A CONTENT ANALYSIS
OF THE NEW YORK TIMES' COVERAGE OF HIV/AIDS IN AFRICA
FROM JANUARY 2000 TO DECEMBER 2007

A THESIS
SUBMITTED TO THE GRADUATE SCHOOL
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE
MASTER OF ARTS
BY
BARBARA A. MAISON
CHAIR- DR. MARK N. POPOVICH

BALL STATE UNIVERSITY
MUNCIE, INDIANA
May 2009
ACKNOWLEDGEMENTS

I would like to thank my committee chair Dr. Mark Popovich; and my committee members, Dr. Dustin Supa and Professor Sheryl Swingley and for their cooperation and guidance throughout this process.

Thanks be to God and my family for all the support.
FIGURES

Figure

1   Bar chart of volume of articles per year   36
TABLES

Table


2. Cross-Tabulation of the Theme within the Year in percentage (2000-2007) 31


4. Cross-Tabulation of the Theme within the tone in percentage (2000-2007) 34

CHAPTER I
INTRODUCTION

Most of the time, news events in other parts of the world are “altogether too big, too complex, and too fleeting for direct acquaintance” (Lippmann 1922, 16). Scholars have constantly argued that public perception of issues are often guided by news media reports, and that it is not the quantity of information about an event that increases its salience, but media characterization of the event (Jasperson et. al. 1998). According to Shoemaker and Reese (1991), the media are not just channels. Media impose their own organizational, institutional, and ideological logic on information, shaping it into a product that offers a specific view of social reality.

For the past few decades, HIV/AIDS has been one of the most salient public health issues in the world. The year 2005 marked the 25th anniversary of the outbreak of HIV/AIDS disease in the United States. Approximately 60 million people are currently infected with HIV/AIDS worldwide, with
95 percent of the global population living with HIV in the developing world, including sub-Saharan Africa, South and Southeast Asia, and now Eastern Europe (www.unaids.org).

HIV/AIDS is one of the leading causes of death in Africa and the fourth leading cause of death worldwide. Five million people are infected every year, and about 25 million live in sub-Saharan Africa (U.S. AIDS 1997 report). As noted by the Global Trends 2015 report, “projections for sub-Saharan Africa are even direr than those in Global Trends 2010,” largely because of the spread of AIDS. In South Africa, for example, the HIV/AIDS pandemic is predicted to depress the gross national product by 17 percent over the next decade, a dangerous burden for a fragile democracy (Central Intelligence Agency 2000).

The growth of the disease is becoming even more difficult and expensive to treat, as the global economy and interdependence among nations facilitates the spread of the disease. In an increasingly interdependent world, reducing the threat of infectious diseases, such as HIV/AIDS, is important to every nation’s security and prosperity.

In response to the rapid growth of the epidemic, developed countries and humanitarian organizations all over
the world have been involved in addressing the HIV/AIDS epidemic in underdeveloped countries. The continued spread of the HIV epidemic and the new availability of lifesaving antiretroviral drugs have triggered universal response from governments, international organizations, pharmaceutical companies, religious organizations, and individuals. For instance, the Clinton Foundation HIV/AIDS Initiative founded in 2002 seeks to increase the number of people with HIV/AIDS receiving high-quality health care and treatment. In addition to the Clinton Foundation’s effort, the World Health Organization’s “3 by 5” program is aimed at providing three million AIDS patients with antiretroviral treatment (ART) by the end of 2005. The U.S. Presidents’ Emergency Plan for AIDS Relief (PEPFAR) initiated in 2003 is a five-year, $15 billion project aimed at treating two million infected persons with ART, preventing seven million new infections and providing care and support for ten million persons infected with or affected by HIV/AIDS, including orphans and vulnerable children (www.aei.org).

The importance and interpretation people attach to potential items on the public agenda is strongly influenced by how the media present news stories (Chyi & McCombs, 2004). The media in an attempt to simplify complex news and
having many ways to deliver a message are forced to select certain words, phrases and pieces of information at the expense of others. As such, all messages are packaged, or framed, in particular ways by producers of media content (Entman 2004). Frames that emerge as dominant over time carry significant implications for public attitude, cultural presentations and policy outcomes (Entman 1991).

Media frames used in the coverage of HIV/AIDS influence what the public think and how they respond to the disease. For example, in the early days of the HIV/AIDS disease, media coverage was laden with metaphorical overtones—“the gay plague” (Johnson 2002). Research also showed that the early 1980s saw the initial coverage of HIV/AIDS characterized by fear, denial, and ignorance. HIV/AIDS was framed in terms of the familiar boundary between the “healthy us” and the “diseased other” by focusing on identifying “risk groups” rather than “risk behaviors” (Gilman 1988). Normalization and the quest for a scientific cure also emerged as the main frames in U.S. media once the HIV/AIDS virus was perceived as universal (McAllister 1992; Watts 1993).

In recent times, little attention has been given to research into media representations of the AIDS disease in
Africa. What has been observed is a decline of AIDS coverage in the elite press. (Kaiser Family Foundation 2004). Interpretations of this disease can vary across different cultures as a result of the complex characteristics of the disease.

Given the complex characteristics of the HIV/AIDS disease, interpretations of this disease can vary across cultures and might present a global-local paradox that requires complex and interdisciplinary approaches to analyze.

Based on the theoretical concepts of framing, this study will examine The New York Times’ coverage of HIV/AIDS in Africa and how The New York Times frames HIV/AIDS in Africa. A content analysis of 243 articles (2388 paragraphs) in The New York Times between January 2000 and December 2007 will be analyzed to examine the dominant frames used, the tone and volume of coverage on the issue. Prominent frames, tone of coverage, and volume of news coverage will be examined. A content analysis will be used because it is described as an “observational research method used to systematically evaluate the symbolic content of all forms of recorded communications” (Kolbe and Burnette 1991). The New York Times is selected to represent
the publication most likely to be circulated among policymakers and the public on a nationwide basis, and the concept of framing will be used to provide theoretical guidance.

