

DECLARATION

I, ROBERTA MUCHANGWE, declare that this dissertation:

- (a) Represents my own work;
- (b) Has not previously been submitted for a degree at this or any other university; and
- (c) Does not incorporate any published work or material from another dissertation.

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APPROVAL

This dissertation of Roberta Muchangwe has been approved as partial fulfillment of the requirements for the award of Master of Mass Communication degree by the University of Zambia.

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ABSTRACT

The main purpose of this study was to establish the extent and quality of coverage of adolescent sexual reproductive health (ASRH) coverage by Zambian newspapers (*The Post*, *Times of Zambia* and *Zambia Daily Mail* newspapers) and to ascertain whether this coverage is adequate or not. The research defined adequate as having about 25% and above of the stories in a particular newspaper on a topic or subject, over a given period of time. The study was also aimed at investigating whether these newspapers have got policies in place to guide them when covering ASRH. Additionally, the study aimed at finding out how in-depth (how far) the three newspapers go when reporting ASRH and to establish the challenges that journalists from the three dailies undergo when covering this issue. Finally, the study aimed at establishing the nature of ASRH information that adolescents would like the Zambian newspapers to provide. This study employed both quantitative and qualitative research designs and a major part of it used quantitative content analysis of the three newspapers for the 2010 months of December, March, April, July and June as well as January 2011. Questionnaires, in-depth interviews, focus group discussions and desktop research were used to collect data from selected newspapers (editors and reporters), and adolescents. Research instruments used were structured questionnaires, content analysis coding sheets, semi-structured interview schedule and FGD guide. This study shows that ASRH coverage by Zambian newspapers is very low and is not given the importance or prominence it deserves. This can be seen from both the quantitative and qualitative analyses of the newspaper content which indicated that ASRH issues are given very little priority especially that only 15 articles were covered in the six months selected for analysis. After examining a total of 549 newspaper issues of *The Post*, *Zambia Daily Mail* and *Times of Zambia*, a total of 224 reproductive health articles were found to be the number of articles published during the selected period (six months). This means that only 15 of these articles (representing less than 7% i.e. 15/224) were ASRH articles indicating low coverage of the same. Additionally, it has been established that most of the ASRH articles did not have adolescents' voices meaning that their opinions were not heard, considering the issues were targeted at them. Furthermore, the adolescents interviewed in the FGDs indicated that the messages or information presented in the reproductive health stories were not (youth friendly) friendly or interesting enough for them. Research findings also revealed the non-existence of policies to guide coverage of ASRH also confirms the seriousness the newspapers attach to ASRH issues. Moreover, findings show that not much prominence was given to the few ASRH articles that were published i.e. in terms of placement in the paper; most of the stories were placed in the inside pages and not as page lead or front page stories. In-depth coverage of issues though at a maximum did not really have so many stories to show for it considering that six months of coverage was being analyzed. Newspapers need to improve and increase the coverage of ASRH and give it the prominence or importance it deserves, involve adolescents when developing stories that they intend to provide them with, develop policies and strategies that will help guide their coverage of ASRH.

DEDICATION

To my late sister Sharon Mutinta Muchangwe who always told me that I was a genius even though she was better than me. I wish she could see what I have become today because she was my inspiration and will forever remain so.

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List of Abbreviations

AIDS:	Acquired Immuno-deficiency
ASRH:	Adolescent Sexual Reproductive Health
GDP:	Gross Domestic Product
HIV:	Human Immuno-deficiency Virus
MoH:	Ministry of Health
NGO:	Non Governmental Organisation
STD:	Sexually Transmitted Disease
STIs:	Sexually Transmitted Infections
UNAIDS:	Joint United Nations Actions Against AIDS
ZDHS:	Zambia Demographic Health Survey
GWCA:	Global Coalition on Women and AIDS

CHAPTER 1

INTRODUCTION

1.0 Introduction

This chapter introduces the nature of this study by bringing out its background, statement of the problem, purpose of the study, research objectives and questions, rationale, site and significance or rationale of the study, limitations, ethical issues and it provides both the theoretical and conceptual frameworks governing this study. The chapter also gives the research questions on which the study is based.

1.2 Background

Globally the issues of reproductive health are of great concern for almost every nation. Even of greater concern in Zambia is Adolescent Sexual Reproductive Health (ASRH) considering that youth or adolescents in the country have been categorised as one of the most vulnerable when it comes to issues of reproductive health. Mpofu et al (2005), observe that “Zambian adolescents are prone to a number of health risk factors such as ... unwanted pregnancies, and sexually transmitted infections (STIs).” Adolescents are one group of people, who, just like adults, need accurate information about their sexual reproductive health. The Global Coalition on Women and AIDS (GWCA) (2012), observes that adolescent’s need for such information can also be linked to the fact that this group of people need this information in order to make a smooth entry into adulthood. Yet for a variety of reasons, the reproductive health of young people is particularly neglected and many millions lack the information, skills and equipment to prevent contracting or passing on HIV or other diseases or to avoid unwanted pregnancy. Where information is available, adolescents are often subjected to distorted and inaccurate information usually from their peers.

In Zambia today reproductive health, as other health information, is obtained from the media. Zhou (2010), stated that the majority of Zambians get their health information from the media and according to Yngstrom (2011) among the ‘traditional’ media

platforms of radio, TV and print, radio is the most important source of information on health issues in Zambia, followed by TV and then newspapers. This is undoubtedly due to the broad reach of radio in Zambia compared to TV and newspapers. Many Zambian radio stations carry stories on health, among them Radio Phoenix, Joy FM Radio, Radio Christian Voice and the Zambia National Broadcasting Corporation (ZNBC). Yngstrom (2011) further states that in terms of print media, *Times of Zambia* has a dedicated health desk, as does *Zambia Daily Mail*. There is also one magazine called *Health Magazine*, a monthly journal, which is distributed for free in Lusaka. It was set up in 2008 by two journalists, with their own money, who felt that health reporting was being sidelined in the mainstream media.

Seeing that ASRH is a critical issue in ensuring survival of young people and Zambia in general, different organizations and even individuals have taken it upon themselves to try and provide reproductive health information for this vulnerable group. For example, Mary Phiri, just at the age of 17 set up the youth-run newspaper *Trendsetters* in 1997. This was done with a strong recognition of the strong influence of mass media on youth behaviour. This newspaper's goals were to provide sexual and reproductive health information to youths and, at the same time, to help them adopt safer sexual practices that decrease the incidence of unwanted pregnancies, STIs, and HIV/AIDS. According to the founder, the newspaper fostered an atmosphere in which young people could discuss sex-related issues with parents, guardians, and other family members. Unfortunately due to lack of funding the paper went under.

With no newspapers that have a special focus on adolescents and providing information necessary for them to make well informed decisions and choices concerning reproductive health adolescents' vulnerability continues to escalate. The mass media, newspapers inclusive, are critical in ensuring a healthy nation. A healthy nation entails not only having access to medical care and having citizens in great physical condition, but also about having adequate information about various health issues. Therefore, media coverage and analysis of different health issues provides the public with information they

need in order to make well informed decisions and choices about health matters and other related issues.

The media are, therefore, the ones that can play a significant role in ensuring that the adolescents and young people are well informed concerning sexual reproductive health. Print media is an exceptional channel for passing on of sexuality education for the facilitation and promotion of good sexual health. Moreover, print media by transmitting accurate information about human sexuality has the ability to assist its readership in the understanding and formulation of positive views regarding the same. The media can also create awareness amongst the public (adolescents) about the various issues in reproductive health. Consequently, public awareness and clear understanding of reproductive health is crucial to minimizing the devastating impact of what the lack of knowledge of such issues can cause. There is no doubt, therefore, that media education if well conveyed, can equip its broad readership with adequate skills to make informed decisions and to take care of their sexual health. Therefore, the purpose of this study was to establish the extent and quality of coverage of adolescent sexual reproductive health by Zambian newspapers and to ascertain whether the coverage is adequate or not. Adequate simply means enough, sufficient or ample and it should be noted that there is no set system or standard used to measure adequacy or to determine adequate newspaper coverage of news. However, this research defines ‘adequate’ newspaper coverage as having about 25% and above of the stories in a particular newspaper on topic or subject, over a given period of time.

1.2.1 Overview of Zambia

Zambia is a landlocked country in Africa, south of the Sahara and is mostly a plateau that rises to 8,000 ft (2,434m) in the east. The country covers an area of 752,614 sq km (290,586 sq miles). Being a landlocked country, Zambia shares its borders with eight countries namely; Angola, Tanzania, Malawi, Botswana, Zimbabwe, Namibia Democratic Republic of Congo and Mozambique. Since Zambia lies near the equator, that mostly experiences a tropical climate, her climate is tropical and only modified by

altitude. This characterizes a lengthy rainy season that usually occurs between November and April, a cool dry winter from May to August and a hot dry season from September to October.

The country's population as of 2010 census is 13.2 million. It is predominantly youthful with young people comprising 68 percent of the population (UN, 2010, CSO, 2010). In the 2007 Zambia Demographic Health Survey (ZDHS), life expectancy was estimated at 48 years and maternal mortality rate at 591 per 100,000 pregnancies.

Zambia has 73 languages with English (official), Bemba, Lozi, Nyanja and Tonga being the major ones. These languages are spread out in the country's 10 provinces namely; Eastern, Northern, Copperbelt, Lusaka, Luapula, Southern, North Western, Western, Central and Muchinga provinces. Zambia is a Christian nation with Hinduism and Islam being the other two religions.

The country used to be a British colony up to its independence in 1964. After independence until 1991, Zambia used to be a one party state which changed to a democratic state. The country holds regular presidential and parliamentary elections after five years and in 2011 the elections took place which saw a change of power from the Movement for Multi-Party Democracy (MMD) which ruled the country since its transformation into a democracy in 1991. However, the MMD government, under the leadership of Rupiah Banda lost its reins in 2011 to the Patriotic Front (PF) led by Michael Chilufya Sata who is now republican president.

Poverty in Zambia is at alarming levels with 60 % percent of the population living under one dollar per day (CSO, 2009). This is despite the country being rich in natural resources which include copper, cobalt, lead, zinc, emeralds, gold, silver, uranium and water. The country is also said to be the third largest producer of emeralds after Brazil and Columbia. Zambia's economy is dominated by copper mining, which accounts for more than 70 percent of its export earnings (Ministry of Finance and National Planning, 2002). With a drive to diversify the country's economy, there has been development

towards a reliance on the agricultural sector which at the time of writing accounts for about 18-20 percent of the Gross Domestic Product (GDP) and provides livelihood for more than 50 percent of the population. More than 60 percent of the Zambian workforce works in the agricultural sector and most of these, except for commercial farmers, are women and children (CSO, 2006).

1.2.2. The Zambia Media landscape

Since the early 1990s the Zambian media landscape has changed from one dominated mostly by government owned media to one flooded by privately owned and community owned media both in print, online and broadcast. At the time of writing, government continued to own and control a larger part of the media such as Zambia National Broadcasting Corporation (ZNBC), *Times of Zambia*, *Daily Mail* and the only news agency Zambia News and Information Services (ZANIS).

1.2.2.1. The print and online media in Zambia

The print media in Zambia has a good number of newspapers with three dailies, *The Post*, *Daily Mail* and *Times of Zambia* newspapers which are also the top three by circulation. Other newspapers include the *Monitor* and *Digest Weekly*, *the Weekly Guardian* and *The New Vision*. All these are privately owned including the *Post* Newspaper. The *Daily Mail* and *Times* are government owned. Some of these like the *Post*, *Zambia Daily Mail* and *Times of Zambia*; also have online versions. Apart from these, there are other online news sources in Zambia and the most popular are the *Zambian Watchdog*, *Tumfweko*, *Lusaka Online* and *Lusaka Times*. It should be noted that despite the existence of online publications of news, this study only focused on the three printed daily versions, the *Times of Zambia*, *the Post* and *the Daily Mail* newspaper. Reasons for leaving the mentioned online publications out of the study will be given in the sampling section of the dissertation. Amongst these reasons is the fact that most of these online sources seem to have news that is based on rumour and without sources hence having no sense of being credible as news sources.

The following are the major national publications presently in circulation in Zambia. However, it should be noted here that reliable circulation figures are hard to confirm but after a survey by the Africa Governance Monitoring and Advocacy Project (AfriMAP) in 2010 the following estimates were established

Table 1: Newspapers and their circulation

Title of Publication	Language	Frequency of Publication	**Circulation	Ownership
<i>Times of Zambia*</i>	English	Daily	9,000	Government
<i>Zambia Daily Mail *</i>	English	Daily	8,500	Government
<i>Sunday Times of Zambia*</i>	English	Weekly	16,000	Government
<i>Sunday Mail*</i>	English	Weekly	13,000	Government
<i>The Post/Saturday Post*</i>	English	Daily	47,000	Privately Owned
<i>Sunday Post*</i>	English	Weekly	47,000	Privately Owned
<i>Monitor and Digest Weekly</i>	English	Weekly	2,000	Privately Owned
<i>Weekly Guardian</i>	English	Weekly	5,000	Privately Owned
<i>The New Vision</i>	English	Weekly	6,000	Privately Owned

Source: Interviews with respective newspapers

** In the absence of an Audit Bureau of Circulation, the circulation figures could not be verified

SOURCE: AfriMAP, 2010.

1.2.2.2 The Broadcast media in Zambia

Just like the print media in Zambia, the broadcast media in Zambia has grown tremendously since the liberalisation of the economy and the airwaves by the Zambian government. Zambia has got five television stations namely MUVI, Zambia National Broadcasting Corporation (ZNBC) in Lusaka and Kitwe towns, ZNBC TV2, Trinity Broadcasting Network (TBN) and Mobi television. ZNBC television continues to dominate the air waves because of the wide coverage it has all over the country due to the corporation's strong signal. ZNBC television and TV2 are owned by the government while MUVI TV, TBN and Mobi TV are privately owned. TBN reach is within Lusaka, Kabwe and Kitwe while MUVI TV coverage extends to the whole country via satellite and terrestrial technologies. Mobi TV's coverage is limited to Lusaka.

Unlike television, the radio industry has expanded massively. Some of the radio stations currently existing in Zambia include ZNBC Radio 1, 2, and 4 which are state owned and privately owned ones include among others Ichengelo, Radio Maria, Yatsani Radio, Radio Chikuni, Mazabuka Community Radio Station, Radio Lyambai, UNZA Radio, Radio Phoenix, Radio Chikaya. Radio Christian Voice, radio Sky FM, Yangeni, Radio Musi-O-Tunya , radio Oblates Liseli, Petauke Explorers, Mano, Friends Committed to Caring (FCC) Radio, Radio Mkushi, Radio Maranatha, Breeze FM , Mphangwe, and Hone FM radio station.

1.3 Statement of the Problem

Lack of reproductive health information amongst adolescents has been cited as one of the contributing factors to the high number of sexual reproductive health problems that this group is facing. Warenus et al (2007) discovered that boys and girls aged 11-22 years old lack adequate information about sexual reproductive health, including HIV and AIDS. Additionally, the Forum for African Women Educationalists of Zambia (FAWEZA) in Mutombo and Mwenda (2010) observe that one of the reasons many girls get pregnant is

due to lack of reproductive health knowledge and information. A number of interventions to reach adolescents with sexual reproductive health information are being implemented throughout the country by different players including government departments, NGOs and the media.

Despite this, the level of coverage (quantity), as well as the quality and types or choices of ASRH in Zambian newspapers is not known. Zambian newspapers, despite their strategic positioning, seem not to be playing an influential role through adequately covering ASRH issues that might result in adolescents refraining from risky practices in reproductive health that have been alluded to above. The reason for this remains equally unknown. To further compound the above, there is hardly any visible indication of research to ascertain the extent and quality of coverage of adolescent sexual reproductive health by Zambian newspapers. This study therefore proposes a study of the problem stated.

