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HIV Stigma: An exploration of how songs with HIV themes are perceived by Zimbabwean nationals living in Johannesburg, South Africa.



Research Report submitted to the School of Public Health

University of Witwatersrand

In partial fulfilment of the requirements for the degree

Master of Public Health

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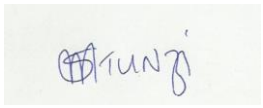
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23 October 2015

Declaration

I **Silinganiso Chatikobo** declare that this research report is my original work. Any work done by other persons has been properly acknowledged in the text. The report is submitted in partial fulfilment of the requirements for the Degree of Master of Public Health (MPH) with the University of the Witwatersrand, Johannesburg, South Africa. It has not been submitted for any other degree or exam in this or any other University.

Signature: 

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Abstract

Background: Despite music being part of everyday living in most African countries, limited research exists on how popular music has been used in public health interventions and its effectiveness in addressing public health issues such as stigma and discrimination among people living with HIV. This study used two Zimbabwean songs about HIV to compare musicians' intended messages to audience perceptions on the portrayal of people living with HIV.

Methods: This qualitative study consisted of 20 interviews with Zimbabweans in South Africa and two key informant interviews with the musicians. Inductive thematic analysis was conducted using MAXQDA.

Results: Popular music can possess many edutainment qualities, but some key distinctions to a typical edutainment programme were noted in the study. Unlike other forms of edutainment that rely on characters to model required behaviour; in songs, musicians took on that role as storytellers. Despite the differences, listeners perceived the educational message within the songs. Phrases and images used by musicians had different meanings among research participants. Sometimes these deviated from the musicians' intended messages, often reinforcing stigma and discrimination among participants. Some participants thought the songs emphasized identification of victim and perpetrator as well as stereotyping the physical appearance of PLHIV. Others felt PLHIV would feel judged if they listened to one of the songs. The songs reinforced gendered notions of HIV transmission. Context, time and setting could create different perceptions to the same or different listeners listening to the same song.

Conclusions: This study highlights how music can promote either the inclusion or othering of PLHIV. By appreciating how audiences perceive music, unintended messages can be minimised, harnessing a widespread art form as a channel for health communication. The research provides an impetus for future interdisciplinary research involving musicologist, SBBC practitioners, and the artists to explore how best methods to of harnessing the art in public health interventions.

Acknowledgements

My sincere gratitude goes to the following groups of people and individuals:

My classmates for the support encouragement and all the academic conversations on and off social media

All Research participants for their time, views and showing interest in my research; as well as the two musicians who were key informants in this research: Pastor Charles Charamba and Steve Makoni; Thank you for allowing me to use your songs and granting me time to talk to you and for the feedback in the data processing stage. I am grateful that you opened your art to academic critique.

My mother and siblings for the support, belief and encouragement throughout; all my children for never wanting to pry into my results throughout my studies and giving me space to be a student like them

Babongile, for the back massages that helped to give life back when it had taken strain after sitting for so long typing away

Rumbidzai, for taking over some of my domestic chores without much complaining while managing to balance your school too; the transcription during data processing, that took away quite a load off my already tired fingers

Munyaradzi, the research assistant husband, for often doubling up roles in the home while I was cooped up trying to read many unending articles, for conducting interviews with all male participants and the daily reflection, feedback and bouncing off of ideas, for the transcription and still being a husband, it was a mission that you accomplished with grandeur

To my two supervisors, who were there to guide me throughout this whole process with much attention, diligence and at times tough deadlines but done with diplomacy that always left me smiling and knowing that they only mean well for me.

Mandi; your comments were always challenging and always set to push me not only one step but ten more steps to engage my mind and apply myself more to the task at hand. Your guidance throughout, combined with knowledge in the subject matter and its applicability to the Zimbabwe situation in general and the two musicians in particular were very helpful in ensuring that I always guard myself from discrediting the two musicians while at the same time balancing the academic arguments in the critique.

Sara; your general belief in my potential is what I loved most, you diplomatically pushed me to reach my potential with less pain and more smiles. Your availability physically, on the phone and on Skype, to listen to me whining about the difficulty of the process and your ability to decipher what exactly I was saying and guiding me back on the right track have been amazing. Your support and efforts to promote my personal growth academically outside this research process too, I will forever be grateful.

AND TO GOD BE THE GLORY WHO SEES ME THROUGH LIFE.

