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United Kingdom newsprint media reporting on sexual health and blood-borne viruses in 2010

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Abstract. *Background:* Improving sexual health and blood-borne virus (BBV) outcomes continue to be of high priority within the United Kingdom (UK) and it is evident that the media can and do impact the public health agenda. This paper presents the first large-scale exploration of UK national newsprint media representations of sexual health and BBVs. *Methods:* Using keyword searches in electronic databases, 677 articles published during 2010 were identified from 12 national (UK-wide and Scottish) newspapers. Content analysis was used to identify manifest content and to examine the tone of articles. *Results:* Although there was a mixed picture overall in terms of tone, negatively toned articles, which focussed on failures or blame, were common, particularly within HIV/AIDS, hepatitis B and C, and other sexually transmissible infection coverage (41% were assessed as containing negative content; 46% had negative headlines). Differences were found by newspaper genre, with ‘serious’ newspaper articles appearing more positive and informative than ‘midmarket’ newspapers or ‘tabloids’. Across the sample, particular individuals, behaviours and risk groups were focussed on, not always accurately, and there was little mention of deprivation and inequalities (9%). A gender imbalance was evident, particularly within reproductive health articles (71% focussed on women; 23% on men), raising questions concerning gender stereotyping. *Conclusions:* There is a need to challenge the role that media messages have in the reinforcement of a negative culture around sexual health in the UK and for a strong collective advocacy voice to ensure that future media coverage is positively portrayed.

Additional keywords: culture, newspapers, representation, stereotypes.

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Introduction

Sexual ill health presents a significant global burden of preventable disease, and the United Kingdom (UK) and Scottish governments have recently released strategies to address inequalities and reduce rates of HIV, hepatitis B virus (HBV), hepatitis C virus (HCV), other sexually transmissible infections (STIs) and teenage pregnancy.^{1,2} It is evident that the media are a major source of health information, constantly alerting, updating, educating and influencing public understandings of health and any associated health risk. As such, understanding the way in which sexual health and blood-borne viruses (BBVs) are presented could inform future prevention.^{3,4}

The media have been identified as playing a key role in setting the agenda by controlling, prioritising and selecting media message content.^{5,6} By selectively emphasising particular issues, the media can shape what views and interpretations are most valid,⁷ influence perceptions of reality, risk and blame,⁸ and impact on people’s health beliefs and behaviours.⁹

Key stakeholders with vested interests often feature in the news media, and when individuals or groups are given a particularly high profile, their political weight or the leanings of a particular newspaper can be emphasised.¹⁰ Research has suggested that the media’s power extends even further, from the public to policy agenda, with news representations influencing the main concerns and decisions of policy-makers.^{8,10,11} The way in which the media represents sexual health and BBV issues could thus play a fundamental part in constructing public (and policy) discourses and have implications in terms of funding, policy and treatment options; and, consequently, legislation, interventions and health campaigns.^{8,12,13}

There have been several studies investigating news reporting of public health issues. Within the field of sexual health, particular attention has been paid to coverage of HIV and AIDS.^{14–16} Other studies have examined coverage of emergency contraception,¹⁷ sex and relationship education,¹³ human papillomavirus vaccination¹⁰ and STIs.⁴ Research has highlighted the media’s focus on negative imagery, risks and dangers;^{18,19} little or inaccurate mention of causes,

consequences, prevention, symptoms or treatment;⁴ and a focus on narrow and stereotypical gender behaviours.^{19,20} However, studies have also emphasised the role of the media in helping to shape knowledge, attitudes and discussion, and in improving health.^{10,11,19}

Here we present, to our knowledge, the first in-depth overview since the mid-1990s of UK newsprint coverage of all sexual health and BBV topics. To allow a baseline measure of reporting for the Sexual Health and BBV Framework 2011–2015 in Scotland,² we examined whether representations of sexual health and BBV issues were essentially negative, positive or neutral; whether representations differed by newspaper genre and what the content of reporting was in 2010, the year before the launch of the framework.

