4. Indeed, the attempt to translate from one to the other has been central to many liberation movements. The women’s liberation movement, for example, included the private experience of sexual abuse within the home being transformed through feminist analysis and survivors speaking out (Armstrong, 1994). It also involved the transformation of housewives’ common, but isolated, experiences into the shared analysis presented in Betty Friedan’s book *The Feminine Mystique* (1963) (see also Bland et al., 1978; Hobson, 1978).

5. The gay or lesbian viewer is often ignored in media theory and cultural studies (for example many studies of ‘youth culture’ ignore the position of the young gay man or lesbian). However, there are specific issues around sexuality and identity that influence audience reception. On the one hand, as Watney points out, media silence and distortion may be particularly evident to lesbians and gay men because media power and prejudice is ‘baldly exposed in the space between our lived experience, and the representations made of us in the media’ (Watney, 1987b: 125). On the other hand: ‘Because, as gays, we grew up isolated not only from our heterosexual peers but also from each other, we turned to the mass media for information and ideas about ourselves’ (Dyer, 1984: 1). The image (and self-image) of gays and lesbians may be particularly vulnerable to the mass media because of certain features of this minority status e.g. routinely growing up within heterosexual families without access to an obvious geographical community or visible way of identifying each other (Gross, 1991).

In this book we have pointed towards new ways of examining the relationship between promotional strategies, the media, the state and the public. The most developed writing about such relationships has tended to draw on liberal or critical perspectives. The former emphasises the complexity of the bureaucratic process and attempts to achieve official ‘balance’; the latter often presents AIDS as a ‘moral panic’. It is our view that both approaches have severe limitations. In the next section we will examine each approach in turn.

The liberal approach emphasises the complexities of policy formation in ‘pluralist’ societies. Writers such as Fox, Day and Klein, for example, see AIDS as simply another unproblematic or positive example of the dominance of medical professionals in policy making around health:

In each country, some people emphasised moral and emotional issues in the epidemic. But even in the United States, where these groups have been loudest and occasionally effective, policies have been made mainly in response to the opinions of the customary actors in health affairs. (Fox et al., 1989: 93–4)

These authors assume that both moralism and emotion are absent from the main policy-making activities of governments and the opinions of the ‘customary actors in health affairs’. We are told that policy response to AIDS in the US, Britain and Sweden has offered many examples of the ‘triumph of the ethic of professionalism over the confused and conflicting claims of morality and ideology. Given uncertainty, it has suited everyone to leave AIDS, like most areas of policy, to the professionals’ (Fox et al., 1989: 110–11). In a later article, Day and Klein argue, specifically in relation to Britain, that: ‘The groping, incremental policy response of the British government was not only a predictable but also entirely rational way of handling the issue’ (Day and Klein, 1990: 351). This rational response was to treat AIDS as a ‘technical’ problem. The technical approaches of the government are seen as simply enlightened, not ideological. Given this, it is not difficult for Day and Klein to recommend the exclusion of popular voices from policy making. According to them AIDS ‘provided another illustration perhaps of the fact that liberal public policies on certain emotion
laden subjects, like homosexuality and capital punishment, can only be implemented if signals from the public: are ignored' (Day and Klein, 1990: 351). Day and Klein provide no evidence on public opinion, simply deducing it from media coverage which, according to them, was of little consequence except as an indication for policy makers and politicians of a potential witch hunt. This, in turn, confirms them in their preference for technical responses.

We reject this analysis. First, policy making is never free of ideology and value commitments; and as we have shown (Chapters 2 and 6), this was definitely not the case with AIDS. Secondly, we agree with Berridge and Strong (1990) that Day and Klein’s argument is ahistorical. Berridge and Strong identify a number of phases during which AIDS policy evolved. In particular, they describe a move from a period of official ignorance (‘no one knew anything’) through a period of relatively open (‘bottom up’) policy approach to the more usual ‘top down’ policy process (Berridge and Strong, 1990). Paying attention to these historical shifts is very important, and fits with our third point, which is that the formation of policy on AIDS was a much more dynamic process than Day and Klein allow. The outcome of policy struggles was not determined beforehand, but was the result of negotiation and contest. Day and Klein underestimated the extent to which the values of the liberal/medical policy community were vulnerable to challenge. Our research demonstrates that the activities of gay and AIDS activists, and the media reporting, were important elements in the construction of agendas on policy formation; and in promoting some forms of action and marginalising others. We also found many examples of moral absolutist interventions in the public education campaign (see Chapter 2), the ‘main theme’ of policy (Day and Klein, 1990: 348).

