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The use of narrative fiction to spread HIV information in Papua New Guinea

Trevor Cullen
Edith Cowan University, t.cullen@ecu.edu.au

Ruth Callaghan
Edith Cowan University

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The use of narrative fiction to spread HIV information in Papua New Guinea.

Abstract

The nature of media coverage of HIV (Human Immunodeficiency Virus) needs to vary in order to be sustained by newspapers—writing the same message, however worthy, loses impact over time. So an interesting innovation in the 2010 coverage of HIV in Papua New Guinea (PNG) is the publication of a serialised fiction story in the *Post-Courier*. It is the story of Vavine, a young girl infected with HIV, who is forced to leave her village after her parents' deaths from AIDS. She keeps her infection secret but because of her circumstances, she is forced to work in a club where sex is freely traded. What makes the story an educational tool, rather than soap opera, is the constant reinforcement of the safe-sex message and exploration of other social issues, including sorcery, beliefs surrounding magic and death, and promiscuity. This represents a shift in reporting towards a better explanation of the disease in the context of broader social and cultural issues. This type of reporting - that uses narrative fiction - could signal a new and more effective approach for reporting on HIV in the Pacific.

Associate Prof. Trevor Cullen Phd
Edith Cowan University
Western Australia

Ruth Callaghan
Journalism lecturer, Edith Cowan University
Western Australia

Introduction: the HIV epidemic in PNG.

In countries where HIV is a serious public health threat, journalists have a responsibility to inform the public about the situation. Whereas HIV is not a major health issue in countries such as Australia, New Zealand and other small Pacific countries, it is classified as an evolving generalised epidemic in PNG. The United Nations AIDS program (UNAIDS, 2009) estimates that there are at least 54,000 people living with HIV in PNG, and forecasts that by 2012, the country will face a prevalence rate of more than 5 per cent, with over 200,000 people being infected with the virus (UNAIDS, 2009). Currently, up to 1.8 per cent of the adult population in PNG lives with the disease, and prevalence in urban areas may be as high as 3.5 per cent (UNAIDS, 2009). New infections rates have increased about 30 per cent per year since 1997. The first HIV infection in PNG was recorded in 1987, and by 2008 PNG accounted for 99 per cent of reported HIV cases in the Pacific region (UNAIDS, 2009).

In fact, health outcomes in PNG have improved little over the last 30 years, and in 2010 PNG's health system struggles to meet the expanding health demands of a growing nation. A 2007 World Bank report titled, *Strategic Directions for Human Development in Papua New Guinea*, painted a grim scenario: a population of more than 5.5 million growing at 2.7 per cent per annum; 40 per cent of people living on less than $1 a day; life expectancy at 59 years, and only 40 per cent of the population with access to safe water. Alarmingly, infectious diseases such as HIV were described as the leading cause of death in the capital's main hospital (World Bank, 2007).

The risk factors associated with HIV outbreaks in PNG include a combination of ignorance and denial: low condom use, increasing migration and widespread incidents of domestic violence. These factors are further aggravated by inadequate health and counselling facilities, as well as poor access to antiretroviral drugs that slow the spread of the disease in infected individuals. In 2007 such concerns were raised by the HIV Project Director of the Lowry Institute for International Policy, Brett Bowtell: "HIV spreads first where there's social dislocation, poverty and high numbers of young people, which pretty much describes most of the Pacific" (Bowtell, 2007).

What worries health experts about the current generalised HIV/AIDS epidemic in PNG is that certain sexual behavioural practices remain widespread. A survey conducted by the Medical School at the University of PNG in 2005 on sexual behaviour and the prevalence of sexually transmitted diseases revealed these disturbing findings.