Methods

Newspaper article selection

We selected seven UK national and five Scottish newspapers. Corresponding Sunday editions were included to create a total sample of 22 newspapers, including 10 ‘serious’ newspapers (formerly known as ‘broadsheets’ before several switched to Berliner or smaller formats), six ‘middle-market’ tabloid newspapers and six ‘tabloid’ papers. This typology has been used before and allows a broad range of newspapers with various readership profiles and political orientations to be examined.^{10,21} See Table 1 for the newspapers included.

Search strategy

Articles were identified using the electronic databases Nexis UK and Newsbank (for *The Sun*, *The News of the World*, *The Daily Mail* and *The Mail on Sunday*) for the period 1 January 2010 to 31 December 2010. Search terms were determined through reading and re-reading news articles to identify keywords

(e.g. sexual health, HIV, STI, sex bugs, safe sex, teenage pregnancy, drug use).

A total of 1841 articles were identified, read and filtered. Articles were excluded if: (1) less than 50% of the content related to issues of sexual health or BBV. (2) they were published in Irish (Eire) editions of the newspapers (Ulster or Northern Irish editions were included), (3) were short lead-ins that referred to a main story elsewhere in the same edition of the newspaper (if the main article also appeared in the sample), or (4) were letters, advice, TV guides, sport, weather, obituaries and review pages. One hundred and sixteen articles were excluded via the automatic similarity analysis facility available in Nexis UK and 1048 were excluded during manual filtering, leaving a sample of 677 articles.

Data collection and analysis

A random 10% of the articles were examined to identify key themes and develop an initial coding frame. This was tested on further batches of randomly selected articles and, following discussion of discrepancies and difficulties, the coding frame was revised until it was considered robust. The final coding frame recorded the publication, date, headline and word count, and assessed the content of coverage in terms of topic, tone, risk groups or individuals focussed on, sexual health or BBV risk, causal factors presented, and stakeholders or interviewees quoted or paraphrased. The coding frame was intended to capture the manifest content of the newspaper articles to enable descriptive analysis and to identify potential areas for further qualitative enquiry.

Article headline and content tone were recorded as a means of assessing whether representations of sexual health and BBV issues were essentially negative, positive or neutral. An article was rated as positive if the content focussed on improvements and successes, outrage at wrongdoing or used optimistic,

Table 1. Summary of articles (n = 677)
na, not available

Genre	Title	Total articles		Front page articles	
		n	%	n	% ^B
Serious	<i>Guardian and Observer</i>	103	15	5	5
	<i>Daily Telegraph and Sunday Telegraph</i>	73	11	5	7
	<i>Independent and Independent on Sunday</i>	55	8	3	6
	<i>Herald and Sunday Herald</i>	52	8	1	2
	<i>Scotsman and Scotland on Sunday</i>	21	3	2	10
Subtotal		304	45	16	5
Tabloid	<i>The Mirror and Sunday Mirror</i>	53	8	–	–
	<i>The Sun and News of the World</i>	84	12	2	2
	<i>Daily Record and Sunday Mail</i>	51	8	3	6
Subtotal		188	28	5	3
Midmarket	<i>Daily Mail and Mail on Sunday</i> ^A	75	11	na	na
	<i>Daily Express and Sunday Express</i>	49	7	1	2
	<i>Evening News</i>	35	5	–	–
	<i>Evening Times</i>	26	4	–	–
Subtotal		185	27	1	1
Total		677	100	22	4

^ANo page numbers available.

^BProportion of articles featuring on front page of newspaper.

supportive and nonjudgmental language; in contrast, an article was assessed as negative if it highlighted failures, or portrayed a sense of hopelessness, fear or blame; and a rating of neutral or factual was given if no position was taken, if the article was purely factual, or if both positive and negative elements were present but neither was clearly more dominant than the other (mixed tone).

