

UNIVERSITY OF SWAZILAND
FACULTY OF HUMANITIES
DEPARTMENT OF JOURNALISM AND MASS COMMUNICATION
2013/2014 EXAMINATION QUESTION PAPER: MAIN

TITLE OF PAPER: NEWS REPORTING

COURSE CODE: JMC 216

TIME ALLOWED: 2 HOURS

INSTRUCTIONS:

Answer THREE questions.

Question 1 is compulsory

Spelling and grammar will count in grading.

Use your own examples to illustrate your answer(s).

**THIS PAPER IS NOT TO BE OPENED UNTIL PERMISSION HAS BEEN
GRANTED BY THE INVIGILATOR**

QUESTION 1 (compulsory)

List and describe the main elements to consider when writing news.

(20 Marks)

QUESTION 2

Explain the differences between newspaper, radio and television news reports?

(20 Marks)

QUESTION 3

Describe the following and elaborate on their usefulness in news writing.

- a) The lead
- b) The inverted pyramid
- c) The hook
- d) The Byline

(20 Marks)

QUESTION 4

Rewrite the following media release into a radio script: Indicate where you would put your slug, intro, audio clips, links, and outro.

(20 Marks)

Oct 15, 2013 at 02:58 PM

Issued by: PR Powerhouse

Attention: Health / News Editors

For immediate release:

CIRCUMCISION DEATHS, BLEEDING DISORDERS COULD BE THE COURSE

Reports of deaths during traditional initiation rites often hit the headlines in South Africa, and there is always a devastating sense of young lives lost too soon. Yet, partly because these centuries-old practices are swathed in mystery, insight into the reasons for the loss of life following ritual circumcision is often limited and not fully understood. Poor surgical practices in non-sterile conditions are often blamed, but there may be another factor, which needs to be

considered. The hereditary bleeding disorder, haemophilia, may indeed be a reason for the deaths in some of these rituals.

The Igazi Foundation, based in Port Elizabeth and working throughout the Eastern Cape, has identified haemophilia as a definite risk factor in traditional circumcisions, especially since they take place in remote areas far from hospitals and clinics.

Haemophilia is an inherited condition in which the patient's blood fails to clot. It is caused by genetic mutations that lead to reduced clotting factors in the blood of people living with the condition. Symptoms of bleeding are very variable and can range from mild to severe. It is in the mild to moderate range where the greatest risk of uncontrolled bleeding during a traditional circumcision may occur.

The reason for this, says Henry Steenkamp, a registered haemophilia nurse working on the Igazi education and outreach programme, is that severe cases are usually diagnosed in infancy, and are already being managed by the time a youngster reaches puberty.

"Mild or moderate cases of haemophilia, however, often only come to light after an injury, dental work or surgery," he says. "As a result, initiates who may have a less severe form of the condition - and who may not previously have experienced an uncontrolled bleed - may not be aware of the fact that they are at risk following a traditional circumcision."

In accordance with the Traditional Circumcision Act (2001), initiates must be over the age of 16, must consent to the procedure willingly, and must undergo routine testing before retreating to the rural areas where initiation rituals are performed. However, while the mandatory routine tests include a full blood count, HIV screening, viral studies and chest x-rays to determine whether the individual has tuberculosis, they do not include a PTT test. This relatively simple screening test is the first test used to diagnose haemophilia.

"If we could get the PTT test included as part of the routine screening procedure," says Steenkamp, "we could identify high-risk individuals, and be in a stronger position to assist both initiates and traditional authorities to manage the risk of excessive bleeding following circumcision."

Since people with moderate and mild haemophilia will not show clear clinical symptoms, running laboratory testing during these evaluations remains to be set-up. "In cases where we have been able to test initiates and manage high-risk individuals, there hasn't been a single death," says Steenkamp. "This is an excellent result, and shows that there's a good argument to be made for including PTT tests for haemophilia in the standard screening of all initiation candidates.

"If we can identify high-risk individuals in this way, we can work with traditional authorities

through the circumcision coordinators to manage the risk of excessive bleeding within the context of the initiation ritual. It's a win-win solution. And hopefully, in the long run, we can eliminate circumcision deaths caused by an undiagnosed bleeding disorder altogether."

QUESTION 5

What basic questions should you ask yourself when determining a lead? Illustrate using an example of a story you wrote.

(20 Marks)

QUESTION 6

Write a newspaper article from the following press release:

(20 Marks)

Oct 04, 2013 at 01:49 PM

Issued by: FLOW PUBLIC RELATIONS

Attention: FEATURES / LIFESTYLE / NEWS EDITORS

LAUNCH OF AN AFRICAN-FUNDED AFRICAN-RUN INITIATIVE

Despite being completely preventable and treatable, malaria infects approximately 219 million people around the world each year, killing an estimated 655,000. 90% of all malaria deaths occur in Africa, where the disease costs the continent an estimated minimum of US \$12 billion each year in lost productivity alone.

Six African countries (including Mozambique) account for 47% of malaria cases globally, and 86% of those deaths were in children under 5 years of age – that's one child every 60 seconds.

Despite tremendous advances in recent years, malaria continues to threaten broader socio-economic development of the African continent and places a huge strain on health resources, communities and individuals across the continent. In an effort to create a sustainable path to development for the African continent, including greater engagement of a variety of African sectors to maximize investment in Africa by Africa, a group of African entrepreneurs have banded together to form Goodbye Malaria, which launches in Durban on October 10, alongside the 6th MIM Pan-African Malaria Conference.

Goodbye Malaria's goals are:

- Support the elimination of malaria in Africa, starting in Mozambique with innovative financing through a social impact bond

- The eradication of poverty by supporting African entrepreneurs
- The improvement of local economies
- Supporting Malaria advocacy - The Global Fund and Rollback Malaria, in creating a fresh voice for the malaria community

The group, which includes Robert Brozin, Sherwin Charles and David Stern, is determined to eliminate malaria and supporting the goal of saving 4.2-million lives by 2015 on achievement of the MDG goals.

“We're creating a win-win-win situation,” says Brozin, founder of Nando's. “Providing African solutions to African challenges where Africa is doing it for herself.

The campaign benefits the Roll Back Malaria Partnership (RBM) and The Global Fund to Fight AIDS, Tuberculosis and Malaria by raising funds for malaria elimination in Africa, using a model that enables Africans to raise funds and advocate against malaria while simultaneously creating employment opportunities.

The group is calling for a show of unity from corporates and individuals on World Malaria Day, 25 April 2014, calling on the world to wear their “Goodbye Malaria pyjamas” to work. Says Sherwin Charles, CEO of Sonhos Social Capital, “This might sound like a big ask, but the pyjamas, made of the softest cotton and in funky shweshwe fabric, are probably the most stylish and comfortable thing you'll wear all year.”

“Malaria statistics are absolutely appalling,” adds Brozin. “And everyone can make a difference and help us to fight malaria in their sleep – what could be easier?”