> We believe that 45-55 per cent of PNG men in the sexually active age range of 19-45 are having sex with more than one partner, possibly multiple partners. And it's the combination of multiple sex partners and the increasing prevalence of sexually transmitted infections (STIs) that puts Papua New Guineans most at risk of a devastating social catastrophe…These are not nightmare stories designed to frighten people. These are medical facts of an epidemic already deeply entrenched in our society (Sapuri, 2005)

The 2009 UNAIDS Epidemic Update stated that fewer than half the young people surveyed in PNG reported using a condom during their last sexual encounter. Former director of PNG's National AIDS Council Secretariat (NACS), Dr Ninkama Moiya, worries that efforts to lessen infection rates could fail:

> Getting the message across to people is not a problem, but it is changing attitudes and behaviour that is the issue. People know AIDS has no cure but still continue to have sex without a condom…We can say and do all we want, but if people at the individual level can't respond positively to prevent HIV, all we've done will count for nothing. (Moiya, 2008)

Given the extent of this epidemic in PNG and the enormous impact it has on life in this country, the media coverage — or lack thereof — is something that needs to be monitored in order to ascertain how well the population is being kept informed of the progress of the virus, the methods of transmission and preventative measures.

In this paper, the acronym HIV is used to include those living with HIV, and also those living with AIDS, which is the next stage of the disease, when the human immune system breaks down. The term 'media' refers primarily to the print journalists.

Challenges for journalists when reporting HIV

Reporting on HIV presents several challenges for journalists in PNG, the first of which is to find an appropriate response while working within organisational constraints. The reality in the newsroom is that coverage of the disease has to compete with many other issues. In recent years, under traditional newsgathering routines and standards, journalists have failed to persuade their editors to run HIV stories (Brodie, Hamel, Kates, Altman, & Drew, 2004). Editors, for their part, do not want to be seen as merely relay-

ing public health information. Moreover, there is a feeling that 'HIV fatigue' has set in, where readers are saturated with narratives of infection, suffering and death.

Ratzsan (1993) argued in his book on effective health communications that despite differing views on the precise role of the media in reporting HIV, there is broad agreement on the fact that the media are an important and influential source of health and medical information, and that they shape public understandings of and responses to current epidemics. "The media have enormous potential to help stop the spread of AIDS if they could inform the public continuously and accurately about the true nature and scope of HIV risks around the world" (Ratzan, 1993, p. 256). He stressed in the early 1990s that journalists should rise above the epidemic of complacency, stigma, and denial to uncover solutions for slowing HIV infection in the most devastated areas of the world. "Effective health communication is our primary and most potent weapon in preventing the spread of AIDS. Until a vaccine or cure for HIV infection is discovered, communication is all we have" (Ratzan, 1993, p. 257). This insight is still relevant today, especially since scientists are no nearer to finding a vaccine or a cure for the disease.

A decade later, Swain (2005) followed a similar line as Ratzan, arguing that the media, particularly journalists, exercise a significant influence, and that much of society's understanding of the disease, including who it affects and its future possibilities, comes from the media (Swain, 2005, p. 258). However, this is contested; some stress that the role of the press in reporting HIV/AIDS is still unclear and limited, and that better information and education on HIV equals improved health outcomes is problematic. Thus, the matter is far from settled.

Turning the focus back to PNG—perhaps the advice offered in 2002 by former PNG editor, Anna Solomon, whose reporting career in PNG spanned more than thirty years, is still relevant. She claimed: 'AIDS is boring to report—so let's try to make it interesting' (Solomon, 2002). In keeping with this exhortation, journalists could report on issues that are closely linked to the disease. For example, initially the global epidemic of HIV was seen as a crisis in public health. This is now generally seen as too simplistic and much interest has been generated by reflecting on the complex social, cultural and economic determinants and consequences of the epidemic.

Another slant on the topic has been derived from scholarly analysis of the

content of HIV reporting such as in the United States (Kaiser, 2003), in Southern Africa (Panos, 2004), and in parts of Asia (International Federation of Journalists, IJR, 2006). There was broad agreement in all three studies that the language and tone of HIV stories from the mid-1990s onwards showed greater sensitivity to people living with HIV. It seems that editors and journalists were encouraged to amplify the voices of those infected by the disease and to increasingly report HIV as a story with medical, political, social, economic, cultural and religious aspects.