In order to systematically quantify manifest content, articles were read line by line and coded to determine if the thematic categories in the coding frame were mentioned. Risk factors and causal drivers were combined into categories: individual factors including 'sexual behaviours' (unprotected sex, nonuse of contraception, multiple and concurrent partners, promiscuity, complacency, nondisclosure of status by partner, early sexual activity and sexual contact) and 'blood-borne behaviours' (injecting drug use, blood transfusion or healthcare, mother-child transmission, tattoos and body piercing, sharing razors or personal items, needle stick injury and blood contact), and societal factors (out of an individual's control) including 'deprivation and inequalities' (discrimination, barriers on socioeconomic level) and 'lack of education or awareness' (media or cultural images and messages, and public health or educational messages and strategies). Articles focussing on reproductive health also had a specific category of 'abortion-related risk factors' (unplanned or unwanted, personal circumstances, risk to mother's life or health, fetal abnormality, rape, doctor's or medical advice, and selfishness or abortion used as contraception).

Data were entered into SPSS ver. 19 (IBM UK Ltd., Hampshire, UK) and χ^2 -tests were employed to test for associations within the topic areas by genre (serious, midmarket and tabloid). Statistical significance is defined as $P < 0.05$.

Results

A breakdown of the 677 articles by genre and newspaper is shown in Table 1. Considering genre, 45% of the articles were from serious newspapers, 28% were from tabloids and 27% were from midmarket newspapers. Only 4% made front page news (Table 1).

Coverage was dominated by articles on HIV and AIDS ($n = 292$). Articles on abortion also featured often, making up

22% ($n = 148$) of the overall sample. Other topic areas included: contraception ($n = 87$, 13%), other STIs ($n = 59$, 9%), sex education ($n = 38$, 6%), HBV and HCV ($n = 31$, 5%), and teenage pregnancy ($n = 22$, 3%). Topic areas were grouped into two categories: HIV/AIDS, HBV, HCV and other STIs ($n = 382$), and reproductive health (including abortion, contraception, sex education and teenage pregnancy; $n = 295$).

Article tone

Overall, 28% ($n = 187$) of articles were rated as positive, 36% ($n = 242$) as negative and 37% ($n = 248$) as neutral or factual. HIV/AIDS, HBV, HCV and other STI articles in particular were rated as being negative in terms of content and headlines (Table 2). Article content and headline ratings were deemed to be neutral or factual most often within reproductive health coverage, but the proportion rated negative rose when looking solely at headline tone.

HIV/AIDS, HBV, HCV and other STI articles had similar numbers considered to have a positive tone in content across the different genre, but serious newspapers had significantly fewer negatively toned articles and significantly more that were neutral or factual (Table 2). In relation to article headlines, the pattern was similar and tabloids had the fewest rated as positive. Rather surprisingly, we found that for reproductive health coverage, that tabloid newspapers had the greatest number of articles with positive content and headlines (Table 2). Serious newspapers again had the greatest number of articles rated neutral or factual, and midmarket newspaper articles had the lowest amount of positively rated content and headlines.

Voices heard

Sexual health groups and health agency spokespersons were frequently quoted or paraphrased across all topic areas (Table 3). In articles on HIV/AIDS, HBV, HCV and other STI's, serious newspapers were significantly more likely to include sexual health groups and academics or researchers than midmarket or tabloid newspapers, whereas quotes from accused individuals featured mores so within tabloids and midmarket newspapers (a large number of articles originated from legal and criminal cases within this topic area, $n = 81$, 21%). Moral conservative groups and religious figures or spokespersons were quoted or paraphrased more frequently

Table 2. Article headline and content rating by topic and genre
HBV, hepatitis B virus; HCV, hepatitis C virus