Day and Klein, and indeed some other writers including Berridge and Strong, underestimate the influence of homophobia. For example, Berridge and Strong challenge the suggestion that the government was slow to respond to the AIDS crisis; and argue that the response to AIDS was, if anything, ‘remarkably swift’ (1991a: 129). They quote Roy Porter’s ‘perceptive’ comment that ‘had AIDS struck middle class heterosexual whites first, it is by no means obvious that the extraordinary hodge-podge of agencies would have dealt with it any better’ (Porter, 1988, cited in Berridge and Strong, 1991a: 134). Porter was writing of the US, but Berridge and Strong apply his argument to Britain (Berridge and Strong, 1991b). While agreeing that routine bureaucratic and organisational issues are significant factors, we saw in Chapter 2 that advertising and education campaigns were delayed precisely because of the people who were mostly affected, namely gay men.

Analyses emphasising ‘technical’ responses neglect contestation and the role of ideology in policy making. Very different analyses come from critical perspectives. These perspectives have tended to stress the concept of ‘moral panic’. This concept has been widely used by a variety of authors, and is the main alternative approach in the literature. It gives prominence to ‘ideology’, but it also neglects contest. Although AIDS activists are involved in the day-to-day practice of identifying points at which they can effectively intervene, this experience seems to be written out of much academic theorising. We argue that reliance on ‘moral panic’ allows slippage over important theoretical and strategic questions.

A critique of moral panic theory

The term ‘moral panic’ was coined by Stan Cohen in his influential book Folk Devils and Moral Panics, first published in 1972. Cohen argued that ingelitarian social orders created problems for powerless and marginalised sections of society, and then used their rebellion to reinforce the social order via the mechanism of ‘moral panic’. He defined a ‘moral panic’ as follows:

A condition, episode, person or group of persons emerges to become defined as a threat to societal values and interests: its nature is presented in a stylised and stereotypical fashion by the mass media; the moral barricades are manned by editors, bishops, politicians and other right-thinking people; socially accredited experts pronounce their diagnoses and solutions; ways of coping are evolved or (more often) resorted to. (Cohen, 1972: 9)

Panic are held to function as a mechanism of control by the ‘control culture’ in which the mass media act as a means of deviancy ‘amplification’. This analysis was developed further, and ‘politicised’ (Harris, 1992) by Stuart Hall and his colleagues in their widely influential book Policing the Crisis (Hall et al., 1978; see also Hall, 1988). According to this development the ‘moral panic’ is

one of the principal forms of ideological consciousness by means of which a ‘silent majority’ is won over to the support of increasingly coercive measures on the part of the state, and lends its legitimacy to a ‘more than usual’ exercise of control. (Hall et al., 1978: 221)

Not all of those who have used the concept of moral panic have done so uncritically. In relation to AIDS, Simon Watney has noted two limitations of the model. The first is that

the very longevity and continuity of AIDS commentary already presents a problem for ‘moral panic’ theory, in so far as it is evidently a panic which refuses to go away – a permanent panic, as it were. (Watney, 1994: 8; cf. Rocheron and Linné, 1989: 411-12)

The concept, according to Watney, ‘obscures the endless “overhead” narrative of such phenomena as one panic gives way to another, and different panics overlap and reinforce one another’ (1994: 9). Furthermore ‘classical’ moral panic theory

interprets representations of specific ‘scandals’ as events which appear and then disappear, having run their ideological course. Such a view makes it difficult to view AIDS as a case of moral panic.
A second and related problem is that viewing AIDS as a discrete moral panic invites us to ignore the historical processes which have constituted contemporary dominant notions of homosexuality. As Watney puts it: 'it is thus particularly unhelpful to think of AIDS commentary as a moral panic which somehow makes gay men into monsters, since that is an intrinsic effect of the medicalisation of morality which accompanied the emergence of the modern categories of sexuality in the course of the last 200 years' (Watney, 1994: 12). However, Watney did argue that the concept had descriptive usefulness, as have other theorists including Weeks (1993), Altman (1986), and even Rocheron and Linné (1989: 430) and Dickinson (1989) who are more critical of moral panic theory than the rest.

