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**Analysing audience reception on health reporting:
An analysis of the eNCA News' coverage of the Ebola
outbreak.**

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of Humanities, University of KwaZulu-Natal, in fulfilment of
the requirements of a Master of Social Sciences degree at the
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To my supervisor, Professor Ruth Teer-Tomaseli, Thank you for your guidance, support and patience throughout the research.

To God Be the GLORY!!!

DEDICATION

To the family: Cleopas Moyo, Lily Mutume, Nigel Moyo, Ursula Moyo and Vuyo
Moyo

Thank you & I love you endlessly.

ACRONYMS

ACAPS	Assessment Capacities Project
AMI	African Media Initiative
BBC News	British Broadcasting Corporation
CDC	Centers for Disease Control and Prevention
eNCA	eNews Channel Africa
EVD	Ebola Virus Disease
HIV/AIDS Syndrome	Human ImmunoDeficiency Virus/ Aquired Immune Deficiency
HJP	Health Journalism Partnership
IFRC	International Federation of Red Cross and Red Crescent
WHO	World Health Organisation
UNAIDS	Joint United Nations on HIV and AIDS

Abstract

BBC News reports, an estimation of 28 607 recorded cases and 11 314 deaths caused by the Ebola virus. The deaths swept across six countries including Liberia, Sierra Leone, Guinea, Mali, Nigeria and the United States of America between the 23rd of March and the 1st of November 2015. This research sought to understand the encoding and decoding process of an audience watching the eNCA news. Specific news bulletins on the Ebola outbreak were selected by the researcher to give an effective investigation on how the eNCA covered the Ebola outbreak. Health experts were interviewed in regards to the media coverage of the Ebola outbreak. The reception theory was the main tool used for this research, complimented by the theory of representation and identity. The researcher also gives a hermeneutic understanding of the eNCA bulletins on Ebola, semiotically analysing images from the bulletins. By so doing, the researcher interrogates the use of the visual and verbal composition of the text in efforts to understand the reading deduced by the focus group participants involved in this study. The researcher also provides a contextual background of Ebola and the countries directly affected by it in an effort to paint a picture of the disastrous effects of the disease. The influence of social and cultural background in decoding media messages was evident when some of the audience obtained a negotiated and or oppositional reading from the messages the eNCA projected. This research illustrated how numerous factors influence how an audience internalises information and how African media should break from stereotypical images and employ the use of positive images when reporting on African issues.

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Analysing audience reception on health reporting: An analysis of the eNCA News' coverage of the Ebola outbreak.

Chapter One: Introduction to Study

The 2014 Ebola epidemic has been reported as the largest Ebola outbreak in history, and as it raised alarm worldwide (Centers for Disease Control and Prevention Reports, 2015). In October 2014, the *BBC News* estimated a figure of 12 000 deaths in West Africa since the epidemic was first reported in March 2014. The Ebola virus disease (EVD)'s high fatality rate caused major concern, as it is extremely infectious and had continuously spread from West Africa to other parts of the world. The EVD, formally known as Ebola haemorrhagic, claimed many lives leaving governments and healthcare providers struggling to contain the relentless virus to avoid a globalised epidemic (Teitsworth, 2014).

Liberia, Sierra Leone and Guinea are said to have some of the worst funded healthcare systems in the world. *BBC News* reports an estimation of 28 607 recorded cases and 11 314 deaths caused by the Ebola virus. These deaths occurred in six countries including Liberia, Sierra Leone, Guinea, Mali, Nigeria and the United States of America between the 23rd of March 2014 and the 1st of November 2015. The statistics given regarding the number of cases or deaths reported could actually be less than the actual figures as some people could be contracting the disease and dying without being recorded statistically (BBC, 2014). Prior to the Ebola epidemic, Sierra Leone, Liberia and Guinea were in a period of recovery after their recent civil wars. There has been evidence of significant economic growth and an increase in basic health indicators (Titilola Obilade, 2015). However since the outbreak, the increase of food prices and low food production are among other challenges these countries face leaving these countries worse off. On the other hand international response to the outbreak was swift and unanimous. As the World Health Organisation (WHO, 2014: n.p) indicated,

Community engagement is key to successfully controlling the outbreak. Good outbreak control relies on applying a package of interventions, namely case management, surveillance and contact tracing, a good laboratory service, safe burials and social mobilisation

Ebola-related deaths were alarming and the media played a vital role in covering the news surrounding the Ebola virus. Many television networks and other communication mediums took the task of informing the public as a form of social mobilization. The public was taught on preventative measures against EVD in hopes to reduce the spread of this life-threatening virus. News media coverage has been shown to influence health behaviour and policy (Callaghen and Schnell, 2001). This

is why it is important to analyse the coverage of Ebola bearing in mind that the media exists to eradicate misconceptions, to empower the audience with information and knowledge to combat the spread of life threatening diseases such as Ebola.

The extent to which EVD caused alarm is also mirrored by the way the topic went viral on social networks. According to Mowafa Househ's (2015) research on the use of twitter and electronic *News* media outlets in communicating EVD information,

[The] frequency of messages (tweets and retweets) between 30 September and 29 October, 21 October 2014 [...] were approximately 26 million tweets [25, 925,152] that contained the word Ebola [...] On average, there were 864, 171 registered tweets per day.

This shows how frequently EVD was discussed on social networks during the outbreak translating to their insecurity regarding how safe they were against this disease.

Objectives

The objective of this study is to analyse audience reception of the semiotic content of the programme of both visual and verbal text (AU multi media). Hermeneutics will be used to analyse the eNCA news bulletins, examining the texts' visual and verbal content. This will enable the researcher to interrogate the use of the visual images and the verbal composition of the text in efforts to understand the reading deduced by the focus groups involved in this study. This study will explore how the reporting was perceived by a non-representative group of tertiary students. The selected group of focus group interviewees will be used to stand in for the larger audience (See sample under methodology).

The researcher also intends to investigate the role played by the media in informing the public during this outbreak. There is need to bring in experts from the scientific field to understand what they think could improve the messages the media projects during outbreaks such as this when reporting on health. It is vital to see if there are any problems regarding the way in which the media projects outbreaks and what can be done to facilitate responsible and accurate information dissemination regarding health issues.

Health Reporting in Media

According to Kitzinger (2004: 167), "[t]o fully assess the media's role in society- its mediation, limitations, and sometimes unexpected implications- we need to study how people 'read', use and respond to the media." In acknowledgement of this insight, this research seeks to assess how the eNCA *News* channel reports on EVD executed the task of reporting this disease to the South African public accurately. It will assess whether the eNCA's health reporting was successful and what challenges the media have in educating its audience and creating health awareness. It is important to examine this as the media is credited with considerable

power to shape opinion and belief, to change habits of life and to mould behaviour more or less actively (McQuail, 1994).

The media plays a role in social mobilization during a public health emergency. It is a source of health information for lay people (Wade and Schramm, 1969) while in some cases physicians and scientists first learn of developments in medicine through the media (Shuchman, 2014). News media coverage has been shown to influence health behaviours and policies (Callaghan and Schnell 2001). It concerns itself with the preparation the public of the disease and the appropriate response towards anything that has the potential to disrupt the wellbeing of the society and its members. For an example, the publicity surrounding Kylie Minogue's battle against breast cancer stimulated an increase in breast screening hence causing awareness within the general public (Chapman, McLeod et al., 2005).

“Social mobilisation interventions have been particularly important in disease outbreaks where medical interventions do not exist; such is the case during the Ebola outbreak” (WHO, 2009). Public health measures concentrated on identifying local risk factors to minimize exposure and reduce infection. Vigorous health information campaigns to raise awareness and educate people about the measures needed to protect themselves saw the media play a crucial role in aiding the eradication of the Ebola virus.

When key issues are given priority by the key media, it is sure to enter public debate which can at times influence policy agenda (Dearing and Rogers, 1996). This is due to the fact that the media is important in setting the agenda of what people talk about, think and thus sets trends. The media plays the role of stimulating and leading open and frank discussions (UNAIDS, 2005). An example would be of how it enables people living with HIV/AIDS to air their views challenging stigma with information and positive images. By so doing, the media can be a tool used to encourage leaders in communities to take action against stigma and discrimination. Most case studies attest that the media is a key component of the web of influence in a society when it comes to policy discourse and implementation (WHO, 2009).

Lessons learned from past experience with infectious disease outbreaks have proven that the outbreak is brought under control only when communities actively participate in control and prevention activities (WHO, 2009). This makes it easier to adopt and sustain preventive and mitigation behaviour.

This study seeks to analyse the consumption and understanding of the *News* bulletins and documentary by a selected audience. In assessing the way the eNCA covered Ebola, the researcher will examine if the eNCA *News* reportage on Ebola was balanced and did not leave traces of stigmatisation on victims and their families. This research will investigate how the *News* bulletins depicted the outbreak, it will assess if the scientific background, prevention methods, spread and treatment of the disease

was communicated effectively. From the evidence gathered in this study, secondary comments will be made for the future facilitation of health promotion strategies.

The analysis of audience reception of News bulletins related to health reporting in Africa, is an area that is yet to be explored. This is one of the reasons why the researcher was prompted to embark on this type of research because as mentioned before little work has been done to investigate the South African media's coverage of the Ebola virus.

A battle between the media and medicine exists as scientists blame the press for disseminating inaccurate information that obscures or misleads the general public. Miriam Shuchman (1997) notes four problem areas the media have when reporting on health issues. These problems are; sensationalism, biases and conflicts of interest, lack of follow up and stories that are left uncovered. Although all these problems are vital to investigate pertaining the coverage of Ebola by the eNCA, it will not be possible to investigate all these factors. This researcher has chosen to focus on the reception of the content of the bulletins and the opinions of the sample group.

The Health Journalism Partnership (HJP, 2006) conducted a study on the state of support to health journalism worldwide that led to the conclusion that health issues tended to be shallow and reactive in the way that the media covers them. The research included 450 organisations engaged in health media support while key informant interviews were conducted in 16 countries. HJP (2006) postulates that most coverage on health is driven by announcements of new drugs or official health campaigns and lacked investigative depth. Health reportage is referred to as sensationalist or inaccurate. The report on the study highlighted the key challenges to good health reportage. It asserts that;

- Many journalists lack basic journalism skills and understanding of science and health issues. Shuchman (2002) concurs adding that a majority of reporters do not understand statistics enough to explain new scientific findings and they seem to be more concerned with sensationalism rather than reporting on the scientific truth.
- Journalists felt that many countries have restricted their access to information and statistics. Access to information is a critical component of news gathering however many laws or institutions may be barriers to attaining vital information for health stories.
- Health reporting seems to have a low status and few rewards. Some journalists consider Health as a beat that is not as prestigious as other beats such as politics and sport.
- Journalists lack resources to fully carry out a good health centred story. Resources such as equipment, time, finances to cover travel expenses and access to information.
- There is need for relationships between journalists and a range of health actors should be strengthened. According to Robin Vincent (2007), many researchers are

wary of media misreporting and sensationalism, thus they shy away from engagement with the media. However this does not benefit the society, as there is need for the media to be the interface between researchers and the general public. There is a vital need for journalists and scientists to share the responsibility for accurate communication to the public as underlying problems are an interactive dynamic through which both parties contribute (Shuchman, 1997).

This research will examine the ways in which these factors have also affected the coverage of the Ebola outbreak by the eNCA. The news is expected to provide public service journalism, supplying the public with information that is essential for rational decision making. Journalists respond to issues that interest and affect the public (Mencher, 2008). Responsible health reporting can enhance the process of shedding light on important issues for the general public that might have otherwise remained obscured in the scientific arena (Shuchman, 2002).

It is necessary to note that the media as a sector can revolve around commercial content driven by the needs of advertisers and an institutional tendency to reflect the interests of the powerful/ global elites (Williams, 1990; Herman and Chomsky 1995; Castells, 1997 ; Bourdieu, 1998). According to Noam Chomsky and Edward Herman (2002; xi), among other functions the media serves and propagandises information on behalf of the powerful societal interests that control and finance them. The minority who are powerful and privileged to influence the media have their own agendas and principles they seek to advance. The editors and journalists internalize the priorities and definitions of what is news worthy and conforms to the institution's policy (Chomsky &Herman, 1988). Structural factors such as ownership and control, dependence on funding sources (such as advertisers) and the relationships between the media and those who make the news and have the power to define it and explain what it means.

Questions to be asked

1. In what manner are the programmes presented
 - o Are the characteristics of the disease mentioned and explained in ways that they become accessible to a lay audience?
 - o Is the audience informed on how the disease is spread?
 - o Who are identified as the victims/ saviours, and how are they portrayed?
 - o Is there a degree of moral panic? (This concept is discussed under 'theory' below).
2. How were the bulletins understood by the selected sample of audience.

Background of the eNCA

According to the eNCA News website (2015), the eNCA *News* channel was launched on the 1st of June 2008 as *eNews*, South Africa's first 24 hour *News* service and was rebranded in August 2012 as it increased its global reach and went online. The *News* channel is available on DSTV's Southern Africa bouquet on channel number 403. Live reports, breaking *News*, sport, weather, entertainment, financial and business updates all form part of the station's offering, along with a host of topical current affairs shows such as *3rd Degree*, *Africa360*, *Maggs on Media* and *The Justice Factor*. The channel has bureaus across South Africa as well as in Lagos, Nairobi and Beijing. It also has correspondents covering Zimbabwe, Ghana, and Tanzania.

Justification for choosing the eNCA Channel

Let it be noted that the researcher chose to use the eNCA *News* channel as a case study due to the fact that, the eNCA has the highest ratings of all three South African 24 hour *News* channels, the others being SABC *News* and ANN7 (Ferreira, 2015). This means that the *News* channel is the most watched, as it is the most popular (Ferreira, 2015). John Hartley (1982; 5) indicates that news gains much of its 'shape from the characteristics of the medium in which it appears and TV in particular view different from other mediums.

Background on the Ebola Virus Disease

The first victim of the 2014 EVD was reported in February, from a city called Dinguiraye in Guinea (CDC Reports, 2014; BBC, 2014). The disease rapidly spread to Sierra Leone and Liberia with a 90% fatality rate in the initial stages as very few people knew or understood the disease. Ebola was first witnessed in 1976. The spread of EVD is increased by human mobility and contact (Brenhardt, 2014). The disease is not airborne but can be transmitted through coming in contact with an infected person's bodily fluids- blood, faeces and sweat, or through the handling of a corpse (CDC, 2014). It was named after the Congolese River, Ebola. In 1976, the Zaire strain caused 280 deaths (WHO, 2015; eNCA, 2014). There are five different strains of the Ebola virus namely, the Zaire Ebola virus; Sudan Ebola virus; Bundibugyo Ebola virus; the Tai Forest Ebola virus- formerly known as the Côte d'Ivoire Ebola virus and the least dangerous to the human species is the Reston Ebola virus.

Infected primates such as monkeys or apes and infected fruit bats can transmit the disease if eaten. The incubation time, where one will have contracted the disease but will not exhibit symptoms, can last between 4-21 days (CDC, 2014). However a person infected with Ebola is not contagious until symptoms appear. It starts with flu-like symptoms and when a person dies of the disease blood comes out of every orifice (WHO, 2015; eNCA, 2014).

Pertaining to the origins of the disease, some scholars have propounded that this virus was man-made. On the programme, *Ebola, Man-made?* on *Press TV*, political commentator Randy Short, stated that Ebola is a man-made disease created for experimentation, "created by the United States of America to create a panic, sell medication as well as kill Africans". He makes references to the Syphilis and Pellagra experiments as other examples of other diseases the USA have experimented on in Africa as bioterrorism. However, as African Media Initiative (AMI) (2015: n.p) put it, "The ("conspiracy") theories quickly fizzled off due to lack of interest in the dominant media and, possibly, the underlying improbability of the assertions that were made".

Initially no vaccine or cure had been made so the people were advised on cleanliness and preventative measures. Medical practitioners tried to cut the chain of transmission through the rapid detection of the disease and the isolation of those infected to limit the spread of EVD. This led to quarantine measures being imposed.