	HIV/AIDS, HBV, HCV and other STIs				Reproductive health			
	Total <i>n</i> (%)	Serious <i>n</i> (%)	Midmarket <i>n</i> (%)	Tabloid <i>n</i> (%)	Total <i>n</i> (%)	Serious <i>n</i> (%)	Midmarket <i>n</i> (%)	Tabloid <i>n</i> (%)
Content rating								
Positive	135 (35)	65 (37)	31 (34)	39 (33)	52 (18)	25 (19)	6 (6)	21 (30)
Negative	156 (41)	52 (30)	44 (49)	60 (51)	86 (29)	20 (15)	49 (52)	17 (24)
Neutral or factual	91 (24)	57 (33)	15 (17)	19 (16)	157 (53)	85 (65)	40 (42)	32 (46)
Headline rating								
Positive	128 (34)	63 (36)	33 (37)	32 (27)	39 (13)	20 (15)	5 (5)	14 (20)
Negative	174 (46)	63 (36)	43 (48)	68 (58)	115 (39)	32 (25)	55 (58)	28 (40)
Neutral or factual	80 (21)	48 (28)	14 (16)	18 (15)	141 (48)	78 (60)	35 (37)	28 (40)
Total articles	382	174	90	118	295	130	95	70

within reproductive health articles (41% compared with 13% in HIV/AIDS, HBV, HCV and other STI articles; Table 3). There was a significant difference by genre within this topic area, with moral conservatives and religious groups quoted by 71% of tabloids, 62% of serious newspapers and 44% of midmarket papers (Table 3). However, 48% ($n=58$) of articles featuring such groups also included quotes from sexual health groups, resulting in an overall balance within these. There were no significant differences by genre.

Risk factors and at risk groups

The majority of articles mentioned at least one risk factor within their coverage (77%, $n=522$) and one risk group or affected individual (90%, $n=608$). Table 4 shows the risk factors or

groups mentioned and the extent to which these differed by genre across the three topic areas.

The majority of HIV/AIDS, HBV, HCV and other STI articles reported on individual sexual behaviours as risk factors, and there were no differences by genre (Table 4). Blood-borne behaviours were also referred to in 22% of articles, highlighting a focus on individual responsibility and risk. Lack of education or awareness was alluded to as a risk factor within 22% of articles, least commonly in tabloids. Deprivation and inequalities only featured in 9% of articles, and serious newspapers were significantly more likely to feature this than midmarket newspapers or tabloids.

People in heterosexual relationships featured in 39% of HIV/AIDS, HBV, HCV and other STI articles, and 27% of articles mentioned people of African origin, people from unspecified

Table 3. Stakeholders quoted or voices heard by topic and genre
HBV, hepatitis B virus; HCV, hepatitis C virus

Voices heard	HIV/AIDS, HBV, HCV and other STIs				Reproductive health			
	Total <i>n</i> (%)	Serious <i>n</i> (%)	Midmarket <i>n</i> (%)	Tabloid <i>n</i> (%)	Total <i>n</i> (%)	Serious <i>n</i> (%)	Midmarket <i>n</i> (%)	Tabloid <i>n</i> (%)
Sexual health or special interest charity ^A	125 (33)	84 (48)	24 (27)	17 (14)	99 (34)	46 (35)	29 (31)	24 (34)
Health agency or spokesperson	95 (25)	44 (25)	27 (30)	24 (20)	54 (18)	24 (19)	20 (21)	10 (14)
Affected individual	73 (19)	33 (19)	15 (17)	25 (21)	44 (15)	17 (13)	12 (13)	15 (21)
Academic or researcher ^A	71 (19)	45 (26)	11 (12)	15 (13)	53 (18)	30 (23)	15 (16)	8 (11)
Accused person ^A	53 (14)	16 (9)	15 (17)	22 (19)	10 (3)	8 (6)	1 (1)	1 (1)
Police or legal professional	49 (13)	18 (10)	12 (13)	19 (16)	13 (4)	9 (7)	–	4 (6)
Moral conservative or religious group ^B	48 (13)	28 (16)	8 (9)	12 (10)	122 (41)	81 (62)	42 (44)	50 (71)
Public figure or celebrity	41 (11)	17 (10)	7 (8)	17 (14)	17 (6)	10 (8)	2 (2)	5 (7)
Government ^B	40 (11)	18 (10)	13 (14)	9 (8)	67 (23)	29 (22)	30 (32)	8 (11)
Total articles	382	174	90	118	295	130	95	70

^AStatistically significant ($P<0.005$) by genre for HIV/AIDS, HBV, HCV and other STI articles.