Dedication

To all those who day in and day out, toil and labour with rhythm and rhyme, words spoken and unspoken, phrases, images and pictures drawn and sculptured; any form of art providing social commentary. To those who dance, hum, sing-along and marvel at the art, let it be enlightening to the mind, body and soul.

Acronyms and Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
ARV	Anti-retroviral
E-E	Entertainment Education
EPPM	Extended Parallel Processing Model
GNU	Government of National Unity
HED	Health Education Division
HIV	Human Immunodeficiency Virus
HREC	Human Research Ethics Committee
IDI	In depth Interview
MCP	Multiple Concurrent Partners
PLHIV	People Living with HIV
PSI	Population Services International
SADC	Southern Africa Development Cooperation
SBCC	Social and Behaviour Change Communication
SPH	School of Public Health
STI	Sexually transmitted infections
UN	United Nations
VMMC	Voluntary Medical Male Circumcision

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CHAPTER 1: INTRODUCTION, STUDY OBJECTIVES AND LITERATURE REVIEW

1.1 Introduction

Prevalence levels of Human Immunodeficiency Virus (HIV) in sub-Saharan Africa remain higher than any other region, accounting for 69% of people living with HIV worldwide (1). Although the region has experienced a decline in the number of Acquired Immune Deficiency Syndrome (AIDS) related deaths, it still accounts for 70% of global AIDS deaths (1). Of the total population of 13 million people, adult HIV prevalence in Zimbabwe is 15% with 0.98% incidence (2). Although there are known hot spots of HIV such as border towns, mining and farming communities as well as the growth points, prevalence levels are somewhat similar across all the ten provinces in the country with slightly higher prevalence in urban areas than in the rural areas (2).

There seems to be a consensus globally of the need to better understand and address factors that lead to HIV vulnerability and create barriers to disease management. In Zimbabwe, while progress has been made on HIV prevention, treatment, care and support, a recent study has shown that gaps still exist in addressing stigma and discrimination (3). Stigma and discrimination have been named as factors that affect efficient prevention and management of HIV (1, 4). HIV stigma and discrimiation has been shown to interact with other pre-existing social issues that attract stigma and discrimination such as sexuality, gender, race and at times poverty (3).

Stigma as a concept, is not unique just to HIV and AIDS, but has been in existence in for a long time, traced back to the Greeks who put marks on people as sign to show something physically or morally wrong with the marked person (5). Stigma is therefore generated from (perceived) differences possessed by one person among a group of people deviating from what Goffman terms the 'normal' person (5). Goffman further identifies three different types of 'abominations' that lead to stigma; namely physical deformities such as disability; blemishes to a person's character, such as being called a homosexual or alcoholic, and the last being that ascribed to a group such as race or religion (5). In reference to HIV and AIDS, it is possible for a someone living with the virus to experience any one or all of the 'abominations'. While the above mentioned are the visible or tangible differences that lead to

a person being stigmatised, it is important to get an understanding of how stigma plays out in society for both the person with the identified difference and the 'normal' person.

Stigma manifests itself in three different forms; enacted stigma, felt stigma and self stigma (6). Enacted stigma often manifests in the discrimination of the stigmatized individuals, in this case People Living with HIV (PLHIV). Discrimination can be in the form of exclusion or restriction but certainly violating the human rights of PLHIV (6). On a daily basis, with enacted stigma, PLHIV face rejection from loved ones and are called derogatory names. Felt stigma, which often arises from enacted stigma, is based on PLHIV's feelings about their conditions and how other people might react to their condition (6). The adverse effect of felt stigma is that PLHIV are restricted in identifying and accessing resources important for their health care needs in fear of discrimination. Self stigma is based on PLHIV internalizing both enacted and felt stigma in such a way as they start to devalue themselves (6). Often this results in PLHIV isolating themselves from the rest of society.