Under Quarantine

The intended role of quarantines was to mitigate the spread of EVD. They facilitated contact tracing and effective burial management under supervision while providing a conducive environment to reinforce social mobilization and behavioural change practices (Oxfam, 2014). However there were negatives that came with employing quarantine. According to the International Federation of Red Cross and Red Crescent Societies (IFRC) the fear of being marginalized may have caused people to conceal their illness while "others with other severe illnesses such as Malaria are at times admitted to quarantine as a precaution. But when they recover and are discharged the community believes they were actually being treated for Ebola and could still be contagious."(IFRC.org, 2014: n.p). On the 19th of September 2014 a three-day shutdown to limit the spread of Ebola was imposed by the Sierra Leone government, banning freedom of movement. 200 patients and 100 bodies were discovered when authorities in Freetown conducted a search during this period (ACAPS, 2015).

Although some NGOs argue that quarantine can fuel panic and counter productive behaviour, others see it as a vital complementary tool to prevent the spread of infection and facilitate contract tracing (ACAPS, 2015).

By December over a million people were under quarantine leading to food shortages, which prompted individuals to violate quarantine in search of basic provisions for survival (ACAPS, 2015).

Location of the Study

The location of study will be the University of KwaZulu-Natal, specifically Howard College and the Nelson Mandela School of Medicine. Both campuses are situated in Durban KwaZulu-Natal South Africa. Participants for the Researchers focus groups will come from Howard College. The Nelson Mandela School of

Medicine will provide the researcher a variety of health experts and medical practitioners to interview for the purpose of this study.

Conclusion

This chapter has attempted to locate the study within its context and also provided the justification, that is, the reasons for undertaking this study. It has also included the objectives of the study, postulating what the researcher intends to find out by carrying out this research. The chapter has also given a brief background of the Ebola virus and looked at the questions the researcher intends to answer.

The following chapters include the Literature review which contains information pertaining to work done by other researchers on the coverage of the Ebola Outbreak. It indicates the gap this researcher intends to fill by conducting this research. The Theoretical Framework explores theories that help in the understanding and explanations of the findings in this research. The Methodology Chapter explains the methods this researcher used in conducting the research while the Data Analysis chapter explains the findings and the last chapter provides recommendation.

Chapter Two: Review of Literature

Introduction:

One unintended consequence of attention grabbing media coverage is that it causes people to become fearful at levels that are far disproportionate to the actual risk. Sometimes that fear can turn to panic, resulting in negative beliefs and even dangerous behaviour (Bernhardt, 2014:1)

This chapter will include key concepts that inform this study and put it into context a comprehensive explanation of the researcher's argument. This chapter serves the purpose of revising scholarly views on the subject on how the media from all over the world covered the Ebola outbreak. It is vital to analyse previous research and reviews so as to understand factors that affected the coverage of the disease by other media sources. This is to see whether the same factors are present in the examining of the eNCA. The chapter will also indicate how this research will be different from what has been investigated by other scholars.

News Flows

Although globalization brought about the positives such as instantaneous news delivery, widely accessible information and a global public sphere platform, many cite its negativity. This negativity consists of the expansion of Western led corporate interests - a vehicle of cultural imperialism, propagating news flows from the West to the rest of the world (Mugdha Ral and Simon Cottle, 2007). The issue of news flows is of relevance to this study as the researcher seeks to find out if and how the international news flow concept may have influenced the production of the eNCA's news in regards to the Ebola crisis.

Due to this digitally connected globe, flows of all kinds of information - political discourse, scientific research, corporate data, personal communication and media entertainment - circulate at high speed (Thussu, 2002). According to Daya Thussu (2002), the enhanced multi-media capacity and falling cost of telecommunication has broadened as well as accelerated access to media and information. However in this information dispensation, Anglo-American views are the most powerful and vocalized leading to the popularity of a one-dimensional flow of news. As an audience of the eNCA one may be inclined to assess if the eNCA provides news about Africa in a similar way to that of the West or if it has its own angle on telling African news.

Kevin Williams (2011: 33-39) postulates that globalization has brought about the interconnectedness between people and nations increasing the growth and demand for international/ foreign news hence the growing awareness of the world's happenings. This is why the Western media gathers news from around the globe. It is presumed that it tries to cater for a diverse audience or a worldwide audience hence the need for the news to be accurate and generally all encompassing. In Williams'

(2011) opinion, globalisation has brought about the standardization of news as news is becoming more and more similar. One should not forget that it is impossible to air every single event happening world wide hence “newsworthy events must jostle for inclusion in the limited number of slots available” (Hartley, 1982: 76). Some issues may take priority over others and as a result, are not aired- what constitutes international journalism is determined by Anglo American news views and practices (Williams, 2011). Therefore those selecting the news to cover also assume the agenda-setting role of worldwide media. The standardised news is based on Anglo-American models of journalism meaning the successful spread of the narrative forms and values of Western journalism (Williams, 2011; Bielsa, 2008). In other words, what constitutes international journalism is determined by Anglo- American news values, practices and editorial policies, hence one should assess how true this statement is regarding the coverage of the Ebola outbreak by the eNCA News.

Western Media Coverage of the Ebola Outbreak

Although one can argue that the Ebola Outbreak is nothing to laugh about, comedian Russell Howard (2014) expressed his concern on the disparity between how the United Kingdom and American media covered the Ebola Crisis. Comedy has been realized to have a purposeful social function revealing human imperfections (Goldman: 2013). Comedians chasten those whose interests violate the moral code of the society they represent. In this case the media had a responsibility to inform and educate the people. According to Nancy Goldman (2013) humour helps us think more flexibly and it is used to critique social injustices. Howard (2014) postulates that Britain gave a ‘calm’ and ‘measured approach’ to the Ebola outbreak saying that it was made clear that it was at the forefront of preventing its spread and that a small number of cases would catch the virus. He states that American media on the other hand called it “The Killer Virus” that was spiralling out of control, causing unnecessary alarm among the Americans. Howard (2014) makes fun of the Americans’ reaction to the Ebola outbreak in an attempt to bring focus to the way in which the American people were uninformed about the disease. According to Howard (2014), the American’s ignorantly stigmatised and discriminated against some members of society who originated from the West African countries affected by Ebola fearing they would contract Ebola.

Similarly, Quinn Mulholland (2014) concurs with this assertion stating that the American media failed to cover Ebola as the coverage of the disease caused stigma and fear to the American public. The article criticises how some Americans failed to understand the disease but instead distanced themselves from members of their society who originated from African countries affected by the disease. Mulholland (2014: n.p) says,

[In] New Jersey and Georgia, students from areas in Africa completely unscathed by the disease weren’t allowed to come to school. In Texas, a

community college rejected two Nigerian applicants, because it refused to admit any students from countries affected by Ebola.

The article lays blame on the American media for not educating its audience stating, “Ebola hysteria, it seems, has had much more of an impact on the country than the disease itself [...] In many ways, the media is to blame for public’s overreaction” (Mulholland, 2014: n.p). The article further criticises the *News* outlets for promoting what he terms “mass hysteria” to draw an audience for the channels ratings.

These observations by Howard (2014) and Mulholland (2014) cause the researcher to question the coverage of the Ebola Crisis by the South African media - the eNCA in particular. These scholars’ analysis is essential as it vividly shows the different angles taken by the media to report on the Ebola Crisis. Factors such as stereotyping, stigmatization and discrimination were a result of an uninformed public.

60 Minutes sent a reporter, Lara Logan to Liberia to cover the Ebola outbreak. In a letter to the CBS News channel written by Howard French (2015) to the Executive Producer, Jeff Fager, major concerns were raised surrounding how the media reported on news based on Africa. Howard French (2015) makes it vivid how the Africans are rendered helpless and voiceless with regards to the spread of the Ebola Outbreak. The only people whose opinions were voiced on air were white foreigners who travelled to Liberia to contribute to the fight against Ebola. The article illustrates how *60 Minutes* could have reported on the Africans contributing to the fight against the disease however no mention was made of the African medical staff or caregivers and no African was quoted in any capacity. In French’s (2015: n.p.) words,

Taken together, this anachronistic style of coverage reproduces, in condensed form, many of the worst habits of modern American journalism on the subject of Africa. To be clear, this means that Africa only warrants the public’s attention when there is disaster or human tragedy on an immense scale, when Westerners can be elevated to the role of central characters [...] [Africans] typically limited to the role of passive victims, or occasionally brutal or corrupt villains and incompetents; they are not otherwise shown to have any agency or even the normal range of human thoughts and emotions. Such a skewed perspective not only disserves Africa, it also badly disserves the news viewing and news reading public [...] The great diversity of African experience, the challenges and triumphs of African peoples, and above all, the voices and thoughts of Africans themselves are chronically and woefully underrepresented.

This letter puts into perspective the areas to be concerned about when looking at the coverage of Ebola. It will help the researcher examine the eNCA to see if these issues appear in relation to their coverage of the Ebola topic. French (2015) mentions

how the Western media portray Africa in the one negative specific way that is not only limited but is also misleading. Chimamanda Ngozi Adichie (2009) in one of her TEDTalks, propounds on the dangers of a single story when something is narrated the same way repeatedly. The way the Western media portray the African people in only one way, negatively as needy, desperate, victims, criminals, villains etc. repeatedly leads to them being defined in that one way only. Adichie (2009: n.p)¹ acknowledges the definitions of power illustrated by a story she states “Power is the ability not just to tell a story of another person but to make it the definitive story of that person”. In other words, who and how a story is told influences the final outcome of the story. The West, particularly on *60 Minutes* according to French (2015) narrate the story on Ebola in their perspective illustrating White supremacy versus African inferiority, however that is not the only available story on Ebola. This researcher will analyse how the African people told the story on Ebola to their African counterparts.

It is important to note that what most people knew of the disease was mainly based on the information from the West. It is of essence to see how Africans reported on a topic affecting them to see if as stated by Williams (2011) that the fundamentals of journalism are learnt/ taught the western way. The West determines what news values are and the principles of how the news should be reported. It would be interesting to look at the eNCA through this microscope to see if they are practicing real journalism/ if they are just mimicking the media from the West.

African News Coverage of the Ebola Outbreak

Not much research has been done on how African media covered the Ebola outbreak. This is a gap that this research intends to fill. However it is necessary to acknowledge comments by media practitioners pertaining to the coverage of the Ebola outbreak by African media, from around the continent. Media Initiative CEO, Eric Chinje stated that,

Ebola is one of the big stories of our times and it is certainly appropriate to question how effectively African and global media have told this important story. Have reporters and editors asked the right questions? ... Reports on the Ebola pandemic are replete with images of death and the violence of the disease, giving media consumers a real life equivalent of a Hollywood horror movie of alien invaders. What about the living millions who stand at the front-lines of that battle? Do we, the audience of the unfolding crisis, have a right to see beyond the frightening body count? (Chinje 2014: n.p)²

Chinje (2014) indicates that there is a deficiency in the way that Ebola was reported by African media. He states that the habitual “copy and paste” tradition synonymous

1

https://www.ted.com/talks/chimamanda_adichie_the_danger_of_a_single_story?language=en

² <http://allafrica.com/stories/201411030384.html>

within African media debilitates ignorance of the media's role in mirroring the society. This means that the role of the media in informing the public on the actual situation and assisting societies deal with the impact of the disease was left unfulfilled. The term "copy and paste" suggests that the African media copies the trends of Western media which links back to the concept of news flows and how the West set the trends on how the rest of the world tell the news.

The Economic effects of the Ebola Virus

The Ebola outbreak of 2014 had an economic crippling effect on the three most affected countries, Sierra Leone, Liberia and Guinea and to Africa as a whole (Songwe; 2015: BBC, 2015)³. This twentieth Ebola outbreak captured global attention like no other previous case of Ebola previously recorded. Dianna Games, the chief executive of Africa@Work, a Johannesburg based consultant company, told BBC that, "Ebola has made a dent in the Africa rising narrative...The stereotype of Africa as a place of poverty and disease has started to re-emerge again," (BBC, 2015).

The perplexing paradox of plenty cannot be ignored when looking at these Western African countries that were most affected by the outbreak. The natural resource curse, coined by Richard Auty in 1993, realizes the paradox of how nations with abundant resources tend to become impoverished while countries that have scarce resources tend to become rich. As mentioned before, the countries - Liberia in particular, have been said to have the worst health care systems in the world. One would question the foundational causes of the rapid spread of the Ebola Virus and reach the conclusion that the West African countries failed to eradicate the deadly virus due to the fact that they lacked the financial capacity that was needed to reduce the spread of EVD (hospital, medical aid, infrastructure, information dispersal tools - media reach, etc). Liberia and Sierra Leone are both countries that were still recovering from civil wars related to diamond and gemstone during the 1990s. The exacerbated inequalities within the people, enhanced corruption and rent seeking governments making poor investment decisions, together with bad governance, lack of transparency and poor macroeconomic management are all symptoms of the ailing West African economy (Oblide, 2015: 2-3). However, Sub-Saharan Africa was anticipated to grow from 4.9 percent in 2013, at 5.2 percent in 2014 and 5.7 percent in 2015 (World Bank, 2015)⁴. In contrast to this anticipation, economic costs were incurred across Sub-Saharan Africa in 2015 as consumer and investor confidence decreased. In addition, a loss of more than US\$ 500 million across the region, excluding the three directly affected countries occurred due to the Ebola outbreak (World Bank, 2015).

³ <http://www.bbc.com/news/business-28865434>

⁴ <http://www.worldbank.org/en/news/press-release/2015/01/20/ebola-most-african-countries-avoid-major-economic-loss-but-impact-on-guinea-liberia-sierra-leone-remains-crippling>

Mining, agriculture and trade within the countries most affected by the outbreak. Sierra Leone witnessed an economic decrease of 30% with the agricultural sector being the most affected (BBC, 2015). 66% of the country's population are farmers but could not work due to the isolation policies restricting movement of goods and labourers (BBC, 2015). Most people fled the Eastern Province near the borders of Liberia and Guinea, where most of the farming in Sierra Leone takes place, to less affected areas. With the shops closed down, little or no agriculture taking place, food shortages and an increase to food prices, a rise in inflation and pressure on the national currency was inevitable. Commercial banks reduced their hours of business by two hours to reduce contact with clients and the country's tourism suffered as the hotels were empty and staff was being laid off. In addition, although the mining sector in Sierra Leone had contributed to its economic growth recently, the Ebola outbreak caused a reverse in this improvement.

Liberia, similarly suffered as the work of world's largest steel maker, Arcelor Mittal, within the country was brought to a halt when contactors stopped going to work in Yekepa. Foreign workers also fled in fear of the Ebola outbreak.

Vale, the world's biggest iron ore producer had been involved in a project in Simandou, Eastern Guinea until operations were seized in April. This illustrates the magnitude to which these countries were affected by the Ebola crisis. These three impoverished countries were already struggling economically and as mentioned before, they had the worst health care systems it was essential for them to attain international assistance.

However national and international responses to the outbreak resulted in a number of public health improvements such as individual safer burial practices, earlier case detection, an increase in health workers and treatment facilities, public awareness campaigns and stepped up contact tracing (BBC, 2015). These actions largely contributed to a lower risk of the Ebola virus spreading across the borders reflecting fast and effective containment measures taken by the neighbouring countries- Mali, Nigeria and Senegal.

Stigma, Discrimination and The Ebola Outbreak

It is essential to note that it was the misunderstanding and lack of awareness of the general public that led to the unfortunate spread of the HIV/AIDS virus in the 1980s and 1990s (Cullen, 2003). It is that same lack of knowledge that also caused the stigmatization of those infected and affected by the HIV/AIDS. Therefore it is important for the public to have access to accurate information pertaining life threatening diseases and Ebola is no exception. This research is vital to assess whether the eNCA served the purpose to inform the general public. Although this study is centred on Ebola, mentioning HIV/AIDS in relation to stigma and discrimination is unavoidable. This is because the two connected social ills- stigma and discrimination have in the past, been strongly associated with HIV/AIDS and it is necessary to point

out that South Africa has the high prevalence of HIV/AIDS, with an estimation of between 6.5 million to 7.5 million people living with HIV (unaids.org)⁵. These statistics are extremely high, also considering the fact that HIV/AIDS has been existent for over three decades. It would therefore be a certainty that tackling Ebola would be an even bigger challenge also considering that Ebola kills faster.