^BStatistically significant ($P<0.005$) by genre for reproductive health articles.

Table 4. Risk factors and at risk individuals or groups by topic area and genre
HBV, hepatitis B virus; HCV, hepatitis C virus; na, not available

Risk factors	HIV/AIDS, HBV, HCV and other STIs				Reproductive health			
	Total <i>n</i> (%)	Serious <i>n</i> (%)	Midmarket <i>n</i> (%)	Tabloid <i>n</i> (%)	Total <i>n</i> (%)	Serious <i>n</i> (%)	Midmarket <i>n</i> (%)	Tabloid <i>n</i> (%)
Individual sexual behaviour	230 (60)	101 (58)	53 (59)	76 (64)	85 (29)	37 (29)	29 (31)	19 (27)
Individual blood-borne behaviour	87 (23)	39 (22)	21 (23)	27 (23)	1 (0.3)	1 (0.8)	–	–
Education or awareness ^A	83 (22)	47 (27)	20 (22)	16 (14)	88 (30)	40 (31)	34 (36)	14 (20)
Deprivation or inequalities ^A	36 (9)	31 (18)	4 (4)	1 (1)	23 (8)	13 (10)	9 (10)	1 (1)
Abortion-only risk factors	na	na	na	na	97 (33)	43 (33)	28 (30)	26 (37)
At-risk individuals or groups								
Women	189 (50)	85 (49)	44 (49)	60 (51)	209 (71)	90 (69)	72 (76)	47 (67)
Men	187 (49)	82 (47)	42 (47)	63 (53)	69 (23)	25 (19)	22 (23)	22 (31)
Aged over 25 years	119 (31)	45 (26)	29 (32)	45 (38)	43 (15)	15 (12)	13 (14)	15 (21)
Aged 13–25 years	100 (26)	46 (26)	23 (26)	31 (26)	136 (46)	53 (41)	46 (48)	37 (53)
People in heterosexual relationships	150 (39)	64 (37)	36 (40)	50 (42)	227 (77)	97 (75)	77 (81)	53 (76)
Gay or bisexual individuals ^A	61 (16)	36 (21)	13 (14)	12 (10)	3 (1)	–	3 (3)	–
African origin, from unspecified high-risk countries or migrants ^A	104 (27)	74 (43)	12 (13)	18 (15)	5 (2)	3 (2)	2 (2)	–
Sex or adult industry workers	50 (13)	28 (16)	8 (9)	14 (12)	1 (0.3)	1 (0.8)	–	–
Drug users	36 (9)	19 (11)	10 (11)	7 (6)	13 (4)	6 (5)	5 (5)	2 (3)
Patients or haemophiliacs	25 (7)	15 (9)	1 (1)	9 (8)	–	–	–	–
Total number of articles	382	174	90	118	295	130	95	70

^AStatistically significant ($P<0.005$) by genre for HIV/AIDS, HBV, HCV and other STI articles.

high risk countries and migrants; however, only 16% mentioned gay or bisexual men and women (Table 4). Serious newspaper articles were more likely to focus on gay or bisexual individuals and people from African origin or unspecified high-risk countries and migrants than midmarket newspapers or tabloids.

One-third of reproductive health articles included a focus on abortion-specific risk factors, reflecting the substantial number of articles on abortion in this category ($n=148$). Similar proportions (30%) focussed on individual sexual behaviours and lack of education and awareness, but again there was little focus on deprivation and broader inequalities (8%) (Table 4). The majority of reproductive health articles included a focus on women (71%) rather than men (23%), and articles also focussed more on young people aged 13–25 years (46%) and those within heterosexual relationships (77%) (Table 4). There were no significant differences by genre.