A further, and widely noted, limitation of the concept of moral panic is that, as Cohen himself observed, it becomes difficult to explain how panics subside. Within the sequence of events said to define a moral panic 'no readily available explanation exists as to how and why the sequence ever ends' (Cohen, 1972: 198). Cohen's own answer was that there was 'a lack of interest' from the public and the mass media. Interest would wane once it was felt that 'something is being done about it' (1972: 200). In the variant elaborated by Hall and his colleagues, this problem is compounded by their notion of a 'more than usual' exercise of control. When Policing the Crisis was being written there was abundant evidence of the drift to a 'law and order' society (under, it should be remembered, a Labour government). However, the problem with the theorising in Policing the Crisis is the lack of any indication of a mechanism by which the degree of control could be lessened. If the state was able to secure a 'more than usual' level of control in the 1970s, then are we now in a period where it is able to secure 'much more than usual' control? If not, the question is how did we get back to 'usual' or 'normal'? Asking this question raises further questions such as: What is the usual level of control in advanced capitalist societies? How do panics decline, and how were the coercive measures rolled back?

In fact the key problem is the lack of a theory about the mechanisms by which society changes at all, except as dictated by the state, or the more nebulous 'structure' of society. The most serious flaw of the concept of moral panic, especially in the variant developed by Hall, is its lack of agency. It is never very clear who is doing the panicking. Is it the media, the government, the public, or who? (cf. Barker, 1992). One reason for this lack of clarity is that distinctions between the media and the state, between the media and public belief, and between the state and other social institutions and groups are dissolved into Cohen's notion of the 'control culture'.

We can examine these limitations specifically in relation to AIDS. If there was a 'moral panic' about AIDS then we would expect to find all the following four processes in operation. First, AIDS is presented in a 'stylised and stereotypical fashion by the mass media'. Secondly, 'the moral barricades are manned by editors, bishops, politicians and other right thinking people'. Thirdly, a 'silent majority' of public opinion is won over (Hall et al.). Fourthly, 'ways of coping are evolved or resorted to' (Cohen), or 'increasingly coercive measures on the part of the state' are legitimised (Hall et al.).

Our research suggests that none of these four processes can be said to have occurred straightforwardly in response to AIDS. There is also no necessary causal connection between the four in the process of a 'moral panic'. Let us examine each of these components of 'moral panic' theory in turn.

Stylised and stereotypical coverage in the mass media

The predominant view in social science and media studies on the media response to AIDS has been that the media have stigmatised people with HIV, distinguished between innocent and guilty victims, promoted homophobia, and/or been dependent on official medical and political sources. Coverage of HIV/AIDS is characterised by many authors as almost universally limited and distorted. Some see this as emerging from media values that promote sensationalism or irresponsibility (e.g. Albert, 1986; Wellings, 1988). Other authors view the problem as a more all-embracing 'homophobia', in which gay men and people with HIV or AIDS get nothing but negative coverage.

There have certainly been many examples of stylised and stereotypical media reporting; and we would agree that much coverage has been characterised by sensationalism, inaccuracy and homophobia. However, critiques of such reporting have tended to collapse distinctions between views which emanate from distinct political pedigrees (cf. Hallett and Cannella, 1994), overemphasise the frequency of negative coverage, overlook possibilities of 'positive' coverage, and ignore variation in reporting. For example, there were many stories in the broadsheet press, discussions on documentary programmes and even reports in the tabloids, in 1986–87 in which the government was urged into action (see Chapters 3, 4 and 5). This strand of coverage is missing from the analysis of most writing in the area, and many writers ignore (or explicitly deny) distinctions between different media. Simon Watney, for example, argued that the first five years of reporting on the AIDS epidemic showed that:

British TV and press coverage is locked into an agenda which blocks out any approach to the subject which does not conform in advance to the values and language of a profoundly homophbic culture - a culture, that is, which does not regard gay men as fully or properly human. No distinction obtains for this agenda between `quality' and `tabloid' newspapers, or between `popular' and `serious' television. (Watney, 1988a: 52)
Such analyses obscure the achievements of gay men, for example, working both within and outside the media. They also disregard differences between reports (and among diverse media outlets) which it is strategically important to understand.

Moral barricades — sources of AIDS news

It is certainly true that the moral barricades have been manned (and 'womanned') by 'right-thinking people'. Yet, such explicitly 'moral' activists did not have a monopoly on the media. Indeed, as we argued in Chapters 3 and 4, moral absolutist voices in the media were not usually privileged, even in the tabloid press, although they did excite considerable comment across the media. Furthermore, the sources routinely used by journalists working for national newspapers or television news were predominantly scientists and doctors, government ministers, or AIDS charities such as the Terrence Higgins Trust. This suggests that the promotional activities of groups such as the Conservative Family Campaign were less than straightforwardly successful in gaining media attention or sympathetic coverage.