Pertaining HIV/AIDS, communication has been called a key intervention in reducing stigma and informing the publics of their rights and options regarding treatment, service and prevention (Susan Goldstein et al. 2005). Lessons can be learnt in tackling Ebola from the previous experience with HIV/AIDS which is why this researcher has included it in this chapter.

Mariam Davtyan (2014:1) quotes Erving Goffman (1963) in defining stigma saying it is “an attribute that is deeply discrediting” excluding an individual from full social acceptance reducing the individual to someone to a tainted and discounted individual. Stigma related to EVD refers to derogatory attitudes, beliefs, and behaviours that are directed towards people living with EVD and those presumed to be infected – the affected and infected. According to Mariam Davtyan et al. (2014: 1), “Diseases do not exist in a vacuum but are a products of broader structural processes such as poverty, racism, and gender inequality”, and this is what perpetrators of stigma and discrimination forget to consider. Patient blaming, neglect, refusal/denial of care and irrational and inappropriate fear of contagion directed towards impacted populations, are all characteristics of stigmatizing attitudes and behaviours (Davtyan et al. 2014). Stigma and discrimination are the negatives that Ebola is managing to leave behind, with traces of post-traumatic stress, division and animosity worldwide.

During 2000 and 2001 EVD patients in Uganda were victimized, prevented from returning to their homes and communities. The 2014 EVD has left individuals originating from the affected areas with a chip on their shoulders. Moses Jensen, 69, a Liberian – American retiree, told Al Jazeera that,

You stretch your hand, nobody will shake it... An African- American man in my apartment block asked me why a Liberian brought Ebola to America (Al Jazeera, 2014).

There are children who were orphaned by EVD who remained sero-negative who were not taken up for care by families and communities out of fear of contagion.

The media exists to eradicate misconceptions of Ebola. According to Christian Raftopoulou (2007: 10), “The power of the media and positive media representations can be used to inform, activate and ultimately empower audience regarding public health issues”. By so doing, stigma and discrimination is reduced. This is because the evidence of both of these negative social ills is brought about due to the lack of knowledge and understanding. The media is expected to provide the skills of how to

⁵ <http://www.unaids.org/en/regionscountries/countries/southafrica>

deal with cases regarding disease outbreaks. This is essential as the consequences of discrimination and fear are what make people have less control over the risk of being infected. For an example, in the case of HIV/AIDS, a person who is HIV positive may not always take their drugs at the correct time or in the correct manor in order to conceal their positive status, as a result, stigma and discrimination compromise AIDS responses and drive the spread of HIV/AIDS. In the same way, some members of the community who had Ebola, due to the fear of being marginalized felt like they were left with no choice but to conceal their illness while "others with other severe illnesses such as Malaria are at times admitted to quarantine as a precaution. But when they recover and are discharged the community believes they were actually being treated for Ebola and could still be contagious."(IFRC.org: 2014). This illustrates the existence of stigma and discrimination as members of society does not want anything to do with a family infected or affected by the virus.

In a bid to counter stereotypes of West Africans, some have posted photographs of themselves on social media using the hashtag #IAmLiberianNotAVirus [See image 1.1]



Image 1.1 Countering stereotypes #IAmLiberianNotAVirus

Source:www.nationalhelm.com (2014:n.p) [Accessed date: 11 November 2015]

However Raftopoulou (2007), states that Media discourses, representations and constructions of health have the power to inform, normalize and empower; however, they also have the power to stereotype and even stigmatise” (Ritterfeld & Jin: 2006). This is why it is essential to analyse the eNCA’s reports on the Ebola outbreak to see if the eNCA was reporting responsibly and accurately or if there were any messages encouraging stigma and discrimination.

Moral Panic and Sensationalism

This investigation will explore issues surrounding moral panic, stigmatization, stereotypes and sensationalism. David Ransohoff (2001: 2) indicates that, “Sensationalism in medical reporting occurs when extravagant claims or interpretations about research findings are made.”

Therefore the nature in which the eNCA reported on Ebola is a crucial matter. Moral Panic is public panic over an issue deemed to be a threat, shocking to, the sensibilities of the status quo (Kenneth Thompson, 1998). It is often fanned by sensationalist selective reporting in the media and exaggerated by opportunists benefiting from the hysteria e.g. politicians, entrepreneurs. The media uses sensational headlines, melodramatic vocabulary which causes the audience to fear the disaster, which in this case is the Ebola crisis (Thompson, 1998). Exaggerated cures, contradictions, and plainly misleading information can do harm. For an example, the Korean stem-cell scandal, in which Hwang Woo-Suk and colleagues claimed to have cloned human embryos. The media was lambasted for their part in distorting or sensationalizing scientific findings (iffgd.org: 2015⁶; ncbi.gov : 2015 ⁷)

This will also lead the researcher in investigating whether the ownership of the channels or programmes influence the content of the output (John Hartley, 1982). The study will explore academic literature relating to audience reception and health reporting (Gower article by Ahmed and Bates; Intech article by Catalán-Matamoros; McQuail, 1994; Schiavo, 2009; Eveland, 2001). Reference shall also be made to the “Health Content Policy Framework for Television Broadcasting in South Africa” (Pule, 2012), so as to bring into perspective the importance of Health Promotion through the mass media in South Africa.

Similarly Matt Gertz and Rob Savillo (2014) focus on the political aspect as to why the coverage on Ebola increased in American media towards the midterm American Presidential elections. This research was different in the sense that it did not have health reporting as an area of concern nor did it comprise of an audience reception study, it was mainly concerned with the political aspect and the frequency of the Ebola topic on certain *News* channels. This illustrates the gap that exists as very little has been done to research African *News* media in its coverage of EVD which is the gap that my research intends to fill.

The analysis of audience reception of *News* bulletins related to health reporting in Africa, is an area that is yet to be explored. This is one of the reasons why the researcher was prompted to embark on this type of research because as mentioned

⁶ <http://www.iffgd.org/site/manage-your-health/tips-daily-living/health-media>

⁷ <http://www.iffgd.org/site/manage-your-health/tips-daily-living/health-media>

before little work has been done to investigate the South African media's coverage of the Ebola virus.

Sensationalism in Health Reporting

The old adage; 'It bleeds, It leads', still takes prominence when news selection occurs. Stories on violence or death take prominence and this was no different where the reporting of Ebola took place on news platforms.

Sensationalism occurs when exaggerated claims or interpretations on research findings are made, in some cases it is to sell the newspaper or to keep viewership on news channels high (Ranshoff, 2001). The use of sensationalism in news stories does more harm than good as the unintended consequence of attention grabbing media coverage is that it can cause fear to levels that are far disproportionate to the actual risk, according to Jay Bernhardt (2014). Bernhardt (2014) highlights that sometimes fear can turn into panic, resulting in negative beliefs and dangerous behaviours. This could explain the reasons why rumours on how to cure the disease were formed and spread so quickly in the areas affected. An example of one of these rumours circulating was that if you drink a cup of hot chocolate you would be cured of Ebola. Although it may sound absurd, it is important to note that in some areas affected by Ebola - mostly rural areas, hot chocolate isn't common and can rarely be found. Rumours such as this could have led others who suffered from Ebola to look for hot chocolate to cure them instead of seeking medical help. This shows how sensationalism in medical reporting prevents the public from being knowledgeable participants of a society. Ranshoff (2001) highlights the importance of having an informed public that will facilitate in policy discussions about scientific or health issues. He states that

[b]ecause democracies rely on an informed citizenry to debate and decide among policy choices, sensationalism may threaten effective involvement by desensitizing the public to information about medical science through repetitive cycles of excitement and disappointment. (Ranshoff, 2001).

Robin Vincent (2007) concurs with this statement sighting Dearing and Rogers (1996) who state that the media's role in influencing public debate has shown that issues given priority to in Key influential media enter public debate which can at times influence the policy agenda.

Ranshoff's argument stems from the fact that journalism and medicine/science are two professions that may have similar goals but differ in style and language, resulting in "miscommunication." Both professions uphold standards of accuracy, fairness, and balance in writing, the two professions aim towards health awareness, however in his opinion it can be difficult to merge the two as the styles differ.

Conclusion

In conclusion, work previously done by other scholars on the coverage of the Ebola outbreak will help the researcher examine the eNCA coverage of the same topic. This chapter explained concepts such as news flows and how they related to the EVD as a factor that possibly influenced the way the channel produced the news. The other concepts discussed are the issues of stigma and discrimination in relation to the Ebola epidemic.

The chapter also gave a brief overview of the economic impact of the Ebola outbreak. The comparison of the Ebola coverage by European and American media was mentioned as research that has been done before. Looking at this research highlighted key concepts to interrogate within the borders of this study. The following chapter shall look at the theoretical framework that influences this study.

Chapter Three: Theoretical Framework

Media texts need to be recognized as deliberate actions- they are the product of processes of selection and construction. To put this differently, media texts engage in discursive or ideological work; they mediate the realm of events, ideas, feelings and they frame events in relation to social contexts.

(Fourie, 2009:206)

This chapter situates the study within the framework of the reception theory as the main theory of analysis. Other theories influencing the study include neo-marxism representation and identity in connection with “the Other”. An overview of how these theories influence this study shall be draw within this chapter.

Reception theory: Encoding and decoding

The initial studies on the media and its relationship with the audience bordered on engineering communication models that illustrated how information was transmitted to the audience (Mapudzi, 2009: 23). This brought about the birth of theories such as the hypodermic needle theory that, even though were simplistic they, signalled the emergence of better models to illustrate media communication. Theorists gradually became more concerned with how the audience used the media to gratify their needs, bringing about the uses and gratification theory (Mapudzi, 2009: 24). This information is important as it explains how theorists postulated the reception theory and how the theory differed with those that came before it. Theorists became aware of the ways in which the audience engaged with text, interacting with encoded messages leaving a theorist called Stuart Hall (1973: 128) to postulate a theory on the encoding and decoding of texts.

The theory on Reception, draws attention to the audience’s way of receiving and interpreting media texts. The new breed of studies which explored the interactive side of reception theory shed light on some aspects of communication that had been previously ignored (Mapudzi, 2009: 24). The reception theory antagonises the hypodermic needle theory that suggests a linear model to explain communication. The hypodermic needle theory is based on the principle that the media has the power to inject the audience with ideologies resulting in them behaving a certain way, the reception theory is built on the opposite of this thought (Fiske, 1992). On the other hand, Stuart Hall’s theory on how a message is encoded by production and decoded by an active audience will be paramount in understanding the audience involved in this research (Hall 1973). Neo- Marxists argue that social elites used the media as a tool to reinforce their power to promote views that forward their own interests- shaping society. Mass society theorists thought the audience was vulnerable. They postulated that media text reinforced social trends and ideologies. The Birmingham

School of thought antagonized this assertion, indicating how the audience had the ability to resist dominant views.

Stuart Hall recognised an audience as active (Hall, 1973: 128). He postulates that an audience does not just absorb what they observe through the medium but they are actually involved, sometimes unconsciously, making sense of messages as they relate to them in personal context (Hall, 1973: 128). In using the reception theory to analyse the audience decoding the eNCA bulletins selected, this researcher shifts the focus from being on the eNCA bulletins to trying to understand the perceptions of the audience as they receive the media product. This is because the reception theory is centred on audience perceptions of the media product.

According to Robert Holub (1984) the reception theory is a creative process that occurs in the act of reading implying that it takes place in the mind of the reader. It is the convergence of the text and the reader that brings literary work into existence. The reception theory “[i]s concerned with the collective social effects of a work of art in a certain historical period given the [existing] prevailing moral values and the cultural – sociological circumstances” (Clara Srouji-Shajrawi 2013; 2-3). The reception theory gives the audience the power to determine the meaning of a text, its value, its acceptance or rejection, giving the work of art its legitimacy (Shajrawi, 2013; 4).

Authors such as John Fiske (1992) antagonize the idea of the media having direct effects on its audience. Fiske (1992; 262) on these terms acknowledges the idea of the audience being active. Hall’s model of encoding and decoding is an attempt to develop insight gathered from the effects and uses and gratification perspectives (Mapudzi, 2009). For an example the encoding and decoding theory derives the notion that “[m]ass communication is a structured activity, in which media production institutions have the power to set agendas” (Herman and Chomsky, 1988: xi).

It is necessary to bear in mind, as Shajrawi (2013: 6) points out, that the public’s judgment of a text can change because of the historical and social changes in aesthetic taste hence there is need for the media to be aware of the socio-cultural environment it is producing a text for. This goes to imply that eNCA news producers must produce their bulletins bearing in mind the audience it is producing for. Shajrawi (2013; 5) postulates that the reception theory considers the context in which the media product is consumed. Hence the audience, text and producer have connections among them that are important in the process of media communication.

This research will try to understand how the audience internalised information on the Ebola outbreak through the eNCA News Channel. The researcher acknowledges that the individuals involved in the focus group discussions may have diverse readings of the eNCA bulletins justified by the fact that one’s reading of a text depends on their relationship with a particular text as indicated by Fiske (1992). “In order to make sense of a text –to read a text- you must be able to interpret the signs

and their structures, “according to Baran and Davis (2011: 257). Thus if the meaning is not articulated in practice, it has no effect (Hall, 1973). This means that after watching the news bulletins, the audience is expected to be vocalizing their thoughts and opinions on the topic. The audience, as they are active, are expected to have an opinion on what they will have seen.

Hans Robert Jauss indicates that a “[r]eader always reads a literary work within some ‘horizon of expectation’- where the literary work may be according to his or her expectation or it may surpass or even disappoint the reader. When an expectation is met, the aesthetic distance between a reader and a text has been met as well. If a work breaks a reader’s horizon, the aesthetic is considerable implying that a work of high art contributing to a new horizon of expectation” as quoted by Shajrawi, (2013: 6). News contributes to the climate of ‘opinion’, to the horizons of possibilities to the process of marking the limits of acceptable thought and action... it functions to produce social knowledge and cultural values (Hartley, 1982:56) Considering this assertion it can be said that an audience of the news reaches a horizon of expectation very regularly since the news functions to inform and educate its audience. It is this researcher’s objective to analyse the decoding process that will take place when the audience reaches the horizon of expectation regarding the Ebola outbreak.

The encoding and decoding theory explains the necessity communicating meaningfully to produce effects such as to influence, persuade and have emotional, ideological and behavioural consequences on an audience (Raftopoulou, 2007). The encoding is conducted by the producer of the media text. When a producer produces a text like any other product, it is for the ultimate consumption of the target audience. Like any other commodity the producer seeks to make it appeal to as many people as possible hence it is of the essence how the media product is produced, packaged and placed. The producer has to make the media text contextual to the target audience’s needs, making it easy for them to understand and /or relate to. This requires the producer to consider the culture and historical background in which the target audience is immersed in in order to manufacture a product that will be popular among the audience. The audience should make known how they feel about the images they consume, hence this focus group will give the audience such a platform to voice and discuss their ideas and perspectives on how the Ebola outbreak was covered by the eNCA. Receiving a message should cause the receiver to decode it and decide whether to internalize and practice or to oppose a message, without this form of negotiation, no communication has been achieved (Hall, 1973:128-131).

This means that the audience has a choice whether or not to internalize and practice what they absorb from the medium. Hall’s (1973: 128-131) theory on encoding and decoding postulates that there are three positions in which an audience could take when decoding a message.

1. The dominant position through which the audience is located within the dominant view. Misunderstanding and miscommunication between the

producer and the audience in this position is limited as the audience receive the intended meaning encoded by the producer. In the case of the eNCA's coverage of the Ebola outbreak, it would be interesting to see if there are members of the audience who internalise the information as it is delivered to them without doubting or questioning the motive of the information. These members of the audience will be an example of an audience who subscribe to the dominant position.