Discussion

To allow a baseline measure of reporting for the Sexual Health and BBV Framework 2011–2015 in Scotland,² we examined representations of sexual health and BBV issues in the UK newsprint media in 2010. We found a mixed picture overall in terms of tone, although negatively toned articles, focussing on failures or blame were common, particularly within HIV/AIDS, HBV, HCV and other STI coverage, and within midmarket newspaper coverage in general. Regarding coverage of reproductive health issues, however, we found that tabloid newspapers had the greatest number of articles considered positive in nature. Across the sample, particular individuals, behaviours and risk groups were focussed on, not always accurately, and there was little mention of deprivation and broader inequalities. A gender imbalance was also evident, particularly within reproductive health articles, raising questions concerning gender stereotyping.

The findings of this research should be considered in the light of the study limitations. First, this study included only newsprint media and is therefore not representative of the broader media's role in the portrayal of sexual health and BBV issues. However, newsprint media provide a widely used data source and although there is a shift away from print to digital news formats, there is no evidence that the actual reporting in them is vastly different. The 1-year time period chosen was short and only represents a 'snapshot', preventing the measurement of trends over time. This also meant that newsworthy events, such as the HIV transmission cases and the Pope's comments on HIV prevention in 2010, may have skewed the data. However, as the focus of this study is on the tone and content within topics, rather than on the topics covered themselves, we do not believe that this has had a significant effect on the results. Finally, the quantitative approach employed resulted in a broad macrolevel analysis and it is evident that the discourse on framing of sexual health and BBV issues would benefit from more in-depth study (a qualitative analysis of the latent content of the articles in relation to gender, risk and responsibility is currently underway). Despite such limitations, this is the first large-scale exploration of Scottish and UK national newsprint media representation of all sexual health and BBV topics since

the 1990s and it provides valuable insight into the newsprint media's role in shaping public understanding of sexual health and illness. Here, we discuss the articles' tone and content and the implications of these for sexual ill health prevention.

Reports of negative or sensationalist coverage in the media are not uncommon, particularly when looking at issues relating to sexual health. Several previous studies have highlighted the sparse positive imagery present within reporting, particularly in relation to young people,^{18,19} and Major *et al.* observed that US coverage mirrored current public discourse in relation to sexual health, focusing on risks and dangers over health benefits.¹² Within our analysis, we found that negatively toned articles were common within coverage of HIV/AIDS, HBV, HCV and other STIs, especially within midmarket and tabloid newspaper articles, which, with higher circulation figures, have a greater number of readers.²² This could be due to a significant number of articles originating from criminal HIV transmission cases, resulting in a particularly negative focus. Research has suggested that such a focus on negative stories depicting danger, fear or controversy is an attempt to increase readership through drama or sensationalism.¹⁷ Indeed, this may explain the higher number of negatively toned headlines in comparison to content within our sample. There is also evidence within experimental social psychology that suggests that a focus on negative events may result in people paying more attention and attributing causality more than if positive accounts are presented.¹² Although this is not necessarily negative and can be beneficial if it leads to audiences giving greater consideration to the issues at hand,¹² it does have implications in terms of the framing of HIV/AIDS and those affected by it.

However, it should be noted that within coverage of reproductive health issues, we found that tabloid newspaper reporting was more likely to be positive in nature, challenging typical notions around the nature of such reporting, which is often accused of contributing to sensationalist or negative framings. Reproductive health articles were also frequently found to be neutral or factual in tone, which, in some ways, could be explained by the controversial nature of some issues (e.g. abortion) and a reluctance to 'take sides'. While the space given to moral conservative groups and religious figures and spokespersons was notable – and may again serve a hint to the competing dialogues, particularly in relation to issues of contraception and abortion, – our analysis found that sexual health groups and health agency spokespersons were featured most often, which is a relatively good sign. Indeed, half of the articles containing 'negative voices' also included quotes from sexual health groups, providing an overall balance, and were therefore rated as neutral. Similar findings have been reported elsewhere.¹³ This highlights the impact interest groups and stakeholders in general can have in influencing discussions of an issue or in mobilising public opinion.²³ Pruitt *et al.* argue that the inclusion of experts outside the 'usual' medical realm, such as legislators, political activists and religious groups, may be a manifestation of the 'if it bleeds, it leads' strategy, again portraying controversial opinions, sensationalism and drama to engage readers.¹⁷