Another important aspect of stigma as a concept is that it functions within the societal spheres of culture, power and economic factors (4, 6). Parker and Aggleton argue that stigma is closely entwined with social inequalities and that stigmatization is responsible for producing and reproducing relations of control and power (6). Poverty, gender, religion, age and policy all of which are driven in society by power and control are variables that are likely to alter health seeking behaviours of stigmatized PLHIV (7). In Zimbabwe, like in most Sub-Saharan African countries, a woman who is HIV positive is likely to be associated with being a prostitute, therefore more stigmatised than an HIV positive male because HIV is spread mostly through heterosexual intercourse (7). While religion may often play a positive role in offering care and support to PLHIV, the association of infection with moral standards could create adverse effect and stigma (7)

Stigma index surveys with PLHIV have shown that members of key populations[1], experience discrimination and sub-standard services in health care settings (8). Although some efforts have been made to address this in many countries, a lot more work needs to be done in order to achieve the global target of zero discrimination by 2015 (1). The recent Stigma Index survey in Zimbabwe revealed that PLHIV were still exposed to stigma and discrimination

[1] According to UNAIDS, key populations refer to those communities disproportionately affected by HIV when compared with the general population. These include gay men and men who have sex with other men, women and men who inject drugs, sex workers and their clients, women and girls, as well as adolescents, migrant populations and their partners.

through exclusion from social, family and religious activities, and at times verbal and physical abuse (3). An earlier study in Zimbabwe had shown how, participants were afraid of taking an HIV test in case they tested positive, as those who tested positive were subjected to varying combinations of ridicule, gossip, denigration or outright hatred from their communities (9). Apart from stigma and discrimination from the community, the Stigma Index Survey also noted that PLHIV still have self stigma manifesting through feelings of guilt, low self esteem and different fears (3). Fear, especially among men testing HIV positive, of losing respect from one's children and wife had been noted in an earlier study (9). In a different qualitative study in the Western Cape province in South Africa, participants in the study stated how they tended to withdraw to themselves in fear of being devalued by their friends, family and co-workers (10).

While stigma and discrimination are social ills in the broader environment, they are major contributors to poor health outcomes of members of key populations including migrant populations within health care settings (4, 8). The epidemiology of HIV/AIDS has been linked to migration, with migrant populations seen as more vulnerable to infection than their non-migrant counterparts as well as being viewed as agents that contribute to the spread of HIV (11). This vulnerability is not a direct result of mobility, but rather of circumstances and events related to the migration process (11). The move to a new social environment is in some instances accompanied by lack of social support, which contributes to a change in risk perceptions to HIV infections making migrant populations engage in risky sexual behaviours (11).

Many interventions have been designed in an effort to mitigate the effects of HIV and AIDS in communities. These range from clinical interventions such as voluntary medical male circumcision (VMMC) (12) and management and treatment of sexually transmitted infections (STIs) (13) to behaviour change interventions such as condom use, delaying sexual debut and reducing number of sexual partners (14-16). While these interventions prove to be effective in meeting the proposed health outcomes, they are not designed to specifically meet migrant population's needs. There is a need, apart from laws and social reform, to design interventions addressing stigma and discrimination that are relevant address the health outcomes related to migration and migrant populations (17).

This study explored the perception of the message(s) or theme(s) within Steve Makoni's song "Vakasasana" (They had good times together), a song released in May 2005, and Charles

Charamba's song "Mhinduro Iripo" (There is an answer), released in January 1999, among Zimbabweans in Gauteng province, South Africa. The study explored the messages of the songs, as perceived by Zimbabweans living in Johannesburg, South Africa, with a particular focus on their portrayal of PLHIV. Although the two songs selected carry HIV messaging, they appeal to two different communities within the population, the religious and secular, where often moral judgement exists between these communities in addressing HIV prevention (18). While there is literature relating to the different stages of HIV epidemic progression in Zimbabwe as reflected in different songs (20), there is very little evidence that addresses the influence of the messages in relation to promoting or hindering HIV stigma and discrimination. Through this study, the researcher sought to explore how music with HIV messaging is perceived among migrant populations in their hosting countries in addressing health related determinants such as stigma and discrimination. By exploring perceptions about PLHIV within the songs, the researcher seeks to contribute to knowledge of how music and songs can be used in targeting key populations with health messages, while guarding against unintended consequences.

1.2 Background

On the African continent music seems to play a central role in the African oral tradition as it narrates the current context of a country or individuals (19). Across the African continent, music is played everywhere and every occasion, whether happy, sad or mellow in times of peace and war, music is there to accompany every occasion (19). Among the Zimbabwean population, music is an integral part of the lives, from the time they are born right through to the grave (20). Music and songs accompany the different milestones that a person goes through, be it in celebration or mourning. Musicians have been viewed as storytellers of what their nations are going through. In particular, liberation songs that were sung before independence and after independence have been viewed as a mirror reflection of the political mood prevailing in the country (21). This has given rise to commentaries of how some musicians, such as Oliver Mtukudzi, have followed the political landscape and at each point written songs with political messaging relevant to that particular moment (22). In the same vein, different songs have also been written with other social themes such as health, especially HIV and AIDS, and the messaging has tended to evolve depending on the current affairs in relation to the epidemic (23).