2. The negotiated position is when the receiver has the ability to “decode the sender's message within the context of the dominant cultural and societal views,” (Hall, 1993: 129). This position recognizes the reader's choice and ability to decipher the message internalizing what they find useful or agreeable to their own beliefs, values and practices. This view is a mixture of adaptive and oppositional elements in the process of decoding a message (Raftopoulou, 2007). With regards to this research, it is anticipated that a certain number of the sample audience will ascribe to this position where they decipher the information given to them by the eNCA with regards to Ebola. Some of the information will be questioned.
3. The “oppositional view is when the audience member is capable of decoding a message the way it was intended [by the] producer, but based on their” contextual background, they do not agree with the message (Hall, 1993:129).

Hall's encoding and decoding theory states that there are various contextual factors that influence the understanding of a text. Hall (1993) mentions the effects of culture, background or personal experiences as these factors influence the reading of a text. John Fiske (1987; 79) acknowledges the fact that the audience is not passive but rather, engages with a message in ways the producer could never fathom. In addition, cultures, backgrounds and personal experiences differ per individual. It also makes sense that a message can be read differently by different people (Baran and Davis, 2011; Fiske 1987). It is the researchers desire to hear what the audience has to say about Ebola and how their different backgrounds, culture and experiences inform their process of decoding the message. It could be possible that the sharing of different views and perceptions may cause other participants to change their views due to the discussion platform the focus groups provide.

This means that there is a possibility of miscommunication or for a “[r]eceiver understanding something different from what the sender intended,” (Hall, 1993; 91). The producer encodes a message influenced by his own contextual background while the decoder who is the audience, decodes the message also influenced by his personal background. Communication is only achieved when a message has been understood, regardless of whether or not the audience agrees with it. Hall propounded that where no meaning is deduced, no consumption will have taken place and meaning is articulated in practice (Hall, 1973).

Furthermore, a text is interpreted within the boundaries of the message being presented (Hartley, 1982). That is, the agenda setting role of the media should also be considered as the media has power to highlight important issues while excluding the others (Hartley, 1982). Moreover, Kevin Robbins and David Morley (2013; 364) have indicated that programmes are usually made in such a way that a preferred reading is considered inviting the reader to take the message in a particular way hence, one must not:

romantise the consumption process and cheerfully celebrating the ‘active’ viewer as a kind of semiotic guerrilla, continuously waging war on the structures of textual power audiences are in certain respects active in their choice , consumption and interpretation of text, with a recognition of how that activity is framed and limited (Robbins and Morley, 2013: 364)

Hence this theoretical approach will help the researcher understand the different views within the sample group investigating how the medium played the agenda setting role with regards to the Ebola crisis.

Representation

Although this topic shall be elaborated on further in the next chapter in relation to Semiotics, I felt it was important for me to make mention of it in this chapter as well as a way of connecting the argument of its importance to this research and introducing the concept of ‘othering’. Through the “[p]rocess of representation, members of a culture use language – [deploying] signs using a signifying system to produce meaning,” (Hall, 1997:61).

This research concerns itself with the representation. It is necessary to understand how the media portrayed the Ebola outbreak and those involved. There is an endless manor in which stories can be represented and retold which is why it is important to understand how the eNCA portrayed the Ebola outbreak. Producers, governed by factor such as ownership, funder’s agendas, advertisers interests etc. have the power to mediate their social, political and cultural contexts at the expense of obscuring decision making processes. By virtue of this fact, the news is a venue of political discourse, including not only ideas, but a range of social practices that reinforce ideas as knowledge and truth. This means that everything means something, every word and image is deliberate. It is the task of this researcher to see what the audience understands from the messages communicated to them by the eNCA news.

The media plays an important role in informing the public of life threatening diseases such as Ebola. It is essential that the media is truthful and accurate. Hall (1997:61) defines representation as “[t]he production of meaning through language, he emphasizes that language is one of the mediums through which thoughts, ideas and feelings are represented through culture”. Objects, events and people, do not have it in themselves any true fixed or final meaning, it is up to an individual or society to make meanings out of them through a signifying process (Hall, 1997: 61). It is important to

note that the audience cannot make their perceptions known without using language. Both verbal and non-verbal communication is necessary in understanding the audience. The valuable concepts of culture and social context cannot be ignored within this research. It is a core determinant of the decoding process of the audience. One cannot talk of perceptions without considering representation.

One uses “[t]he principle of similarity and difference to establish relationships between concepts or to distinguish them from one another,” according to Hall (1997:17). Although stereotypes are a crude sense of mental representation, the topic is inevitable to mention in relation to how individuals and situations are represented in the media (Hall, 1997: 284). Stereotyping is essential in the production of news. Hartley (1982) points out that the accused voices in news, which don’t survive an individual episode, only achieve continuity through function. He states that, in order to function at all, the guilty or accused must be strongly marked to identify them with other voices that perform the same function—they are routinely stereotyped to make them meaningful within the continuing saga of news discourse. One of the ways stereotyping is achieved by the production within the news is through basic opposition, that is, what is good versus what is bad. “Once a topic or representation has been assigned a place in the negative (them) side of the basic opposition, it’s doings cannot be seen in positive (us)” as indicated by Hartley (1982:116). According to Sandra Gilman cited in Hall (1997:284);

Stereotypes arise when self-integration is threatened. They are a part of our way of dealing with the instabilities of our perception of the world. This is not to say that they are good, only to say that they are necessary.

By this quote, Gilman explains the necessity of stereotypes, how they might not be intentional but they help us know and understand ourselves in a way of noting our personal similarities and differences. This is an essential point to note when observing the audiences decoding process. It will help the researcher understand the way the audience internalise the message and it will help explain their understanding.

Issues of Identity

The theory or phenomenon of the ‘Other’ arose in the 1980s when a geographer who travelled to other parts of the world sought to describe what they had seen in the physical environments and tropical societies in other continents. The explorers sought to convey Western civilization as superior to others (Staszak, 2008). Since then the terms have been used to be used in social sciences and humanities to address how people tend to view others in ways that are dissimilar and separated thus expressing complex systems of devaluation. Otherness has predominantly been associated with marginalized people, disempowering them, robbing them of a voice by devaluing their importance in society (Staszak, 2008).

Most individuals in society depend on the media to relay information on events further from our own direct experience; hence it is necessary for one to

identify how we see ourselves compared to those we see through television. With this in mind, the researcher shall investigate if a sense of 'Otherness' can be identified within the audience. "Otherness is the result of a discursive process by which a dominant group ('Us,' the Self) constructs one or many dominated out-groups ('Them', Other) by [stigmatising] a difference- real or imagined- present as a negation of identity" and thus a motive for potential discrimination (Hall:1997:62). Television is implicated in the construction of the fundamentals of 'self-us-good' versus 'Other-them-bad' (Robbins and Morley, 2013). In this instance, 'self-us- good' is the non-infected/ healthy people living in Southern Africa and from other parts of the continent and 'Other-them-bad' being those infected and affected by Ebola in West Africa. It is of interest to see if the audience identified with those affected as fellow Africans or if the audience, like the British media according to Howard (2014), felt the disease would not affect them so they had no reason to fear. When research is being conducted, the research will examine whether the media has encouraged the creation of othering. Othering consists of applying a principle that allows individuals to be classified into two hierarchical groups, "Us and Them" (Staszak, 2008) or "The Dominant and The Lesser". Marginalised people submit to the descriptions assigned to them by the dominant group involuntarily as they will have been defined without choice through the use of stigma and discrimination.

The researcher will investigate who is identified as the lesser, the other. The other will be identifiable as they are portrayed with exaggerated stereotypes that are largely stigmatized making them easy to distinguish. There exists a power relationship within the construction of otherness as only the dominant group imposes value or devaluation upon the other (Staszak, 2008). In this case, the other are South African/ non-infected members of the audience. The researcher seeks to observe how the uninfected audience viewed the affected population. The researcher wants to know if the audience sympathised, blamed or stigmatised them and how exactly they felt about the disease in general. Another way to look at it is whether the African audience felt inferior towards the Europeans who seemed to be doing all the research on this disease that they seemed to have no solution for or not. This is applicable as the origination of the 'Otherness' concept was derived from how the West sought to demonstrate their superiority over others (Staszak, 2008). Xenophobia is not a topic that can easily be avoided when discussing these issues to understand the audience' perceptions of different people of various nationalities.

It is necessary to identify the portrayal of the Ebola outbreak by the eNCA so as to compare its differences from the portrayal of Ebola by the Western media. This will be good to hear African news being told by an African news station so that one can see if there is a difference between the two. The African Media Initiative (AMI, 2015) stated its disappointment in the African media's coverage of the Ebola outbreak saying that African media has, "... in their cut-and-paste approach to coverage, demonstrated a debilitating ignorance of the issues by not addressing necessary questions..." but instead playing along with the Western media's opinions. It would

be interesting to see how true this statement is with regards to the eNCA. AMI blames African media for not assisting society in dealing with the impact of the disease. The researcher shall investigate this with regards to the eNCA.

Ebola coverage from a Neo-Marxist View

Neo-Marxists believe that the media is a tool that exists to reinforce the dominant ideology in society (Milano *et. al*, 2013). One can say that these practices can be seen in the media's coverage of Ebola by western media as some researchers have pointed out. Quinn Mulholland (2014) for an example sees the media using the Ebola crisis to increase channel ratings. This shows the influence the industrial and social organisation of the *News* institutions had on the content output (Hartley, 1982). Mulholland (2014) also stated that Ebola was politicised seeing as the crisis coincided with the American midterm elections. He claims that Republicans used it as an example of Obama's failures as Ebola posed as an immediate threat to the United States of America. Marxist theory critic's ideology showing how the ruling class ideas reproduce dominant societal interests serving to naturalise, idealise and legitimate the existing society and its institutions and values. With this in mind, this theory can also be used to analyse the way in which information on the EVD was presented to the audience. This researcher will ask if the eNCA coverage was similar to that of Europe or if and how it was different.

One must also investigate what the eNCA and *Carte Blanche* have done to bring clarity on the Ebola crisis in their health reporting. It will also be paramount to examine who are depicted as the victims and the heroes, who are glorified as opposed to who is blamed by the mediums in this crisis.

Conclusion

It is necessary to consider the ways in which the audience will internalize the information they receive through the media. Various theories exist for producers to know what to anticipate so that they manufacture a message that will be met with little or no resistance especially when it comes to health issues that affect a whole community. Health reporting should be strategized in a way that the audience receive vital information concerning the disease or outbreak in a way that will not cause fear but raise awareness. This research will use the Reception theory as the main theory of understanding how a selected group of people internalize the eNCA news bulletins regarding the Ebola outbreak. The following chapter shall contain an elaborate overview of how the researcher intends to use the reception theory when conducting data analysis

Chapter Four: Methodology

Introduction

If a text is viewed as a weaving or a tapestry it can be examined in terms of the strands that make it up: it is the complex weaving of the warp and the weft of ideas and discourses and is a result of the selections made in producing the weaving. (Fourie, 2009: 211)

This chapter focuses on the research method, procedures and techniques employed in this research. Interpretivism has been chosen as the paradigm to define this study. This is due to the type of questions the researcher wants to answer using this research. The researcher has chosen to use a qualitative method of research to examine audience reception on the eNCA's coverage of Ebola. It also gives the rationale for the use of the case study, which will be the eNCA broadcasts. This researcher seeks to do two things, that is: (i) To conduct a hermeneutic analysis of the *News* bulletins and (ii) To have the text viewed by focus groups who's decoding of the text shall be analysed by the researcher.

The qualitative research paradigm was developed in the social sciences to enable researchers to study the social and cultural phenomena. The researcher chose to use qualitative research methods over quantitative research because it seems to be more suitable to elicit detailed responses, allowing a generation of ideas and hypotheses concerned with health reporting.

Qualitative methods of research answer the questions: 'Why? How? In what way?' while quantitative research is designed to answer questions like 'How frequently? To what extent? How many? Or How much?' (Hancock et. al, 1998). A quantitative research methodology would not have been ideal mainly because numbers would not satisfy the questions the researcher needs to ask in enough depth. Qualitative research is an inductive and holistic approach that gives the opportunity to develop a descriptive, rich understanding and insight into the individual's beliefs, concerns, motivations, aspirations, lifestyles, culture and preferences.

The researcher intended to find out what the audience understood about the Ebola virus through the eNCA News bulletins. These type of questions and the others designed to provide an answer to this research could not be answered by a simple yes or no and neither could the responses be quantified qualitatively hence the choice of qualitative research methods versus quantitative research methods. Quantitative research tends to view events from the outside, imposing empirical concerns upon social reality. Its use narrows an individual down to a simple statistic that cannot state the reason for its choices and disregards the individual's situational context. This research requires opinionated responses from the sample group hence the use of the qualitative research method. In qualitative research, actual talk, gestures and other social action are the raw materials of analysis, which leads to an in-depth understanding of the phenomenon one is studying. This is unlike quantitative research

where evidence lies on the logic of mathematics and methods of statistical analysis. Qualitative researchers study things in their natural setting, attempting to make sense of, or to interpret phenomena in terms of the meanings people bring to them. The process of “[q]ualitative research [shall involve] emerging questions and procedures, data typically collected in the participant’s setting, data analysis inductively building from particulars to general themes, and the researcher making interpretations of the meaning of the data” according to Creswell (2009: 43).

Interpretive Paradigm

According to Blanche (2006: 273),

The interpretive paradigm involves taking people’s subjective experiences seriously as the essence of what is real for them (ontology), making sense of people’s experiences by interacting with them and listening carefully to what they tell us (epistemology) and making use of qualitative research techniques to collect and analyse information (methodology).

This means that this paradigm is none isolating or controlling, but it harnesses and extends the power of ordinary language and expression to understand the social world we live in. This suggests that the paradigm is centred upon engagement and expression. It relies on first-hand accounts while providing rich detail. The interpretative tradition has no ‘correct’ or ‘incorrect’ theories since it recognizes a subjective approach to questions asked. Instead judgement is made on how ‘interesting’ a response is to a researcher. (Walsham, 2006). A researcher uses his/ her preconceptions in order to guide the process their process of enquiry, in such an exercise the both the researcher and subject of investigation could change (Walsham, 1995).

Blanche et al. (2006) insists that the paradigm has two principles: [a] Understanding in context and [b] The self-involvement of the researcher. Taking this into consideration, the researcher has chosen to use focus groups as the method of collecting data. The researcher needs to hear from the audience how they feel about the information they obtain by watching the eNCA news bulletins.

Research Design

As suggested by the topic, this research is centred on a case study approach to understand the audiences’ perceptions of Ebola based on the eNCA News bulletins. Case studies are intensive investigations a particular subject: individual or institution (Blanche et, al. 2006: 286). It is “descriptive in nature and provides rich longitudinal information [about a] particular situation. Case studies have the advantage of allowing new ideas and hypotheses to emerge from careful and detailed observations,” as Blanche et, al. (2006: 286) indicates. They often use methods such as videos and audiotapes. These devices often make it easier to be analysed and re-analysed by other researchers. This is true for the data collected in terms of the eNCA bulletins

that are easily accessible on the internet. Due to the fact that a case study narrows the research to a specific individual or institution, a more detailed study can be carried out as compared to studying a larger sample (Gilbert, 2008: 36).

Hermeneutics

Hermeneutics, using the basics of semiotics and reception theory, is used when the researcher watches the text to derive a personal reading of the text that he or she triangulates with an additional data source. In the current research, I triangulated data derived from the focus group readings and the opinions of the health experts derived from their interviews. According to David Rennie (2012), originally hermeneutics was applied to the interpretation of legal documents and Biblical Scriptures but over time, hermeneutics has been used in the interpretation of all kinds of texts. Stanley Baran and Dennis Davis (2012: 13) define hermeneutic theory as the study of understanding, especially through the systematic interpretation of action and text. This means that hermeneutics is a subjective theory based on how the researcher understands text. The researcher examines the text as an audience would and drafts ideas on what they understand the text to represent. This researcher intends on using their understanding together with the understanding of the focus group participants to investigate the eNCA bulletins. The researcher depends on both the understanding of the participants and her own understanding due to the fact that understanding is immeasurable and the researcher respects the subjectivity of its nature.