1.4 Significance of the Study

Upon establishing the extent and quality of coverage of ASRH by Zambian newspapers it is envisaged that different media especially newspapers might improve and increase their coverage of ASRH if need be. Consequently, it is hoped that this research may help adolescents to gain access to more quality information about reproductive health issues. Access to information might in turn empower adolescents to make well informed decisions as well as choices about their sexual reproductive life. As a result, there may be reduction of the current high rates of teenage pregnancies, deaths, abortions, HIV infections and other reproductive health vulnerabilities that adolescents are currently facing. Being well informed for adolescents may, among other things, entail that adolescents might delay their first sexual intercourse or, if they are already sexually active, take precautions by using contraception. With knowledge at hand, adolescents might be able to make well informed decisions about their sexual reproductive health leading to a reduction in their being vulnerable or at risk of death which comes about as a result of ill health in their reproduction system. Additionally, it might help Zambians

to achieve well-being in this area of their lives. All this may be achieved by the newspapers tapping into the findings of this research from which they might be prompted to adopt a number of measures which they can put in place in order to improve or increase coverage of ASRH issues depending on the outcome of this study.

The study might also help bridge the research gap that is pending in this area because no research has been conducted to assess the coverage of adolescent sexual reproductive health issues in the Zambian newspapers; hence this research may help the media to decide on which way to go concerning sexual adolescent reproductive health. Furthermore, different media may get to understand and have a passion for reporting on reproductive health issues. The study findings might also pave way for media to formulate policies and strategies not only to cover adolescent reproductive health education but reproductive health in its entirety.

1.5 Objectives of the Study

1.5.1 Main Objective

The main objective of the study was to establish the extent and quality of coverage of adolescent sexual reproductive health by *The Post*, *Times of Zambia* and *Zambia Daily Mail* newspapers and to ascertain whether this coverage is adequate or not. As earlier alluded to Adequate simply means enough, sufficient or ample and it should be noted that there is no set system or standard used to measure adequacy or to determine adequate newspaper coverage of news. However, this study will define adequate as having about 25% and above of the stories in a particular newspaper on a topic or subject, over a given period of time.

1.5.2 Specific Objectives

The specific objectives included the following:

- a) To investigate the nature of the coverage of ASRH in terms of number (quantity) of articles , the type of articles , where they are placed and their prominence and quality ; by *The Post*, *Times of Zambia* and *Zambia Daily Mail*;
- b) To establish if *The Post*, *Times of Zambia* and *Zambia Daily Mail* have policies that guide coverage of ASRH issues and to establish whether coverage of ASRH by the three newspapers is event driven or issue based;
- c) To find out what kind of ASRH information adolescents need the Zambian print media to provide;
- d) To identify the challenges that journalists from the above mentioned newspapers encounter when covering ASRH.

1.6 Research Questions

The research was guided by the following research questions:

- a) What is the quantity and quality of coverage of adolescent sexual reproductive health by the *Daily Mail*, *Times of Zambia* and *The Post* newspapers?
- b) What issues in ASRH would adolescents want covered by the above mentioned newspapers?
- c) How much prominence and importance are ASRH articles given in the three newspapers?
- d) How in-depth do the three newspapers papers go when covering ASRH? How far do they go with their coverage?
- e) How do the three newspapers' editorial policies guide them when covering adolescent sexual reproductive health?
- f) What challenges do journalists for the above mentioned newspapers face when covering ASRH issues?
- g) What drives the three newspapers' coverage of ASRH?

1.7 Scope of Study

The study was carried out in Zambia's Lusaka province in Lusaka town. It was conducted from three newspapers, *The Post*, *The Zambia Daily Mail* and *the Times of Zambia* and three secondary schools (Dora Tamane, First Rate Academy, Kamwala High School and two basic schools (Libala and John Laing Basic) in the town. The schools provided the adolescents needed for the research while the newspapers provided newspapers from their libraries, reporters and editors required by the research.

1.8 Ethical Issues

The research ensured that every research procedure done was guided by ethical research practice and principles. For example, before any interviews were conducted permission was obtained and consent was obtained for the use of the information obtained. Confidentiality was also observed as agreed during some of the research processes.

CHAPTER 2

RESEARCH METHODOLOGY

2.0 Introduction

This chapter gives a discussion of the methodology used in the research and it also gives a description of the sample selection procedure, data collection methods and coding. Additionally, this chapter describes the methods used in analysing the data.

2.1. Research Design

2.1.1 Research Methods

In order to accomplish the stated objectives, the research employed both qualitative and quantitative research methods by use of interviews, Focus Group Discussions (FGD) and quantitative content analysis. The use of both research methods, also referred to as triangulation; was used with a belief that triangulation ensures validity, reliability as well as a relatively in-depth understanding of the subject under scrutiny (Wimmer and Dominick, 1987). As such, the study used qualitative research because it was envisaged that qualitative techniques (interviews, FGDs) could increase the researcher's depth of understanding of the phenomenon under investigation and because they are flexible and allow for pursuing of new areas of interest and give detailed descriptions and explanations of the phenomenon studied rather than providing and analysing statistics. On the other hand, quantitative research was used in this research because of its element of number use which allows for greater precision in reporting results.

2.1.1.1 Quantitative Research Methods

2.1.1.1.1 Quantitative Content Analysis

The main method for data collection in this research was quantitative content analysis, a quantitative method of research. Many definitions of content analysis exist. Walizer and

Wienir (1978) have defined it as any systematic procedure devised to examine the content of recorded information while Krippendorff (1980) defined it as a research technique for making replicable and valid references from data to their context. Kerlinger's (1973) definition is fairly typical: content analysis is a method of studying and analysing communication in a systematic, objective and quantitative manner for the purpose of measuring variables (Wimmer and Dominick 1987:166).

The newspapers under study were analysed in order to establish whether they cover ASRH and how frequently they do so. The content analysis was also used to measure the quality of the stories or articles covered. The choice of content analysis by the researcher was based on the understanding that the technique is objective, systematic and it had several advantages for this particular study as can be noted from the definitions of content analysis above.

The researcher did an intensive physical search for articles containing ASRH throughout the newspapers under study and the ones found were logged using a special coding sheet (see Appendix I and II). Information gathered on each article included the following:

- a) Name of publication
- b) Date of publication
- c) Author's name
- d) Headline of article
- e) Summary of story
- f) Size of article (length in column centimetres)
- g) Type of article (feature, column, news, letter to editor etc.)
- h) Statistics (Use of Research)
- i) Adolescent sexual reproductive issue covered in the article

- j) Type of page where article is placed (Business, Sports, Local news etc.)
- k) Source (In-house, local, International)
- l) Number of sources
- m) Photo
- n) Language decency
- o) Ethical Issues
- p) Events or Issue based
- q) People in story (adolescents or adults)
- r) Accuracy
- s) Prominence of page where ASRH issues were placed (Front lead or page lead story)

Furthermore, the researcher based the content analysis of all publications based on the following themes:

- a) Puberty
- b) Pregnancy (unwanted pregnancies or teen pregnancies)
- c) HIV and AIDS
- d) Abortion
- e) Adolescent reproductive health rights
- f) Contraception (family planning)
- g) Sexually Transmitted Illnesses (STIs)

2.1.1.1.2. Quantitative survey

2.1.1.1.2.1. Questionnaires

One structured questionnaire was used to collect data on media coverage of ASRH from journalists consisting of reporters and editors from newspapers under study while another structured questionnaire was directed at collecting data from adolescents. The questionnaire directed at journalists was self-administered while the one directed to adolescents was administered with help from trained research assistants. The questionnaires consisted both open-ended and closed-ended questions and this survey with the journalists was qualitative. Questionnaires were a preferred method because they enable one to organize the questions and receive replies without actually talking to every respondent thereby avoiding interview bias (Walliman, 2001).

2.1.1.2. Qualitative methods

2.1.1.2.1 In-depth Interviews

In-depth interviews were conducted and a total of 12 editors and 18 reporters were interviewed from all newspapers under study. Managers from each newspaper sampled provided ten journalists selected alphabetically from a list. The researcher requested the managers to choose journalists whose first names appeared first on the English alphabet. It was anticipated that this process would also ensure that the sample had subjects with various ages. On the other hand, where all the first ten were males or females, a female or male journalist was deliberately included on the list of ten to replace one. Nevertheless, it should be noted that the instructions were not fully followed by all the newspaper managers as one of them indicated to the researcher that they preferred own choice of journalists to participate claiming that the alphabet was discriminating against some of their most capable health news reporters. The use of an alphabetical list had been preferred to avoid the risk of having a sample that has elements that are alike. This method hoped to ensure the principle of genuine randomness in the sample selection.

The in-depth interviews focused on finding out the challenges that journalists from these newspapers faced when covering ASRH. The in-depth interviews were guided by schedules and these gave the researcher a lot of room to probe and adjust the direction of interviews were necessary. The in-depth interviews gave the researcher a chance to clarify certain information given and to also get a rich and large amount of data. “The major advantage of in-depth interviews is the confidential atmosphere in which informants can share sensitive information. Informants are able to provide detail about their personal experiences, views, and behavior” (Longfield, 2004).

2.1.1.2.2 Focus Group Discussions (FGDs)

Focus Group Discussions were conducted with 100 adolescents from various secondary schools in Lusaka. This was done using a semi-structured interview guide. The adolescents were encouraged to participate freely in the discussions by providing an enabling environment of encouraging them to ask questions and to discuss responses as openly as possible. In all, ten groups, each consisting of ten pupils and in total, a 100 people took part in the FGDs. Wimmer and Dominick (1987), observe that focus group responses are often more complete and less inhibited than those from individual interviews because one respondent’s remarks tend to stimulate others to pursue lines of thinking that might not have been brought out in an individual situation.

2.2. Data collection instruments

As earlier alluded to, in this study, structured questionnaires were used to collect data from the 100 adolescents and a content analysis questionnaire and coding sheets were used to get data from the three newspapers under study. A semi-structured Interview schedule was also used to collect data from the 30 journalists and an FGD guide was used to collect data from the adolescents.

2.3. Sampling Procedure and Sample Size

Simple random sampling was used to identify participants for the in-depth interviews with journalists and focus group discussions (FGDs) with adolescents and the quantitative survey with adolescents using questionnaires and journalists that the researcher used to gather data. Even as the researcher used simple random sampling, it was recognised that the samples selected are not representative of the general population of Zambia; rather they attempted to represent a specific portion of the population; especially when it came to selecting the adolescents. Five schools were randomly selected and these consisted two basic schools (grades eight and nine) and three high schools (grades 10 and 11) in Lusaka. The five schools were randomly selected by writing names of 15 high schools in Lusaka town on separate pieces of paper. Then the pieces paper were placed in a box. Without looking, the researcher then picked three papers bearing names of the high schools to be involved in the research. The same process was used when picking the two basic schools.

A total of 100 participants (adolescents) were selected for this study and from these a convenient sample of 10 boys and 10 girls per school was chosen giving a total of 20 students from each school. The boys and girls were picked randomly from their class registers from each school. Most of the classes had an average number of 40 pupils and the researcher picked every second pupil in the register and then assessed whether the pupil picked matched the age that was being looked for. In the event that a pupil did not meet the characteristics (age and gender) set, he or she was skipped. Moreover, to be included in the sample the girls and boys had to be aged between 12 and 19 years in grades eight through eleven. Grade twelve students were excluded because they were writing their final examinations at the time. The pupils in grades selected were also selected because of their ability to communicate in English and their ability to read and write proficiently. The FGDs consisted of 10 participants per group in order to ensure full participation from all adolescents and for ease of management. The researcher saw the need to involve the adolescents because they are the targeted audience for ASRH information presented in the newspapers, therefore, it was necessary to get their views

especially on what they desired the newspapers to present to them in terms of ASRH issues.

Furthermore, a total of 30 journalists were selected from the three newspapers under study using purposive sampling by choosing the ones involved in reporting general news and health news. This number was broken down into 10 journalists from each newspaper consisting of six reporters and four editors. The journalists were randomly picked from the staff lists provided by the various newspapers under study.

Purposive sampling was also used to select three daily newspapers for content analysis to determine ASRH coverage in terms of quality and quantity namely; the *Zambia Daily Mail*, *Times of Zambia* and *The Post newspaper*. These three newspapers were chosen for content analysis because they have got a wide coverage, and reach. In other words, these newspapers circulate to most parts of the country and represent the private and public media. *The Post Newspaper* is privately owned while *Times of Zambia* and *Daily Mail* are state owned papers. In addition, these newspapers are published daily and this was significant for sampling purposes and for consistency in terms of data collection and analysis. It should be noted that these newspapers' weekend issues or monthly issues were also treated as part of the main newspaper. For example, the *Weekend Post* was incorporated in the mother name *The Post Newspaper* and the same applied to the other two newspapers as well. As earlier alluded to, the online newspapers or publications, as much as they are in existence in Zambia; were not the focus of this study. This is because the popular ones like the *Post*, *Zambia Daily Mail* and *Times of Zambia* newspapers online actually carry the same news that their printed versions carry so the findings would have reflected the same had these been analysed also. As for the *Zambian Watchdog*, *Tumfweko*, *Lusaka Times* and *Lusaka Online*; most of the news they publish is usually sourced from different sources and not so much from the firsthand source in their organisations. For instance, the *Lusaka Times* online clearly states on their website <http://www.lusakatimes.com/about/> : "Our day to day news content comes from known *Zambian* sources like *Zambia Daily-Mail*, *Times of Zambia*, *ZNBC* and *ZANIS*. These are the giants whose shoulders we stand on." Most of the news seems to

be based on rumour and without named sources; the sources seem to always be anonymous or “sources close to the publications” as the researcher observed from most of their articles. This has led to most people doubting their content and the publications being constantly rebuked as a result not so much credibility is placed in these publications.

Additionally, most of these publications seem so inclined to reporting politics and giving commentary on the going-ons in Zambian politics. These reasons, coupled with the fact that most Zambians do not use the internet so much gave the researcher reason not to focus on the on-line newspapers or publications despite the fact that the internet is the medium that most young people get drawn to and are constantly using or having access to especially now that it is available on mobile phones (which most adolescents now own) unlike in the past when the only places it could be accessed from were internet cafes. However, it should also be noted that internet use is concentrated in the urban areas making online publications not to have the characteristic of wide reach because most rural dwellers do not have internet access, let alone computers and the cost of using the internet is high at about K100 to K200 per minute (slightly less than a dollar to browse for an average of 10 minutes. According to Internet World Statistics (2011), there were about 882,000 internet users in Zambia by December 2011 which is approximately 6.6% of the country’s population of 13.2.million.This percentage is small compared to the national population. (Internetworldstats.com)

The study analysed newspaper coverage of ASRH issues for a total period of six months namely December, March, April, June, July of the year 2010 and January 2011. The researcher analysed a total of 549 newspaper editions. The months December, March and June were selected because during these months commemoration of days related to adolescents and reproductive health occur. For example, on December 1st, is World AIDS Day which is commemorated worldwide and Zambia takes part in commemorating this day. Another day celebrated is Youth Day which falls on 12th March and Day of the African Child is commemorated on the 16th of June. The months that follow these months, that is, January, April and July also had their coverage of ASRH analysed so as

establish whether the newspapers under study's coverage of ASRH is event based. Additionally, months that have celebrations or events of youth and ASRH issues were also selected in order to establish the same.

2.5. Data analysis

Analysis and presentation of collected data in the questionnaires and in the content analysis process was articulated using the Statistical Package for the Social Sciences (SPSS) and Windows Excel. After data was collected using content analysis, the information was logged or coded using a special coding sheet (Appendix II). The data was then analysed quantitatively using frequency distributions and rank correlations to examine patterns in media coverage of ASRH. These packages (SPSS and Windows Excel) yielded quick and efficient results and provided for the formulation of statistical tables, graphs and charts. To allow for validation and comparison of the findings, the researcher when analysing the data looked at the objectives and research questions individually and collectively. These were then correlated with the results obtained from qualitative and quantitative surveys. A thematic analysis of data was also done, that is, qualitative data was logically organised and analysed by selecting key themes that were relevant to the study.

CHAPTER 3

CONCEPTUAL & THEORETICAL FRAMEWORK

3.0 Introduction

This chapter outlines the theories and concepts that have been used in interpreting and presenting data that was obtained from the research.