Music has been part of Zimbabwe's history during and after the colonial war, acting as the barometer measuring the mood of the people (24). Music captured "the sum thoughts, attitudes, strivings, drives and living forces of the people, expressing themselves with given causes and effects in a definite course of events" (24) pg ii). Music propelled the people to act in a certain direction depending on what was contained in the lyrics. During the liberation struggle, music was used to boost the morale of the fighters as well as spread the opinions of the liberation movements to the general masses (22). After Independence and especially after the disputed 2000 elections in Zimbabwe, music has been used across the political divide to further the political agendas of the different political parties. The government, under the leadership of Professor Jonathan Moyo as Minister of Information, used music to churn out government ideology in support of the much disputed land reform programme (25). The lyrics in the songs extolled government policies, but at the same time threatened opponents, and legitimised violence (25). In another context, in 2005, musician Simon Bikindi was brought before the International Criminal Tribunal for Rwanda for composing songs that are said to have incited hatred for the Tutsi people leading to their genocide (26).

Locally conceived messages delivered through music, like any oral tradition, have a higher likelihood of being both contextually and culturally appropriate. Failure to recognize the potential of music and song as a communication channel for stimulating social and behaviour change can represent a missed opportunity in HIV strategies (27). In Zimbabwe, not only has music been given recognition for its contribution to HIV prevention strategies, musicians have also been recognised for the potential role they can play within communities in HIV prevention strategies. Oliver Mtukudzi was appointed the UNICEF regional Goodwill Ambassador for Eastern and Southern Africa focussing on Young People's Development and HIV and AIDS prevention. Population Services International (PSI)- Zimbabwe has used various artists, both old and new to drum up support for VMMC (28, 29). These ambassadors have included popular poetry artist, Albert Nyathi, young urban grooves artist Winky D, local sungura artist Sulumani Chimbetu, Zim dancehall artist Jah Prayzah and female gospel artist Shingisai Zvakavapano (28-30). Using their talents and local narratives through poetry, music and song, they drum up support in an effort to improve the uptake of VMMC (27). Chitando and Chitando, in their study, showed how different artists and musician incorporated local narratives around HIV and AIDS depending on the state of the epidemic (23). During the mid-1980s, AIDS (as it was popularly called in Zimbabwe), was initially a taboo subject as infection was mostly associated with sexual intercourse and

Zimbabwean musicians addressed the topic through a moralistic and stigmatizing tone, such as Paul Matavire's song Yakauya AIDS (AIDS Has Come) (23). In late 1990s songs were characterised by lamentations of high death rates due to AIDS such as Oliver Mtukudzi' s Todii/ Senzenjani (What Shall We Do) and followed by songs of hope with the availability of ARVs in the country (23).

Music has been used in Zimbabwe as a channel to empower the community to be able to face different afflictions, be it during the war, disease or death (23). Except for the appointment of individual artists as ambassadors, products such as VMMC, popular artists have often used their own local knowledge and observations to compose music and songs at times containing health messages such as in the case of HIV and AIDS. While this has a potential to create awareness on the particular disease, local popular artists could be able to play a more significant role in health communication with proper engagement. There is need for designers of health communication to consider music and songs as a channel that can address stigma and discrimination in supporting HIV and AIDS prevention and management. Musicians are positioned to capture the local narratives in a culturally sensitive way to that particular audience (27). The format or genre they use could also be tailor made to fit the population. Without the intentional engagement of musicians in health communication, musicians continue to create songs that have commentary on current discourse but that may fail to capture the important messages that need to be included as part of a more responsible engagement with HIV and AIDS (23). The commentary offered by musicians is equally valid as it demonstrates a level of public opinion we would not otherwise get. However, this commentary can be potentially damaging if it fuels stigma and discrimination.