Health communication theories

The need to widen the framing of HIV from purely a health story has been re-echoed in recent years by social scientists who have come to realise that socio-cultural factors influence complex health behaviours, including sexual behaviour related to HIV infections. Beyond an individual's own social network, there are larger structural and environment determinants that affect sexual behaviour such as living conditions related to one's employment. Social scientist, Kippax (2007), argues that individual behaviour and 'choice' is always mediated and structured by social relationships, which are in turn influenced by important differences of community, social status, class and other structural differences such as gender and age. In other words, individual behaviour is always contextual, always socially embedded (Kippax, 2007, p. 5). This social communication approach to understanding HIV, and the need to highlight the context in which the pandemic is embedded, has wide support (McKee, Bertrand & Becker-Benton, 2004, p. 41). Indeed, this is not a new insight. The United Nations Educational, Scientific and Cultural Organization (UNESCO) echoed this view several years ago: This epidemic has become a major developmental challenge that goes beyond the realm of public health. The emerging complexity of the epidemic has made it an issue that touches all aspects of human life. And the perspectives are diverse: medical, human rights, ethical, legal religious, cultural and political (UNESCO, 2001, p. 20).

This shift in thinking forms a key part of Social Communication theory where the focus is on seeing people and communities as agents of their own change. It is based on a belief that behaviour change is dependent on social change and is a long-term process (Deane2002, p. 1). The implications of this theory, if adopted by editors and journalists, would widen the predominant framing of HIV stories from primarily a focus on health to one that covers related issues such as gender equality, domestic violence, inadequate access to treatment, poor health facilities, complex sexual networking and challenge

governments on their policies towards treatment, human rights and overall strategies. Indeed, this perspective on the disease provides a new and extensive list of news and feature stories for both print and broadcast journalists.

Another example is gender equality. This reflects the complexity of the situation and exposes how difficult it is to prevent and slow the spread of HIV. For example, sexual relations lie at the heart of the HIV epidemic in PNG. Women's lack of social or economic authority is underwritten by the sexual economy and enforced largely by violence. Current attitudes to sex pose serious barriers to the effectiveness of HIV interventions. Women in general, and those involved in sex work in particular, are blamed for HIV infection in PNG. It is true that this attitude is not limited to PNG, but also exists in even more developed countries. But the constant public scapegoating of sex workers has further entrenched the view that HIV can be attributed to filthy and immoral women. And yet, it is estimated that almost half of PNG men pay for sex at some time each year (Smith & Cohen, 2000, p. 6). For the same reasons, married women are the largest group of women at the risk of HIV infection. Since most infected women are of childbearing age, they also carry the risk of infecting their children.

In-depth articles could expose the serious gender inequality in PNG and argue that if married women are to protect themselves and their children in such circumstances, they need precisely the same things as women need in general – access to education and training, removal of restrictions on employment, access to banking services and credit on their own surety. In addition, what they require are drastic shifts in laws on property rights, rights of divorced and widowed women, child custody rights and protection against physical violence. The HIV epidemic is not simply about public health – it also is about basic human rights. There is a need, therefore, to ensure that when reporting on HIV epidemic, the wider links such as poverty reduction and gender equality are part of the coverage. How many journalists would think of reporting these issues or are able to link these issues. This is not due to an unwillingness to report but rather a lack of awareness about the wider links to HIV. Unfortunately, the narrow conception and understanding of HIV has led to missed opportunities for wider coverage and debate.

This paper examines the use of narrative fiction as a strategy to rekindle the discussion of HIV in Papua New Guinea, through the story of Vavine, a young orphan girl from an inland village who has HIV through no fault or action of her own. In writing the story, author and journalist "created this story of courage and determination in the hope that it will increase awareness of the horrifying threat of HIV/AIDS" (*Vavine's Curse highlights Papua New*

Guinea's HIV/AIDS problem, March 3, 2009, *Post-Courier*). The story has received backing within PNG from officials including Community Development Minister Dame Carol Kidu, who is reported as saying, "This is a novel that deserves to be widely read, particularly by high school students, as the awareness it brings will serve as a sober warning about HIV/AIDS and the human costs." *(Vavine's Curse highlights Papua New Guinea's HIV/AIDS problem*, March 3, 2009, *Post-Courier*,).