3.1. Conceptual and operational definitions

For easier comprehension of what the study entails the definitions relevant to the study should be highlighted.

3.1.1. Reproductive health and adolescent sexual reproductive health

Reproductive health is a state of complete physical, mental and social well-being, and not merely the absence of reproductive disease or infirmity. Reproductive health deals with the reproductive processes, functions and system at all stages of life (World Health Organisation (WHO), 1994).

The International Conference on Population and Development Programme of Action (ICPDPA) of 1994 states that “reproductive health ... implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this last condition are the right of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law, and the right of access to appropriate health care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant ... Reproductive health includes sexual health, the purpose of which is the enhancement of life and personal relations, and not merely counselling and care related to reproduction and sexually transmitted diseases” (ibid).

Reproductive health is a very cardinal part of every human being. The very existence of life depends on a human being with a healthy reproductive system and as such it is something that ought to be considered with great seriousness. The WHO (1994) observes that reproductive health is a crucial part of general health and a central feature of human development. It further states that reproductive health is a reflection of health during childhood, and crucial during adolescence and adulthood, sets the stage for health beyond the reproductive years for both women and men, and affects the health of the next generation. Failure to deal with reproductive health problems at any stage in life sets the scene for later health and developmental problems.

Reproductive health is an important component of general health such that it is a prerequisite for social, economic and human development. The highest attainable level of health is not only a fundamental human right for all; it is also a social and economic imperative because human energy and creativity are the driving forces of development. Such energy and creativity cannot be generated by sick, tired people, and consequently a healthy and active population becomes a prerequisite of social and economic development. In view of the above definition and explanation of what reproductive health is, there is no doubt that adolescents also need it. (ibid)

Having defined what reproductive health is **Adolescent Sexual Reproductive Health** will be taken to simply mean reproductive health for adolescents.

3.1.2. Sex education

According to the WHO, sex education is an educational programme designed to provide the learners adequate and accurate knowledge of the biological, socio-cultural and moral dimensions of human sexuality. Human sexuality is the core of sex education and is a function of the total personality which includes the human reproductive system and processes individual feelings about being a woman or a man, the relationship between the members of the same or opposite sex. It embraces the biological, socio-cultural and ethical aspect of human sexual behaviour (Sahu, 2004). In other words, sex education is a

broad term used to describe education about human sexual anatomy, sexual reproduction, sexual intercourse, and other aspects of human sexual behaviour.

The media has three basic functions and these are educating, entertaining and informing and through these three functions sex education is achieved. Media (newspapers) coverage of ARSH should be seen to drive at administering sex education to adolescents through their three functions.

3.1.3. Adolescents, youth, young people

There is no one agreed upon definition of adolescent. This is because the age ranges differ from country to country or from one organisation to another. For example, the WHO defines adolescents as persons in the 10-19 year age group and youth as the 15-24 year age groups. ‘Young people’ or ‘youth’, on the other hand, covers the age range 10-24 years combining two overlapping groups into one entity. The three terms depending on the context, are sometimes used interchangeably (Makwate, 2002) and in the present context they will be used interchangeably. It should, however, be noted that there is hardly consensus among scholars and international agencies on the definition of the youth. In Zambia a “youth” is defined as a male or female person aged between 15 and 25 years. (Zambia Department of Youth Development, 1994)

Although a decade of life from 10-19 years provides us a formal, temporal definition of an adolescent, the social and cultural norms recognition of the concept and values placed on adolescence as a transition period between childhood and adulthood vary substantially between cultures and societies. In many populations, adolescence is not recognised as such and special rituals, commonly not universal, mask the relative sudden transition from childhood to adulthood (ibid). This study will take adolescent to mean anyone between the age of 12 to 19 years old and this will also be used to define youth. In this study these two will be used interchangeably.

3.1.4. Mass media

The mass media are the technologies and social institutions such as newspapers, radio, books, magazines, film, and television that are involved in the production and distribution of messages to large audiences. They are also referred to as devices used to accomplish mass communication. According to Steinberg (1972), it is important to be aware that, while the mass media are essential in the process of mass communication, they represent the technological instruments used to convey messages to large audiences; they do not constitute the process involved. In other words, mass media are the devices used to accomplish mass communication and these include newspapers, radio, books, television, magazines and film.

3.1.5. Mass communication

According to Dennis and DeFleur (1998) mass communication is an essentially linear, multistage process in which professional communicators design and use media to disseminate messages widely, rapidly and continuously in attempts to influence large and diverse audiences in a variety of ways.

3.1.6. Sexuality

This is a central aspect of being human throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious and spiritual factors (WHO, 2002).

3.1.7. Newspaper

A newspaper is a publication produced regularly on mechanical printing press that provides news of general or specialised interest, is available to people of all walks of life and is readable by them, and is stable over time (Dennis and DeFleur, 1998). It is a publication containing news and comments on current events, together with features and advertisements, that usually appears daily or weekly and is printed on large sheets of paper that are folded together and it can also be defined as an organisation that produces a newspaper.

3.2. Theoretical Framework

It should be noted from the beginning that this study does not have a proven theory to explain the levels of coverage of ASRH in the newspapers under study. It however borrowed from the following theories: media information dependency theory and agenda setting theory.

3.2.1. Agenda Setting theory

Mass media provide information among people at large so that there is acceptance of any idea to create interest. The information mass media displays could be about health and makes people aware so as to prevent the spread of various diseases. This also applies in ASRH issues. The Agenda-Setting theory states that the media (mainly the news media) are not always successful at telling us what to think, but they are quite successful at telling us what to think about (Cohen, 1963). Media could make everyone think about adolescent sexual reproductive health by setting agenda on how important it is to each and every human being especially the youths. This they can do by covering more on the issue.

As earlier alluded to, there are various types of mass media (magazines, television, internet, newspapers). The media have the power to direct our attention towards certain

issues. This is the agenda setting theory. In the words of Cohen (1963), the media “may not be successful in telling their readers what to think, but are stunningly successful in telling their readers what to think about”. Freimuth et al. (1984) have shown that many people rely on the news media for their health-related information.

Policy makers also obtain considerable amount of information from the media. As Bryant and Thompson (2002) have suggested, news coverage of health matters takes on considerable significance that has the potential to shape the impression of average citizens and powerful policy makers alike. According to Brown and Walsh-Childers (1994), news coverage of health tends to ascribe the power to control individuals’ health to medical experts using high-technology equipment. Studies have also shown that the news media tend to increase their coverage of health concerns as they affect the society’s mainstream and/or the greatest number of people in their audience.

Through setting the agenda, the media can draw the attention of adolescents especially when they are presenting issues concerning them in sexual reproductive health. According to the agenda setting theory, media are able to structure issues and present them to the public who in turn have something to think about and act accordingly. Lazarsfeld et al. (1944) in McQuail 2000 refers to it as the power to ‘structure issues’. Adolescents can be convinced as to what, from the media’s or media user’s standpoint, are most important issues in reproductive health. This is an essential part of advocacy and attempts at influencing public opinion. As Trennan and McQuail pointed out in McQuail 2000 , “the evidence strongly suggests that people think about what they are told but at no level do they think what they are told”(1961:178).

3.2.2. Media Information Dependency Theory

This theory states that the more dependent an individual is on the media for having his or her needs fulfilled, the more important the media will be to that person. It states that the relationship between the content of mass media, the nature of society and the communications behaviour of audiences is called media information dependency theory.

People in contemporary urban-industrial societies, make heavy use of the content that the media provides by reading newspapers, magazines and books; going to the movies, watching television, renting films for their VCRs and listening to the radio. In part, they do this because they enjoy media content. However, according to Dennis and DeFleur (1998), people in modern society have come to rely on mass communications for all kinds of information that they would find difficult to obtain from other sources. They turn to the media (far more often than neighbours, friends and family) for entertainment. They do so when they want to find out the latest news, or how to interpret it. They also turn to the media to find out where they can purchase things they need at the best prices, to locate suitable housing, to obtain many kinds of services, to seek employment and many other things.

Dennis and DeFleur (1998) observe that a major reason for this media information dependency is that people live in a society in which networks of interpersonal ties are not as deeply established as they once were in preindustrial societies. Adolescents no doubt also depend on the media for information about a number of issues which also includes sexual reproductive health. However, most youths do not get adequate and accurate information most times. According to Simasiku et al (2000), research findings indicated that adolescents in Zambia have incomplete, inaccurate and distorted information on sex and reproduction and that they mainly depend on unreliable sources of information such as friends, grandparents and pornographic video films, parents and clinics were very rarely mentioned as sources of information. This theory will help the researcher establish how much coverage of ASRH the newspapers under study do i.e. whether it is enough to make adolescents depend on the media for such information. Improved coverage of ASRH will hence mean that the youths that rely on media (newspapers) for information will be catered for.

CHAPTER 4

LITERATURE REVIEW

4.0 Introduction

This chapter presents information from various literatures that were reviewed concerning the subject at hand. The review highlights general media coverage of ASRH globally. The chapter also presents the situation of ASRH in Zambia.

4.1 Media Coverage of ASRH: A Global Perspective

It should be noted from the onset that at the time of the research there was no evidence of research that had been carried out in Zambia on the subject matter of the study. However, research or content analysis has been done on issues of sexual reproductive health coverage by the media in different countries worldwide and it was observed that most media houses in Africa do not pay much attention to covering sexual reproductive health issues let alone ASRH. Most of the coverage has a ‘uniform message’ element to it in that most of the messages are not targeted specifically at adolescents but to everyone, irrespective of age, sex, gender and occupation.

According to Akinfeleye (2006), a research carried out in four African countries (Nigeria, Egypt, Kenya and South Africa) print media, particularly newspapers, stated that the print media in all countries under study all record low coverage, shallow analysis of sexuality issues and sometimes misinformation and disinformation. It was observed that during the period under study (January to June 2004) the above mentioned countries’ media covered various aspects of sexuality, though coverage focused largely on HIV and AIDS. The studies revealed very limited coverage of issues of sexual rights, reproductive rights and sexual identity. In other words, there is scanty coverage of sexuality issues in the African media and this does not accord the subject the position it deserves in the public mind. Akinfeleye further states that the total number of articles on sexuality reported in the sample of media (of the period of six months under study), was 20 and that none of these articles were front page stories. Rather, they were to be found in the

middle pages, with some of the issues being featured in the newspaper's editorial for that day.

Additionally, according to Kumasi and Muita (2006), in Kenya findings from content analysis of sexuality related issues by two most widely circulated dailies (the Daily Nation and the Standard newspapers), weeklies (Citizen Weekly and Independent) and monthly magazines (Drum and Eve) in the second half of 2005; revealed that on the whole, coverage of sexuality issues including reproductive health issues was found to be relatively general and lacking in detail. It was observed that during the period in focus, the media seem to have assumed the basic role of information transmission and not of imparting education or raising the readership consciousness to sexuality and related issues.

Furthermore, for most print media in African countries the media coverage of certain sexual reproductive health issues is usually event driven. For instance, coverage of HIV and AIDS and Tuberculosis issues in Ethiopia is not sufficiently consistent based on well ahead planned activities of the newsrooms. The coverage is highly event-driven rather than an interest on the part of the media houses to report on the issues with analytical depth and fail short of providing human interest stories which show the consequences of the epidemics on individuals and families (Panos Institute of Eastern Africa, 2009).

Mbozi (2010), after conducting a content analysis of HIV and AIDS coverage among seven major newspapers in Zambia from July 1st, 2009 to December 31, 2009, pointed out that quality and in-depth analysis was also lacking from story quality. He observed that most stories covered in the print media were short news stories of official events and that these stories relied little on statistics, quotes and testimony from people affected by the pandemic. For instance, of the 278 HIV and AIDS stories written, 168 quoted only one source for their stories, 68 two sources, 20 three sources and the rest four or more sources. Additionally, almost half (44% or 123) of the 278 articles were less than 500 words long, 26% (72/278) were in the range of 500 to 1000 words, 14% (40/278) in the range of 1000 to 1500 words, 4% (17/278) 1500 to 2000 words and the rest above 2000

words. With respect to issues for PLWHA, 25% (71/278) of the HIV/AIDS stories highlighted treatment; 7% (19/278) addressed human rights; 5% (13/278) talked about nutrition; 3% (9/278) were on stigma; and, the majority 60% (166/278) had no issues for PLWHA. In other words, the articles lacked a human face.

Additionally, a study based on a 15-month content analysis of a national Ghanaian newspaper—the *Daily Graphic*—which looked at assessing coverage of Reproductive Health (RH) issues—family planning (FP), abortion, and HIV; coverage of RH issues was extraordinarily poor, less than 1 percent each for FP, abortion, and HIV. RH news that was covered was given little prominence. This review shows that coverage of the four RH issues was incredibly poor, less than 1 percent for each. Of the close to 5,000 news items analyzed (including straight news, features, editorials, and letters to the editor), 197 (4.2 percent) were on health, and 25 (0.5 percent) were RH-related. Specifically, there were four (0.09 percent) news items on FP, two (0.04 percent) on abortion, and 19 (0.4 percent) on HIV. The 62 editions of the paper contained a total space = 2,937,962.00cm². Of this, only 5,433.95cm² representing 0.2 percent was dedicated to RH news. The mean number of non-health stories per newspaper issue (excluding adverts, comics, obituaries, weather reports, announcements, commodity quotations, and stock markets) was 75.64. For news items on health, this statistic was 3.18, and for RH news, it was less than 1 (0.47), (Laar, 2010).

Furthermore, the International Federation of Journalists (IFJ) (2006) after a two week media monitoring “snapshot” of HIV and AIDS coverage in six countries (Nigeria, Cambodia, Philippines, South Africa and India) it was discovered that there was a low coverage and medium prominence of HIV/AIDS stories in the media. Media monitoring found a low incidence of HIV/AIDS stories across most media in the six countries. Researchers variously described the incidence of HIV stories during the media monitoring as “small” (Cambodia and the Philippines), “miniscule” (South Africa), and “infrequent” (India). In Nigeria, the researcher noted that cartoonists in particular had “gone to sleep on HIV/AIDS”. When they appeared in Asian media, HIV stories were generally given a moderate to high prominence, although researchers in all three Asian

countries felt this was related to World AIDS Day (which occurred during the monitoring period in Asia). Researchers in African countries found that prominence varied and that many stories were event-based and buried. All researchers reported that, overall, the number of HIV/AIDS stories in print and broadcast media was low compared to other stories during the two monitoring periods (ibid).

4.2 Adolescence in Zambia and the World

Today there are more than one billion 10-19 year olds, 70 percent of whom live in developing nations (United National Population Fund (UNFPA) 2003). UNFPA (2008) further states that this group of people is growing up in circumstances quite different from those of their parents, with greater access to formal education, increasing need for such technological skills as computer and internet literacy, different job opportunities, and more exposure to new ideas through media, telecommunications and other avenues.

The environment in which young people are making decisions related to sexual and reproductive health is also rapidly evolving. Rates of sexual initiation during young adulthood are rising or remaining unchanged in many developing countries, childbearing and marriage are increasingly unlinked, and in many countries, high HIV prevalence adds to the risks associated with early sexual activity. For example, in all but a few countries in Africa, AIDS is a generalized epidemic. Young people are disproportionately affected, accounting for almost two-thirds of the people living with HIV in the region. Moreover, the prevalence of HIV among adolescents is higher in Africa than in other parts of the world (UNAIDS, 2004).

According to Amuzu (2007, pp14-15) “sexual activity starts in adolescence for the majority of people. In many countries, unmarried girls and boys are sexually active before the age of 15. Recent surveys of boys aged 15-19 in Kenya and other countries found more than a quarter reported having sex before they were 15. A study in Bangladesh found that 88 percent of unmarried urban boys and 35 percent of unmarried urban girls engaged in sexual activity by the time they were 18. In rural Bangladesh,

those figures were 38 percent for boys and 6 percent for girls. Early marriage occurs across the globe, but it is most common in parts of Africa and South Asia. In India, 50 percent of girls are married by the age of 18.”