HIV/AIDS is a complex incident linked with biomedical, political, economic, socio-cultural, religious, and ethical issues that raise innumerable questions in the face of limited answers. This study examines the media frames used by The New York Times to cover HIV/AIDS stories on Africa and the implications of these frames.
CHAPTER II
REVIEW OF LITERATURE

There is a growing acknowledgement that news plays an important role in the interpretation of epidemics and shaping public opinion. According to Nelkin’s research (1987, p.2), most people understand unobtrusive issues that involve complex scientific dimensions “less through direct experience or past education than through the filter of journalistic language and imagery.”

The literature review builds a theoretical perspective for this study through the exploration of the trends in international news coverage, HIV/AIDS coverage, and the framing theory – the underlying theoretical framework for this research.

Trends in International News Coverage

Over the past three decades, studies have shown a decline in the amount of foreign news coverage in major
U.S. daily newspapers. Furthermore, studies by Wilhoit and Weaver (1983) show that foreign news is incomplete, biased, and largely negative in nature when the focus is on developing countries.

A variety of surveys reveal that foreign news coverage in the U.S. has indeed shrunk since the end of the Cold War. In 1998, statistics show that only two percent of total newspaper coverage focused on international news, a drop from ten percent in 1983 (Shaw 2001, 27). Also the amount of time that the network TV devotes to international news shrunk from 45 percent of total coverage in the 1970s to 13.5 percent in 1995 (a decline of more than 70 percent) (Lang and Lang 2000; Hoge 1997; Moisey 1996, 9). The cover of *Time* magazine, which was devoted to foreign affairs, decreased from 11 in 1987 to zero in 1997, and foreign reports in *Time* between 1985 and 1995 declined from 24 percent to 12 percent (Thussu and Freedman 2003). According to Seib (2004), *Time* magazine reduced its foreign correspondence from 33 in 1989 to 24 in 2001, and ABC News decreased its foreign bureaus from 17 to seven in the last 15 years. Even CNN—the network created to cover all the news, all the time with a foreign press corps that grew
steadily from its founding in 1980--began to shift away from hard news.

Media analyst Andrew Tyndall reports that in 1989 the ABC, CBS and NBC evening newscasts presented 4,032 minutes of datelined coverage from other countries. Foreign coverage had dropped to as low as 1,382 minutes in 2000. With the September 11 attack on the United States and the war in Afghanistan, the figure rose to 2,103 minutes in 2002, which is still only slightly more than half the total of 1989 (Seib 2004).

Geographical distribution of American news correspondents shows that 31 percent of the correspondents are stationed in Europe, 23 percent in Latin America, 18 percent in Asia, 12 percent in the Middle East, and 8 percent in Africa (Hawk, 1992). According to Rotberg and Weiss (1996), in a series of meetings in 1993 examining the effects of media coverage on humanitarian relief efforts, senior officials from the American Red Cross, the BBC, CNN, the International Broadcasting Trust and a few other organizations examined the impact of coverage of humanitarian relief. According to the project’s final report, “Much of the public throughout the industrialized world share an image of developing countries that is
incomplete and inaccurate. Because western audiences often lack knowledge of developing countries, reports of exceptional events such as famines or floods may foster misimpressions of the developing world."

Westerstahl and Johansson (1994) also showed, from a large-scale cross-national study of foreign news selection that the two attributes of news—the importance of the event country and the proximity to the home media—account for a large amount of selection. William Hachten wrote “Americans typically feel secure in their isolationist environment and since world events tend to seem far away, little alarm is caused when a government is overthrown in Africa or a natural disaster occurs in Asia.” He notes further “the rapid increase in foreign oil prices, the Soviet excursion into Afghanistan and the Iranian hostage crises, however, greatly increased the average Americans’ interest in foreign affairs (Hachten 1981, 5,1), perhaps because the events had direct impact on affairs in the U.S.” He added that the United States’ heavy use of oil, made turmoil in Iran a major story, which follows that Western news media tend to report foreign news from the viewpoint of their countries’ foreign policy concerns. As
one America editor put it, “Who wants to read about Zaire if there is nothing going on there” (Hachten 1981, 87, 94)?

**Trends in HIV/AIDS Coverage**

Coverage in the elite press has shaped public understanding of AIDS, which in turn has influenced national policy debates and resource allocations (Tassew 1995). Sub-Saharan Africa is more heavily affected by HIV/AIDS than any other region of the world. In just the past year, the AIDS epidemic in Africa has claimed the lives of an estimated 1.6 million people, and more than eleven million children have been orphaned by AIDS. It is estimated that approximately 22.5 million people will be living with HIV at the end of 2007. (UNAIDS, 2007 AIDS Epidemic Update)

Many studies, including Princeton Survey Research Associates; Rogers, Dearing, & Chang 1991; and Traquina 1996 have explored how the U.S. news media and those of some Western European countries covered AIDS.

As noted by Rogers, Dearing, & Chang (1991), the initial phases of coverage in the early 1980s were characterized by confusion, denial and an uncertainty
about how to handle the unknown. The Princeton research survey on media coverage of HIV/AIDS over the 22-year time period from the first news reports in 1981 through December 2002, shows that media coverage of the AIDS epidemic was mainly U.S. focused. Throughout the 22-year period, 94 percent of all stories had a U.S. dateline and 86 percent presented a U.S. only perspective. However, a comprehensive examination by the Kaiser Family Foundation in conjunction with the Princeton Survey Research Associates shows that beginning in the late 1990s there was a significant increase in news coverage of the HIV/AIDS diseases globally than in the U.S.

According to the article, “Between 1997 and 2002, the number of stories in the selected media outlets presenting at least some global perspective increased 118 percent from 177 to 386, while the number of stories with a U.S. only perspective decreased 57 percent from 1227 to 527.” By 2001 and 2002, more than one in five HIV/AIDS news stories had a non-U.S. dateline, and more than 40 percent presented at least some global perspective.

Media frames used in the coverage of HIV/AIDS have also influenced what the public think and how they respond to the disease. For instance, in a study of HIV/AIDS
coverage in national U.S. magazines between 1982 and 1984, Albert (1986) found that readers were distant from the “deviant” and the diseased and that “it was the deviant character of the victims rather than the problematic aspects of the illness itself that characterized media treatment” (p. 135).