In using a fictional account as a vehicle for health messages, the novel follows the growing pattern of the use of entertainment media to explore topics and raise awareness, predominantly on American television. Research shows these messages can have a significant increase in viewer awareness, although repetition is usually required to have a long-term impact. Collins, Elliott, Berry, Kanouse and Hunter (2003) describe how a storyline in a single episode of the comedy *Friends* conveyed to 65 per cent of surveyed viewers that condoms could fail and lead to pregnancy (Collins, Elliott, Berry, Kanouse, & Hunter, 2003, p. 1118), although this 'knowledge' declined again after a period of time. A three-minute vignette on an 1997 episode of medical drama *E.R.* regarding the use of the contraceptive Pill after unprotected sex raised the awareness among viewers of emergency contraception by 17 per cent, while a discussion of human papilloma virus that took less than a minute on an episode in 2000 raised awareness by 23 per cent (Brodie et al., 2001, p. 194). Similar studies have considered the impact of information conveyed through television drama on syphilis in men (Whittier, Kennedy, St Lawrence, Seeley, & Beck, 2005), immunisation (Glik et al., 1998) and obesity (Valente et al., 2007). While these stories are confined to television, and particularly the US market, Brodie et al draw some conclusions about the success of this medium in conveying health messages, arguing that dramatic depictions of health issues are aided by the access to wide audiences, who tune in week after week (Brodie et al., 2001, p. 198), and much the same could be said of a serialised fiction story with a strong newspaper readerships. The authors do warn that fictional depictions carry some risks, however, and

> … could lead to viewers' obtaining inaccurate information or taking away critical misperceptions about health topics … Therefore, even the communication of "factual" information in entertainment media, as in other health education forums, produces both the potential for real disagreements or outright abuse by parties with a particular interest or point of view. (Brodie et al., 2001, p. 198)

The more familiar narrative journalism has been used by journalists in the United States to spread information on HIV, such as by Roy Clark, who in 1996 wrote a 30,000 word series called *Three little words*. He focused on a family struggling with AIDS and broke their experiences down into chapters of 800-1000 words each. These were run every day in the *St Petersburg Times* for 29 consecutive days. While it is unlikely that any local newspaper would run such a long series these days, it is possible that longer serialised stories might work with online editions. Journalists could write and develop their stories over a number of days, rather like a web diary or a more conscious form of blogging. Harrington (1997) described narrative journalism as news you can feel, and that scene detail and narrative bring a story to life, while theme and meaning imbue it with a soul.

The use of narrative fiction writing to spread HIV information in PNG

Findings from a longitudinal content analysis on the reporting of HIV in Papua New Guinea's two national newspapers—*The National and Post-Courier*—in 2000, 2005 and 2010 showed that coverage of the disease increased significantly during the ten-year study period, and that the framing of the disease moved beyond representing HIV as purely a health story. to one that was linked to socio-economic conditions and cultural practices. There was an increase in narrative story-telling, both non-fiction and fiction, over this time, and articles in this format were particularly used to address the social stigma surrounding People Living with Aids (PLWA). One notable article in the *Post-Courier* described the road to infection of a 29-year-old woman from Balimo who became the second wife of a "well-built man who was a land-owner" from the region. It was only after her husband began losing weight rapidly that she discovered he had been diagnosed with HIV some time earlier; but he had not disclosed it. The article directly addressed the societal pressure both for her to remain with her husband and to hide the disease:

> She went back to her family and they are supportive in the situation and want to help raise (her HIV-infected daughter) who is four years old. She said she disclosed her status to the community and to date had not suffered stigma. The community is supportive and I believe that is due to ongoing awareness of the virus, she said. (S*ad tale but true in PNG.* March 25, 2010, *Post-Courier*)