New studies from across the globe have also established that the vast majority of young people have no idea how HIV and AIDS is transmitted or how to protect themselves from the disease. This also applies to other sexually transmitted illnesses and other issues. In countries with generalised HIV and AIDS epidemics, such as Cameroon, Lesotho and Sierra Leone, more than 80 percent of young women aged 15-24 do not have sufficient knowledge about HIV and AIDS (Amuzu, 2007) themselves. Many young people that consider their specific needs either do not have access to information about HIV and AIDS or opportunities to develop life skills that they need to turn this information into action. Frequently, they do not have access to youth friendly health services or no health services at all.

Worse still, over 100 million new sexually transmitted infections (STIs); excluding HIV, occur each year among young people under 25 years. Additionally, even when they suspect they have an infection, many young people do not seek medical care because they fear that their privacy will not be respected. Health workers may also be reluctant to serve adolescents (ibid). Access to sexual and reproductive health services is vital in preventing unnecessary deaths of men and women. Yet around the world, governments and health organisations do not prioritise spending on these services (Panos Institute, 2005).

A number of adolescents are at risk because they do not understand the vices that cause ill-health. For example, according to Amuzu (ibid), young people are vulnerable because they often do not know how serious the problem of HIV and AIDS is, how it is caused or what they can do to protect themselves and according to the ZDHS (2007), overall, less than 35 percent of Zambians ages 15 to 19 had comprehensive knowledge of HIV and AIDS a status that no doubt, makes them vulnerable. If adolescents lack understanding, it means that they are bound to make wrong decisions and choices concerning their reproductive health.

Adolescent sexual reproductive health issues are also serious both in the central and eastern parts of Europe and in the west. For example, the adolescent pregnancy rate now tends to be between 12 and 25 (per 1000 aged 15–19) in most western European countries, but the rate is 47 in the United Kingdom, where it is a major social and health concern. However, the United Kingdom rate is less than half of the reported rate in the Russian Federation (102 per 1000). Adolescents tend to become sexually active at earlier ages but proper sex education and sexual health services are largely lacking (WHO, 2001).

As earlier alluded to, the reproductive health of Zambian adolescents has been, and continues to be a matter of serious concern. According to the Zambia Reproductive Health Policy, (Ministry of Health (MOH), 2006) adolescent sexuality is becoming an increasing concern in the country. For a country whose population is mostly comprised of young people, this no doubt is a serious matter if the survival of the country is put into consideration. Sixty eight percent of the population in Zambia comprises children and youth. To be specific, the youth aged between 18- 35 make up 28 percent of the population while the children between 0-17 years consist of 40 percent (National Assembly, 2010). This means that 40 percent of children is in the age range of what was earlier defined as adolescent.

Young people in Zambia just like any other nation today face a number of reproductive health vulnerabilities. Many youths are extremely exposed to early and risky sexual habits. According to the 2007 ZDHS (2007) the average man and woman in Zambia initiates sexual activity before marriage and among the population age of 25-49, the median age at first sexual intercourse is 17.9 years for men and 17.2 years for women. Moreover, according to UNAIDS (2000) in some impoverished communities, high HIV infection rates may be partly explained by early sexual initiation, consensual or coerced. For example, in a survey of 1,600 urban Zambian youths, over 25 percent of 10-year-old children and 60 percent of 14-year-old youths reported already having sexual intercourse. Urbanisation and modernisation are also giving rise to new patterns of sexual behaviour

in adolescents, including premarital sex which often leads to early pregnancy, induced abortion, STDs and HIV infection.

Worse still, contraception use amongst adolescents in Zambia is very low for both married and unmarried youth leading to high rates of early and unwanted pregnancies. According to the ZDHS (2009) unplanned pregnancies are common in Zambia. Overall, 16 percent of births are unwanted, while 26 percent are mistimed or wanted later. ZDHS states that teen pregnancy is high in Zambia. About three in ten young women aged between 15 and 19 have begun childbearing, that is, they have given birth already or are currently pregnant with their first child. The Forum for African Women Educationalists of Zambia (FAWEZA) Secretariat in Mutombo and Mwenda (2010) state observe that one of the reasons many girls get pregnant is due to lack of reproductive health knowledge.

Moreover, the majority of youths in the country perform abortions under unsanitary conditions which might lead to infertility, morbidity and/ or mortality. In Zambia, information concerning abortion is not clear partly due to the fact that abortion is illegal except in situations where the life of the mother is threatened. Nevertheless, hospital records present some evidence of the incidences of safe or unsafe abortion. According to data from 5 major hospitals across Zambia, a total of 616 women obtained safe induced abortions between 2003 and 2008. In contrast, the number of women admitted to the hospitals with abortion related complications increased from 5600 in 2003 to more than 10,000 in 2008 and totalled 52,791 over six years (Guttmacher Institute, 2009). The Guttmacher institute further states that a study shows that women presenting at the University Teaching Hospital (UTH) in 1990 with complications from unsafe abortions generally were 15-19 years old (60 percent). The study also found that compared with women obtaining illegal abortions, women seeking legal procedures were older (55 percent were aged 20-29).

Additionally, according to the Zambia Reproductive Health Policy, in 1993 the Ministry of Health records indicated that over 16,000 hospital admissions nationally were due to

illegally performed abortions. The policy further states that another study on maternal mortality conducted at UTH, Lusaka, 1993, noted that 15 percent of all maternal deaths were occurring among patients with abortion. Despite the availability of family planning services, many young women and teenagers fail to prevent pregnancies, and in 1993, 23 percent of incomplete abortions were in women younger than 20 years while 25 percent of the maternal deaths due to induced abortion were in girls younger than 18 years. This might well reflect the lack of information and difficult access to family planning services as is reported from anecdotal data on adolescents. Lack of access to comprehensive family planning and safe abortion services are two of the major reasons why so many women suffer abortion complications and end up dying (MOH, Reproductive Health Policy, 2000).

Other sexual reproductive health problems prominent amongst Zambian adolescents include sexual abuse, HIV and AIDS and Sexually Transmitted Infections (STIs). The ZDHS states that among women aged 15-49, the HIV prevalence rate is 16 percent, while among men aged 15-49 and 15-59 the prevalence rate is 12 percent (CSO, 2009). This rate has been reported to have reduced to 14.3 percent; a figure which, unfortunately experts say is not significant. The STIs constitute one of the major public health problems in Zambia and they account for 10 percent of all documented out-patient attendances in public health facilities and more than 50 percent of persons with a history of STDs are infected with HIV (National HIV/AIDS/STIs/TB Policy, 2005). Additionally, according to Nicoll et al (1996, MOH, Dissemination Seminar 1997) in Ndubani and Hojer 2001, about 50 percent of all new HIV infections take place in persons aged between 15-29 years.

It is clear to see that despite various existing policies in the health sector that are relevant to sexual and reproductive health, Zambia still experiences a setback in adolescents sexual reproductive health development. Additionally, government facilities are far from being youth friendly thus making the lives of the youths very difficult when it comes to accessing youth friendly information. Various interventions have been put in place to address this problem and these have included sex education in schools; but this has been

unfair to out-of-school youths who also require information about reproductive health. Thus, a great many adolescents are at risk of experiencing poor reproductive health, which has a number of negative implications for them, for their children, and for society at large.

Lack of information about reproductive health is one of the setbacks that adolescents in Zambia are facing. For example, Warenius et al (2007) in a study aimed to explore secondary school students' needs in relation to sexual and reproductive health in order to inform efforts to improve the quality of health services available to young people discovered that boys and girls lack adequate information about human reproduction and STIs, including HIV. The study involved data collection from 716 11–22-year-old students in four secondary schools in an urban area in Zambia. Adolescents express concern about lack of information and understanding about their own sexuality. Even though services and information are provided in sexual reproductive health, the youths are being neglected. The information that they manage to access is usually not youth friendly and most times not accurate. According to a sexual behaviour study carried out in various urban towns of Zambia, sexual matters amongst young people are discussed with close friends of the same sex and peer group, or with cousins who are of the same age. Sometimes grandmothers are consulted for advice by co-resident grand-daughters. Girls discuss their intentions about sex with their close friends, many of whom appear poorly informed about sex themselves (Kalunde et al, 1997).

Furthermore, people are not free to openly talk about matters of reproductive health because they are bound by certain traditions and customs not to do so. In other words, matters to do with sexuality are considered sacred and open talk about them is considered taboo by most people in the country. Pathfinder International (1999) observes that in sub-Saharan Africa, as in other regions of the world, a culture of silence surrounds most reproductive health issues. Many adults are uncomfortable talking about sexuality with their children, while other adults lack accurate sexual health knowledge (Pathfinder International, 1999).

Despite this, reproductive health problems such as HIV/AIDS, early and unintended pregnancy, and illegal and unsafe abortion are widely recognized by both young people and adults, as public health problems in need of intervention and the lack of information amongst adolescents concerning reproductive health seems to be worsening the situation. A 1994 study found that most Zambian adolescents had limited knowledge about reproduction and sexuality and that 20.4 percent of childbearing, teenage women in urban Zambia were HIV positive. Although providing family planning information and services to adolescents is legal in Zambia, youths were routinely scolded by clinic staff who were reluctant to provide services to young, unmarried people. However, AIDS prevention clubs in primary schools and TV debates, sponsored by the World Health Organization and UNAIDS, have established high levels of AIDS awareness in Lusaka. The community is open to new approaches for reducing adolescent risk (Fykesnes et al, 1997). Newspapers, no doubt, could be another welcome approach.

The WHO (2007) has recognised that the lives of millions of adolescents worldwide are at risk because they do not have the information, skills, health services and support they need to go through sexual development during adolescence. Moreover, UNAIDS (2004) indicates that young men and women need accurate and relevant information about sexuality and reproductive health, including full information about their own risk of acquiring STDs and how to avoid STDs, access to information and services where they feel comfortable and accepted and communication skills to talk honestly with partners about sexuality as well as negotiating skills necessary to refuse unwelcome sex.

As earlier alluded to, there have been a number of media interventions in trying to promote teaching of sexual adolescent reproductive health in the country, but most of them have been in form of campaigns by bodies such as Non-Governmental Organisations (NGOs) which also seem to just have a focus on HIV and AIDS awareness and because of cultural barriers they do not go into so much detail when teaching young people about reproductive health.

As such, the Zambian media have been trying to facilitate sex education, unfortunately, the methods being used, though having impact, seem not to be having a lot of their messages targeting adolescents or youths targeted. There have been a lot of 'one message fits all' methods being used where the messages about sexual reproductive health seem to have information that is uniform for all ages especially in the newspapers. "The mass media are a veritable tool not only in sensitising the public but also in influencing policy makers to take action on issues of national concern. Therefore, the media has got a role to play in the promotion of adolescent sexual reproductive health" (Oniovokukor, 2010).

In Zambia a number of interventions have been put in place to try and bridge the current information gap in the area of reproductive health and among them is the use of the media. Media has been used in the form of radio, television and newspapers, but as earlier alluded to, usually consists of the 'one size fits all' kind of information or messages without specifically targeting different groups with different information.

CHAPTER 5

PRESENTATION OF FINDINGS

5.0 Introduction

This chapter presents the findings of the research. Firstly it presents the quantity of coverage of reproductive health in general by *The Post*, *Zambia Daily Mail* and *Times of Zambia* newspapers and then it narrows down to showing quantity of coverage of ASRH which is the main basis of this study. As such, a lot more detail in terms of coverage is shown concerning ASRH coverage. Additionally, the challenges faced by the media when covering reproductive health are also presented. Moreover, the chapter shows the nature of stories in ASRH that adolescents would like the newspapers to provide for them. Findings concerning policies that help guide coverage of ASRH by the three newspapers are also shown in this chapter.

5.1 Newspaper content analysis results

5.1.1. Quantity of Coverage of Reproductive Health by *Zambian* newspapers: *Zambia Daily Mail*, *Times of Zambia* and *The Post* Newspapers

After examining a total of 549 newspaper issues of *The Post*, *Zambia Daily Mail* and *Times of Zambia*, a total of 224 reproductive health articles as being the number of articles published during the period of coverage selected. The study analysed print media coverage of ASRH issues for a total period of six months namely December, March, April, June, July of the year 2010 and January 2011. The 224 articles found were from a mixture of selected reproductive health topics namely; puberty, pregnancy (teen pregnancy), STIs, contraception, abortion and HIV and AIDS.

Of the 224 reproductive health articles found, the *Zambia Daily Mail* had the most articles at 105 (47%) followed by *The Post* and *Times of Zambia* which had 60 (27%)

articles and 59 (26%) articles respectively. **Figure1** below shows the distribution of articles amongst the three newspapers.

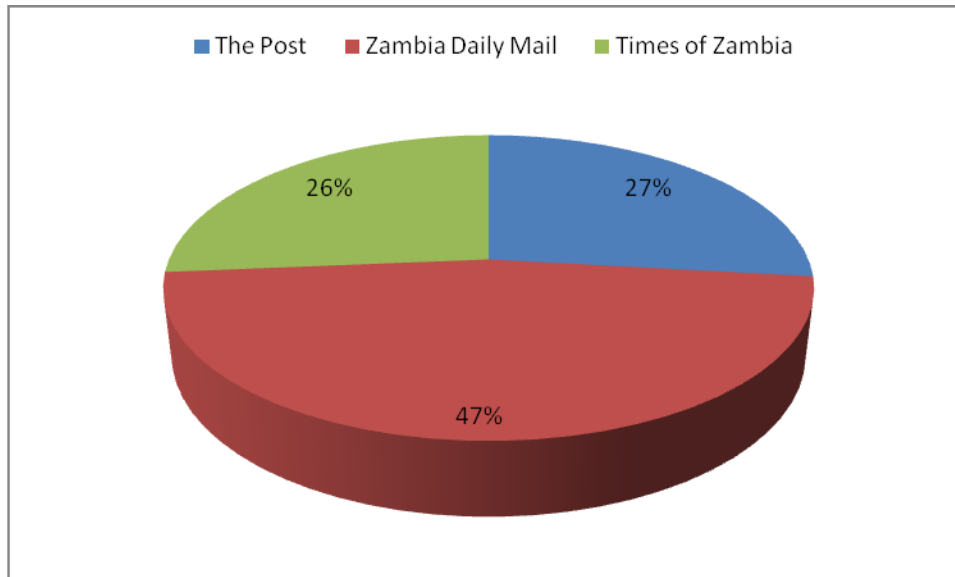


Figure 1. Distribution of reproductive health stories amongst The Post, Daily Mail and Times of Zambia

5.1.2. Comparison of coverage of reproductive health issues by the *Zambia Daily Mail, Times of Zambia and The Post Newspapers*

Of the seven reproductive health topics (Puberty, Teen/unwanted pregnancies, HIV and AIDS, abortion, contraception, ASRH rights and STIs) chosen for content analysis six were covered by the three newspapers. In comparison among the six topics covered HIV and AIDS had the highest percentage, with its articles accounting for 83 % (185/224) of all the stories, followed by teen/unwanted pregnancies articles at 6% (13/224), STIs at 4% (9/224), contraception at 3% (8/224), abortion at 2% (5/224) and puberty at 2% (4/224). (See **Figure 2** on the page that follows).