The message that HIV can affect anybody and everybody gained more public acceptance after Rock Hudson, a Hollywood star, contracted the disease. A content analysis conducted by the Princeton Survey Research Associates 1996 shows a distinct increase in the coverage of HIV/AIDS in the U.S. media and globally in the latter half of the 1980s after this event.

The acceptance of HIV/AIDS can be attributed partially to the dramatic rise in coverage during this phase (Netter 1992; Rogers Dearing & Chang 1991). Once the HIV/AIDS virus was perceived as universal, normalization and the quest for a scientific cure emerged as the main frames in U.S. media (McAllister 1992; Watts 1993).

In the 1990s, AIDS became an ongoing and routine story for the mainstream U.S. media. The moral panic faded, and the media began to project HIV/AIDS as a global phenomenon. Stories like Magic Johnsons’ infection, anxieties among
heterosexuals, biomedical discovery, and the AIDS devastation in Africa triggered the media.

Few studies, however, empirically investigate how AIDS in Africa is covered or represented in U.S. media. Research shows that public attention has waned, even when objective conditions related to AIDS have not changed. Public dialogue and policymaking addressing the Sub-Saharan AIDS epidemic have been limited. Media coverage has both reflected and led to “compassion fatigue,” the emotional burnout response to social problems that receive extensive media attention (Kinnick et. al. 1996).

According to one poll, the public believes the U.S. media has underreported the sub-Saharan epidemic. More than half said they had personally seen little or nothing about the AIDS crisis there. Eighteen percent could correctly estimate the total number dead or dying of AIDS in the region. Only four percent thought the U.S. should take the lead in dealing with the epidemic (Hirsh et. al. 2000, 29).

Although many studies have examined the U.S. coverage of AIDS in the U.S., few have examined coverage of AIDS in sub-Saharan Africa. Triggering events for HIV/AIDS coverage in Africa have largely been limited to wars and medical discoveries. Reporting about major events rather than
issues appears to have been a catalyst for America public concern and policymaking about the sub-Saharan AIDS crises. Sub-Saharan AIDS crises coverage in the U.S. newsweekly magazine has emphasized disaster, hopelessness, the origin of AIDS, its stigma and outside intervention (Swain 2003).

In recent times, little attention has been given to research into media representations of the AIDS disease in Africa. What has been observed is a decline of AIDS coverage in the elite press. Research shows that the media put more emphasis on the emerging story of AIDS in Africa, the global epidemic in general, and debates over prescription drug prices and access, and the Global Fund to Fight AIDS, tuberculosis and malaria (Kaiser Family Foundation 2004).

Framing

Given the complex characteristics of the HIV/AIDS disease, interpretations of this disease can vary across cultures and might present a global-local paradox that requires complex and interdisciplinary approaches to analyze. The concept of framing offers a way to describe
the structure and power of words. Framing represents the manner in which newsmakers package and disseminate issues and events, thereby providing the public with familiar frames of reference for the purposes of interpretation and understanding (Entman 1993; Gitlin 1980; Tuchman 1978). Analysis of frames illuminates the precise way in which influence over a human consciousness is exerted by the transfer (or communication) of information from one location—such as a speech, utterance, news report, or novel—to that consciousness (Entman, 1993).

Frames that emerge as dominant over time carry significant implications for public attitude, cultural presentations and policy outcomes (Entman 1991).

For instance, mass media were initially slow to report on AIDS probably because of its prevalence among already stigmatized groups. Media frames of “stigmatization” and the politics of AIDS stigma repeatedly hindered society’s response to the epidemic (Albert, 1986). Extensive resources that might otherwise have gone to the prevention and spread of the disease instead were needed to respond to coercive AIDS legislations.

Much is written about the ways news narratives are framed for the public by the mass media. The media frame,
package, and present messages in ways that define the problems and issues that provides coherence and meaning to the messages. Gamson and Modigliani (1987) define framing as “the central organizing idea or story line that provides meaning to an unfolding strip of events” (43).

Framing is so broad a concept that the framing metaphor has been conceptualized in various ways when being used to study media contents. Goffman (1974), when first introducing the framing approach, described frames as “strips” or “slices” cut from the stream of ongoing activity” (p. 10). Gitlin’s (1980) definition of framing not only emphasizes the function of presentation—“selection, emphasis, and exclusion” (p. 7), but also implies the function of interpretation—“persistent patterns of cognition, interpretation, and presentation... symbol handlers routinely organize discourse, whether verbal or visual” (p. 7). Gitlin was among the first to deal with the issue, suggesting that “media frames, largely unspoken and unacknowledged, organize the world both for the journalist, who report it, and in some important degree, for us who rely on their reports” (Gitlin 1980, 7).

According to Iyengar (1991), frames can be episodic and thematic. Episodic frames make references to isolated
news events without providing broader context—“only a passing parade of specific events” (p. 140). Thematic frames, however, provide broader societal context to issues and events and, therefore, present more complete pictures and collective evidence. Episodic frames tend to put responsibility on specific groups or individuals, whereas thematic frames attribute responsibility to societal/political forces. He notes that the way in which news about social problems was framed affected whether audiences were more or less likely to blame the victims for their troubles.

Framing has sometimes been integrated with agenda-setting theory by treating framing as an extension of agenda-setting, where a restricted number of thematically related attributes is selected for inclusion in the media agenda when a particular object is discussed (McCombs & Evatt 1995; McCombs & Ghadem 2001). However, framing is based on the theoretical premise of attribution, whereas agenda-setting is concerned with the salience of issues. In other words, framing influences how audiences think about issues, not by making aspects of the issue more salient, but by invoking interpretive schemas that influence the interpretation of incoming information.
Therefore, framing analysis has been expected to be useful to detect the persistent patterns of cognition, interpretation, and presentation, and of selection, emphasis and exclusion by which symbol-handlers routinely organize discourse. For instance, Gilman (1988) found that disease coverage already has historically delineated frames in place—those of victimization, deviance and abnormality, blame attribution, and the power of modern medicine to ultimately develop a miracle cure. Such contexts are built narratively over time, and there is always an either-or choice involved in frame construction. It is very rare to find frames radically divergent from established frames. Watts's (1993) study of the U.S. print and broadcast media framing of two epidemics—AIDS and polio, revealed that the historically dominant frame did not show much change.

