetings organized in East and Southern Africa aimed at raising media practitioners’ consciousness on the need to cover HIV/AIDS prevention and management issues more intensively and widely. Additional work could focus on the following strategies:

Training media practitioners in the basic concepts of HIV/AIDS

There is no doubt that there are high awareness levels of the need for greater and more effective coverage of HIV/AIDS on the part of media practitioners. This situation is akin to that of high public awareness but minimal behaviour change for most countries in sub-Saharan countries. Seminars and workshops should be re-designed to ensure that the media adopt a pro-active approach in the coverage of HIV/AIDS prevention and management issues.

A method that has been used recently by the Kenyan Chapter of the African Council for Communication Education has been to ground interested journalists in the basic concepts of specialized subjects. This has been applied in relation to the environment and there is evidence of greater interest among the journalists. This method is beneficial in that it demystifies concepts that may appear to be difficult and technical to the journalists, thus equipping them with confidence and creating an interest for further research and reading.

Despite this interest, constraints exist in the use of this approach. A much ignored but significant category of the media are the editors. In the meetings with journalists, they have expressed their frustration at following up on specialized issues which are “spiked” by edi-
tors. Editors should be sensitized on the need to have more effective coverage of HIV/AIDS prevention and management issues. Innovative approaches are required, however, because logistically, it is difficult to get editors who are often media managers at one sitting or meeting.

**Advocacy and lobbying for regular allocation of space in the mass media**
This strategy has been well applied by human rights and democratization activists. In the Kenyan press, for instance, it is now common to have specialized writing on human rights and political issues, sometimes by experts from these areas. This trend has been realized by lobbying for space for the coverage of such issues, but more importantly by commitment on the part of these organizations in ensuring that the space is used regularly. Most editors are willing to allocate space for columns, but they require full commitment that the space will be used.

Some of the columnists have taken up the writing as a part of their crusade, while others have been supported by donor agencies. Organizations involved in HIV/AIDS prevention and management can develop a pool of writers or a syndicate where there is shared responsibility for the columns.

**Publication of reference materials for the media**
Media practitioners often complain that there is little reference material developed for them as an audience on specialized subjects such as HIV/AIDS prevention and management. The structural constraints within media houses are an obstacle for journalists who would like to specialize in technical areas as it is a laborious effort identifying and accessing relevant and essential background material. One effective strategy would be to develop materials which simplify basic concepts on HIV/AIDS prevention and management, such as the epidemiology, socio-economic impact, and trends in scientific, medical and social science research in the area. Journalists then have a text, which they can refer to as a quick reference. The Zambian Institute of Mass Communication (ZAMCOM) has developed a resource book for the media on HIV/AIDS, and there are plans to replicate this effort in other countries in the East and Southern region.

Another required publication would be an inventory of organizations and experts involved in this area in each of the countries in East and Southern Africa. This is useful as a publication that can be easily accessible to all journalists who require specific information and credible sources whom they can interview and seek opinion or clarification from.

**Establishment of a network on media and HIV/AIDS prevention and management**
Networking as a strategy has fast gained credibility in most development work in East and Southern Africa. The idea has proved to be effective in that there is shared information on emerging trends, constraints and challenges and on strategies to deal with these. Such a network in this case would seek to sustain contacts between the media and experts working on HIV/AIDS prevention and management.

Contact between the different groups of specialists may serve to reduce or remove suspicion of each other and to create understanding of the working environment in which each works. The media have often been accused of being casual; most of these accusations are based on a lack of understanding of how the media work and the constraints they face. Similarly there has been the public perception that scientists are locked up in their lofty and ivory towers, isolated from society, “spewing” technical jargon that cannot be understood by the ordinary citizen.

Networking would help the media to put a face to these scientists and to explain to the public through coverage, the emerging trends on HIV/AIDS prevention and information. An additional benefit of this would be the development and maintenance of sources for journalists for their articles and programmes on HIV/AIDS prevention and management.
REFERENCES