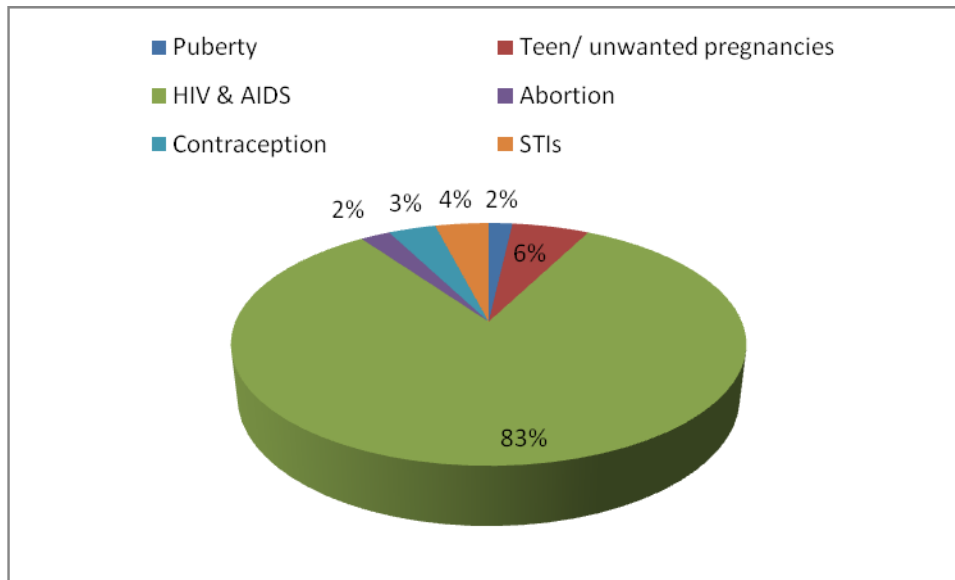


Figure 2. Distribution of Reproductive Health Issues over six months

5.1.3. Comparison of coverage of reproductive health issues by month

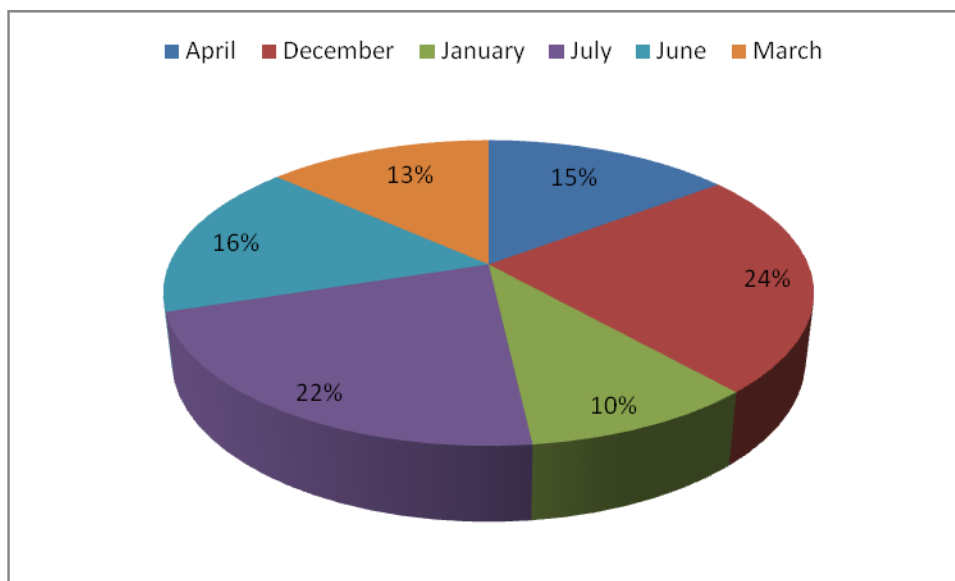


Figure 3. Distribution of Reproductive Health Stories per Month

The research found that the month of December which hosts World AIDS Day on 1st December had the most articles accounting for 24% (53/224) while January, the month following it accounted for 10% (22/224) of the articles. The month of March which hosts Youth Day which falls on 12th March accounted for 13% (30/224) of the articles and the following month, April accounted for 15% (33/224) of the articles while the month of June which hosts the Day of the African Child on the 16th of June accounted for 16% (37/224) of coverage while the following month July accounted for 22 % (49/224) of coverage.

5.1.4. Quantity of coverage of adolescent reproductive health by **Zambian Newspapers: *Zambia Daily Mail, Times of Zambia and The Post Newspapers***

From the newspaper content analysis of all the 224 reproductive health articles published in the three papers under study, only 15 were ASRH stories and of these *The Zambia Daily Mail* had a share of 40% (6/15), *Times of Zambia* had 33% (5/15) and *The Post* had 27% (4/15).

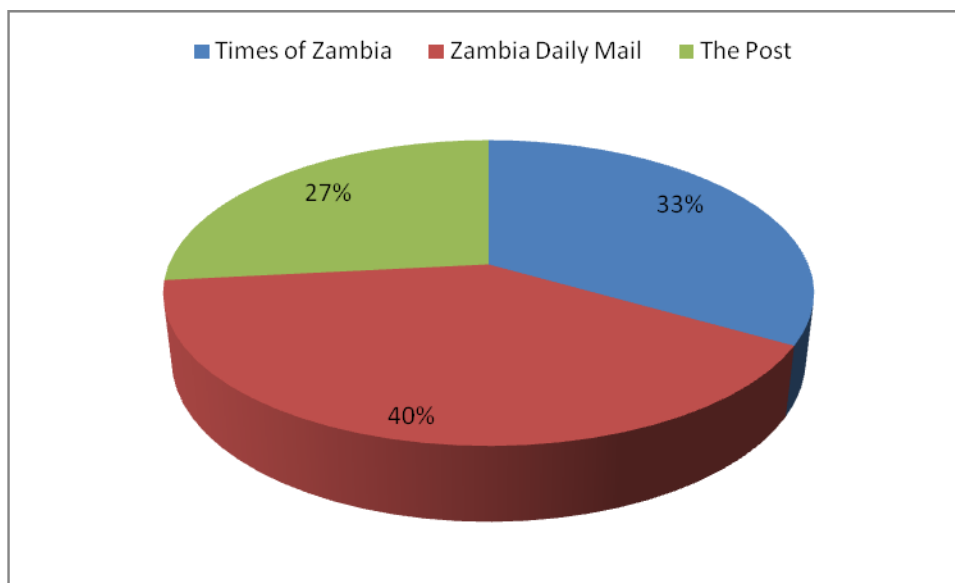


Figure4. Distribution of ASRH Stories amongst The Post, Zambia Daily Mail and Times of Zambia

Table 2 below further shows that the ASRH stories published during the selected six months period only represent 4.7 % of the approximated stories (966 stories) published by the three newspapers over the period under study, with *Zambia Daily Mail* and *The Post* having a share of 1.4% respectively while the *Times of Zambia* had a share of 1.9 %.

Newspaper	Approximate (average) No. of stories per daily edition	Estimated average in 6 months	Published ASRH stories over 6 months	Percentage of coverage
<i>The Post</i>	49	294	4	1.4%
<i>Zambia Daily Mail</i>	69	414	6	1.4%
<i>Times of Zambia</i>	43	258	5	1.9%
Totals	161	966	15	4.7 %

Table 2: Comparison of ASRH coverage by newspaper to the total estimated coverage by all the newspapers over the selected six months.

5.1.5. ASRH Coverage per issue

As indicated in the **figure 5**, almost all (11/15) of the ASRH articles examined were HIV and AIDS articles while 27% (4/15) of the articles were teen/unwanted pregnancy stories. Abortion, puberty, contraception and STIs issues had no share of articles.

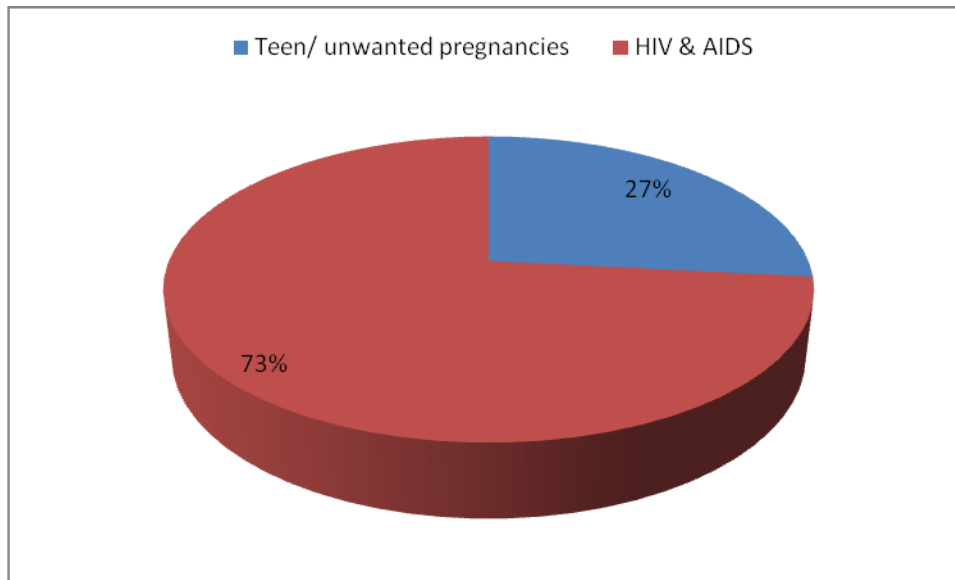


Figure 5. Distribution of selected Reproductive Health issues

Of all the ASRH issues covered, *The Post* newspaper had completely no teen/unwanted pregnancy stories while the *Zambia Daily Mail* had three and the *Times of Zambia* only had one. As for the issue of HIV and AIDS, *The Post* and the *Zambia Daily Mail* had a share of four stories each while the *Times of Zambia* had three.

5.1.6. Comparison of coverage of reproductive health issues according to focus of article

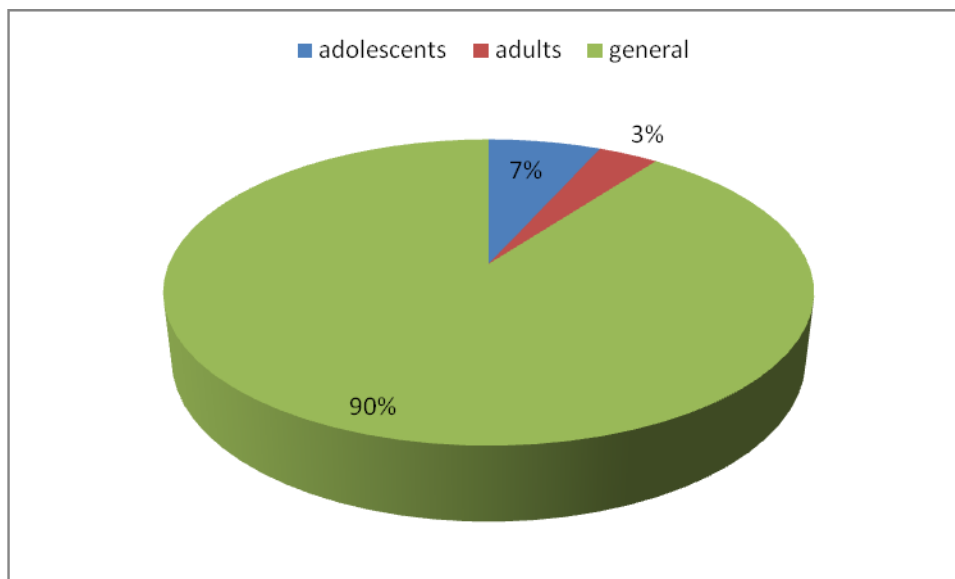


Figure 6. Focus of Reproductive Health Stories

The research discloses that only 7% (15/224) of the reproductive health articles focused on adolescents, while 3% (8/224) focused on adults and the majority 90% (201/224) took a general focus.

5.1.7. Distribution of ASRH by month

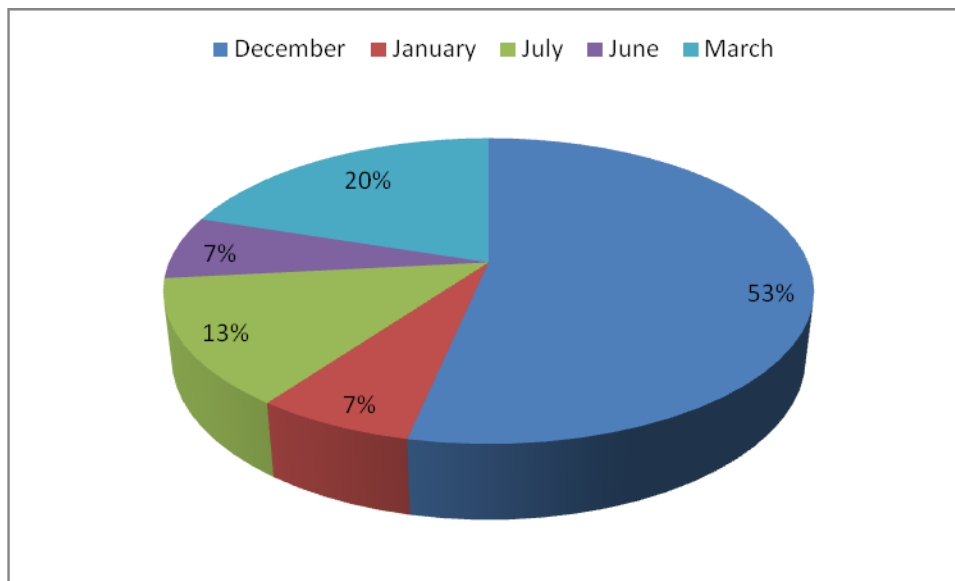


Figure 7. Distribution of ASRH stories by month

The month of April had completely no ASRH stories, December had 53% (8/15), January had 7% (1/15), July accounted for 13% (2/15), June had a share of 7% (1/15) and March had 20% (3/15). In the month of December, out of eight stories covered, the *Times of Zambia* had the lowest coverage with two stories while *The Post* and the *Zambia Daily Mail* had similar number of stories at three each. January almost had no stories with *The Times of Zambia* having the only one story covered in this month. In July *The Post* newspaper and the *Zambia Daily Mail* had one story each while the *Times of Zambia* had none. In June there was only one story covered by the *Zambia Daily Mail* while *The Post* and *Times of Zambia* had none. March, on the other hand, had the *Times of Zambia* having a share of two stories; *Zambia Daily Mail* had one story while *The Post* had none.

5.1.8 Quantity of front page lead stories

TYPE OF PAGE	Home	Business	International/ Foreign	Entertainment	Features	Sports	Supplement	Comment
NUMBER OF ASRH STORIES	3	0	0	0	10	0	1	1

Table3. Placement of ASRH Stories in newspapers

None of the 15 ASRH stories were front page lead stories for any of the newspapers under study.

5.1.9 Quantity of page lead story

Of the 15 ASRH stories examined, seven were page lead stories. Of these seven stories the *Times of Zambia* had the most share of four stories followed by the *Zambia Daily Mail* which had two articles and *The Post* which had one.

5.1.10 Type of page where ASRH stories were placed

As indicated in **Table 3.** above, the majority (10) of the stories were placed on the Feature's page, three were placed on the Home page, one was placed in the Supplement, and one was placed on the Comment page while none were placed on the Business, International/Foreign, Entertainment and Sports pages. Of the three ASRH stories placed on the Home news page, the *Zambia Daily Mail* had the most (two) followed by *The Post* which had one story and the *Times of Zambia* having none. Of the 10 articles placed on feature pages, the *Times of Zambia* had the most (five) stories followed by the *Zambia Daily Mail* which had four stories and *The Post* newspapers which had only one story on this page. The Supplement page only had one article from *The Post* and none for the *Zambia Daily Mail* and the *Times of Zambia* newspapers. The Comment page had only one article from *The Post* and the *Zambia Daily Mail* and *Times of Zambia* had none.

5.1.11 Type of Article

Type of Article	Editorial Comment	Hard News Story	Feature article	Letter to the Editor	Column
Number of ASRH Stories	0	4	5	1	5

Table4. Type of article

There were five ASRH articles written in feature form, four Hard news, five Column, one Letter to the editor and zero Editorial Comment kind. Of the four hard news stories examined, *The Post* and *Zambia Daily Mail* had two stories each while the *Times of Zambia* had none as shown in **Table 4** above. None of the newspapers had an editorial comment type of article. Of the five feature articles found, *The Post* only had one story of this type while the *Zambia Daily Mail* and *Times of Zambia* had two stories each. For the stories that were letter to the editor type, the *Times of Zambia* and *Zambia Daily Mail* had none while *The Post* had only one. *The Post* on the other hand had no column story while the *Times of Zambia* had three and the *Zambia Daily Mail* had two.

5.1.12 People in story

It was established that most of the voices in the stories were those of adults. Young people were hardly consulted for a point of view.