Bonacci (1992), one of the few scholars studying AIDS coverage in Asian media, has found that the coverage of AIDS in Asian countries, including China, has been infused with consistent themes, including denial and blame attribution. Asian media also consistently emphasize "otherization," claiming that AIDS was imported into their countries through contact with Westerners.
Additional research also shows that the early 1980s saw the initial coverage of HIV/AIDS characterized by fear, denial, and ignorance. HIV/AIDS was framed in terms of the familiar boundary between the “healthy us” and the “diseased other” by focusing on identifying “risk groups” rather than “risk behaviors” (Gilman 1988).

Blame attribution and the lack of political support from the government also marked media coverage during this period. The African press retaliated against the Western media’s implications that the virus originated in that continent. France and Germany pointed fingers at the United States. The United States looked hard at Haiti. The former Soviet Union suggested that the virus had been created by American intelligence units as a means for biological warfare (Gilman 1988).

In another research effort to analyze HIV/AIDS coverage and examine how the mainstream media in a given society frames HIV/AIDS in the 21st century, JingJing (2006) found that a significant difference existed in news frames of HIV/AIDS coverage in the U.S and China between 2001 and 2004. The research, which analyzed The New York Times and the China Daily for prominent frames, representations of world regions, and overall news volumes
found that a significant difference existed in news frames of HIV/AIDS coverage between the two papers. JingJing (2006) noted that human disaster themes and medical-scientific issues gained ground in *The New York Times* while a public health frame was dominant in *The China Daily*.

Based on the review of literature, this study will examine the following hypotheses and research question:

**H1:** *The human disaster frame will be dominant in *The New York Times*’ coverage of HIV/AIDS in Africa.*

Based on the trend of coverage on HIV/AIDS in the U.S. and U.S. media coverage of foreign news as discussed in the literature review, it is expected that *The New York Times*’ coverage of HIV/AIDS in Africa will be more on the transmission and the prevalence of the disease. Results will show a dominant frame of depiction of HIV/AIDS as a threat or crisis on the continent, thus supporting H1.

**H2:** *The New York Times*’ coverage of HIV/AIDS in Africa will contain more negative frames than positive frames?

Triggering events for HIV/AIDS coverage in Africa have largely been limited to wars and medical discoveries. In addition, trends in the coverage of HIV/AIDS in sub-Saharan
Africa indicate that emphasis is often on disaster, hopelessness, its stigma and outside intervention. (Swain 2003) Negative images that accompany news stories (Bardhan 1996) as well as coverage of HIV/AIDS in U.S media indicates that coverage was sometimes characterized by confusion, denial and an uncertainty about how to handle the unknown. (Rogers, Dearing, & Chang 1991) It is assumed that coverage of HIV/AIDS in Africa will follow this trend and will have more negative tones of coverage than positive. Results are expected to support H2.

RQ 1: What is the trend in news volume on the coverage of HIV/AIDS in Africa within the seven years in The New York Times?

Existing research on the coverage and decline of foreign news in U.S. media, as well as the presence or absence of a breaking news story lend support to the research question. (Shaw 2001, Princeton Survey research Associates 1996)

The trend in the volume of news through the seven years is not expected to be linear but is expected to increase and decrease based on media fatigue and occurring events such as the World AIDS day and the introduction of
support initiatives such as the Presidents Plan For AIDS Relief. (PEPFAR)

The result of this study is to build on research on how HIV/AIDS in Africa is covered. This period (January 2000-December 2007) was chosen because several empirical studies on AIDS in the 1980s and 1990s have been conducted; however, few studies examine the 2000s. Another reason for this period is to examine the trend and volume of news coverage and how the media sustain the news on HIV/AIDS in Africa.

The print media was selected because of the issue being explored. Prior research (Nelkin 1991) indicates that complex and ambiguous issues (e.g., HIV/AIDS) was covered more in-depth by the print media than broadcast media. In addition, the Princeton survey research associates’ (1996) study of HIV/AIDS coverage by the U.S. media found that the print media accorded more analytical coverage when compared to broadcast offerings. The New York Times was thus elected for the study. It has a large circulation (more than 1.1 million) and a reputation for exemplary international news coverage (Gardetto 1997). It is also considered a publication most likely to be circulated among policymakers and the public on a nationwide basis.
CHAPTER III

METHODOLOGY

A content analysis was used to identify the dominant media frames *The New York Times* used in the coverage of HIV/AIDS in Africa. All articles on HIV/AIDS in Africa that appeared in *The New York Times* from January 1, 2000, through December 31, 2007, (both days included) were analyzed.

The unit of analysis was the paragraphs in the news articles. All articles that contained the keywords “acquired immune deficiency syndrome” or “AIDS” or “HIV” in full text in *The New York Times* over the seven-year period was downloaded from the online LexisNexis news database for *The New York Times*. As the search with keyword “AIDS” generated many unrelated stories on financial aid, hearing aids, etc., all articles were examined and irrelevant stories excluded. Briefings, obituaries and letters to the editor were excluded. The final sample was a total of 243 news articles (2388 paragraphs) from *The New York Times*. 
Coding categories were developed based on the topics and themes identified in the news articles. Two previous coding systems, i.e., the principal news topic coders conducted by the Princeton Survey Research Associates (1996) on HIV/AIDS coverage in the U.S. news media, and the theme coders of HIV/AIDS story developed by Bardhan (2001), guided the formation of some of the categories.

For this study, the categories included:

1. **Medical-scientific issues**--Stories related to medical treatment, new drugs, scientific research, development and global cooperation in dealing with AIDS in Africa;

2. **Public health issues**--Stories aiming at enforcing education of the public for prevention and self-protection from the virus (e.g., prevention/protection) in Africa;

3. **Political-Legal issues**--Stories on new regulations and laws regarding the epidemic or patients, AIDS-related legal cases, and events with political or diplomatic concerns in a national or global context on Africa.