The power and influence of the moral right has been exaggerated by some commentators.2 Weeks and others have asserted that 'a moral counter-revolution has always been close to the heart of Thatcherism' (Weeks, 1988); and that moral concerns represent part of the Thatcher government's 'ideological commitments' (Weeks, 1989b: 129). However, such arguments fail to recognise the 'vast gap between rhetoric and reality' (Durham, 1989: 70). As Martin Durham has argued:

The Thatcher government has moved only partially in a 'moral Right' direction. On many issues that concern organisations such as the Conservative Family Campaign, the government has been reticent or even antagonistic, and its taking up of Clause 28 (and other initiatives) falls far short of what 'the moral Right' desire. (Durham, 1989: 70–1)

On AIDS this has meant that: 'Despite what we might expect [the government] has not used AIDS in order to enforce a traditionalist moral stance' (Durham, 1991: 130). In general: 'Where medical health or scientific research was involved, then the Thatcher government was likely to harken to the advice of its civil servants, the British Medical Association or scientific bodies' (Durham, 1991: 140).

Clearly, the moral right have had some sympathy at the very highest levels of government, and have had an impact on particular policy decisions or advertising campaigns (as we saw in Chapter 2). Nevertheless, we should be clear about the differences between such perspectives and both government policy and medical responses to AIDS. As Durham writes:

It is vital to disentangle the New Right and Thatcherism. Thatcherism as a particular combination of neo-conservative and neo-liberal themes was only one (albeit the major) element in the New Right. In addition, Thatcherism, whether in opposition or, even more, in power, operated under circumstances that make the consistent pursuit of an ideological project impossible. The government included non-Thatcherites, it had to negotiate its way through both the Civil Service and civil society, it was buffeted by public opinion, economic shifts, international tensions. It is distinctly unhelpful to amalgamate the New Right, Thatcherism and the Thatcher government into one identical object (let alone combine them with moral crusades as well), (Durham, 1991: 139–40; for more on this see Durham, 1991: especially 140–2 and Chapters 8 and 9).

Is the public reactionary?

The 'silent majority', which is supposedly won over to consent for increased repression during a moral panic, is also problematic. The assumption of moral panic theorists such as Cohen and Hall is that the public endorses reactionary social change as a result of the manipulation of the media by the state. Yet in the case of AIDS it is not at all clear that public opinion in general was in favour of some of the more draconian suggestions made by Conservative backbenchers, police officers or other moral absolutist activists (such as Green, 1992). Nor was it clear in the case of mugging in the 1970s or beach battles in the 1960s. Similarly the extent to which public opinion simply reflects the content of media reporting is nowhere directly examined. Instead, public beliefs are simply 'read off' from an analysis of news coverage. Public opinion may or may not follow the lines suggested (Chapters 8 and 9). In the case of AIDS our work does provide evidence of some causal links. It does this through thorough empirical exploration. The point is that moral panic theory as a model actually disregards and inhibits empirical investigation of the impact of the media on public belief and opinions.

There is a further problem in that the legitimation of reactionary social or legislative change by the 'control culture', the state or the moral right is assumed necessarily to include winning over at least some elements of popular opinion. Certainly Hall and his colleagues in their interpretation of Gramsci, and their theorising about hegemony, place a great deal of importance on the winning of the consent of the governed for reactionary policies. Yet we would question the extent to which reactionary (or indeed progressive) social, political or legislative social change does in fact rely on popular support, consent or even indifference. State actions can sometimes be constrained by lack of consent when opposition is mobilised, as the case of the poll tax shows (Deacon and Golding, 1993). However, if the state always relied on public legitimisation before acting, there would be precious little legislation in an average year.1 Conversely, there are examples where overwhelming popular support for particular measures exists but is not transformed into legislative or other changes. There is then no straightforward relationship between public opinion and social control. Instead of assuming such a relationship, the task of social science should be to examine influences on public opinion and belief and, in turn, to investigate the influence of public opinion (or indeed representations of public opinion) on policy formulation and the wider structures of society.