The two songs under study by Steve Makoni and Charles Charamba were released between 1999 and 2005 when ARVs had been introduced in the country, bringing hope in saving people's lives, though they were not readily available to everyone who needed them. At this time there was the mass exodus from Zimbabwe following economic decline and the subsequent creation of the diaspora as we know it today (31). There was also something of a religious revival, perhaps attributed to the prevailing conditions of difficulty and the rise of the Pentecostal churches. These churches became wildly popular. There was also some effort put into health education and promotion and serious discussion of stigma and discrimination was occurring at this time (32).

Makoni who sang “Vakasasana” is a comedian, songwriter, and solo guitarist. He is perhaps best known for his hit song "Sabhuku Nedhongi". He also penned and sang the woman empowering song "Handiende" about a wife telling her husband that she will not go as the husband wants to remarry but would rather stay for her kids. Another song he is known for is "Zvachonyana" which is a song about the realities and exaggerations of love. His comic take on realistic issues has made him popular. Charamba who sang “Mhinduro Iripo” is a gospel musician and a pastor in the Apostolic Faith Mission Church of Zimbabwe. Charamba's albums have been some of the top selling gospel music in Zimbabwe since the early 2000s. He has toured many countries including most in southern Africa. His wife is also a gospel singer and appears with him on stage and on his albums. Some of his popular songs include “Buruka” and “Machira chete”.

“Vakasasana” talks about how in the old days individuals could afford to have different sexual partners with little consequences, unlike now. While the song talks about multiple concurrent partners (MCP) and seeks to discourage these because of the risk they pose in HIV transmission, the song may also perpetuate stigma against PLHIV. The song explores in a satirical way the physical appearance of one who is HIV infected and later hospitalised with full-blown AIDS. With a cynical giggle, the singer describes how the ill person can only eat half a banana, but fails to hold it in as they throw it all up due to ill health, their hair thins out and seems to be waving at everyone passing by.

“Mhinduro Iripo” is a call for people to trust in God for an answer in the face of the devastation of HIV and AIDS. The song questions as who is to blame when an individual contracts HIV. In a direct reference to stigma and discrimination, the song questions society on how PLHIV should treated including those well known for their risky sexual behaviours. Despite admonishing promiscuity, the song suggests that people with HIV still need family support.

1.3 Statement of problem

Zimbabwean musicians such as Leonard Zhakata, Steve Makoni, Andy Brown, Charles Charamba, Oliver Mtukudzi and Thomas Mapfumo have all written and composed their own songs using different formats/genres with HIV messaging in the lyrics (23). While musicians have HIV themes in their songs, there has been little exploration of how these songs could potentially influence stigma, which is known to hinder HIV prevention and management efforts. In some instances, song lyrics, such as Charamba’s Mhinduro Iripo, have included

direct references to stigma. However, even songs like Makoni's Vakasasana create impressions for the listener, which may evoke stigma. Prior to this study, little was known about what these may be in the context of stigma. Key questions were: Apart from the intended message(s) by the musicians, are there any other messages embedded within the songs? How do these messages portray PLHIV? This study sought to address a data gap on how audiences perceive PLHIV portrayed in popular songs and how such perceptions relate to the context of stigma.

1.4 Justification for the Study

While there has been research conducted around the use of music in other health promotion campaigns, such as drug abuse (33, 34), there is no easily available research on how music has been used to address HIV among people living in the diasporas. There has not been an exploration of how Zimbabweans living outside the country receive and act upon songs with HIV lyrics. It is also important to understand how audiences receive songs with HIV messaging if SBCC programmers or individual musicians want to use music as a channel to address HIV stigma, while also addressing other HIV prevention messages. While audience perception is important, it is critical to get an appreciation of the musician's intention in the composition and production of a song perceived as edutainment. This provides insight into how popular artists conceive of songs and how to engage them better for commissioned work. Through acquiring a basic appreciation of audience reception, the study will guide health communication practitioners on the role of music to reduce HIV stigma. Such insight may also be shared with musicians who may collaborate with SBCC programmers.

1.5 Study Aim and Objectives

The study aimed to explore how Zimbabwean men and women living in Johannesburg, South Africa for at least six months as of 31 December 2013 experienced and perceived the portrayal of HIV positive people and the extent to which songs perpetuate or address HIV stigma through two songs from Zimbabwe, "Vakasasana" and "Mhinduro Iripo". The following were the study objectives:

1. To explore the intended messages from the musicians and compare these to audience perceptions
2. To explore the perceived key messages of the songs among the target group
3. To explore the acceptability of the HIV focus of the song among the target group.