4. **Economic issues**--Stories involving socioeconomic issues, fundraising and charity issues.

5. **Social issues**--Cultural and religious issues, human rights and ethics issues.
6. Human disaster--Stories about transmission and prevalence of HIV in Africa, deaths from the virus, or depictions of HIV/AIDS as a crisis or threat.

Each article was coded for a specific category. Paragraphs in each article were coded as positive, negative or neutral to determine if each paragraph generated a “positive,” “negative,” or “neutral” image of the disease in Africa.

Paragraphs were coded as positive when they contained positive words, sentences or connotations about HIV/AIDS in Africa. For example a paragraph reading, “Contradicting long-held prejudices that have clouded the campaign to bring AIDS drugs to millions of people in Africa, evidence is emerging that AIDS patients there are better at following their pill regimens than Americans are.” (The New York Times, 2003)

Paragraphs were coded as negative if they contained negative connotations. For example, “In Nigeria, Africa's most populous country, an ambitious, widely praised plan to get generic drugs to 15,000 citizens has been hampered by bureaucracy, corruption and a scarcity of laboratories.” (The New York Times, 2003)
Paragraphs were coded neutral if they carried neither positive nor negative elements or did not relate directly to HIV/AIDS in Africa. For example, “The disease claims new victims in all parts of the world, including industrial countries, although the availability of therapy is slowing progression from viral infection to AIDS and death, the agency said.” (New York Times, 2000)

The chi-square formula was applied to test the research hypotheses. In order to get a more accurate and legitimate comparison of the coded articles, the total outcomes of positive, negative and neutral paragraphs were converted into percentages.

Two coders (including the author) coded the sample. The primary coder (author) coded the entire, sample and the secondary coder independently reviewed and coded a random subset of 10 percent of the sample. Agreement between the two coders was checked to minimize error and increase inter-coder reliability. The inter-coder reliability coefficient was .78 indicating satisfactory levels of agreement reached by two coders. The level of significance selected was .05.
A total number of 2388 paragraphs were coded for analysis. Paragraphs coded were from January 2000 through December 2007. Each paragraph was coded for one of the six dominant themes or frames. The tone of each paragraph was also coded. Both the percentage results and chi-square results obtained by running the collected data in SPSS were used to determine if the two hypotheses were supported.

**H1: The human disaster frame will be dominant in The New York Times’ coverage of HIV/AIDS in Africa.**

To test the first hypothesis, a cross tabulation and chi-square test was run to identify the dominant frames used by The New York Times in covering HIV/AIDS in Africa. The results indicated that the human disaster frame was the most dominant frame used in the coverage of HIV/AIDS in Africa.
Table 1 shows the breakdown of the overall emphasis given to each theme by The New York Times. On the whole, the results from a seven-year period sample lend statistically significant support to the differences (Pearson Chi-Square = 267.2; p<.001) in news frames in The New York Times.


<table>
<thead>
<tr>
<th>Frames</th>
<th>Frequency</th>
<th>X²</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Scientific</td>
<td>541</td>
<td>51.4</td>
<td>22.8</td>
</tr>
<tr>
<td>Public Health</td>
<td>213</td>
<td>86.9</td>
<td>8.9</td>
</tr>
<tr>
<td>Political, Legal</td>
<td>426</td>
<td>2.0</td>
<td>17.8</td>
</tr>
<tr>
<td>Business/Economic</td>
<td>314</td>
<td>17.7</td>
<td>13.1</td>
</tr>
<tr>
<td>Social/Religious</td>
<td>308</td>
<td>20.4</td>
<td>12.9</td>
</tr>
<tr>
<td>Human Disaster</td>
<td>586</td>
<td>88.8</td>
<td>24.5</td>
</tr>
</tbody>
</table>

X² = 267.2; p < .001

The New York Times' coverage of HIV/AIDS in Africa is more on the transmission of the disease, the effects and prevalence of the disease in Africa, deaths from the virus, and a depiction of HIV/AIDS as a threat or crisis on the continent. The most dominant frame identified in the seven-
year period was the human disaster frame (24.5%). Chi-square results show that the human disaster frame was significantly high, thus supporting H1. This finding is consistent with Bardhan’s (2001) observation that the focus on prevention programs and the globally interrelated nature of HIV/AIDS is minimal.

Table 2 shows that although the human disaster frame was identified as the dominant frame in the entire study, certain years showed a percentage decrease. In 2000, the human disaster frame accounted for 12.3 percent. This decreased to 9.8 in 2001. It increased in 2002 to 14.4 percent and then declined to 11.7 percent in 2003. Coverage on issues in this frame further declined to 10.6 percent in 2004. It increased again to 16.0 percent in 2005 and declined in 2006 and 2007 to 13.8 percent and 6.2 percent respectively.
Table 2: Cross-Tabulation of the Theme and Year

<table>
<thead>
<tr>
<th>Theme</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2000</td>
</tr>
<tr>
<td>Medical Scientific</td>
<td>14.4%</td>
</tr>
<tr>
<td>Public Health</td>
<td>4.1%</td>
</tr>
<tr>
<td>Political/Legal</td>
<td>11.2%</td>
</tr>
<tr>
<td>Business/Economic</td>
<td>6.9%</td>
</tr>
<tr>
<td>Cult./Soc./Rel.</td>
<td>4.6%</td>
</tr>
<tr>
<td>Human disaster</td>
<td>12.3%</td>
</tr>
</tbody>
</table>

*(percentage within year)

The medical scientific frame (22.8%), which addressed issues on medical treatment, development of new drugs and vaccine, scientific research, development and global cooperation in dealing with AIDS in Africa, was also predominant.

In 2000, the medical scientific frame was 14.4 percent. This declined to 8.1 percent in 2001 and 5.7 percent in 2002. It increased in 2003 to 15.9 percent, probably as a result of the PEPFAR initiative on HIV/AIDS in Africa. It declined in 2004 to 9.8 percent and 9.3 percent in 2005. The medical scientific theme increased to 14.9 percent in 2006 and declined to 6.6 percent in 2007.
Public health frame also had a low coverage. This frame includes issues enforcing education of the public for prevention and self-protection from the virus (e.g., prevention/protection) in Africa. It accounted for 4.1 percent in 2000, 4.9 percent in 2001, 3.0 percent in 2002, 2.4 percent in 2003, 2.8 percent in 2004, 5.8 percent in 2005, 7.7 percent in 2006, and 2.5 percent in 2007.