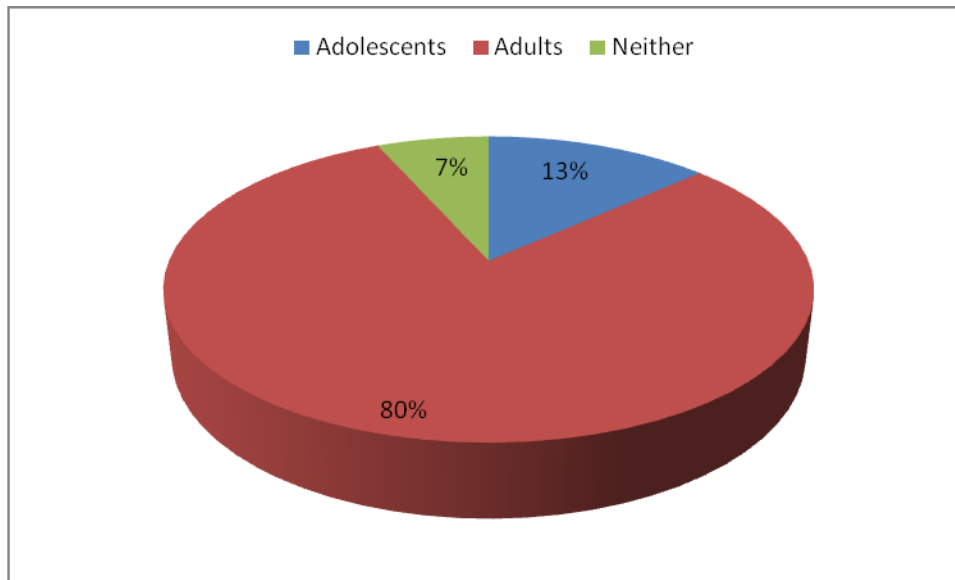


Figure 8. Voices in the story

As can be seen from **Figure 8** above, only 13% (2/15) of the ASRH articles had adolescent's voices, the majority 80% (12/15) of the articles had adult voices whilst 7% (1/15) of the stories contained neither voices. All the two articles that had adolescents' voices were from *The Post* while the *Zambia Daily Mail* and *Times of Zambia* had none. As for the stories that had adult voices, *The Post* had the lowest number (one) of stories while the *Zambia Daily Mail* had six stories and the *Times of Zambia* had five.

5.1.13. Issue Based or Event Based stories

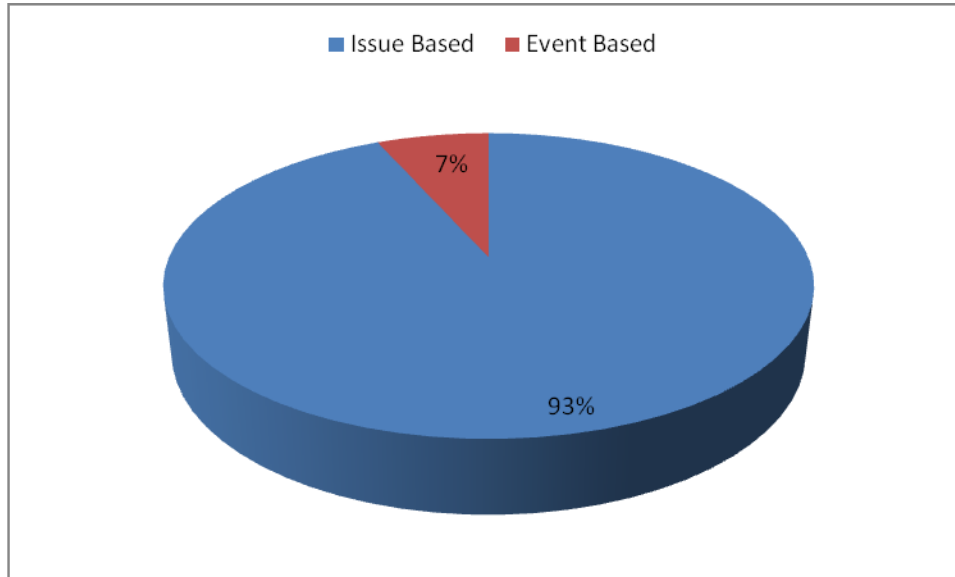


Figure 9. Basis of Story (issue based or event based)

Almost all the articles (93% or 14/15) were issue based while 7% (1/15) were event based. The table below shows the distribution of these stories amongst the three newspapers.

Name of Newspaper	Issue Based Stories	Event Based Stories	Total
<i>The Post</i>	3	1	4
<i>Zambia Daily Mail</i>	6	0	6
<i>Times of Zambia</i>	5	0	5

Table 5. Number of issue based and event based stories per newspaper

5.1.14. Length of stories

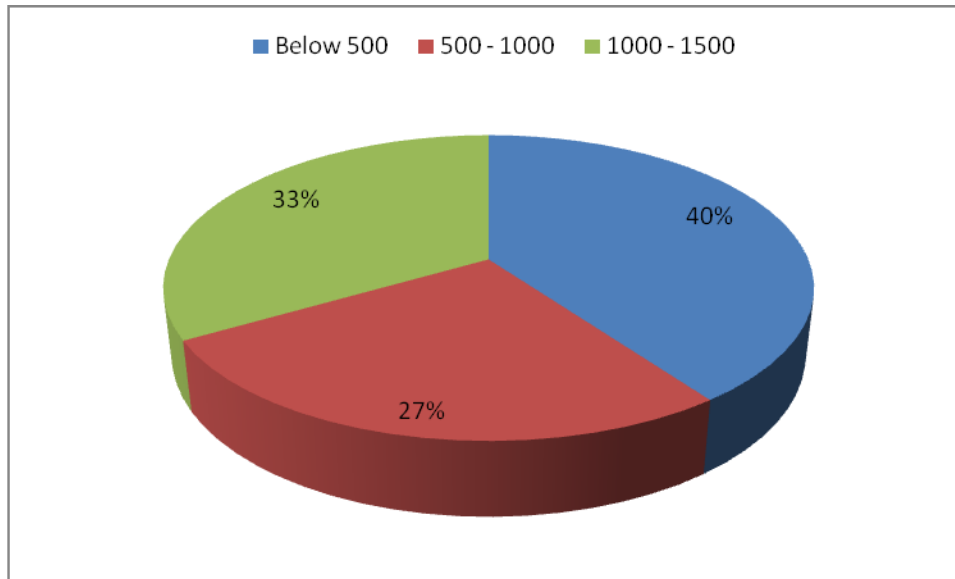


Figure 10. Length of stories

Of the 15 ASRH articles, 40% (6/15) were below 500 words, 33% (five) were 1000-1500 words, and 27% (4/15) were 500-1000 words. Of the 15 articles, *The Post* had three that were below 500 words while the *Zambia Daily Mail* had three articles and the *Times of Zambia* had none. For the stories that were 500-1000 words the *Zambia Daily Mail* had the most (three), followed by *Times of Zambia* which had only one article and *The Post* which had none. The *Times of Zambia* had four stories that had 1000-1500 words followed by *The Post* which had one story and *Zambia Daily Mail* had none.

5.1.15. Statistics in the stories

Nine of the stories contained statistics while six had none. Of the nine stories that had statistics in them, the *Zambia Daily Mail* had the largest share of five stories followed by the *Times of Zambia* which had three and *The Post* which had one story.

5.1.16. Language decency

Almost all (13/15) the stories proved to have decent language and only two had indecent language.

5.1.17. Photos

Nine out of the 15 ASRH articles had photos while six had none. Of these stories the *Times of Zambia* had the most (four) followed by *The Post* which had three and the *Zambia Daily Mail* had two.

5.1.18. Number of sources in a story

A great percentage (47% or 7/15) of the articles had one source of information, 13% (2/15) had two sources, another 13% had five sources, 11 sources and two sources respectively, and 7% had four and nine sources respectively. Of the seven stories with one source, *The Post* and *Zambia Daily Mail* had three stories each while the *Times of Zambia* only had one. *The Post* however had no story with two sources while *Times of Zambia* and *Zambia Daily Mail* had one each. *The Post* and *Times of Zambia* also had no stories with four sources while the *Zambia Daily Mail* only had one. Out of the two stories that had five sources *The Post* and *Times of Zambia* had a share of one each while the *Zambia Daily Mail* had none. Only the *Times of Zambia* had a story with nine sources while the other two newspapers had no story with nine sources. As for the stories that had 11 sources in them, the *Times of Zambia* and *Zambia Daily Mail* had a share of one story each while *The Post* had none.

5.1.19. Sources of the stories

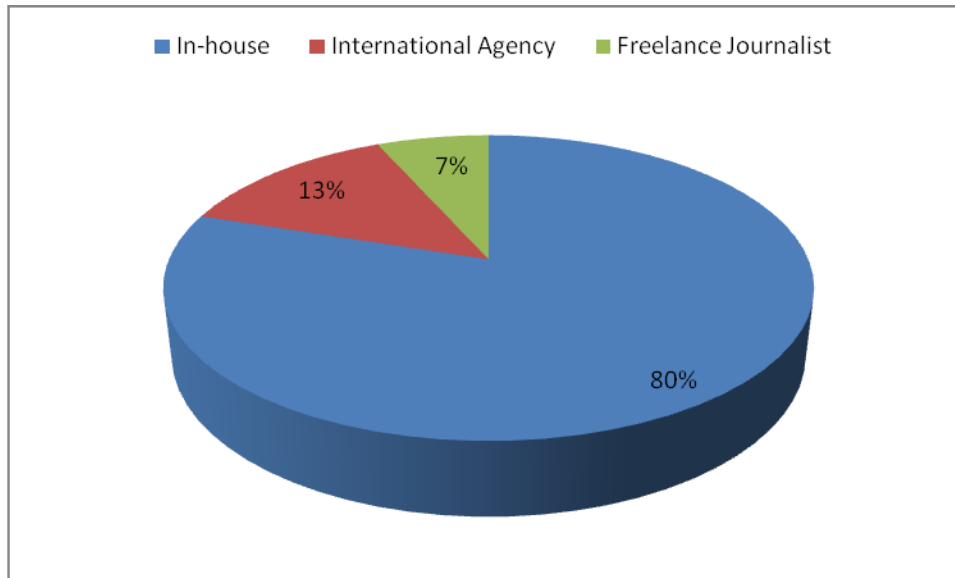


Figure 11. Distribution of ASRH stories according to sources

Almost all (80% or 12/15) of the stories were from In-house sources while 13% (2/15) were from International Agencies, 7% (one) was from Freelance journalists and none were from Local agencies. Of the 12 In-house sourced stories examined, the *Zambia Daily Mail* had the most share having five stories, the *Times of Zambia* followed with four stories and *The Post* with three stories. *The Post newspaper* had completely no story from an International Agency while the *Times of Zambia* and *Zambia Daily Mail* sourced one story each. As for sourcing stories from Freelance journalists, the *Zambia Daily* and *Times of Zambia* had no stories while *The Post* sourced one story.

5.1.20. Accuracy

All 15 ASRH stories examined were accurate .i.e. accurate in terms of spellings, grammar and figures.

5.2 Focus Group Discussion and In-depth Interview results

5.2.1. Suggested Reproductive Health issues for newspaper coverage by adolescents

Firstly, it should be acknowledged that almost all (64%) of the 100 adolescents that were sampled for this study read newspapers while 36% do not. It is also worth noting that the 36 adolescents that do not read newspapers had various reasons for not doing so. For instance, 31% said newspapers are boring, 79% claimed that newspapers did not have anything for young people, only 7 % stated that newspapers are expensive while 3% said they never get access to newspapers. The fact that 64% of the adolescents read newspapers signifies what an important position the newspapers have and that if utilised effectively, a great number of adolescents can be reached with ASRH information country wide hence reducing their vulnerability to most of the ASRH issues which tend to have a detrimental effect on them.

The adolescents that stated that they read newspapers were also asked for reasons as to why they read newspapers and 31% of them said they read them for entertainment, while 69% declined entertainment being a reason for their reading newspapers. Seventy eight percent of the adolescents indicated that they read newspapers for information while 22% declined this as a reason. Almost half (45%) of the adolescents stated that they read newspapers so that they could get educated about various issues while 55% declined this.

Asked whether the three newspapers under study should cover ASRH, 33% of the adolescents agreed while 65% strongly agreed and when asked whether these newspapers were adequately covering ASRH the adolescents only 14% agreed while a great number (86%) of them disagreed.

Research findings indicate that adolescents would like the newspapers to cover the following reproductive health issues: STIs, early pregnancies, abstinence, masturbation, HIV and AIDS, dangers/ risks of early sex debuts, puberty, abortion and contraceptives.

Below is **Table 6** showing the reproductive health issues and the number of adolescents that suggested them.

REPRODUCTIVE HEALTH ISSUE	NUMBER OF ADOLESCENTS THAT SUGGESTED THAT ISSUE BE COVERED
STIs	57
Early/Unwanted Pregnancy	61
Abstinence	80
Masturbation	74
HIV and AIDS	54
Dangers/Risks of Early sex	65
Puberty	82
Abortion	70
Contraceptives	74

Table 6: Issues suggested for coverage by adolescents

5.2.2. How Adolescents want the media to cover Reproductive Health Issues

During the focus group discussions the adolescents suggested that the newspapers cover ASRH stories by:

- a) Presenting articles that contain different ASRH issues/topics more regularly, for example, every week
- b) Giving in-depth coverage or detailed information on ASRH issue
- c) Dedicating one full page or section to ASRH issues in the newspapers
- d) Presenting question and answer kind of articles
- e) Involving adolescents when writing the articles
- f) By writing in a youth friendly manner with language that adolescents can understand easily and by coming up with adolescent targeted messages.

- g) Providing stories that run with pictures or illustrations for enhancing understanding of stories presented to young people.
- h) Articles that encompass life skills such as decision making, assertion so as to help them make right decisions and choices.
- i) Placing articles on pages in the newspapers where they can be easily noticed and hence considered with utmost importance, for example, the front page.

5.2.3. Policy Issues

All the 10 editors interviewed disclosed that they do not have a policy that guides or enforces the coverage of ASRH in their newspapers. However, when asked whether they planned on developing such a policy all of them declared that they would. It was also learnt that none of the newspapers under study had ASRH Desks but the *Times of Zambia* editors were quick to point out that this fell under their health desk and was treated like any other health issue and not prioritised per se.

5.2.4. Challenges faced by journalists when reporting ASRH

All the journalists interviewed indicated that ASRH was a very important issue and was worth reporting on and that they had a significant role to play when it comes to providing information concerning it. The study findings show that 12 (67%) out of 18 reporters admitted that they cover ASRH as indicated in **Figure 12** on page that follows.

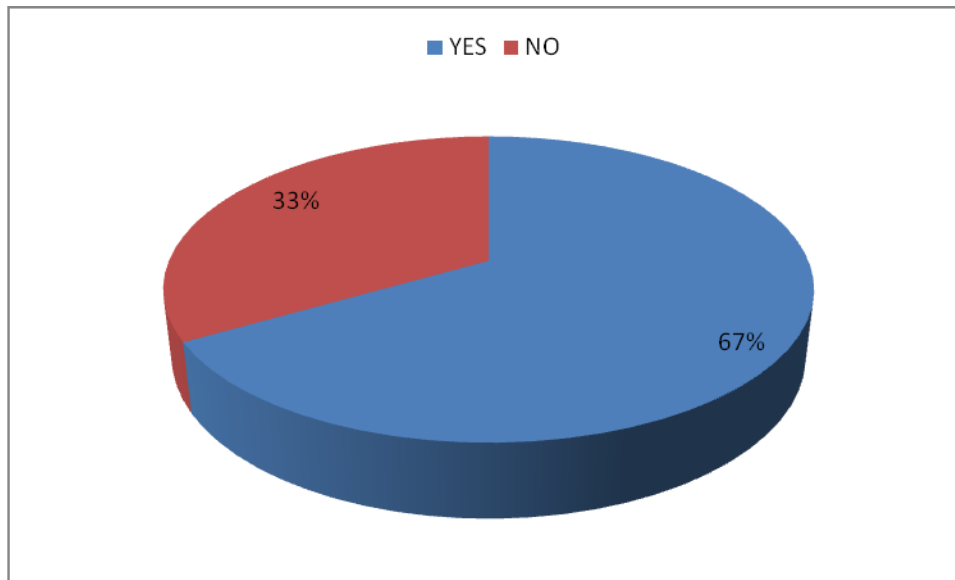


Figure 12. Percentage of reporters that cover ASRH

However, though they indicated this, they also disclosed that covering ASRH though important, comes with its own challenges. It is worth noting that although most of the journalists acknowledged ASRH as a vital issue, their newspapers presented a complete opposite of what they had said-there was low and almost no coverage of ASRH as has been disclosed by the findings.