What is a striking innovation, however, is the publication of a serialised fiction story alongside the more traditional narrative feature articles. Entitled Vavine's Curse, the story tracks the young girl's departure from her village after her parents' deaths from AIDS. She keeps her infection secret but because of her circumstances, she is forced to work in a club where sex is freely traded. What makes the story an educational tool, rather than soap opera, is the constant reinforcement of the safe-sex message and exploration of other social issues that are prevalent in PNG and must be addressed alongside the health issue of HIV, including sorcery, beliefs surrounding magic and death, and promiscuity. Take, for example, this passage in which Vavine considers what might happen to her if the club owner finds out her infected status:

> Vavine thought about her HIV status. But she knew Dennis wasn't aware of it and there was no way she was going to volunteer that information. Who knows what he'll do to me if he finds out, she thought. Many people in PNG didn't care about or truly comprehend how dangerous certain behaviours could be. The message that unsafe sexual activities could literally kill you was being ignored by a great deal of the population, mainly the uneducated. This was another reason AIDS was tightening its deadly grip on Papua New Guinea — countless people simply didn't understand the disease and how it was spread. (*Vavine is assaulted*, January 12, 2010, *Post-Courier*)

The main character has many 'uneducated' ideas about HIV herself. In one vignette, Vavine's auntie Toka tries to describe why villagers believe Vavine's parents died — and relates it to strange behaviour on behalf of Vavine's uncle Dennis. Her story describes how Dennis had taken items from her father to try to put 'magic' on them, and that this had influenced the villagers. At first Vavine is angry and believes sorcery caused her father's death but her auntie argues otherwise.

> … listen, Dennis's so-called magic doesn't really work. I know because he once tried to put purripurrion me and I just ignored him. He said I was going to be sick and nothing happened to me. Then one night when he was really drunk he admitted to me that he didn't know magic at all. Toka blew on her tea to cool it down a bit. Thing is though, that doesn't matter. Everyone else still believes it's true and so they're afraid of him. All the villagers think he killed your parents with purix. And they also believe you now have AIDS because of it. That's why they are scared of you. But it just isn't true. Your father caught AIDS because he slept with someone he'd

> met as a one-night-stand and didn't use a condom. I don't know how many girls he slept with, but one of them had the virus and passed it on to him. *(A secret is revealed*, February 23, 2010, *Post-Courier)*

As Vavine learns more about the connection between unprotected sex and HIV, she becomes more aware of her companions' risky behaviour. One friend laughs that another will sleep with anyone after a few drinks; "Well, I hope she uses condoms, Vavine said to herself." Later, she ponders her own future and wishes others were more careful.

> They were nice enough girls but stupid. They were playing a dangerous game. She wished people, especially ones so young, were more aware of the threat of AIDS. With this thought, she felt the stink thing inside moving through her body, a reminder of what the future held for her. *(Vavine gains an ally*, January 26, 2010, *Post-Courier)*

From the perspective of Australian print media, this may be an unsophisticated method of promoting a message: however, it fits well with the established tradition of using popular culture such as television or serialised stories to deliver and clarify health messages. It also contextualizes HIV within the broader social issues that best PNG, including poor education, the fragile economic status of many people, gender inequality and the mistreatment of women, the belief in and practice of sorcery, and community violence. While such an approach may not work with an Australian audience — at least in this format — the research shows fictional accounts of people with health problems do work in other contexts, provided the story is tailored to the audience. This paper has not attempted to assess the level of awareness raised in PNG by the Vavine stories, but they clearly hammer home some critical messages in a format that is likely to be well-received and closely followed. It is possible that similar approaches using fictional characters may work in other communities, particularly those where more formal education on health issues is sporadic or uneven.

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Associate Professor Trevor Cullen coordinates the Journalism program at Edith Cowan University in Perth, Western Australia. His doctoral thesis focused on press coverage of HIV/AIDS, and he is the author of several peer-reviewed articles, book chapters and conference papers on the subject. He has facilitated workshops on "Reporting HIV" for journalists and editors in Australia, Papua New Guinea and in a number of other countries in the Asia Pacific region.

Ruth Callaghan is a health writer and a journalism lecturer at Edith Cowan University.