The hermeneutic circle method is where the meaning of a whole text informs the meaning of its parts, and the meanings of the parts illuminate the meaning of the whole. The interpreter's knowledge of authors' backgrounds and the contexts of their writings enable interpreters to understand author's texts better than they were capable of themselves (Dilthey, 1996b). Dilthey (1996b) recommended that induction can be made objective in two main ways (i) paying attention to familiar grammatical and syntactical arrangements and to the more or less determinate meanings of words, and to make use of art objects, artifacts, and architecture as objective indicators of historical events and personages and (ii) by comparing other wholes to an individual whole to aid understanding of the latter (Dilthey, 1996b: Rickman, 1979).

Reception Theory and Hermeneutics

The research design is reception analysis. The case study for this research is the eNCA *News* channel. There are over thirty (30) Ebola bulletins by the eNCA between the 24th of March 2014 and the 7th of April 2015 (as illustrated in annexure 4). The selected audience or research participants did not have enough time to watch all thirty bulletins, therefore the researcher purposively sampled bulletins for the focus group. Initially the researcher had sampled eight (8) news bulletins to show the audience but some members were falling asleep while others got up to leave. This was the reason the researcher reduced the bulletins to six (6). The researcher excluded the following

headlines from the initial eight that were chosen: First Ebola death reported in Nigeria- 26 July, 2014 and Ebola reports worldwide-9 October, 2014.

The chosen bulletins were from the time during the initial stages and the peak of the Ebola Crisis. The researcher considers that the initial stages of the outbreak would not produce enough of the data required by the researcher to understand why the Ebola outbreak caused such panic. The researcher purposively sampled bulletins that:

- a) Defined and explained the disease, how to prevent it and what to do when someone is ill. This was done to find out whether or not the audience were able to acquire the knowledge contained in the bulletins.
- b) The researcher chose bulletins that defined the areas mostly affected by the disease to get a general response on whether or not the audience felt threatened by the disease
- c) The researcher chose the bulletins to understand their perceptions about those areas and how they defined themselves in relation to the crisis.

The researcher chose the bulletins on this basis with the desire to obtain sufficient data in understanding the audience's perceptions and in the semiotic/ hermeneutic analysis of the bulletins. The eight (8) bulletins were selected from the period between the 24th of March, 2014 and the 18th of December, 2014.

In the initial stages of the outbreak not enough was known about the virus hence the need to use bulletins at the height of the crisis when the eNCA had more information about the disease. In order to avoid redundancy, the bulletins were an average of fifteen (15) minutes all together. The researcher kept this exercise short to enable the audience to give constructive feedback.

The researcher chose the following bulletins:

1. Guinea Officials fear Ebola virus has spread- 24 March, 2014. Duration: 0.33
2. Multiple countries shut their borders as Ebola spreads- 3 April, 2014. Duration: 3.19
3. Concerns over further spread of Ebola- 26 July, 2014. Duration: 1.18
4. First Ebola death reported in Nigeria- 26 July, 2014. Duration: 1.36
5. Ebola reports worldwide-9 October, 2014. Duration: 1.37
6. Suspected Ebola cases in KZN- 31 October, 2014. Duration: 3.21
7. Sierra Leone fights Ebola- 10 November, 2014. Duration: 1.29
8. Sierra Leone looks for patients- 18 December, 2014. Duration: 1.25

According to the audience reception theory, Hall (1973) states that texts are polysemic, however within a text is a dominant reading, which the producer uses to

reinforce the status quo. He propounds that viewers understand a text one of three ways, through the dominant reading, negotiated reading or the oppositional reading. The dominant reading is the reading intended by the production, while the negotiated reading would be when one might accept the dominant cultural order that the message presents but reject other parts of the message that the producer encoded that might not necessarily fit their own beliefs. The oppositional reading is when the viewer receives the message and immediately dismisses it because it is contrary to their belief (Milano et. al, 2013). This research investigates the audiences' reception of the media texts to see the different types of reading that are generated by the audience. This analysis technique is used to analyse the data collected.

Focus Groups

The researcher uses three focus groups. Members of the focus groups are gathered through purposive sampling.

In this case the participants of the focus group were people who generally had an interest in the news or current affairs. Participants were invited to the focus group they were asked three questions to see if they met the criteria of participants the researcher was looking for. They were asked:

- (a) Do you watch the news?
- (b) Are you interested in current affairs?
- (c) Would you like to engage in a focus group discussion centered on the News and the Ebola outbreak?

Each participant had to give three yes answers to qualify to be a participant. This was so that this research would enable them to share their personal opinions and served as a sphere of discussion centered on something they were truly interested in. Furthermore this helps the researcher as the audience had a recollection of the time when outbreak was at its peak giving the researcher a vivid understanding of the emotional response the bulletins may have caused.

Informed consent forms were provided to and signed by all the research participants. The researcher incorporates students who originate from West Africa and were probably there during the time of the outbreak or had family there during the outbreak. Focus groups rely on the spontaneity and synergies created when different member of the group question and respond to each other so that data are generated by interactions within the group (Kitzinger 1995: Moriarty, 2011).

Each focus group contained 8-12 people.

Sampling Method

Purposive Sampling

Purposive sampling is synonymous with qualitative research. It is a non- probability sampling technique (Creswell, 2007; Tongco, 2007). According to Blanche et al. (2006), it is also known as Judgment sampling due to the judgment the researcher exercises when picking a participant. Purposive sampling is when a researcher samples with a purpose in mind, selection is based on certain characteristics identified by the researcher (Cresswell, 2007: Kitzinger, 1995).

It is effective when studying a domain with knowledgeable experts, as is the case of this research (Tongco, 2007). It is the researchers desire to include a number of 8-10 participants in each focus group with the purpose to deliberate on how they understand news. It is therefore a prerequisite for participants of the focus group to

have a general interest in the news. It thus follows that the informants selected will be due to the qualities they possess that will enable them to participate in the study.

Qualitative Interviews

The researcher interviews health experts regarding their experiences as medical practitioners in communication or using the media to communicate with the public regarding outbreaks. The researcher used five (5) unstructured and generally open-ended questions to elicit views and opinions from the medical practitioners (Creswell, 2009). The interviewees had to have experience in the complexities of dealing with outbreaks. This was done intentionally so that the researcher could find out from them what they expected the media was expected to do during the outbreak and how the coverage of the Ebola outbreak could have been improved if there was need. Interviews remain the most common data collection method in qualitative research and are a familiar and flexible way of asking people about their opinions and experiences (Moriarty, 2011). This qualitative research technique that involves conducting intensive individual interviews with a small number of respondents to explore their perspectives on the Ebola crisis and will help the researcher gather the general response anticipated whenever there is any type of outbreak (Boyce & Neale, 2006). They provide helpful information as to why the outbreak caused such panic in 2014. Three health experts were interviewed for this research, purposively sampled from the Nelson Mandela School of Medicine. Information from these interviews was recorded using a recording application on the researcher's cellphone. The recording of the interviews enabled the researcher to be able to play the interview repeated to analyse the information obtained.

Online Research

The researcher obtained qualitative visual material through the use of the internet. Russell and Purcell (2009) are of the opinion that online research now offers researchers a broader opportunity to assess issues across the globe. Online research has been used to gather the information and sources that the researcher has used and will continue to use throughout this research. The eNCA *News* bulletins were obtained from the eNCA website and downloaded for the use of showing it to the audience.

Analysis Methods

The relationship between media and society is dependent on three variables that operate in a circuit: production, text and audience- the circuit of culture. The variables have to be understood in relation to their context. Media texts are mediations of reality. Producers mediate their social, political and cultural context, obscuring decision processes of selection and construction governed by factors. Pieter Fourie (2009) indicated the importance of the institutional context of a texts production and reception. Chomsky and Herman (2008:xi) concur stating that “[f]actors such as

ownership and control, [the] dependence [of other] funding sources (such as advertisers), mutual interests and relationships between the media and those who make the news and have the power to define it and explain what it means. They contest that editors and journalists internalize [priorities and] definitions [on] news worthiness that conform to the institutions policy “.

The media can be used as a tool to advance the agendas and principles of those who control the institutions (Herman and Chomsky: 2008). There is an endless manor by which stories can be represented and retold. This is why it is necessary to understand how the eNCA portrayed the Ebola outbreak and what factors could have influenced representation. The media is a tool constantly engaging in the negotiation of ‘truth’ within society (Fourie, 2009: 208-209). This dictates conformity with regards to what is portrayed as right by the media, and makes the spread of a particular ideology easily adaptive. A media text should be analysed as a social act that mediates the substance of the text and is therefore a rhetorical act. Rhetoric is defined by Pieter Fourie (2009: 211) as an attempt at persuasion through the choices made in producing a text. As previously mentioned in the literature review chapter the media, as an example, portrays how the image of the African- a helpless needy being awaiting a European saviour, is very synonymous with Western productions. This is the ‘truth’ that some of the media portrays through repetition of stereotypes, for an example, portraying the Westerns / Europeans more superior to the African. It is necessary to see whether or not the eNCA lives up to this and other stereotypes regarding its coverage of the Ebola outbreak. The media possess the power to establish and sustain relations of dominion (Thompson (1990) as cited in Fourie (2009)). This is why it is essential to analyse what the audience internalizes consciously and unconsciously.

Semiotics

The text is the product of a range of semiotic decisions that act to position the reader inviting them to adopt one position and at least implicitly reject another (Fourie, 2009: 212). It is necessary to scrutinize the selection and combinations of various semiotic resources that presented in the text. Semiotics is the theory of the production and interpretation of meaning. Its basic principal lies in the understanding and use of objects and acts as ‘signs’ in relation to other signs. John Hartley and John Fiske (2003: 22) defined semiotics as the science of signs, how they work and the ways in which we use them. One needs to look at what position the producer is inviting the audience to adopt.

Semiotics is the study of signs and codes. “Semiotics can be applied to anything seen as signifying something [or] everything which has meaning within a culture,” as indicated by Chandler (2014: n.p). Therefore it is used to establish underlying conventions, to identify significant differences and opposition in an attempt to model the system of, relations (syntagmatic and paradigmatic), connotations, distinctions and rules of combination employed (Chandler, 2014). For an example it would help a reader distinguish between a person who plays the role of a hero/ seeker and the

binary opposite- the villain/ victim. John Hartley and John Fiske (2003: 22), the central concerns of semiotics are the relationship between the sign and its meaning and the way signs are combined to make codes. An audience uses media language to understand messages, for an example to decode the meaning of a particular camera angle or to understand a certain type of editing technique- such as fade ins and fade outs representing memory flashbacks. According to Holly Field (2012), Saussure (1988) identified three levels at which an audience reads a media text

(1)Synaptic level – where an audience identifies the basic denotations or obvious meaning of a text

(2)Representational level- where the representation of characters and places are identified by the reader and

(3)Symbolic level- understanding the hidden, cultural meaning of a text.

The representational and symbolic levels of understanding texts are both necessary connotations. It is necessary to note that the understanding of a media text comes from their understanding and knowledge of frequently told myths and stories (Field, 2012). Meanings are interpreted by the culture in which they are told hence when a producer engineers a production it is necessary to consider the cultural beliefs of a target market. This is in order to frame a production in a way that the intended reading is understood within the particular cultural context. This is why connotations and denotations change depending on the context and culture the audience ascribes to.

Signs have two parts, the signifier, which is the visible part of the sign, and the signified- that is what the said sign signifies or the idea or meaning or concept represented. Relationships can change between the signifier and the signified, for an example the same character in a film can be projected differently depending on the angles the camera uses. This also illustrates how chosen signs influence meaning. Therefore it is important to note why a particular sign has been chosen since everything is constructed for a reason. Fiske and Hartley (2003: 23) notes that a sign is determined by culture therefore it is man- made.

Semiotics shall be used in analysing the eNCA news bulletins that will be used for the focus groups. A sample shall be chosen of three (3) news bulletins that shall be analysed. Due to time constraints the researcher will not be capable to analyse all six (6) of the chosen bulletins. This researcher looks at how the Ebola outbreak was projected by the eNCA paying particular attention to the signs and symbols used to communicate with the audience.

Narratives

According to Fourie (2009: 212). “Narratives recount events with the purpose of influencing emotional, rational, aesthetic and other reactions. Narratives illustrate how an individual understands the world”. Narratives seek to persuade, please and

seduce us an audience into believing the producers intended meaning (Silverstone, 1999:30 cited in Fourie, 2009). Helen Fulton, Rosemary Huisman, Julian Murohet and Anne Dunn (2005: 1) state that, “[...] as long as human beings have had the power of speech, they have been speaking in narratives.” Narratives should be viewed as purposive communication meaning one should be concerned with the narrative affective, ethical, and aesthetic effects (Phelan and Rabinowitz, 2012).

Todorov’s theory of Narrative

Bulgarian born philosopher, Tzvetan Todorov engaged in literary and cultural theory. His model of explaining a narrative describes the casual transformation of a story through the five stages of:

1. a state of equilibrium
2. a disruption of equilibrium by some action
3. a recognition of the disruption of equilibrium
4. an attempt to restore equilibrium and
5. the restoration of equilibrium.

Todorov’s narrative theory is based on conflict and resolution. He theorises that all conventional stories begin with a stable status quo- the state of equilibrium. The normalcy of the situation/ environment is followed by a disruption of the status quo, concluding the narrative with a resolution of the disruptions. He notes that the restoration of the disruption results in a new equilibrium (Fourie, 2009) The production of news stories tends to focus on events that are disruptions of equilibrium or those that restore the equilibrium such as an achievement or completion of a task or request (Fiske 1987:139, Fourie, 2009: 221). This is because equilibrium is not found as news worth. News narrative often do not reach closure and the ending is still anticipated however there is always a clear middle in some way. The value of a news story is in the disequilibrium/ disharmony/ disruption of normalcy. It is necessary to note that some scholars such as Graham Baym (2004) do not agree with the use of narrative formats similar to those used in entertainment, to be used on news. Baym (2004) is concerned with the risks of undermining the authority of news as news narratives adopt techniques similar to entertainment programmes.

Propp’s theory of Narrative

Vladimir Propp’s theory of narrative suggests that characters took on the role of narrative ‘spheres of Action’ or function. Propp influenced by his study of Russian folktale, identified seven different character types. His approach to narrative is more syntagmatic compared to that of Todorov. The theory can be organised as a quest in which a seeker or hero contests wit a villain to transform his/her circumstances. Propp identifies:

- The **hero/seeker** who is, usually male, whose role in the story is to restore the narrative to equilibrium. He embarks on a search/ quest.
- A **villain** who usually creates the narrative disruption.
- The **donor** who aids the hero with something, a magical agent/ information or advice, which helps, in the resolution of the narrative.
- A **helper** who aids the hero in the task of restoring equilibrium
- The **princess/victim** is usually the character most threatened by the villain and must be saved at the climax of the narrative by the hero.
- The **dispatcher** who sends the hero on his/ her way to the task
- The **false hero** who appears to be good but is revealed at the narratives conclusion to have been bad.

It is also important to acknowledge that a character can occupy more than one role in a narrative. Although this form of narrative originated from the analysis of folk tales, it is evident that a narration of any type of event follows this form of structure. These same theories will be used to analyse the eNCA news bulletins that have been selected for the purpose of this research to see who play the characters mentioned above. In the creation of a narrative, Propp (1968) postulates that a producer has the freedom of chose in molding characters, a producer chooses what to use, functions to implement and the linguistic means in which a narrative is represented. It is the aim of the researcher to question how the characters in the news bulletins were potrayed considering that the framing of the characters was deliberate. This supports what has been mentioned in the literature review chapter regarding the importance of selection, framing and news values.