The political frame that identifies issues on new regulations and laws regarding the epidemic or patients, AIDS-related legal cases, and events with political or diplomatic concerns in a national or global context on Africa had average coverage (17.8%). This frame was most dominant in 2001 with 11.6 percent. This was followed by an 11.2 percent decrease in 2002 and a 7.6 percent decrease in 2005. It was 7.4 percent in 2004, 7.2 percent in 2003, 6.3 percent in 2006, 5.1 percent in 2002, and 3.3 percent in 2007.

**H2:** The New York Times’ coverage of HIV/AIDS in Africa will contain more negative frames than positive frames.

Table 3 shows the breakdown of the overall emphasis given to each tone of coverage by The New York Times. The results from a seven-year period sample lend statistically
significant support to the differences (Pearson Chi-Square = 258.4; df = 2; p< .01) in news frames in The New York Times.

### Table 3: Tones used in coverage of HIV/AIDS in Africa in The New York Times 2000-2007

<table>
<thead>
<tr>
<th>Tone</th>
<th>Frequency</th>
<th>X²</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td>551</td>
<td>75.4</td>
<td>23.1</td>
</tr>
<tr>
<td>Negative</td>
<td>678</td>
<td>17.5</td>
<td>28.4</td>
</tr>
<tr>
<td>Neutral</td>
<td>1159</td>
<td>165.5</td>
<td>48.5</td>
</tr>
</tbody>
</table>

X² = 258.4; p < .01; df = 2

To examine the second hypothesis, a cross tab was conducted to test if the coverage of HIV/AIDS in Africa was more negative than positive. Positive tones accounted for 23.1 percent, whereas negative tones accounted for 28.4 percent. Neutral tones were 49.5 percent. Chi-square results showed that negative tonal coverage was more significant than positive tones, thus supporting hypothesis two. The results showed a general hint of negativism in the coverage; however, the overall tonal coverage of HIV/AIDS in Africa by The New York Times was neutral.
Table 4: Crosstab of Theme and Tone of coverage

<table>
<thead>
<tr>
<th>Theme</th>
<th>Tone of Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Positive</td>
</tr>
<tr>
<td>Medical Scientific</td>
<td>39.4%</td>
</tr>
<tr>
<td>Public Health</td>
<td>48.8%</td>
</tr>
<tr>
<td>Political/Legal</td>
<td>15.0%</td>
</tr>
<tr>
<td>Business/Economic</td>
<td>26.8%</td>
</tr>
<tr>
<td>Cultural/Soc./Rel.</td>
<td>10.1%</td>
</tr>
<tr>
<td>Human Disaster</td>
<td>7.5%</td>
</tr>
</tbody>
</table>

A cross-tab of the theme and tone (Table 4) shows that overall, Medical/scientific issues, Business/economic issues, and public health issues were covered positively. Political and legal issues on the other hand were negatively covered as well as cultural, social and religious issues. The human disaster theme—the more dominant theme—had a negative tone of coverage.

The tone of coverage also changed over time depending on the issue at hand. For instance, the year 2003 accounts for the year with the most positive coverage. This might be due to the PEPFAR initiative by President Bush. The initiative proposed a $15 billion project aimed at treating two million infected persons with ART, preventing seven
million new infections and providing care and support for ten million persons infected with or affected by HIV/AIDS, including orphans and vulnerable children in Africa.

**RQ 1: What is the trend in news volume on the coverage of HIV/AIDS in Africa within the seven years in The New York Times?**

The volume of news on HIV/AIDS in Africa from January 2000 through December 2007 has changed overtime. Table 5 shows the trend within the seven years. The table shows that 2000 and 2001 were significantly larger years than normal, while 2002, 2005, and 2007 were significantly lower than what would be average coverage.


<table>
<thead>
<tr>
<th>Year</th>
<th>Frequency</th>
<th>$X^2$</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>434</td>
<td>61.5</td>
<td>18.2</td>
</tr>
<tr>
<td>2001</td>
<td>591</td>
<td>286.6</td>
<td>24.8</td>
</tr>
<tr>
<td>2002</td>
<td>194</td>
<td>36.6</td>
<td>8.1</td>
</tr>
<tr>
<td>2003</td>
<td>322</td>
<td>1.85</td>
<td>13.5</td>
</tr>
<tr>
<td>2004</td>
<td>287</td>
<td>0.44</td>
<td>12.0</td>
</tr>
<tr>
<td>2005</td>
<td>175</td>
<td>51.1</td>
<td>7.3</td>
</tr>
<tr>
<td>2006</td>
<td>323</td>
<td>2.01</td>
<td>13.5</td>
</tr>
<tr>
<td>2007</td>
<td>62</td>
<td>187.4</td>
<td>2.6</td>
</tr>
</tbody>
</table>
The bar chart above in Figure 1 shows that the trend is not linear and straightforward. In 2000, the volume of news on HIV/AIDS in Africa was 18.2 percent. Most of the coverage can be attributed to the attention given to the international AIDS conferences. This increased by 6.6 percent in 2001 to 24.8 percent. The increase was due to the emerging stories of HIV/AIDS in Africa; the debate over drug prices and patents; and the global fund to fight AIDS, tuberculosis and malaria.
Coverage declined from 24.8 percent in 2001 to 8.1 percent in 2002. This was the largest decline in volume (16.7%).

A 5.4 percent increase was noted in 2003 when President Bush in his state of the union address contributed $15 billion to fight AIDS in Africa. This was followed by a further increase in 2004 (1.5%).

A 4.7 percent drop was noted from 2004 to 2005, followed by an increase of 6.2 percent in 2006 and a further drop to 2.6 percent in 2007. The year of maximum coverage was 2001 (24.8%), whereas 2007 was the year of minimum coverage (2.6%). Overall, the volume of coverage declined at a decreasing rate.