The focus on individual risk groups and risk behaviours within the articles on sexual health and BBV issues could have

implications on both the awareness of risk and the attribution of responsibility. Throughout, the focus was very much on heterosexual individuals, and although people of African origin or from high-risk countries and migrants were mentioned often in HIV/AIDS, HBV, HCV and other STI coverage, other 'high-risk' groups such as gay or bisexual men were less frequently included. Kitzinger stressed that a common feature in HIV/AIDS newspaper coverage was persistent 'othering': HIV/AIDS as a disease of the 'other' (i.e. of particular individuals or groups).¹⁶ Such framing can reinforce stigma¹⁷ and, according to Raimondo, results in individuals being less likely to think critically about themselves and their own sexual behaviours.²⁴ Several studies, in fact, have highlighted a shift away from the reporting of the 1980s and 90s, when HIV/AIDS was often referred to as the 'gay plague' and reports focussed on domestic tales of homosexuals and drug users,^{15,25,26} to HIV/AIDS as a 'global epidemic', particularly affecting heterosexuals in Africa.²⁷ Although this is somewhat reflected in our analysis, it fails to reflect the current epidemiology of HIV in the UK²⁸ and has implications for prevention if those at highest risk (i.e. men who have sex with men) are distanced from perceptions of risk. There is likely to be a challenge in finding the balance between 'targeting' the groups most at risk (without stigmatising them) and ensuring an inclusive approach.

Further evidence for the unbalanced attribution of risk and responsibility was apparent in reproductive health articles, with a systematic focus on women. This was not unexpected, due to the nature of the issues being considered (e.g. abortion, pregnancy and contraception). However, several studies have highlighted the way in which gender roles are portrayed within media coverage of sexual health issues, drawing attention to gender biases in reinforcing existing stereotypes and framing women as being responsible for contraception, teenage pregnancy and STI prevention.^{4,10,19,20} This discourages engagement with men and hinders work within sexual health promotion encouraging equal responsibility for actions and behaviours.²⁰ It is important to challenge the portrayal of such gendered stereotypes in media reports and encourage discourse focussing on sharing responsibilities in sexual health matters.

A focus on broader societal factors was limited in the articles in our analysis, although serious newspapers were significantly more likely to present societal factors across the topic areas than the other newspaper types. Various other studies have emphasised this individualistic, intrapersonal focus within newspaper coverage of sexual health issues, centring on individual action solutions to sexual health problems.^{4,11,12} More worryingly, any focus on deprivation or broader inequalities was largely absent, which has implications for the UK's sexual health strategies that aim to reduce inequalities.^{1,2} Major *et al.* 2010 argue that a lack of focus on the organisational, community, societal and policy levels within reporting results in poor coverage of the broader policy or social issues needed to tackle sexual health-related problems.¹² They argue that thematic framing, looking at social conditions and broader trends has greater potential for making people attribute some responsibility for the problems to society, with the possibility that this could then lead to policy change. There is a clear need to

go beyond purely targeting messages at individuals and to increase the focus on broader inequalities as a means of acknowledging and seeking to reduce such inequalities.

It is evident that the way in which sexual health and BBV issues are framed and who is held responsible within the media could play a crucial role in shaping the public's understanding and awareness of sexual health and illness. Negative framing, a focus on individuals (not always accurately so) and the reinforcement of gender stereotypes suggest that there remains a need to challenge the role that these messages have in the reinforcement of a negative culture around sex, relationships and sexual health in the UK. The UK's sexual health strategies focus as much on wellbeing as on ill health, and it will be interesting to see if such an approach is reflected in a reframing of media messages around sexual health in coming years. There is precedence for this and particular sexual health organisations have made progress in working to quell the negative tone of media reporting around sexual health while positively influencing public debate.¹³ The development of a strong, collective advocacy voice for sexual health in the UK could ensure that future media coverage of sexual health and BBV issues is positively portrayed.

Conflicts of interests

None declared.

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