Ethical Considerations

Ethical Clearance:

The Ethics committee at the University of Kwazulu Natal has approved this research. This is what has enabled the researcher to embark on this research and to collect data.

Informed Consent

The researcher issued every participant a consent form to sign before participating in the research. This is a requirement as part of the ethical procedures. It informs the interviewee that the interview is for academic purposes only and that it will not be published in academic papers. It notifies the interviewee that they can be anonymous if they wish to, for the purpose of this research. They are permitted to discontinue the interview and withdraw at anytime as indicated by this form. The form also stipulates that they will not be coerced into commenting on issues against their will and that they reserve the right to schedule the time and location of the interview. The signed consent form indicates an acknowledgement of these terms.

Conclusion

This chapter has mapped out the research paradigm, method, instruments and data gathering and analysis techniques. It unfolded by first explain the interpretive paradigm approach that this research is based on, explaining the qualitative research methodology. It explained the goals of the researcher, of obtaining opinionated responses from members of the focus groups and interview subjects. Detail on how the data collected will be analysed is also included in this chapter. The use of semiotics and hermeneutics in analysing the news bulletins was explained and the use of the narrative theories by Propp and Todorov was highlighted.

Chapter Five Data Analysis

Introduction

This chapter contains the findings of the study in relation to the research issues raised in the previous chapters. It contains a discussion of the previous concepts and theories discussed previously in connection with the results of the examination of the eNCA's coverage of the Ebola outbreak. This research was interrogated two aspects, the content of the bulletins and the audience, the chapter has been divided into two. This is to enable the researcher to present the data in a way that is presentable, clear and in-depth.

The data was analyzed in order to answer the research questions. As mentioned in the previous chapter, semiotics and hermeneutics were used to analyse the eNCA's coverage of Ebola, while focus group interviews were used to investigate the audience reception aspect of this research. Data was gathered from the audience and interviewees to ensure that data was not subjectively analysed through the use of the researcher's perspective only, hence these two instruments were chosen to triangulate the data. The data gathered from the focus groups shall be presented thematically so that key issues are elaborated on in a clear and concise way. This chapter will elaborate on the different bulletins used for this research and three in particular will be used as examples on semiotic analysis carried out by the researcher.

Semiotic analysis of eNCA News bulletins

The researcher chose three (3) pictures from three (3) bulletins involved in the study. The three bulletins were purposively sampled from the six (6) bulletins played for the focus group audience. The bulletins are titled and dated as follows:

- Bulletin one: Multiple countries shut their borders as Ebola spreads.
Published on the 3rd of April, 2014
Duration: 03.19⁸
- Bulletin three: Concerns over further Ebola spread
Published on the 26th of July, 2014
Duration: 01.18⁹
- Bulletin five: Sierra Leoneans fight Ebola
Published on the 10th of November, 2014
Duration: 01.29¹⁰

⁸ https://www.youtube.com/watch?v=wA_XrabIM2E

⁹ <https://www.youtube.com/watch?v=olXhExtAMxY>

The tables below contain information on the three bulletins. They explain the screenshots of each bulletin, the time the image is captured within the bulletin, the background information, signs within the bulletin and other important information regarding the analysis of the bulletins. The image analysis conveys the communication of the image. The social context of the study is necessary in understanding the social context that existed during the time the media text was consumed. This gave the reader an understanding of what factors affected the decoding process of the audience at that time.

	Visual Description:	Verbal Description:
Setting	Third World Country: Guinea, Africa	Voice Over:
Symbols	Protective clothing; bed	
Camera	Long shot	
Plot	Representation of Current situation	
Mode	Graphic +Voice over <ul style="list-style-type: none"> • Green tent background – Usually associated with hospital material • Two health workers attend to a patient • Health workers dressed in protective clothing from head to toe • Helpless African man looks away, covers face with hand, exposing his arm with drip tubes stuck to his arm 	(Bulletin starts) It's the stuff of horror movies... 01:42 Ebola isn't airborne, it is transmitted between humans and animals through blood, fesses, through sexual contact or by handling of corpses (01:54)...

¹⁰ https://www.youtube.com/watch?v=sP_RfawNm-4



Multiple countries shut their borders as Ebola spreads, Duration 03:19

Image

5.1

Source: Screenshot from bulletin

Table 5.1 Analysing image 5.1

Image analysis

The above image contains visual signs used to convey a message to the audience. The signs, described as symbols in Table 5.1 serve the purpose to communicate information to the reader. The image and many others suggest the threat that the Ebola virus poses on human livelihood. This is suggested by the way in which the health workers are fully clothed in protective gear and how skinny and frail the patient they are nursing is. This is an image used to evoke fear and suggest life-threatening danger to the reader.

It is necessary to note the verbal communication especially in the beginning of this bulletin. The expression, “It’s the stuff of horror movies...” likens the spread of Ebola to a horror movie, this is an example of sensationalism as it intensifies the ‘deadliness’ of the Ebola virus. The expression suggests a gruesome scene while captivating the viewer making them inquisitive to see what the expression suggests.

Social Context

At that moment, not a lot of people knew or understood the Ebola virus, where it came from or how to prevent it, because the disease was in its initial stages and not much information had been available to the audience through media channels. This is probably why this bulletin was packed with information on what caused the disease, how it was first discovered and how to prevent it. The first EVD report had been in

March and this bulletin was reported on the 3rd of April 2014. At that time the virus was spreading across the Guinea borders to Sierra Leone and Liberia. As the virus spread, casualty numbers increased and death tolls escalated it was reported that there were 112 cases of infection, 70 reported deaths by the 28th of March 2014 as reported by the WHO (2014). The bulletin came at a time where the number of deaths was escalating and the virus was spread through contact. Healthcare workers were among the newly reported cases indicating the need to strengthen health facility-based infection prevention and control (WHO; 2014). A call for aid workers had been made but all aid workers would have to understand the risks involved in volunteering.

Health ministries in Sierra Leone, Liberia and Guinea, together with the WHO and other response partners implemented a coordinated response against Ebola in agreement with the International Health Regulation of 2005. The surveillance for illnesses consistent with Ebola has heightened in countries bordering Guinea.



Headline: Concerns over further Ebola spread

Duration 01:18

Image 5.2

Source: Screenshot from bulletin

Table 5.2

	Visual Description:	Verbal Description:
Setting	Third World Country: Sierra Leone, Africa	Voice Over:
Symbols	Garbage, old vehicles, large number of moving people- congestion	
Camera	Long shot	
Plot	Representation of Current standing	
Mode	Graphic +Voice over <ul style="list-style-type: none"> • Busy streets of Sierra Leone • Heaps of garbage in a street in the city center • Lady with goods above her head (Passerby) • Old vehicles • Public transportation (commuter omnibus) • Old looking building in the background 	<p>... 01:07</p> <p>Religious leaders in Sierra Leone blame this on lack of information [fear of stigma and discrimination has led members of the community to hide their sick relatives] and are urging the government to address the issue (01:12)...</p>

Image analysis

The image 5.2 displays information that revealed how the wrecked old vehicles displayed in the picture are a clear indication of poverty stricken areas that put people at risk of high spread of the Ebola virus. In the picture there are vendors selling their commodities on the side of the road and this poses as a health hazardous

for the people in that area. One could say that this is a typical image of an African-poverty stricken country. The researcher ponders on questions such as,

‘Why this particular picture of Sierra Leone?’

‘Were there no better pictures to associate Sierra Leone with at the time?’
‘How different is this portrayal of Africa by the eNCA any different from how the Western media portray this and other African countries?’

The researcher noticed that there some scenes in the bulletins that were also repeated in some bulletins hence the researcher questions the message relaying of the media sources with regards to educating and conscietising the public of the deadly pandemic of Ebola. Could the production have done this intentionally to bring emphasis to a particular image/information or had they just run out of images to use?

One can see that the eNCA in this and many other bulletins reproduced their news with Western influence. Although the researcher assumed that the eNCA is an African production it would have better images to portray of Africa, not the same stereotypical images used by the West. However this study proved that this assumption was misplaced as the same stereotypical images used by the western media to portray Africa, are the same images eNCA uses to show Africa.

Social Context

Over a thousand cases had been reported and over seven hundred people had died in Guinea, Sierra Leone and Liberia. The lack of resources had intensified – lack of equipment, drugs and health workers.

Fear of stigma and discrimination has caused patients to hide. The World Health Organisation is worried about the continuous spread of the virus since the countries lack resources. Organisations responded to help prevent the spread of the EVD. The WHO convened a meeting with health ministers from 11 countries to work on strategies to coordinate technical support to combat Ebola (WHO, 2014). The development and distribution of informative and educational materials is promoting a more aware and mobilized society (ECDC, 2014;4).



Headline: Sierra Leoneans fight Ebola

Duration: 01:29

Image 5.3

Source: Screenshot from bulletin

	Visual Description:	Verbal Description:
Setting	Third World Country: Lokomasama; Sierra Leone, Africa	Voice Over:
Symbols	Building tools,	
Camera	Long shot	
Plot	Representation of Current standing	

Mode	Graphic +Voice over <ul style="list-style-type: none"> • Two men help each other move a drum while another stands watching • Plastic walled terrace • Teamwork/ effort 	0:39 Over 360 people live in the village [Lokomasama; Sierra Leone]. The sick will be kept apart from the villagers. A number of community members have volunteered to take care of them but with little professional training, protection against the disease is in question 0:57
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Image analysis

This is a positive image of some of the communities affected by Ebola taking a stand in the fight against Ebola. The African people are portrayed as able-bodied, in opposition of the stereotype where Africans are portrayed as needy. The three men are a symbol of African people coming together to fight the Ebola virus together as a team, as a community.

Social Context

Members of the Lokomasama community are displeased with the government's incompetence as they have been abandoned to build their own isolation centers. Members of the community are portrayed as proactive about the eradication of the Ebola virus. Members of the community were empowered with knowledge they needed to prevent its spread. This bulletin demonstrates the initiative individuals in communities took, although not many news reports/ programmes recognised the proactive members of the communities, the eNCA recognizes them here.

Narrative Analysis

This researcher has based character analysis on the six bulletins used throughout this research. This was done due to the fact that the researcher could not analyse all the 31 bulletins available on the Ebola outbreak due to time constraints. Furthermore, it is difficult to analyse each bulletin independently as they are short and not every character is evident in each bulletin. Therefore to analyse characters all the six bulletin used during research are the ones used by the researcher used to narrow down characters roles as portrayed by the eNCA.

1. *The Hero*

- Sierra Leone Community

Using tree branches and bits of cloth, some of the members of the community have come together to build isolation centers for those infected by the Ebola virus to separate them from those without the disease. The builders are building a center with 90 beds and classrooms. The workers have very little resources but they still have volunteered to work for the better of their society. Doctors such as Dr. Amara are interviewed as the authoritative voices within the community. The workers, together with Dr. Amara within the bulletin work as a symbol of how the African people affected by this virus are using their resources and the little they have to help or improve the situation in their society.

World Health Organisation

The WHO has taken it upon themselves to help the West African countries who lack resource to combat the deadly virus. They provide health workers, donate sanitation facility and try to cater for they're needs.

2. *The Villain*

The Ebola Virus

It has killed a lot of people and continues to spread uncontrollably. There is no cure for the virus. What the scientists do not understand is why the 2014 Ebola Virus strain is stronger than the 1976 Zaire strain.

The Bats

They have been portrayed as the main virus carriers. They suspect the bats transmitted the virus to humans.

Stigma and Discrimination

These two elements are portrayed as the enemy of society. They are seen as the reason why people keep dying. People in the communities do not want to seek help due to the fear associated with the Ebola virus. Lack of information has caused stigma and discrimination to intensify, increasing the number of those infected and dying of the virus but will not seek help especially in rural areas.

The Government in Sierra Leone

Is seen as a villain as it is not helping the communities to an extent that communities have to build their own isolation and centers. They are also seen as in-active in fighting stigma that is existent in the communities.

3. *The Helper*

Scientists and the World Health Organisation

Scientists such as Jean Jacques Muyembe who is a Congolese Professor, are characterized as the helpers. They give vital information giving the current situation,

background information as to where Ebola is suspected to have come from and how to prevent catching the virus. It is generally good to discover how the eNCA uses indigenous scientists and doctors to give vital information. This is not what the researcher anticipated.

The World Health Organisation (W.H.O.) is portrayed as a helper, sending aid to the African countries affected by the Ebola virus. Chris Lane a epidemiologist and representative of the WHO is interviewed in one of the bulletins. He mentions the lack of resources and how the WHO is helping the communities fight the spread of the virus but the virus is still spreading.

Indigenous and international health workers provide health care to those affected by the disease. Contract tracers and burial teams brought together by non-governmental organisations help the communities' curb the threat of this merciless virus.

4. The Princess

Africa, specifically West African People

The West African people are the ones who desperately need help in the struggle against the Ebola virus. The African continent is largely at risk as the virus is spreading uncontrollably. West Africans need help to fight the deadly virus that keeps taking lives within the communities. People living in the rural areas seem to be at a higher risk as they do not have access to basic communication and lack resources.

5. The false Hero

Relatives and friends hiding the sick

Relatives and friends who hide the sick are the false heroes mentioned in these bulletins. They are seen as saving the sick from stigma and discrimination but in fact are causing the sick to die due to their lack of medical attention this also intensifies the spread of Ebola virus, increasing the number of deaths and infections.

6. The Donor

World Health Organisation

The World Health Organisation and other Non- Governmental organisations are seen as the donors as they facilitated information dissemination, establishing and supporting child protection service, food relief, critical logistic and material support for health facilities, training teachers and health workers, giving direct patient care and doing research for the Ebola treatment to mention a few.

Researcher's notes

The West is portrayed in two ways, as heroes and helpers. Most of the bulletins are short and do not remind the audience how to prevent the disease, instead it is made to

seem as if the audience should already know or remember key issues on Ebola. Therefore it can be said that the bulletins do not contain as much information as an audience would require.

Footage on the West African countries supports the stereotypical concept of Africa being a place of poverty, gloom, death

eNCA also projects the Africans as fighters. Their efforts in fighting the disease are recognized through the various community members that work together to build community centers, others combing the streets to find the sick and volunteering to take care of the sick.

Data gathered through focus groups and interviews

Focus Groups

The focus groups were conducted using UKZN students as participants for the study. Both female and male participants between the ages of 20-35 were included but no specific gender or age group was a target. The objective of the focus groups was to have participants share ideas, knowledge and perceptions regarding to the Ebola outbreak and how they perceived it through the eNCA bulletins.

The three focus groups were all conducted on separate days giving the moderator a chance to reflect on each discussion and improve on skills to get participants talking for the next focus groups to come. Due to the fact that participants were purposively sampled, some participants were meeting for the first time hence there were some who were reserved and did not contribute but stayed to hear others opinions. Other members were pro-active to the extent of wanting to be the only ones to speak so the moderator had to find ways of negotiating so that everyone had the chance to voice their opinions. Some participants posed challenging responses to the questions the moderator asked and provoked other participants engagement sparking debate causing everyone to re-examine their previous perceptions of the topic. It was very interesting hearing other people's opinions of the coverage of Ebola by the eNCA and other things surrounding that topic.

The groups were interactive and generated detailed quality data and shifted the researchers way of seeing things as not everything turned out as I had anticipated in both a the negative and positive manor. The researcher /moderator would pause the viewing and ask questions to unpack the audience perceptions for a rich and detailed analysis. This enabled the audience to vocalize their perceptions and to engage in dialogue producing fresh insight, detailing their decoding process. The recorder captured all the audience's reactions throughout the screening process to capture expressions of fear, anger and shock as the audience watched. Some of the participants asked each other questions pertaining to some of the facts they had not heard clearly, could not remember or felt the bulletins had omitted. An example of the most common questions is

Is Ebola Airborne?

How did Ebola start/ Where did it come from?

This shows that they had been listening but there is a need for information to be repeated several times for people to be able to internalize facts.