There is one further adaptation of the concept which is worth noting here. Jeffery Weeks was one of the first social scientists to apply moral
panic theory to the AIDS crisis in his 1985 book *Sexuality and its Discontents*. Although this was written before the major governmental response to AIDS in Britain, and before Watney’s critique of moral panic (Watney, 1987b, 1988a), subsequent events have not led him to abandon the concept. Thus, in an essay, published in 1993, Weeks argues that although there are some problems, the concept still retains a certain descriptive usefulness ‘as a helpful heuristic device’ (Weeks, 1993: 25). In particular, after noting some limitations, he describes the societal reaction to AIDS between 1983 and 1986 as a period of moral panic ‘not least because a perception of how the public was reacting determined the responses both of the community most affected, and of the government’ (Weeks, 1993: 27). Our analysis certainly confirms this. However, the key caveat in Weeks’s statement is that it was perceptions of public reaction rather than systematic information about actual public responses that guided policy responses. If it is only perceptions of public opinion which might be important, then this is a radical problem for the concept of moral panic.

The state and the legitimisation of repression

Next we turn to the question of results of the panic. Has the advent of the AIDS crisis and the accompanying media coverage resulted in a ‘more than usual’ exercise of control by the state? It is clear that there were some increases in state control in this area between 1980 and 1995, such as Clause 28 (although some commentators have concluded that Clause 28 did not have the extensive impact feared by many: Evans, 1989). However, there have also been changes which appear to be in the opposite direction, such as the lowering of the age of consent for gay men to the (albeit still discriminatory) age of 18. Similarly, there were, especially in the pre-1987 period, many examples of what might be described as panic reactions to HIV and AIDS; and there is ample evidence that gay men in general (and sometimes lesbians too) suffered discrimination, hostility, stigmatisation and violence which can be attributed to, or were legitimised by, public debates on AIDS. Attacks on gay men increased in this period, and violence and discrimination against drug users and sex workers also rose (Social Services Committee, 1987a, 1987b, 1987c).

However, it is an oversimplification to suggest that such responses were carried out (or deliberately inspired by) the state, or even the ‘control culture’, although it can be argued that it was the absence of state action which allowed the phase of ‘panic’ to continue. Furthermore, it is not at all clear that the status of gay men (or even injecting users of illegal drugs) in society has declined as a result. Indeed, Denis Altman (1988) has argued that the impact of AIDS on gay men as a social constituency amounted to ‘legitimation through disaster’. In the US, as Altman has noted, ‘the conservative Reagan administration has had more contacts with organised gay groups than any of its predecessors, largely because of AIDS’ (Altman, 1988: 302). Similarly in Britain, AIDS and gay organisations have been consulted and funded by central government; also a first. The evolution of AIDS policy in Britain has been slow, painful and in many respects problematic. Nevertheless, the state, rather than successfully legitimising repression, has largely moved in the opposite direction; albeit hedging such changes with all sorts of conditions, reversals and contradictions.

Finally, on panics

The term ‘moral panic’ has sprung from the pages of social scientific texts and become a buzzword for the media. It is used to describe a whole range of controversies, depending on the writer’s desire to validate or dismiss the apparent threat. One hears the concept applied to anything from single mothers to working mothers, from guns to Ecstasy, and from pornography on the Internet to the dangers of state censorship. Part of its attraction for some media is that it explains away the reporting of tabloid papers and ‘right thinking people’ as irrational, not the sort of thing that could fool educated liberals and the readers of the Guardian or Independent. To be sure, the popular use of the term in the media involves something of a simplification and distortion of its usage in the original sociological studies. Especially in the work of Hall et al. (1978), there is an implication that such panics are in fact in the interests of the panicers, or at least of those who whip up the panics. Nevertheless, there is a sense in which the term moral panic, in its proper usage, necessarily conjures up the irrational: it is as if the panic (of the tabloid papers, conservative backbenchers or the public) was an involuntary ‘moral frisson’ (Mort, 1987: 214) over which conscious control was difficult. The subject of the panic is also seen as non-existent, or at least as exaggerated. It might be objected that the term is not meant to refer to individual states of consciousness or panic, but is intended as a collective term to describe a kind of societal psychology. However, this interpretation would also be vulnerable to the charge of labelling processes of social control as irrational.

Part of the original impulse behind the work of Cohen and his followers was a desire to portray the behaviour and culture of stigmatised and powerless groups as rational responses to inequality in contemporary capitalism. Mods and Rockers were not ‘mindless hooligans’, but engaged in ritual or stylistic rebellions. It is ironic, then, that the term is now often used in ways which implicitly present the process by which powerless groups become stigmatised (and further marginalised) as irrational and closed to serious sociological study.