Eighteen of the reporters interviewed from the various newspapers indicated that one of the challenges they faced when reporting ASRH at institutional level was that their editor did not give much priority to ASRH stories hence they seemed to always end up being spiked in preference for political stories which seemed to be the 'hot cakes'.

Twelve of the 18 reporters from the two state owned newspapers *Times of Zambia* and *Zambia Daily Mail* disclosed that lack of transport was another challenge they faced adding that as such they could not exhaust coverage of ASRH especially if a story was in a farfetched area like a rural area. This means that stories remained uncovered in the rural areas or in far off places.

Six out of 18 reporters interviewed revealed that another challenge faced was that of minimal space allocated to ASRH stories in the papers. Additionally, lack of financial resources was cited as one of the challenges by all 18 reporters who said this hindered them from researching or investigating further into the topic so that they can present in-depth articles.

Ten reporters from state owned newspapers indicated that lack of time was one other challenge they faced. They explained that due to minimum manpower in their media houses, they are forced to forgo ASRH stories claiming that there just is never enough time to cover them especially if they have to meet deadlines for stories their editors consider important.

It was interesting to note that almost all the (16/18) reporters had no challenges in reporting ASRH as a subject. They stated that they were knowledgeable of most of the issues in ASRH though they said they lacked expert commentaries at most times when they wrote ASRH forcing them to write articles without medical expert back-up. Lack of information material concerning ASRH was also lacking said two out of the 18 journalists making it impossible for them to give full detailed stories. Twelve out of 18 (12/18) journalists indicated that the unwillingness of people or sources to talk openly about sexual reproductive health issues also posed as a great challenge when covering ASRH which led to most stories not having a human face to them so that adolescents could easily relate to these issues. A lack of advanced equipment such as cameras and voice recorders was also a challenge for almost all 15/18 journalists when they were in the field gathering information for ASRH stories.

5.2.5. How Far/In-depth do they go when covering ASRH?

Of the 18 reporters interviewed, six indicated that whenever they covered an ASRH story they were driven by events. Only four out of 18 reporters interviewed disclosed that their coverage of ASRH was driven by their own decision and all four are from *The Post*. The rest of the reporters from the *Times of Zambia* and *Zambia Daily Mail* disclosed that most

of their decisions to cover ASRH were prompted by their editor's decisions. Twelve of the reporters interviewed indicated that their coverage of ASRH was prompted by the public's demand. "What the public demands is what I deliver to them and they are the ones I consider first before I venture out in the field," said a journalist from *The Post Newspaper*.

Only five out of 18 reporters interviewed indicated that they would tell ASRH stories by "calling a spade a spade" adding that this is the only way that adolescents can get enriched information. It was, therefore, no wonder when all 18 reporters stated that they take an approach of writing ASRH in-depth so as to exhaust all the information there is no given topics. However, they were quick to state that they ensure that the language they used was youth friendly and decent. They said they also try by all means to respect cultural issues that surround reproductive health though at times these can be quite a huge barrier to their practice. "For instance, if I want to call a spade a spade especially when it comes to mentioning sexual reproductive organs, this may seem taboo to some cultures hence even interviewing people on such issues has proved to be very difficult because they are not open to talk about such," said a reporter from the *Zambia Daily Mail*.

CHAPTER 6

DISCUSSION OF FINDINGS

6.0 Introduction

This chapter presents a discussion of the research findings. It involves an interpretation of the study findings and also explains how the theoretical framework influenced the analysis or study. As earlier alluded to, this study does not have any proven theory to explain the levels of coverage of ASRH in the newspapers under study but it borrows from two mass communication theories: agenda setting theory and media information dependency theory. This chapter will hence show how these two theories influenced the study. The agenda setting theory helped to analyse how different levels of coverage of ASRH can help set the agenda and lead to adolescents acquiring knowledge and information about reproductive health which is hoped, to in turn lead them to make informed decisions and choices when it comes to such issues hence reducing their vulnerability. This theory also helped in determining which issues among those that were covered were to be considered as important by merely assessing the level of coverage of each of the selected issues i.e. teenage pregnancy, abortion, HIV and AIDS, puberty, adolescent sexual reproductive health rights , contraception and STIs. The media information dependency theory on the other hand helped the researcher in analysing what the adolescents want the newspapers to present to them in terms of ASRH and whether they can rely on them for a consistent supply of reproductive health information.

6.1 Discussion

Given the significance of reproductive health and in particular ASRH, findings show that there is a low coverage of ASRH issues in Zambian newspapers (*The Post, Zambia Daily Mail and Times of Zambia*). This is confirmed by the fact that only 15 stories out of 224 reproductive health stories were ASRH stories. Additionally, it was noted that of the six months period used as sample, there were 15 ASRH articles published by three newspapers. The approximate number of stories, whether ASRH or not, per daily edition

after doing some simple calculations was 49 for *The Post*, 69 for the *Zambia Daily Mail* and 43 for the *Times of Zambia*, making this a total of 161 articles per day. Therefore, for the six months period under study, there may be 966 stories of which only 15 in this case would be covering ASRH and once the percentage of coverage by the three papers is calculated, it comes to 4.7%. This means that ASRH articles had a representation of 4.7% which when shared amongst the three newspapers gives each paper very minimal shares as shown in **Table 2 in Chapter 5**. This clearly shows that the coverage of ASRH was extremely low. This low coverage also meant that ASRH coverage by the three newspapers did not meet the researcher's set standard of 'adequate coverage'. As earlier mentioned, this research defined 'adequate' coverage as having at least about 25% of the stories in a particular newspaper on a topic or subject, over a given period of time. The fact that there was only 4.7% coverage of ASRH by all three newspapers combined means that there is inadequate coverage of ASRH by Zambian newspapers. This makes the influential role of the media or newspapers in raising awareness or reaching out to young people questionable. Coverage of 4.7 % cannot reach out to a significant number of people in society. And when measured against the total number of reproductive stories found, that is, 224 stories (23.1% of the total estimated 966 articles). Adolescent sexual reproductive health stories are still very low; having only a 6.6% (15 stories) share of the 23.1% reproductive health portion.

Moreover, the findings in terms of coverage are similar to those shown in the literature review from Akinfeleye (2006) which stated that the print media in Nigeria, Egypt, Kenya and South Africa whose newspapers, after a content analysis showed low coverage, shallow analysis of sexuality issues. It was observed that during the period under study (January to June 2004) the above mentioned countries' media covered various aspects of sexuality, though coverage focused largely on HIV and AIDS. The studies revealed very limited coverage of issues of sexual rights, reproductive rights and sexual identity. In other words, there is scanty coverage of sexuality issues in the African media and this does not accord the subject the position it deserves in the public mind.

The coverage of the different reproductive issues selected by this study also demonstrated that they were not evenly covered. For example, of the total seven reproductive health issues selected, only two of them were covered. Almost all 73% (11/15) of the ASRH articles published in the papers under study were HIV and AIDS articles while 27% (4/15) of the articles were teen/unwanted pregnancy stories; other issues such as abortion, puberty, contraception and STIs though important had no share of articles. As earlier alluded to, these issues affect young people who include adolescents more than any other group in society and therefore require even coverage by the newspapers. However, it should also be noted that the three newspapers are doing a great job when it comes to reporting on the HIV and AIDS pandemic as this is claiming the lives of most young people including adolescents.

Despite the fact that the newspapers under study are covering the two issues (HIV and AIDS and teen/unwanted pregnancies) findings show that most of these issues are lacking a focus on adolescents. Instead of having messages specifically targeted at adolescents a large percentage of the stories are taking a general focus and presenting ‘uniform’ messages for everyone without considering their age groups. The research discloses that only 7% (15/224) of the reproductive health articles focused on adolescents, while 3% (8/224) focused on adults and the majority 90% (201/224) took a general focus. As such, instead of adolescents getting their age appropriate reproductive health information they have no choice but to make do with the general information that is presented to them by the newspapers. This is similar to the findings by Kumasi and Muita (2006), who after conducting a content analysis of some Kenyan newspapers in (the Daily Nation and the Standard newspapers), weeklies (Citizen Weekly and Independent) and monthly magazines (Drum and Eve) in the second half of 2005; revealed that on the whole, coverage of sexuality issues including reproductive health issues was found to be relatively general and lacking in detail.

Not only are some of the reproductive health articles not age appropriate but they are also written with language that adolescents are unable to understand easily and they lack an element that is able to capture the interest of adolescents or young people. Additionally, it

was observed that almost all (only 13% (2/15) of the ASRH articles had adolescent's voices, the majority 80% (12/15) of the articles had adult voices whilst 7 % (1/15) of the stories contained neither voices of the ASRH articles were lacked adolescents' voices in that even though the stories were about them and for them, they were not given an opportunity to give their opinion about the issues involved. This tends not to help other young people reading the articles as they are unable to connect or relate to what is being presented to them in the article. Moreover, according to the African Youth Alliance (AYA) (2005), young people are necessary partners in defining issues and responses to the sexual and reproductive realities in their own lives.

Besides the number of ASRH stories published in the newspapers examined being extremely low, placement of these articles in the newspapers was also considered as an important matter in the research. For example, none of the 15 stories were front page lead stories while only seven were page lead stories. If a story is placed on the front page of the newspaper it carries more weight in drawing the attention of the reader and also signifies value placed on it. Importance of a story's occurrence is usually identified when it is placed on the front page of a newspaper. However, in this case the majority of the articles were placed on the inside pages of the newspaper. Even so, these stories on the inside pages can be considered prominent if they are page leads.

Importance given to an article is also determined by its length or amount of space it is allocated in the newspaper. Almost half (40%) of the ASRH articles were below 500 words proving that such stories are not given much priority when it comes to significance. By being short, it means that the stories lack in detail hence depriving adolescents of the very much needed reproductive health information.

Coverage of ASRH issues was also unevenly distributed amongst the three newspapers under study. Almost half of the stories were covered by one newspaper while the rest were still unequally divided by the other two newspapers.

As regards quality of the ASRH stories covered, it should first of all be noted that there is no standardized, objective metric for quality that provides as guide of determining what is a good quality story and which is not. This study however did develop criteria for determining which stories where of good quality and which ones were not. It hinged on some of the general elements that make a story a good story. The criteria defined good quality of the story as being accurate, having decent language, having at least more than four sources, having statistical data backing a story topic. The study showed that the three newspapers under study did manage to carry good quality ASRH stories. For example, all the 15 articles in all the newspapers were 100% accurate a sure assurance that information that reached the adolescents was not full of distortions or inaccuracies. Additionally, more than half of the stories contained statistics thus signifying that a lot of attention was given to ASRH as the newspapers took time to research for the stories, though it must be noted that the share of stories with statistics amongst the three newspapers was not evenly distributed.

A great percentage (47%) of the articles had only one source of information indicating that there was not much in-depth ASRH coverage by the three newspapers obviously because the reporters did not regard ASRH an issue worth reporting on hence they were not prompted to seek out credible sources for opinions. This is contrary to the fact that most of them agreed that ASRH was an issue worth reporting on and to the fact that they considered a very important issue. A lack of or a story having few sources (one in this case) may be a sign of a lack of concern about the seriousness of providing ASRH information to adolescents. The highest number of sources that ASRH stories had was 11 and these were only two stories that two of the newspapers had a share of one each. See **figure 11**. Additionally, even though most of the ASRH stories had a fair amount of photographs to go with them (Nine out of 15 ASRH had photos while six had none), most of these did not have adolescents in them and they were not interesting enough to attract adolescents. Having pictures to go with a story can play an important role in helping engage and further inform adolescents about the story they are reading. Photographs can even become story on their own story rather than just acting as supplemental elements of a story.

One of the assumptions made in this study was that newspaper coverage of ASRH issues is event driven or prompted by commemoration of certain health days on the Zambian calendar and the world. However, the findings proved otherwise. Research evidence demonstrates that almost all (93%) of the articles were issue based and not event driven. Journalists interviewed also confirmed that they were not prompted by events or special days on the calendar. The research found that only the month of December which hosts World AIDS Day on 1st December had the most articles while January, the month following it accounted for fewer articles. With these findings for the month of December and January it can be justifiably stated that during the month of December the newspapers especially the *Zambia Daily Mail* and *The Post* newspapers were event driven. This can also be concluded for the trends of coverage of ASRH in the month of March which hosts Youth Day on 12th March as well; this month had more articles than the month (April) following it. During this period it seems that the Times of Zambia and the Zambia Daily Mail were event driven as they covered ASRH stories. However, this was not the case for the month of June which hosts the Day of the African Child on the 16th of June which had fewer articles than the month following it as observed in **figure 7**.

When it comes to the type of stories that the newspapers wrote it seemed that feature stories dominated and hence had the largest share. Though the stories were not evenly distributed amongst the three newspapers and though they were not significantly many it is a positive phenomenon considering that feature stories have got an advantage of covering issues in depth meaning adolescents are provided with more detailed information concerning different ASRH issues. The fact that none of the newspapers had editorial comment kind of stories meant that the agenda setting theory became partially fulfilled in that the newspapers were not able to set the agenda for the public and adolescents in particular. Editorial comment articles, it has been established are of great importance when it comes to contributing to agenda setting (Wallack, 1999). More so, even though there was a good number of hard news stories, these cannot be considered significant in the coverage of ASRH because all hard news stories seem to do is to inform about daily happenings and do not necessarily have an educational element that

adolescents are in dire need of concerning their reproductive health. In the six month period of the study, it seemed that the three newspapers assumed the basic role of informing and not so much of educating or raising awareness amongst adolescents. The 15 ASRH stories examined did not seem to have intent of setting the agenda hence issues presented in the stories especially hard news stories were not enough to warrant public discussion and thought which could consequently lead to prompting behaviour change or in any change needed concerning the reproductive problems faced by adolescents.

According to McFarlane (2011), agenda setting is the media's ability to influence the perceived importance of an event or topic based on the volume of news coverage discussing that event or topic and Iyengar in McFarlane 2011:28 wrote, *"By covering some issues and ignoring others the media set the public agenda –they influence what people view as important issues"*. McFarlane further states that in agenda setting studies news articles are categorized based on a prominent topic discussed in the news coverage. From this study it is clear to see that though all of the reproductive issues selected for the research are important, only HIV and AIDS received the most coverage during the selected months of study. This issue unlike the other issues had coverage in all selected months as is displayed in **Table 7** below. Newspapers are also essential to the public construction of reality regarding the importance of ASRH issues by making some issues more important than others. The most obvious way the media highlights selected topics is by publishing a greater quantity of stories on the issues. However, this study has shown that the quantity of coverage is extremely low and not enough to warrant the setting of an agenda for the public.

The fact that the quantity of coverage of ASRH by Zambian newspapers is low, makes the media information dependency theory ineffective in this case because dependency on the newspapers under study by different audiences and adolescents in particular, for information depends on the amount of coverage they do. Low coverage and infrequent coverage of these ASRH issues makes the newspapers a source of information the adolescents cannot rely or depend on for constant information about such issues.

In view of the above discussion, the two theories (that is, the agenda setting theory and media information dependency theory) that this study considered, are useful when it comes to Zambian newspaper coverage of ASRH. The two theories can even work better when combined. With the agenda setting theory's approach of media covering issues that they deem important and going a step further by covering a high quantity of these issues, the media information theory will also, no doubt, be effected.

	ASRH Issues		
Month	Teen/unwanted pregnancies	HIV and AIDS	Total
December	2	6	8
January	0	1	1
July	0	2	2
June	0	1	1
March	2	1	3
Total	4	11	15

Table 7: Number of ASRH Issues covered over 6 months

However, in as much as HIV and AIDS was covered in all the six months it does not mean that the newspapers managed to set an agenda for the public because only a few HIV and AIDS stories were published in each of these months rendering them inadequate to influence what people viewed as important issues.