All the participants recruited for the focus groups had knowledge of the Ebola outbreak as they were asked prior to them participating in the focus groups. Initially before the participants were invited to the focus group they were asked three questions to see if they met the criteria of participants the researcher was looking for. They were asked:

- (d) Do you watch the news?
- (e) Are you interested in current affairs?
- (f) Would you like to engage in a focus group discussion centered on the News and the Ebola outbreak?

Interviews

This researcher intended on interviewing epidemiologists from the Nelson Mandela School of Medicine pertaining to the relationship between the medical/research field and the media. The objective was to understand the role played by the media in informing the public during an outbreak and to understand the challenges regarding the relationship between the media and medical field from a medical practitioners point of view. This was to understand how to improve the relationship so as to help benefit the audience. Although the epidemiologists from the Nelson Mandela Medical School were not within reach nor did they do any research work on Ebola specifically, the researcher went on to find other subjects to interview. The researcher interviewed a total of four individuals who worked in the medical field.

As indicated in the Methodology Chapter, the interviewees had to have experience in the complexities of dealing with outbreaks. This was done intentionally so that the researcher could find out from them what they expected the media to do during the outbreak and how the coverage of the Ebola outbreak could have been improved if there was need. It is for this reason that the interviewees were sampled purposively.

Upon the search for epidemiologists at the Nelson Mandela School of Medicine, the researcher met with Smita Maharaj who is the Public Relations Officer for CAPRISA. Ebola has been compared to HIV/AIDS by other researchers largely due to their similarities in terms of being synonymous for the high death rate. Other similarities include how no one quite understood the emergence of both viruses in the initial stages of their spread.

CAPRISA is a private company that specialises in research particularly on HIV/AIDS. It is affiliated to the Nelson Mandela School of Medicine as part of a strategy employed by the Vice Chancellor of the University to encourage more research concerning HIV/AIDS. According to their website, CAPRISA was formally established in 2002 under the NIH – funded Comprehensive International Programme of Research on AIDS. It is a designated UNAIDS Collaborating Centre for HIV Prevention Research.

Their organization has done extensive work on HIV/AIDS which has been compared to Ebola by other researchers largely due to their similarities in terms of the being synonymous for the high death rate, how no one quite understood what the Ebola and HIV virus was when it started and the stigma and discrimination associated with both diseases. It was based on this premise that the researcher saw the opportunity to interview Smita Maharaj and took it.

The researcher interviewed Dr. Benedicta Ebuwa, a medical doctor at the CRS Rescue Medical Clinic in Victoria Garden City situated in Lagos Nigeria. She was relevant to this study as she gave an opinion pertaining to the Ebola outbreak as a person who was situated within the region of West Africa during the outbreak.

The Researcher also interviewed Dr. Ayo Osunrinade (MBBS, MSc, FCMI) who is a managing partner at Ithiel Partners. He trained as a medical doctor and is a former practicing psychiatrist who worked in various teaching hospitals in London. He has worked as the lead consultant for the Federal Government of Nigeria on a DFID funded project conducting a needs assessment of Federal Health Centers across Nigeria. His exposure to the medical system within Nigeria gave the researcher the encouragement to include him as a part of her study seeing his vast experience in the medical field. Dr. Osunrinade is also a founder of the UK based TV Channel on the Sky Platform, Urban TV that focused on Black Urban Culture, however he sold his rights to BET but still works within the industry advising individuals and organisations on traditional and new (digital) media projects.

The researcher found DR. Osunrinade's background in both the media and medical field was a great advantage, which is why she chose him to be a part of her study. The added advantage was that he came from Nigeria, which is another West African country that experienced the Ebola outbreak.

The researcher also interviewed the General Manager at Right to Care, Dr. Khumbulani Nkosiya Moyo. He was a valuable asset to this research due to the fact that the 'Right to Care' organisation was one of the main South African contributors in the fight against Ebola. Dr. Khumbulani Moyo has experience working as the Programme Manager at Right to Care and he was a Clinical Director at PSI. Right to Care is a non-profit organisation that supports and delivers preventions, care and treatment services for HIV and associated diseases.

Reception Analysis

The initial assumption of this study, informed by the reception theory, was that an audience is active. The researcher confirmed this assumption as is reflected by the diverse interpretations given by the audience discussed below. Analysing the process of making meaning or decoding a message is a fundamental aspect of exploring audience perspectives. Non-verbal communication is also a form of communication the audience used to articulate their thoughts on the eNCA bulletins. The researcher observed the participants' reactions during moments that triggered an emotion or provoked a preconceived perception as the audience internalized the messages.

Various themes emerged during focus group discussions as participants raised their ideas, feelings and concerns. For the purpose of analyzing the focus groups in a clear and elaborate manner the researcher unified similar ideas from the three focus groups to come up with these major themes. Information gathered from the focus groups was organized into themes to make it easier for the researcher to elaborate on them in a clear manor. The aim at carrying out this research was to understand the audiences' perspectives when interpreting the eNCA bulletins. The researcher set out to understand how the audience decoded the information they were receiving through the eNCA news, what they understood and what influenced their understanding. Upon conversing, participants thought processes and personal previous experiences and ideas had a bearing on what the audience internalized. All the participants chose to be addressed using pseudonyms for this research. Hence all the names used to refer to participants are names they chose as pseudonyms.

Mistrusting the Media

During the discussions, members of the audience expressed that they did not trust the media. They stated that the media had its own agendas or the content it publicised and information gathered from the media was not something they could internalise without further examination. They mentioned that they questioned the media's integrity due to the fact that they knew there were political factors influencing the media and that the media does not always tell the truth as it seeks to protect its interests.

Participant Busi (FG1: 12/ 10/ 15) stated:

They tell us what they want us to know, instead of really giving us insight on what's going on, you know... they tell us what is there for you to know, like right now we don't even know what was then done underlying to find out about how the virus started and stuff... how do you know that for sure:?

The AMI (2015) also possess this same question pertaining to conspiracy theories surrounding the Ebola outbreak. AMI (2015) indicates that the African media has not tried to investigate. As mentioned in chapter one and two, AMI claims the African media should have done more in terms of providing information to the public, clearly the results of this research indicate the same. This participant's statement is connected to the political theory that has been mentioned in chapter one. Political economy states that the media functions to propagandise information on behalf of the powerful societal interests that control and finance them (Chomsky & Herman, 2002:xi). The conversation prior to this comment indicated that the participant subscribed to the fact that the media was not being transparent but was hiding something and only told the audience what it wanted it to know.

One can see how an audience can have negotiated /oppositional readings when they do not trust what the media is portraying This indicates how a member of the audience does not internalize what they observe in the media as the hypodermic needle mentioned in chapter two suggests, rather, the audience gathers information and negotiates its meaning before apply it.

Religion versus Science

Some of the participants were an example of how values and beliefs affect the way in which they decode a media text.

Brian (FG2: 24/10/15) stated:

I am a strong-grounded Christian and when all the Ebola talk was griping people with fear, I for one was not moved because I thought that was a prophecy being fulfilled. Revelations states that in the last days there will be deadly incurable diseases that will kill people. The Bible plainly states that Jesus said "all these things must come to pass, but the end is not yet . . . All these are the beginning of sorrows" (Matthew 24:6). The many tragedies we see around us are chilling reminders of Christ's words and a foretaste of even greater catastrophes yet to come. So for me Ebola did not move my faith I was listening to news, reading posts on social media and I did not pay much attention because for me Ebola is the fulfilling the prophecy. I myself, I think it's supposed to be like that so that the bible will be fulfilled. So guys let all these things happen so that the bible is fulfilled.

This is an illustration of how culture and social background inform an individual's internalisation of a message. This participant expressed that he was not very concerned about Ebola since it was one of the fulfilments of biblical prophecy. This can be very harmful to an individual, when they choose to be ignorant towards warnings or information regarding how to prevent danger, from the media. However it is an illustration of how an individual's values and beliefs inform how they internalize media messages. One can assume that this participant may have had an oppositional reading of the media text seeing as they choose to be ignorant regarding the warnings of danger issued by the media because they accept that a higher force or supernatural force is in control regardless of what actions are taken by individuals in the world.

This conversation sparked an argument as other participants claimed that science was the cause of Ebola insinuating that it was a product of a lab experiment gone wrong as suggested by the conspiracy theory. They discussed one of the most prominent conspiracy theories surrounding the occurrence of the Ebola virus.

The researcher found out that a snippet of the programme, '*Ebola, Man Made?*' had previously circulated on social networks during the peak of the Ebola outbreak. Social networks such as Facebook and Whatsapp were used to disperse a video raising alarm in the general public while others brushed it off as nothing but a conspiracy theory. This conspiracy theory is important to mention within this research due to the fact that some of the members of the focus groups mention it proving that it may have been an issue they considered. Although this research did not dwell on the scientific terms of the origins of Ebola, it is interesting to bear some of these thoughts in mind as one considers that some of the opinions focus group participants had was informed by this programme. It is necessary to understand what other influences some of the research subjects were exposed to, to gain general insight on why they see certain things the way they do.

This researcher sought to understand how the eNCA *News* reported on the Ebola outbreak. Press TV channel (2014) held an interesting debate as to how Ebola originated. On the programme, Political commentator from Tehran, Dr. Randy Short, states that Ebola is a Man-made disease and created for experimentation, "created by the United States of America to create a panic, sell medication as well as kill Africans". He makes references to the Syphilis and Pellagra experiments stating them as examples of other diseases the USA have experimented on in Africa as bioterrorism. Two particular individuals, Busi and Dynamite stated in the focus groups how the Ebola virus was similar to the HIV/AIDS virus since the West had performed experiments using apes and that is how the virus started. Scholars such as Dr. Cyril Broderick, a Liberian scientist concurs with Short's ideology. In an exclusive article published in the *Daily Observer* based in Monrovia, Liberia. According to an article in the Washington Post, Dr. Broaderick stated that "[t]he US Department of Defense is funding Ebola trials on humans... (It) gave a contract worth \$140 million dollars to Tekmira, a Canadian pharmaceutical company to conduct

Ebola research... (which) involved injecting and infusing healthy humans with the deadly Ebola virus." (McCoy, 2014). McCoy (2014) expresses that the article could have caused unnecessary fear as there had already been attacks on volunteers working at the hospitals. This article could have also caused members of the community from seeking help from the hospitals. McCoy (2014, 1) states, "[s]everal medical workers have been murdered in Guinea — throats slit, bodies dumped in a latrine". This shows to what extent the conspiracy theory was taken seriously.

This conspiracy theory coupled with the ingenuity of how drugs are manufactured and distributed make the West look very sinister even though they were the forerunners of foreign aid during the crisis. This paints the image of the West as false heroes in the narrative of the Ebola outbreak. This concurs with Kevin Williams' (2011) assertion that the news is standardized, based on Anglo- American models of journalism spreading narrative forms and values of Western journalism- in this case the eNCA is seen glorifying the West, making them look like the heroes of Africa and not questioning motives or opposing ideologies or conspiracies regarding the origination of Ebola virus.

The West as False Heroes

A debate ensued as some of the participants raised their concerns indicating that deadly infectious disease occur mostly in Africa. Zakes one of the participants said:

Why is it that we only find these deadly viruses in Africa? [...] For an example, I own a computer, you have to have an anti-virus for your computer, but that very person who is making the anti-virus is going to make the virus, so that you can buy his anti-virus to cure his virus.

Although this participant did not have evidence to support this assertion, the participants joined in affirming how some of them agreed with this statement. The researcher was prompted to investigate some of the assertions brought about by participants in the discussion group.

The atmosphere was filled with tension as the participants raised emotional points as to why they thought the African continent seemed to be plagued with sorrow, death and disease. Although some respondents blamed the issue on economic factors, other respondents indicated that the West was the cause. An animosity was expressed by some of the members of the focus group as they expressed their dislike of the West indicating that they were the cause to all of Africa's problems.

Upon conducting the investigations regarding why deadly viruses plague Africa, the researcher gathered interesting information regarding the way that pharmaceutical companies manufacture and distribute drugs.

Pharmaceutical companies are driven to make sales to attain revenue like any other business, the companies target diseases that affect wealthy people. In the words of James Surowiecki (2014; 1),

When pharmaceutical companies are deciding where to direct their R & D money, they naturally assess the potential market for a drug candidate. That means that they have an incentive to target diseases that affect wealthier people (above all people in the developed world) who can pay a lot. They have an incentive to make drugs that many people will take regularly for a long time – drugs like Statins. This system does a reasonable job of getting Westerners the drugs they want (albeit often at high prices). But it also leads to enormous under investment in certain kinds of diseases and certain categories of drugs. Diseases that mostly affect poor people in poor countries are not research priority, because it is unlikely that those markets will ever provide a decent return. So diseases like malaria and, tuberculosis, which together kill two million people a year, have received less attention from pharmaceutical companies than high cholesterol.

To some extent this makes sense but it explains why so many deadly diseases strike Africa but little is done about them until they reach Europe or America. Ebola was no exception in this case. It was not until it was seen as a threat or danger to the West that they started looking for a solution. This leads to a large number of Africans dying of diseases when this could be avoided.

Poverty

Poverty was also center of the discussions as participants said that poverty stricken countries are the ones that suffered the most because they were not fully equipped to tackle the outbreak and this led to fatal deaths. Although the researcher acknowledges that the countries most affected by the Ebola outbreak were still recovering from civil wars (as acknowledged in chapter 2), the audience only decoded how impoverished the countries were. One of the participants, Bheki (FG1: 12/10/15) said:

These people are poverty stricken, they have got no money, they don't know how to control it, sometimes to control a disease like this, it money! Money which West African countries did not have as their medical facilities were dilapidated even before the Ebola

West African countries received the highest death rates because of their poor health facilities and the poverty status. There is the issue of Ebola spreading from dirty surroundings and unkempt food especially fruits and vegetables. It is said that bats and vegetables were accelerators in spreading diseases and it is because of poverty that these people end up having bats for a meal and poorly managed

vegetables and fruits because they cannot afford the proper healthy food stuffs. This Ebola tragedy overwhelmed the already poor healthcare systems that were already falling apart because of the crippled economy. The participants of the focus group mentioned how Guinea, Sierra Leone and Liberia needed adequate healthcare system before the outbreak happened but in reality these countries do not have health facilities that could cater for those that needed access to proper health facilities.

Another participant, Busie (FG1: 12/10/15) added that poor countries are always on the receiving end of tragedies and can hardly save lives because of lack of necessary health facilities.

One of the Millennium development goals shows that improving health system is key for any country and unfortunately this is still a dream in some parts of the world where there is poor health facilities and in some cases poor people then fail to access these facilities and hence the spread of these diseases like a veld fire and claiming many lives.

It is difficult to talk about poverty in Africa without mentioning the resource curse mentioned in chapter two. It is unjustifiable how countries rich in minerals, are still impoverished and have citizens who die of diseases when having a stable economy could enable the building of health promoting infrastructure and purchasing medication in an effort to save lives.

The semiotic analysis- mentioned before, indicates that Ebola is made to look like a disease for the poor. This is what made some participants feel like it was not a threat to them. They said South Africa was not a poor country so they had no reason to worry about the diseases affecting them. This reflected the issue of 'othering' defined in chapter three as a result of a discursive process by which dominant groups construct dominated out-groups (Robbins and Morley, 2013). The individuals who ascribe to the assertion that South Africa not a poor country hence it would not be affected by the Ebola virus, drew an invisible line between themselves and others residing in the West African countries. Othering comes in where part of the audience felt that they come from a country that was better than any of these directly affected by Ebola.

Although it may be true that South Africa is better developed in terms of infrastructure and it has a better economy compared to this and other countries in Africa, it is by no means that South Africa is invincible. There are poor regions of South Africa. South Africa may be in a better financial position to tackle this and other diseases but it is by no means impenetrable by Ebola.

One cannot dispute the fact that there is poverty in Africa. In an interview, with one of the interviewees, Dr. Khumbulani Moyo (Interviewee 1- 5/08/15), he mentioned the theme of poverty saying,

The resource gap is always a problem. Africa has huge shortage of trained personnel, technology, equipment, and state of the art drugs. Shortages of

clean water, sanitation and food works against these efforts too. It takes longer to arrest an epidemic. With Ebola, early detection is essential. We didn't do well with that.