The above findings show that the dominant frame used by The New York Times in covering HIV/AIDS in Africa is the human disaster frame. Although overall the tone of coverage on the issue was neutral, the study identified more negative tones than positive tones. Volume of coverage also changed overtime.
CHAPTER V
SUMMARY AND CONCLUSION

This study analyzed The New York Times to explore the dominant news frames, the tones of coverage and the volume of coverage on HIV/AIDS in Africa from January 2000 through December 2007. A total number of 2388 paragraphs from The New York Times were coded to identify the dominant news frames and tone of coverage.

Based on previous coding systems, six frames or categories were created and used to code the paragraphs. A quantitative analysis was used to test the hypotheses and provided answers to the research question.

The results showed that The New York Times used a neutral tone and a dominant human disaster frame to cover stories of HIV/AIDS in Africa. More negative tones of coverage than positive tones of coverage were used and the volume of coverage on the issue also changed overtime.

News stories were widely distributed among different HIV/AIDS topics on Africa. The New York Times devoted 24.5
percent to the transmission and prevalence of the disease in Africa. The stories were more centered on the effects of the epidemic, deaths from the virus, and a depiction of HIV/AIDS as a threat or crisis on the continent. The majority of the stories with human disaster theme depicted Africa as a continent where infection means a virtual certainty of death. Social collapse was commonly personified; for instance, an article described the faces of young widows as those “who trudge the road in somber capes and skirts, traditional mourning garb.” Words like plague, implosion, dissolution, fear, and despair link AIDS to Africa. Under such an overall tone, the other themes related to the public health, social problem, and political issues were inevitably associated with the human disaster frame.

Although the human disaster frame remained the most dominant, the coverage also emphasized medical-scientific issues. Results showed that 22.6 percent was dedicated to new stories about research, including research on new HIV/AIDS drugs, treatments, and vaccines.

The findings in this study are consistent with Gilman’s (1988) study which notes that coverage of diseases have historically delineated frames in place--those of
victimization, deviance and abnormality, blame attribution, and the power of modern medicine to ultimately develop a miracle cure. He notes that such contexts are built narratively over time, and there is always an either-or choice involved in frame construction. It is thus very rare to find frames radically divergent from established frames.

Swain (2005) also notes that the bio-medical frame of AIDS coverage and the medical-scientific issue has remained important since the late 1980s in mainstream U.S. media, thus it has become a prominent frame constructed by the U.S. media.

Despite the severity of the disease in Africa, very few of the news articles were on HIV prevention, HIV education and awareness efforts. Overall, the public health frame was less dominant with 8.9 percent. Results from the study showed that public health issues were declining as compared to news stories on how devastating the disease was in Africa. This suggested that The New York Times’ coverage of HIV/AIDS in Africa dealt more with crisis-reporting than with prevention-reporting.

The importance and interpretation people attach to potential items on the public agenda is strongly influenced by how the media present news stories. (Chyi & McCombs,
2004) The media impose their own organizational, institutional, and ideological logic on information, shaping it into a product that offers a specific view of social reality (Shoemaker and Reese, 1991)

According to Entman (1991), media frames that emerge as dominant over time carry significant implications for public attitude, cultural presentations and policy outcomes.

Based on previous literature, it can be argued and assumed that public policy and opinion will be affected by the dominant human disaster frame used by The New York Times in the coverage of HIV/AIDS in Africa. Although there is no data on actual public opinions on HIV/AIDS in Africa, the influence of framing could be inferred from the literature and indirect data. Watts's (1993) study of the U.S. print and broadcast media framing of two epidemics—AIDS and polio, revealed that the historically dominant frame did not show much change. This supports Watt’s in that the dominant HIV/AIDS human disaster frame did not change much over the seven-year period examined in The New York Times.

Tones of hopelessness with AIDS in Africa carried on through the other themes identified in the study. Results
indicated that the tone of coverage on HIV/AIDS news stories in Africa was more negative than positive. However, the overall tone of coverage on HIV/AIDS in Africa was neutral. Neutral tones account for 48.5 percent of the coded paragraphs. Positive tones accounted for 23.1 percent, and negative tones accounted for 28.4 percent.

Wilhoit and Weaver (1983) determined that foreign news is incomplete, biased, and largely negative in nature when the focus is on developing countries. This study supports their findings in that the tone of coverage was negative in the coverage of the human disaster frame as *The New York Times* used words such as fear, despair, and a few others to describe the horrors of the epidemic in Africa.

The fact that the volume of coverage in *The New York Times* has declined through the years (2000-2007) lends support to the argument that the HIV/AIDS story in Africa is no longer a newsroom attention getter. One of the reasons for the decline could be attributed to “media fatigue” in mainstream media as indicated by the Princeton Survey Research (1994).

In conclusion, this study advanced the study of media framing by addressing the media’s portrayal of HIV/AIDS in Africa. The study identified the human disaster frame as
the dominant frame used by the New York Times in the coverage of HIV/AIDS in Africa. A general neutral tone of coverage was used; however, there were more negative tones than positive tones of coverage. Overall the volume of news on AIDS in Africa had declined.

The New York Times was covering the issue of HIV/AIDS in Africa but did not cover it as frequently and thoroughly to enable it to have a great impact on public policy. It confirmed findings by (Mann, 1995) that HIV/AIDS in Africa is becoming less prominent in news coverage and the issue was often covered from a developed world perspective.

AIDS is at its worst in less-developed countries. As Bardhan (2001) noted, “coverage on HIV/AIDS in developing countries has become routinized and is more reactive than proactive and passive descriptions dominate over active narrations about the future of the pandemic.”

Bardhan (2001) suggested that the way in which HIV/AIDS stories are framed can motivate or demotivate policymakers. Thus, media constructions of HIV/AIDS influence not only how individuals will react but also how a society responds (Colby & Cook, 1991).

As HIV/AIDS continues to be a growing epidemic not only in Africa, but in other parts of the world, all elite
media have an obligation to provide accurate and timely information on HIV/AIDS to influence the response in combating the disease.