Newspaper			No. of Teen/unwanted Pregnancy	No. of HIV and AIDS	
<i>The Post</i>	Month	December	0	3	
		July	0	1	
	Total			4	
<i>Zambia Daily Mail</i>	Month	December	2	1	
		July	0	1	
		June	0	1	
		March	1	0	
	Total		3	3	
<i>Times of Zambia</i>	Month	December	0	2	
		January	0	1	
		March	1	1	
	Total		1	4	

Table 8: Distribution of ASRH Issues covered over six months amongst the three newspapers

Additionally, the fact that 78% of the adolescents use newspapers for obtaining information indicates that the media information dependency theory mentioned earlier in chapter three is at play. People, in this case adolescents, in contemporary urban-industrial societies, make heavy use of the content that the (newspapers) media provides.

CHAPTER 7

CONCLUSION, RECOMMENDATIONS AND SUGGESTIONS FOR FURTHER STUDY

7.0 Introduction

This chapter presents the conclusion of the study and highlights the suggestions for further study as well as the recommendations of the research. Firstly, it presents the recommendations, followed by suggestions for further study and finally the conclusion.

7.1 CONCLUSION

This study has established that ASRH receives poor or low coverage in Zambian newspapers and is not given the prominence it deserves. This can be seen from both the quantitative and qualitative analyses of the newspaper content which indicated that ASRH issues are given very little priority especially that there were only 15 articles covered in the six months selected for analysis. This low coverage of ASRH issues by newspapers is clearly a sad state of affairs considering that adolescents or youths in the country are a highly vulnerable group when it comes to matters of sexual reproductive health.

Besides low coverage, it was also established that most of the ASRH articles did not have adolescents' voices meaning that their opinions were not heard, considering the issues were targeted at them. Additionally, the adolescents interviewed in the FGDs indicated that the messages or information presented in the reproductive health stories were not youth friendly or interesting enough for them. All this makes it difficult for adolescents to get clear interpretation or comprehension of reproductive health issues.

Moreover, the fact that research findings revealed the non-existence of policies to guide the coverage of ASRH also confirms the seriousness the newspapers attach to ASRH issues. Not much prominence was given to the few ASRH articles that were published that is in terms of placement in the paper; most of the stories were placed in the inside pages and not as page lead or front page stories. In-depth coverage of issues though at a

maximum did not really have so many stories to show for considering that six months of coverage was being analysed.

Considering that the mass media, in this case newspapers are critical in ensuring a healthy nation, the results of this research have clearly indicated that Zambian newspapers have a lot of work to do especially in trying to improve and increase the quantity and quality of coverage of ASRH. Adopting some of the above mentioned recommendations would be very helpful to the newspapers. There is also a need for the newspapers to focus more on behavioural change and educational or informative articles when it comes to picking angles as to how they will approach writing ASRH articles. Increased coverage of good quality ASRH stories will no doubt help empower adolescents with reproductive health information which will consequently assist them in making well informed decisions about their reproductive health and lessen their vulnerability.

7.2 Recommendations

In order to improve and increase newspaper coverage of ASRH, the following interventions are recommended:

- a) Newspapers to develop policies and strategies that will help guide their coverage of ASRH. Additionally, the newspapers' editorial policies must include ASRH issues coverage as a key editorial line in their editorial policies which may compel reporters not to overlook ASRH issues.
- a) Newspapers to engage with adolescents in order for them to tailor adolescent friendly stories providing ASRH information. Moreover, newspapers must encourage adolescents' participation in writing articles for their peers considering most young people get most information about reproductive health from their friends.
- b) Newspapers to put more concentration on their education function in order to teach adolescents about their reproductive health more effectively. It seems,

- according to research findings that their stories are informational more than they are educative and awareness raising.
- c) Deliberate capacity building programmes should be initiated so that journalists can be equipped with enough ASRH knowledge that will help them write well informed stories. This could be done by providing training workshops for journalists that will be based on ASRH, including ASRH reporting or coverage in the curricula of journalism training schools and also setting up a media resource centre that will be stocked with ASRH material among others for journalists to utilise when researching for their stories.
 - d) The newspapers to create working partnerships with government bodies' non-governmental organizations and health professionals that are engaged in reproductive health issues so as to develop a collaborated effort in reaching adolescents with reproductive health information.
 - e) Establishment of youth news desks by the newspapers that will give a good focus on covering ASRH through publication of regular ASRH articles in the form of educational and informational columns or feature stories ensuring in-depth covering of given issues. Additionally, reporters should be encouraged to specialize in reporting ASRH.
 - f) It is cardinal that the newspapers mobilize necessary resources such as finances, transport, equipment so that their reporters can enhance their coverage of ASRH.
 - g) The three newspapers should establish a media resource centre which will be stocked with all kinds of educational material which will also include ASRH material as this can help in building the currently low data base of ASRH material.

7.3 Suggestions for further research

The researcher suggests that further research be done which will involve establishing the quantity and quality of coverage of broadcast media such as television and radio in

Zambia so as to establish whether Zambian media in its entirety (both print and broadcast media) does cover ASRH or not. Additionally, research should be carried out in order to investigate media preferences that adolescents in Zambia have so as to reach adolescents with ASRH information effectively.

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APPENDICES

APPENDIX I

Quantitative and Qualitative Media Coverage of Adolescent Sexual Reproductive Health (Content Analysis Spread Sheet Excel-Data entry tool)

Name of Newspaper:

No.	Date	Author	Headline	Summary of Story	Front Lead Story

Type of Page [Business, Sports, etc]	Page Lead Story	Length	Source [In-house, local, FL, Int'l]	No. of Sources

Type of Article	Photo	Statistics	Language Decency	Ethical Issues	Events/Issue based	Focus of article

Adolescent Health Issue	Sexual Reproductive	People in Story	Accuracy

APPENDIX II

Content Analysis for Newspaper Coverage of ASRH Coding Sheet

Theme	Variables and code values in SPSS		
Front Lead Story	1. Yes		
	2. No		
Type of Page	1. Home		
	2. Business		
	3. International/Foreign		
	4. Entertainment		
	5. Features		
	7. Sports		
	8. Supplement		
	9. Comment		
Page Lead Story	1. Yes		
	2. No		
Source	1. In-house		
	2. Local Agency		
	3. International Agency		
	4. Freelance Journalist		
Length	1. Below 500		
	2. 500 – 1000		
	3. 1000 – 1500		
	4. 1500 – 2000		
	5. 2000 - 2500		
	6. 2500 - 3000		
	7. Above 3000		
No. of Sources			
Type of Article	1. Editorial Comment		
	2. Hard News story		
	3. Feature		
	4. Letter to the Editor		
	5. Column		

Statistics	1.Yes		
	2.No		
Photo	1.Yes		
	2.No		
Language Decency	1. Decent	Name the Term Used e.g.	
	2. Indecent	HIV AIDS Sufferer,	
Ethical Issues	1. Yes		
	2. No		
Events/Issue based	1. Issue based		
	2. Event Based		
ARSH Issue	1. Puberty		
	2.Teen Pregnancy (Unwanted pregnancies)		
	3. HIV and AIDS		
	4. Abortion		
	5. Adolescent reproductive rights.		
	6. Contraception (family planning e.g. Condom Use)		
	7. STIs		
Focus of article	1.Adolescent		
	2.Adults		
	3.Neither		
People in Story	1. Children 2. Youth 3. Adults		
Accuracy	1. Yes 2. No		

APPENDIX III

JOURNALISTS' QUESTIONNAIRE/ SEMI-STRUCTURED INTERVIEW SCHEDULE

Dear Respondent,

My name is Roberta Muchangwe and I am currently studying for my master's degree in Mass Communication at the University of Zambia (UNZA). You were randomly sampled to take part in my research study focused on assessing media (print media) coverage of Adolescent Sexual Reproductive Health (ASRH). Your contributions in answering the questions in this questionnaire will go a long way in trying to find viable ways of increasing and improving media coverage of ASRH. The research is also majorly for academic purposes. You are, therefore, kindly being asked to answer each question truthfully and honestly and all your answers will be treated with utmost confidentiality they deserve.

***Specific Instruction:**

Tick [✓] in the appropriate bracket(s) provided for you next to the answer of your choice, and/or write in the space dotted where your opinion or comment is required.

Questionnaire #()

SECTION A: Demographic Background of the journalist:

Researcher, please complete:

Name of Paper:

Gender of Respondent:

Town of Interview:

1) Your age.

1) 15 – 24yrs

[]

2) 25 – 34yrs

[]

3) 35 – 44yrs

[]

4) 45 – 54yrs

[]

5) 55 – 64yrs

[]

6) 65 – 74yrs

[]

2) For how long have you been practicing journalism?

1) Less than 1 year

[]

2) 2-5 years

[]

3) 6-9 years

[]

4) 10 and above

[]

3) On what desk are you?

1) Politics

[]

2) Business

[]

3) Entertainment

[]

4) Features

[]

5) Sports

[]

6) Health

[]

SECTION B (FOR REPORTERS)

4) *Prompt as needed:* What types of stories and issues are you responsible for reporting on?

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.....

.....

5) Do you report on ASRH?

1) YES

[]

2) NO

[]

5. What is your experience in reporting ASRH?

6. What issues have you been reporting on in ASRH?

7. How far would you go when writing a story involving adolescent sexual matters?

9. How do you determine the stories that you will write?

Prompts: Editor's decision, reporter's decision, public's demand, events etc.

10. What issues do you think media should focus on when reporting ASRH?

12. Is ASRH relevant to your line of stories?

1) Yes

[]

2) No

$$\begin{bmatrix} \cdot \\ \cdot \\ \cdot \end{bmatrix}$$

I. Why/why not?

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13. How important do you regard ASRH as an issue worth reporting on?

- | | |
|-----------------------|-----|
| 1) Very Important | [] |
| 2) Important | [] |
| 3) Not important | [] |
| 4) Slightly Important | [] |

☐

14. What are some of the challenges you face in reporting ASRH, if any?

- At institutional level

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- In terms of the subject

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15. How can the challenges be overcome?

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SECTION C (FOR EDITORS)

16. Have you been covering Adolescent Sexual Reproductive Health?

- | | |
|--------|-----|
| 1) YES | [] |
| 2) NO | [] |

☐

17. What issues have you been focusing on?

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.....
.....
18. What (additional) issues do you wish to have focused on but did not? Why didn't you?

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.....

19. Does your organisation have a policy for reporting ASRH?

1) YES []

2) NO []

☐

20. What is the nature of the policy?

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.....

21. How effective has it been, if any? How can it be improved?

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.....

22. What has been your experience in reporting ASRH?

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23. Where do you see gaps? How can these be overcome?

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24. What are the factors that hinder effective reporting of ASRH?

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25. Do you think that news reporters have a part to play in teaching ASRH?

- 1) YES []
- 2) NO []

☐

I. Please explain your answer:

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26. Do you think the training for a journalist adequately equips trainees for ASRH reporting?

- 1) YES []
- 2) NO []

☐

27. How important do you believe your ASRH coverage is?

1. Very High []
2. High []
3. Low []
4. Very Low []
5. Not a priority []

☐

I. Please explain your answer.

.....

.....

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.....

28. How often do you include ASRH on your diary?

1. Every Day []
2. At least once a week []
3. More than twice a week []

☐

- 4. Up to twice a month []
- 5. Rarely []
- 6. Never []

29. Is your reporting on ASRH event driven?

- 1) YES []
- 2) NO []

☐

30. How many ASRH articles/stories did you write and publish in your paper in the months June, July, April, December, March 2010 and January 2011?

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I. If you published, what was the topic/s?

.....

II. If you never published, state the reason/s why.

.....

III. If you did not write ASRH stories within the last 6 months or 12 months, what was the reason?

.....

Thank you very much for your time and cooperation!

APPENDIX IV

Focus Group Discussion Guide for discussions with adolescents

My name is Roberta Muchangwe a student from the University of Zambia pursuing a masters degree in Mass Communication and as such, I am conducting a research entitled Coverage of Adolescent Sexual Reproductive Health (ASRH) by Zambian Newspapers: A Content Analysis of The Zambia Daily Mail, Times Of Zambia And The Post Newspapers. Since this research involves adolescents I felt that i should get your opinions concerning this topic. Whatever will be discussed in here is strictly confidential and your names will not be included in the dissertation. Remember, there is no right or wrong answer. You may have different views from those of others/ friends but that is perfectly normal. However, you must also tolerate views that come from others that may have different views from yours. I urge you to be open and feel free to express your opinions.

1. What is Adolescent Sexual Reproductive Health (ASRH)?
2. Do you think Zambian newspapers cover ASRH? Why should they cover ASRH? Why is it important to cover ASRH?
3. Do you have problems with the way it is covered? How should the newspapers cover ASRH?
4. Do you feel that the stories focus on your needs as adolescents in the area of reproductive health?
5. What issues in ASRH would you like the Zambian newspapers to cover?
6. What are the main problems that young people are facing in your communities?
7. Do you think the newspapers should be involving you when they write the ASRH? How?

APPENDIX V

Focus Group Discussion Guide /Questionnaire for Adolescents/Youth

Date_____

Dear Respondent,

My name is Roberta Muchangwe and I am currently studying for my master of mass communication degree at the University of Zambia. I am interested in learning about whether the Zambian newspapers adequately cover adolescent sexual reproductive health. I would like to ask your permission to ask you questions about adolescent sexual reproductive health and how the newspaper has been covering it in Zambia. Your answers will be confidential and to this effect, you are not required to write your name anywhere in this questionnaire. The information you will give will help us to learn more about media coverage of adolescent sexual reproductive health and to advocate for improvement of the same if need be. I expect our conversation to last about one and a-half hours.

Questionnaire # ()

Background

1) Sex

1. Male []

2. Female []

2) Your age

1. 10-15 yrs []

2. 16-19 yrs []

3) Marital Status

1. Single []

2. Married []

3. Other..... []

4) Educational Level

1. Basic []

2. Secondary []

5) Do you read newspapers?

1) Yes []

2) No []

6) If yes in question 5, how often do you access them?

1) Every day []

2) Once a week []

3) Never []

4) Rarely []

5) Other..... []

7) If NO in question 5, why not?

a. Newspapers are boring Yes=1, No=2 []

b. There is nothing in newspapers for young people my age Yes=1, No=2 []

c. Newspapers are expensive Yes=1, No=2 []

d. I cannot access newspapers where I stay Yes=1, No=2 []

e. Other.....

8) If yes in question 1, which of the following reasons do you read newspapers?

- | | | |
|----------------------|------------|-----|
| 1) For entertainment | Yes=1,No=2 | [] |
| 2) For information | Yes=1,No=2 | [] |
| 3) For education | Yes=1,No=2 | [] |
| 4) Excitement | Yes=1,No=2 | [] |
| 5) Nothing special | Yes=1,No=2 | [] |
| 6) Other..... | | |

9) Do you think there is a need for Zambian media to cover adolescent sexual reproductive health?

- 1) Strongly agree []
- 2) Agree []
- 3) Strongly disagree []
- 4) Disagree []

10) If yes in question 9, why do you think so?

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11) Do you think Zambian print media or newspapers cover sexual reproductive adequately?

- 1) Yes []
- 2) No []

12) If NO in question 11, how would you wish them to cover ARSH?

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13) What issues in adolescent sexual reproductive health would you like Zambian newspapers to cover?

.....

14) What is your source of information concerning reproductive health?

- 1) My parents Yes=1, No=2 []
- 2) My friends Yes=1, No=2 []
- 3) My teachers Yes=1, No=2 []
- 4) Other.....

☐

15) There is a need for media (newspaper) coverage of sexual reproductive health issues

- 1) Strongly agree []
- 2) Agree []
- 3) Disagree []
- 4) Strongly disagree []

☐

16) Do you think Zambian newspapers give youth targeted reproductive health messages?

- 1) YES []
- 2) NO []

☐

17) What are the main problems young people are facing in your community today as regards reproductive health?

.....

Thank you very much for your time and cooperation!