In other words, Dr. Moyo postulates that if Africa had enough resources the Ebola outbreak would not have been as bad.

Fear

The participants expressed the emotion of fear after watching the eNCA bulletins. Some of them made sound effects and expressed non-verbal expressions during the playing of the bulletins that suggested that they were given a scare by some of the visuals within the bulletin. The non-verbal expressions expressed while the bulletins were being played for the audience suggested the arousal of fear, some participants in focus group three covered their faces as they did not want to see images of those suffering from Ebola, but when asked if they didn't want the media to project such images they suggested that it was alright for them to be projected so that they would get the real idea of what was going on in the world and what the Ebola virus was really about.

It is paramount to mention that although this researcher compared the eNCA and the Western media's coverage of Ebola, the researcher did not witness any information that may have been considered as sensationalist. Instead the researcher thinks there is more that could have been done in terms of keeping the audience conscious of the signs and symptoms of Ebola. It was through the interviews conducted by the researcher where issues of sensationalism in health reporting were raised. Smita Maharaj (Interviewee 3: 24/08/15) indicated that

The media has a tendency and reputation to sensationalise issues... I think in terms of the interpretation of science... you have your mainstream media those are not scientifically trained journalists and the copy has to be written in layman terms for the general public to understand so I think the responsibility lies with editors to ensure that headlines are not sensationalized in terms of the media issues that they are factual.

Maharaj in this statement mentions the importance of training journalists on how to cover health issues. An example of some of these training workshops is how 20 journalists from across Africa were recruited for training on 'Conflict Sensitive' reporting in Cairo by a Sudanese organisation called *Gurtong*. In light of this statement, it can be seen how some beats in the newsroom are neglected, training programmes should be formulated to empower journalists on reporting health reporting. These and other forum train journalists to be more knowledgeable regarding the skills to employ when reporting on sensitive beats such as conflict and health.

Dr. Ayo Osunrinade (Interviewee 2: 20/08/15) supported the assumption that the media are challenged in the area of reporting on health issues saying

Accuracy and style of reporting. There needs to be a balance between scaremongering and education. The media tends to focus on sensationalising information.

This emphasises the challenges the media has on reporting on health issues without being sensationalist.

The use of fear appeals has been used in numerous health promotion messages to scare an audience into adopting a particular health precaution to prevent the spread of life-threatening disease. Raftopoulou (2007) conducted a research study indicating the use of fear appeals in health promotion campaigns. Raftopoulou (2007) looks at the effects of fear in influencing the reception and implementation of health promotion messages by a selected audience, interrogated using a case study of an advert on smoking. Although reference is made of his research in my chapter two, this researcher does not delve into theories that inform health communication, it is necessary to note how essential fear appeals are in conscientising the audience about life-threatening diseases. Most health promotion strategies use fear as a mechanism to reinforce in the audience, that behaviour that brings about a state of security or relief. According to the extended parallel process model of fear; individuals evaluate their susceptibility to a threat (if a threat is perceived as relevant to them/ significant), they become scared and this fear gives them the motive to take action in order to reduce /control the danger and thus lessen the perceived threat (Kim Witte and Mike Allen, 2000; Raftopoulou, 2007)

Information and Education

One cannot over emphasise the importance of the role played by the media in informing and educating its audience. The participants of the focus group however said that the eNCA did not give them as much information as they would have liked on the Ebola outbreak, they expressed that the channel could have done more. It is also vital to note that on several occasions the researcher had to play the same news bulletin more than once for the audience to be able to answer certain questions within the discussions. This indicates the importance of repetition in order for an audience to internalise certain facts because when a media text is repeated it eventually persuades its audience through familiarity. The more familiar a message becomes the more the likelihood of the audience practicing it. This explains why the same adverts are aired continuously to persuade the audience into consumers of that product or service. In an electronic interview, Dr. Ayo Osunrinade indicated that the most effective way the media could be used during an outbreak such as Ebola was an educational tool. “[The media] [...] need to be conduits of breaking myths especially in Africa to curb or stop outbreaks. Outbreaks in Africa are deadlier due to myths or tradition,” he explained, illustrating the importance of education to counteract ignorance, stigma and

discrimination. Dr. Osunrinade's statement suggests a point pointed out by the reception theory and the narrative theory. The reception theory states that, one's cultural and social background influence how an audience decodes a message. The narrative theories of the media reflected on in Chapter three indicate that the way in which an audience decodes a message depends on their previous exposure to similar texts that influence their understanding (Fourie, 2009).

Participants of focus group three recommended the use of New Information Communication Technologies (NICTs) saying that because they may not always be home to access the news at specific times they keep up to date with what is going on around the world through the internet. The invention of the internet that has brought about the global village as suggested by Kevin Williams (2011) seems to be an added advantage to the news craving citizens of the world. The participants mention how convenient it is for them to read the news and spread it through social sites while also acknowledging the fact that they can giving instant feedback and engaging in a public sphere forum with people from all over the world.

In Zama's (FG3: 29/10/15) words, she says,

I feel like if it wasn't for social media lots of people wouldn't know lots of things. So imagine if there was like no social media like the Facebook, Instagram you know, you wouldn't know half of the things that we do because, I don't know I just think sometimes like the media in terms of like the newspapers and magazines and the news, there's a part where they lack you know in like letting information out, like on time or full out information.

This illustrates the gap that the advancement of the internet fills in terms of making it convenient to access news at any time and for one to be able to research on the news they acquire instantaneously. This is another platform through which the eNCA keeps its audience updated on the things that are happening in real time.

One of my interviewees, Dr. Benedicta Ebuwa (Interviewee 4: 30/08/15), mentioned the issue of education saying that the media in general has a challenge in delivering information to the public especially when dealing with the non-educated. She highlighted an important fact that information pertaining to outbreaks should be delivered to the non- educated in a way that they can understand. This caused the researcher to wonder what was being done to promote Ebola awareness in rural areas. On the other hand, Dr. Khumbulani Moyo (Interviewee1: 5/08/15) added that the media in South Africa gave Ebola good coverage due to the responses they got from civil society. In his word he said,

I think it had good coverage and there was response from SA companies and civil society to the plight of the West Africans. Our organization, Right to Care, sent a team to Sierra Leone to screen health workers there for treatment. The media covered that as well.

Pertaining to the eNCA, the researcher investigated this and found this information to be true even though a lot more could have been done.

Solidarity

The theme of solidarity was evident as participants discussed their opinions on the Ebola outbreak. An example of this is when one of the participants, Busi stated:

Busi (FG1: 12/10/15): [b]ut because they feel it's an African problem then not much was done. Uyabo [you see]? So I also feel ukuthi [that] now they also just want to just waltz in as a savior and come in and save us

The participant Busi, in this statement draws the line between the West and Africa. She emphasises the need for solidarity as Africans against the West that according to her and other participants, plays the role of a false hero in the Ebola outbreak storyline. This encouraged the researcher to look into what South Africa was contributing in the fight against Ebola.

It is necessary to take note of how South African took hid of the African Union's call to help in the fight against the Ebola outbreak. On the 23rd of January 2015, the first batch of trained health care professionals was deployed to Sierra Leone to assist in the fight against Ebola (SouthAfrica.info, 2015). The team comprised of a doctor and ten (10) nurses who had been recruited and trained by Right to Care organization. The team was in Sierra Leone for eight weeks before another team was sent in. The team joined other professionals who had already been stationed in Sierra Leone helping the process of fighting the pandemic. According to SouthAfrica.info, the Right to Care chief medicbal Officer, Dr. Pappie Majuba, stated that measures had been put to ensure that the team's chances of contacting the disease were close to 0% (SouthAfrica.info, 2015). This first team of medical practitioners sent to Sierra Leone made returned to South Africa on the 22nd of March 2015 and were quarantined for 21 days. According to the South African Government News Agency, while in Sierra Leone they treated 98 Ebola patients of which 32% of them survived (More Matshediso, 2015). The expedition helped the team gain knowledge and experience in infection control. They were also exposed to working with international organisations from countries such as Italy, United Kingdom, Serbia, Ireland and South Korea.

The South African Health Department sent a team of experts from the National Health Laboratory Service to perform medical mobile testing. This was done to assist in the diagnosis of Ebola.

As a part of the response to fighting the spread of Ebola, South Africa produces sterilizing units that sterilize medical waste. They have the ability to function in low-resource settings such as rural areas where there are very few resources and have been distributed to affected countries through the United Nations Development Programme (UNDP) (SouthAfrica.info: 2014). A financial contribution has been made in the fight against Ebola by South Africa. The private and public sector have been mobilized to

assist in the raising of R50 million for the International health and Humanitarian Response in Sierra Leone, Guinea and Liberia.

The eNCA published a news story on South African doctors who had contributed in the fight against Ebola. The story published on the 23rd of October 2014 was centered on two doctors namely, Dr. Stefan Kruger and Juli Switala who were trained and worked for Médecins Sans Frontières. They shared their experiences working in Sierra Leone. Although the story was insightful, the eNCA could have done more in terms of publicising more stories that indicated how much South Africa was contributing in the fight against Ebola. A number of non- governmental organisations based in South Africa contributed in many ways but they were not mentioned by the eNCA. It would have been necessary and informative for the South African citizens to know how their country was taking part in fighting this pandemic so that ordinary civilians could contribute in campaigns to assist in raising funds or in any other way that would have been possible.

This would generate more interest within the public resulting in them being aware and mindful of what was going on in the countries directly affected by Ebola. The public would also get to understand how serious the Ebola outbreak was.

SouthAfrica.info mentioned how Dr. Majuba indicated that there were many health care professionals from within South Africa that had wanted to help in Sierra Leone but failed to be a part of the first team due to the administrative challenges involved in applying (SouthAfrica.info, 2015). This illustrates the theme of solidarity that the focus groups expressed during the focus group discussions.

Contributions by South Africa would have nurtured the spirit of solidarity within the South African public. It would also assist in the elimination of stigma and discrimination, enabling the public to engage in discussions about the Ebola pandemic enforcing the concept of a public sphere.

Limitations of the study

Access to information:

In the initial stages of this research, the researcher intended on doing a comparative study however this was not possible as they could not access information from the other television program they intended to compare the eNCA with. Due to the deadline the researcher decided to focus on the news bulletins instead of comparing the bulletin to a documentary program.

Finance:

The researcher did not find it easy to commute from one place to another as they did not have enough money.

Conclusion

This chapter presented the findings of this study by first presenting a hermeneutic semiotic analysis of images from the eNCA news bulletins, followed by

an analysis of the information gathered during the focus group discussion and interviews. The chapter has drawn on the reception of the eNCA bulletins, illustrating the way in which the audience decoded the messages. The chapter elaborated on the themes identified by the researcher. The researcher mentioned the popular themes that emerged within the data she collected.

Chapter 6 Conclusion

This chapter provides a summary of the research conducted in analysing audience reception on health reporting. It will explain the findings and recommendations gathered from the participants involved in the research. This study attempted to explore audience reception of the eNCA's coverage of Ebola outbreak.

Summary

The study carried out was to understand how an audience understood the eNCA's coverage of the Ebola outbreak.

The researcher engineered this research to answer the two main questions:

1. In what manner the eNCA covered the Ebola outbreak, paying particular attention to the portrayal of the pandemic, how it was explained and character representation of those involved, among other things.
2. This research sought to find out how the audience understood the eNCA bulletins on Ebola.

In order for the researcher to do this, it was necessary to involve the use of semiotics to analyse a sample of the bulletins and reception analysis to analyse audience perceptions.

In understanding the audience's reception of the coverage of Ebola outbreak by the eNCA news channel, this study aimed at understanding the effects the media has on its recipients. Focus group discussions were used and the audiences put to centre stage as they were the key of this study. Through the use of interviews, semiotic analysis this researcher was able to uncover the audience's reception and the role played by eNCA in covering the Ebola outbreak.

The study sought to establish the complexities involved in health reporting. This narrowed in to the challenges faced by the media in influencing health behaviour through bringing together two professions, media and medicine. It was established that sensationalism was one of these challenges so the researcher investigated whether or not sensationalism existed within the eNCA's coverage of the Ebola outbreak. The eNCA proved to be sensationalist in the way it constructed its bulletins to draw the attention of the viewer towards the importance of observing health behaviour.

The objective of the focus groups was to have participants share ideas, knowledge and perceptions regarding to the Ebola outbreak and how they perceived it through the eNCA bulletins. These focus group participants expressed their lack of trust in the general media as they said the media only told them the information that it wanted them to know suggesting that the media hid some aspects of reality from them due to observing their interests and the interests of those it benefited from.

The influence of social and cultural background in decoding media messages was evident when some of the audience obtained a negotiated and or oppositional

reading from the messages the eNCA projected. Religious beliefs for an example, proved to influence the way in which the audience internalised the eNCA Ebola messages.

The role of the media is vital in educating people and creating safe havens for their viewership while being a communication medium people can rely on for information. This role of the media is the solution towards issues of stigma and discrimination. Reference was made to the HIV/AIDS pandemic highlighting its similarities with Ebola. This comparison was also referred to as a learning curve for reporters when reporting on the Ebola outbreak and other life-threatening diseases. The audience craved more information from the eNCA and this researcher paramount to highlight that eNCA focuses on composing and divulging as much information as necessary to inform its audience.

The eNCA also possessed stereotypical images similar to those in the Western media, portraying Africa through a lens of negative stereotypical messages that suggested poverty, death and disease. This indicated that the eNCA reproduced their news with Western influence. Although this researcher assumed that the eNCA as an African production would have had better images to portray Africa, this was not so. The West were maintained its role as a hero saving the victims as they popularly do in many other productions. In this case the victims were the African people mostly affected by the Ebola virus, within narration of the outbreak.

Recommendations

Drawing from the findings of this researcher this study hereby recommends the following:

- Journalists should undergo specific training for them to be equipped with the right knowledge in reporting balanced issues on health. It is important that the health beat is treated with as much consideration as other beats e.g Current Affairs, Finance. Journalists should be trained on how to report on Health issues.
- African media should break from stereotypical images that damage the face of Africa and employ the use of positive images when reporting on African issues. There is need for African experts to be the voice of the challenges Africans face instead of the media relying on European experts. Africans should also be projected as intelligent, self- reliant to oppose the stereotype that suggest that African are constantly suffering and expecting a helping hand from Europe or America.
- Relationships and equipping conferences should be put in place to bridge the gap between health institutions and media practitioners. A good relationship needs to be cultivated between the media and health experts so that they can rely on each other to produce productive messages pertaining to outbreaks and diseases.

- Sufficient coverage should be given to life threatening outbreaks. The media should constantly send messages to the public so that they are made aware of the disease and how to prevent them.

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APPENDIX 1: GUIDE FOR INTERVIEWS

- 1.How was the Ebola outbreak any different from any other recorded in history?
- 2.How do you think the media in South Africa treated the Ebola outbreak?
- 3.What challenges do you think the media has in terms of delivering information to the public pertaining outbreaks?
- 4.How can the media be used more effectively on issues to do with outbreaks?
- 5.With a large amount of information regarding the treatment of diseases coming from the West , are there any challenges in implementing the solutions in Africa especially during outbreaks such as Ebola?

APPENDIX 2: GUIDE FOR FOCUS GROUP DISCUSSIONS

1. What do you understand about the Ebola virus?
 - What is Ebola?
 - How does one contract it?
 - What are the symptoms of someone with Ebola?
2. How did you initially find out about Ebola?
3. Where do you think the disease came from?
4. Who do you think is most likely to be affected and why?
5. How did watching these news bulletins make you feel?
6. How did you feel during the peak of the Ebola outbreak?
7. Do you trust the information you get from the media?
8. Had you been an eNCA reporter what would you have made sure you covered when reporting on the Ebola outbreak?
 - Do you think this is a good depiction of the disease?
 - Would you show pictures of people suffering from the disease?