In agreement with Bardhan (2001), media frames on news stories on HIV/AIDS that are not clearly and objectively reported might hinder the implementation of AIDS-focused campaigns and policies as well as the allocation of sufficient resources and funding to combat the disease in Africa and third world countries.

AIDS has had a devastating effect on Africa as observed through the dominant themes identified in this study. Coverage on the effects of HIV/AIDS in Africa is essential to depict how devastating the disease is affecting Africa in order to influence public opinion and perception. However, it is imperative that newspapers which, set the agenda or provide accurate information for people to act responsibly, cover Africa’s HIV/AIDS issues to include a dominant public health frame and success stories on preventive measures in curbing the disease.

From the theory of framing discussed, positive framing of AIDS in Africa, increased coverage of preventive measures and a dominant public health frame will encourage positive public response. As the media covers the issue of
AIDS in Africa extensively and objectively, the volume of news will increase and public understanding of the disease will increase.

Limitations of the Study

One limitation was that this study did not examine the effects of certain events or circumstances, such as the World AIDS Day, on news coverage. These events could be responsible for less coverage of the issue and also the tone of the coverage when these events were prominent in the media.

Suggestions for Further Research

Future research could include more themes or a multi-theme category in order to get a fair representation of each paragraph. Qualitative analysis also could be conducted to take a more in-depth look at what was written in the articles, and sentences could be coded instead of individual paragraphs. Researchers could analyze statements in a sample of articles to get a more detailed illustration of how Africa or HIV/AIDS is framed in the media.
In addition, this study examined only The New York Times. Even though The New York Times has a wide circulation and is very reputable, the HIV/AIDS issue is an ongoing health issue and examining other newspapers from Africa and also outside the U.S. would provide a more accurate comparison and analysis of the coverage of HIV/AIDS in Africa.

Researchers also could examine how HIV/AIDS in Africa is portrayed in different types of articles, such as editorials or opinion articles, letters to the editor, or political cartoons. The style of writing in both hard news and editorials might change how the issue is portrayed. In addition, it would be useful to examine how other newspapers within the U.S., in Europe, and in Africa cover the issue.

Datelines, length and placement of articles, gender of the authors of articles and other different approaches could be used to explore the influence on the coverage of HIV/AIDS in Africa. The gender of the author could be compared to tone and also the dominant frames used.
REFERENCES


Swain, Kristen Alley. 2003. Proximity and Power Factors In
Western Coverage of the Sub-Saharan AIDS Crisis.
*Journalism & Mass Communication Quarterly* 80 (1): 145-165.


http://www.aei.org

http://unaids.org
You will be evaluating a number of news articles concerning HIV/AIDS in Africa from January 2003 – December 2007 in the New York Times. Please read each article carefully and evaluate each paragraph in the article using the enclosed coding sheet. (Appendix 1)

Your task is to determine if the statements made in each paragraph were positive, negative or neutral one and place that paragraph into the category you think appropriate. You will also be required to record the section the article appeared in, the date, page number and the placement of the article in the paper.

Category definitions are enclosed with this document, and you should read those definitions thoroughly to become acquainted with them.

Please ask any questions of the team leader if you need further clarification.

PROCEDURES

1. Write your name and date at the top of the coding sheet as indicated.
2. Mark the article number in the first column of the code sheet followed by the date of the publication, section, page number and the placement in the article.
3. Read each paragraph carefully.
4. Determine to which category on the coding sheet the paragraphs should be assigned and designate by initials as shown at the bottom of the code sheet.
5. Evaluate the paragraph if it is positive, negative or neutral concerning HIV/AIDS in Africa. Only one box can be checked.
6. For the purposes of this study, the number (1) should be assigned to a paragraph which is positive and puts HIV/AIDS in Africa in a favorable light or shows that the reporter uses sentences or words which are optimistic in portraying the disease or subjects.

The number (2) should be assigned to a paragraph which is negative and puts HIV/AIDS in Africa in an unfavorable light or shows that the reporter uses sentences or words which are pessimistic in portraying the disease or subjects.

The number (3) should be assigned to a statement that is neutral or ambiguous, and neither favorable nor unfavorable.

6. Please be aware that there is no right or wrong answers in this exercise. Spend time with each sentence but work as quickly as you can. If a paragraph discusses more than one issue in it or if the paragraph has two topics in it, in your estimate base your decision on the topic which you think is most closely related to the subject of the entire article.

CODING KEY

Positive (1)
Negative (2)
Neutral (3)

CATEGORIES

Medical-Scientific (1) Stories related to medical treatment, new drugs, scientific research, development and global cooperation in dealing with AIDS in Africa.

Public Health (2) Stories aiming at enforcing education of the public for
prevention and self-protection from the virus in Africa (i.e. prevention/protection)

Political-legal (3) Stories on new regulations, policies, laws regarding the epidemic or patents, AIDS-related legal cases, and events with political or diplomatic concerns in a global context on HIV in Africa.

Economic/Business (4) Stories on prices, finance, or fundraising and charitable issues toward HI/AIDS in Africa.

Social/religious/cultural (5) Stories involving socioeconomic issues, cultural and religious issues, human rights and ethics issues, or fundraising and charity issues.

Human disaster (6) Stories about transmission and prevalence of HIV in Africa, deaths from the virus, or depictions of HIV/AIDS as a crisis or threat.

Miscellaneous (7) Stories excluded from the above five principal frames, for example, a story about a celebrity living with HIV.
A CONTENT ANALYSIS OF NEW YORK TIMES’ NEWS COVERAGE OF HIV/AIDS IN AFRICA (JANUARY 2003 – DECEMBER 2007)

Name of Coder: …………………………………..
Article number: ………………………………………
Date: ……………………………………………..

<table>
<thead>
<tr>
<th>Paragraph #</th>
<th>Positive (1) Negative (2) or Neutral. (3)</th>
<th>Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

KEY: Positive (1), Negative (2) Neutral (3)

CATEGORIES: Medical-Scientific (1), Public Health (2), Political- legal (3) Economic/business (4), Social/Religious/cultural (5), Human disaster (6), Other (7)