



LEVESON INQUIRY: CULTURE, PRACTICE AND ETHICS OF THE PRESS

Submission from NAT (the National AIDS Trust)

Introduction

NAT (the National AIDS Trust) is the UK's leading charity dedicated to transforming society's response to HIV. We provide fresh thinking, expertise and practical resources. We champion the rights of people living with HIV and campaign for change.

A central strategic aim of NAT is to address HIV-related stigma and discrimination, which so blights the lives of many people with HIV and harms public health. To that end, we have been particularly active in recent years in challenging inaccurate and stigmatising coverage of HIV in the media. We have produced with support from the National Union of Journalists and the Society of Editors 'Guidelines for reporting HIV'; we have established and supported a group of HIV positive people, 'Press Gang', who themselves directly challenge poor reporting of HIV when it occurs; we take complaints to the Press Complaints Commission; we regularly write letters to editors and/or for publication which complain of stigmatising reporting or correct inaccurate journalism. We also make every effort to encourage the media to report positively and accurately on the reality of HIV in the UK today and how people with HIV now live with this condition.

We welcome the establishment of the Leveson inquiry into the culture, practice and ethics of the press. Whilst we are aware that much of the inquiry will focus on invasions of privacy and hacking, we did want to take this unique opportunity to raise briefly some of the broader issues around press ethics and behaviour, and the current state of press regulation. By 2012 there will be 100,000 people living with HIV in the UK. Like everyone else they deserve to have their condition and lives reported respectfully and accurately.

Current press coverage of HIV in the UK

HIV treatment and the lives of people with HIV have changed dramatically and for the better over the last fifteen years. But media reporting of HIV seems to have progressed little and indeed in some areas seems now to be going backwards to the early hysterical days of reporting on the AIDS epidemic in the 1980s. Poor reporting includes -

- Scare stories about HIV transmission risk where in fact no risk of transmission exists - this is a weekly occurrence, with reports of risk from biting, spitting, minor cuts and abrasions, standing on a discarded needle, and from everyday social interactions. There has never been a case of HIV transmission in the UK from any of these actions.

- Headlining HIV as an issue and cause for serious concern in a story where its relevance is at best tenuous and more usually non-existent (here are two examples from the last few days from the Evening Standard and The Sun).
- In criminal cases of reckless HIV transmission, using language which goes beyond criticism of the accused to an association of HIV and evil ('HIV monster', 'Evil HIV beast' for example - headlines which people with HIV uniformly believe to harm public perceptions of HIV).
- Inaccurate statements about HIV testing and treatment - for example claims it takes six months to get a definitive HIV test result or that a pregnant mother with HIV cannot have an HIV negative baby.
- Non-consensual disclosure of HIV positive status - HIV remains a stigmatised condition and someone's HIV status should only be disclosed if absolutely necessary. Consequences of media disclosure can be devastating for the individual and his or her family. In recent months we have seen instances of someone's HIV status disclosed simply because of unsubstantiated personal allegations and in relation to a court case where HIV status was entirely irrelevant to the conviction.

We note that the Editors' Code has for some of its clauses a public interest exception, which can include 'public health and safety'. We have no doubt that poor reporting of HIV is harming public health as people are deterred from testing, confused as to how HIV is transmitted, and frightened of disclosing their HIV status to others. **It would be good for public health, as a public interest consideration, not only to permit breaches of the Code but also to prevent irresponsible reporting.**

More generally, people with HIV are increasingly frustrated by the sort of reporting described above. They do not have celebrity status or much power or influence and look to the media and Government to identify a future for press regulation which allows HIV, and people with HIV, to be treated fairly, respectfully and accurately. There is very often some technical reason why a piece does not breach a provision of the PCC Editors' Code but there can be no doubt HIV is persistently singled out and sensationalised for the sake of a good headline. We outline below some specific proposals for press regulation. But additionally, the media need to think about minority groups, far too vulnerable to attack and victimisation, with little ability to respond and have their voice heard. In this context it is worth looking at the 'positive duty' under the Equality Act 2010 (s 149) applied to public bodies requiring them to promote equality and good relations and eliminate discrimination, harassment and victimisation. The BBC and Channel 4 are two media organisations that come within this duty, and to good effect.

It is striking that the bulk of the current Editors' Code is prohibitive, identifying a focussed set of actions which should not take place, rather than positively setting out what 'the highest professional standards' look like in practice. **NAT believes that positive obligations, for example to promote fairness and deter discrimination and victimisation, against which complaints could be made and reporting assessed, would be very useful, and allow the sort of poor and stigmatising journalism outlined above to be challenged.**

Press regulation

NAT has taken a number of complaints formally to the Press Complaints Commission (PCC) and in all but one recent case been successful. We have found PCC staff approachable and immensely helpful, and often they have also intervened informally and at an early stage to ensure media print corrections. Our experience is that that part of the Editors' Code of Practice (1 'Accuracy') on inaccurate reporting can be used very effectively to require apologies and changes to printed articles.

Our most recent complaint however was in relation to a prejudicial and pejorative reference to HIV (Editors' Code 12 'Discrimination'). This was the first time we had found an individual willing to allow us to make a complaint on his behalf (this is as much a result of the difficulty of contacting such individuals in the requisite time). The current requirement in relation to this part of the Code that the 'directly affected' individual has to make the complaint in our view ignores the fact that the harm of such a prejudicial reference affects many more people than the individual him- or herself. **We recommend that anyone should be able to make a complaint about discriminatory media reporting.**

Our particular complaint referred to the use by The Sun of the headline 'HIV Monster' to describe someone convicted of reckless HIV transmission. Our complaint on behalf of the individual was not upheld. We conducted with Terrence Higgins Trust an online survey of over 250 people living with HIV all but one of whom considered that the headline would harm public attitudes to HIV and to people with HIV. The PCC noted this concern but stated it was not relevant to 'whether the phrase discriminated against Mr Mabanda', then citing the facts of his criminal trial. The Code in fact refers to 'a prejudicial or pejorative reference to an individual's ... physical or mental illness or disability' - we had understood this to mean that a wider pejorative or prejudicial impact of a piece on others, even if in relation to a story about an individual, is also prohibited. If we were wrong and if the impact needs to relate solely to the directly affected person, then this underlines the inadequacy of the current protections against discrimination in the Code. **We recommend that the Editors' Code or its relevant replacement prohibit 'prejudicial or pejorative reference to race, colour, religion, gender, sexual orientation or to any physical or mental illness or disability', omitting the current reference to 'an individual'.**

We are also very conscious that questions of prejudicial or pejorative reporting can be more subjective than questions of accuracy. It was striking how the near unanimous view of The Sun's headline from people with HIV had no impact on the outcome of the complaint, though they more than anyone truly understand the impact of such reporting. We acknowledge that the PCC includes a mix of editorial and public members. Our remit does not extend to detailed views on the future of press regulation but **it would seem to us that some form of ombudsman-like role may be worth considering for such significant adjudications, especially on discriminatory coverage, where minorities' points of view may tend to be ignored or discounted.**

NAT
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