The moral panic model assumes a straightforward relationship between state interests, media content and public opinion, in which the media circulate reactionary social wisdom, the public believe it, and the state is then able to secure consent for its actions. This is, despite the protestations of some moral panic theorists, a very instrumental model of the role of the media in supporting a dominant ideology and securing hegemony. It leaves
out a series of important possibilities for investigating, theorising and intervening in the process of ‘panic’. If reaction to AIDS is or was a ‘moral panic’, then it was a moral panic *mangue*; and the reasons behind the failure of the moral panic or the success of resistance need to be examined. It is this which our study has attempted to achieve.

Notes

1. Five years later Watney had slightly modified his argument:

For the better part of a decade, AIDS coverage across the mass media has consistently positioned readers and viewers alike in contradictory ways, implying that they both are and are not at risk. This is the context in which gay men appear as threatening rather than threatened, and in need of punitive control rather than support. However, this agenda has not been established without some resistance, and several attempts have been made over the years to ‘de-sensationalise’ the coverage of the epidemic, both in the press and on network TV. Nonetheless, most coverage continues to regard gay men as if they were members of a uniform culture, with a shared ‘gay lifestyle’ and identical sexual needs. We appear simultaneously as villains and as victims, but never as a social constituency facing the worst natural disaster in the history of any minority group within many Western societies. (Watney, 1992: 151–4)

2. Neil Small has explicitly counselled us to recognise the power of the “moral right”. Harsher forms of control have not been far from achieving support that would ensure their implementation. When one has to rely on the “balance” of the Secretary of State to hold back absolutist explanations and remedies suggested by his backbenchers then no one can feel secure’ (Small, 1988: 27). As well as being an extraordinarily individualistic model of politics (policies decided on the whim of the Secretary of State), this underestimates both the monolith of the British civil service and policy-making machinery and overestimates the power of backbench Conservative moralists. The reason that successive Conservative secretaries of state for health, whatever their own views, have not taken the road suggested by moral conservative groups, has little to do with them possessing a high degree of ‘balance’ and more to do with the atmosphere and ethos of the policy community surrounding them. This confusion about the relationship in New Right thinking between the free market and morality runs through much of the debate on Thatcherism (see Hall and Jacques, 1983; Hall, 1988).

3. Here we agree with Abercrombie et al. in *The Dominant Ideology Thesis* (1980) and in *Dominant Ideologies* (1990), that there has been a tendency to overemphasise the role of ideology in assuring the reproduction of capitalism. However, governments and others do expend considerable ideological labour in legitimising particular policies and actions. This does not mean that they are always successful, or that success requires that the entire working class believes the latest piece of propaganda. But there are times when significant numbers of people do believe information which has originated with one section or another of dominant groups, which is intended to support the interests of those groups and which is misleading, ideological or simply false. Sometimes this is important in legitimising particular actions and at other times the belief of the public will be simply irrelevant to the state’s ability to carry out a particular act. Either way, there is a clear case for the empirical examination of the circulation of information in society and an assessment of its consequences. (For a longer critique of *The Dominant Ideology Thesis* see Miller, 1997.)

The mass media play a central role in the reproduction and transformation of contemporary society. The study of the media ought, therefore, to be central to the study of society. Yet, the role of the media is neglected or oversimplified in mainstream sociology. At the same time, the disciplines of media and cultural studies often discuss cultural products without much attention to broader configurations of power in society as a whole. Contemporary media/cultural studies has increasingly concentrated on the ‘politics of consumption’ or the power of ‘discourses’ while sidelines questions about media impact and ignoring the political movements and pressure groups which seek to influence public debate and representations.

The research findings reported in this book place the media back at the centre of debate about the reproduction and transformation of societies. Our work highlights the limitations of viewing the media as a discrete topic of enquiry and the importance of examining how the media are fundamentally enmeshed in the societies in which they operate. At one end of the process we have the priorities of interest groups, corporate capital and government which centrally involve public relations and promotional struggle. At the other end we have questions of public belief and opinion and their impact (and that of the media) on public behaviour, policy decisions, culture and society. In the middle, of course, are the interests and strategies of media corporations and their own processes of production. It is our view that all of these processes and their interactions need to be examined together if the role of the media is to be properly understood. This means examining promotional politics, information campaigns, mass media production, content, audience responses and policy impacts.

**Promotional politics**

Our research on HIV/AIDS demonstrates the increased centrality of promotional politics and public relations strategies to interest groups and other organisations. It emphasises the centrality of the institutions of the state both in terms of their superior promotional resources and in their ability to manage media agendas. But it also demonstrates that definitions of social issues do not simply emerge from the centres of political power. Campaigners did manage to influence the production and circulation of