4. To explore how the target group perceives the portrayal of people living with HIV in the songs.
5. To compare if men and women within the target group have the same perceptions of the songs, particularly their portrayal of PLHIV

1.6 Literature Review

1.6.1 Music as Health Education

Those concerned with HIV stigma and discrimination at different levels seem to agree that behaviour change is important to achieve the goals of HIV prevention and management (35). Health messages can be delivered through different channels, ranging from mass media campaigns, and health interventions activated within community, to integrating messages into the school curriculum (35). In using different channels, the communication strategies are core to the success of the programmes, as health messages are often inter-twined in the complex contexts of the communities, which could either impede or promote the impact or the persuasiveness of the messages (36). Through health education, individuals within a community achieve health literacy, which can lead to reduction of HIV related stigma and discrimination (37). Music and songs are channels that Social and Behaviour Change Communication (SBCC) programmers can use in the delivery of health messages to different audiences. Although the intended message within songs is not always the received messages, songs have the ability to disseminate different messages to audiences on different health issues.

1.6.2 Music as Entertainment Education

Entertainment education (E-E) can be used to raise awareness and promote action in the fight against different health issues including HIV related stigma among different communities (38). E-E is the intentional placement of educational content in entertainment programs with the aim of bringing about social and behavioural change (39). Most E-E has been influenced by Albert Bandura's social learning theory that supports the notion that a person's feelings and behaviour are influenced by the opinions, thoughts, behaviour, advice, and support of the people around them (40). Most E-E seeks to influence behaviour change by providing positive, negative, and transitional role models to the audience (39). E-E, disseminated through radio or TV, provides the audience an opportunity for social learning, bringing about social and behaviour change (38). Some examples of E-E include the television series Studio

263 from Zimbabwe and the Soul City series that have been used on South African and Southern Africa Development Cooperation (SADC) countries to address issues relating to HIV and AIDS (38).

While television and radio soap series are widely recognised as edutainment, stage theatre performances and dramas have also been recognised as edutainment. In Ghana, the Health Education Division (HED) of the Ministry of Health set up three drama troupes to carry out AIDS education on a pilot basis and results showed that well thought out AIDS messages within dramas increased knowledge and commendable behaviour towards HIV and AIDS prevention (35). Dramas provide the opportunity to embed arguments and counterarguments within a narrative that has personal relevance to the audience, especially those who are facing similar conflicts in their own lives (41). The same can be said for music that uses local stories as part of its lyrics. Steve Makoni in his song narrates the state of a patient in a hospital bed in a familiar way to anyone who has had a relative or family member hospitalised from an HIV related illness.

Ndopanozonzi "aswera sei murwere"? "Hayiwa aswera zvake" "Wadya here"? "Hongu, half yebanana, asi azorutsa	That is when people ask, "how is the patient"? "The patient is feeling better" "Did they eat"? "Yes half a banana, but they later vomited"

The communication process in this instance builds on local knowledge of what is happening within the community in relation to the HIV epidemic and the societal realities of those affected and infected with the virus (42). In E-E, research has found that if theoretical constructs of perceived realism, perceived similarity and cultural proximity are applied, audience members are more likely to adopt health beliefs and the modelled behaviour, as they are emotionally and psychologically involved (43). Therefore, the audience may be able to relate to what is contained in both Charamba and Makoni's lyrics if this bears semblance to their own stories.

A number of interventions have used music in conjunction with other methods or on their own to assist in facilitating behaviour change within particular communities. In interventions in the United States, hip-hop music was used intentionally to address risky behaviour among young African Americans, because of the role that hip-hop music plays in the lives of this

population (33, 34). The researchers noted that hip-hop made use of culturally relevant material and was based on peer developed material stimulating learning as a group to address the health education needs and this could be used for other health education interventions (33, 34). In another intervention in Texas, because of the meaning of rock music in the lives of injecting drug users, rock music was used to target them with HIV prevention messages (44). In this research it was found that rock music could re-ignite the respondent's attention and rejuvenate the interview process during an intervention because of how they related to the music (44).

1.6.3 Music as a form of Interpersonal Communication

Current discourse on HIV management and prevention programmes has placed importance on interpersonal communication (45). This is believed to mediate campaign effects through the creation of social learning environments that become important in health education (45). One of the important factors in social learning environments created through interpersonal communication is the cultural sensitivity about which factors are important to HIV prevention, because they can exert a powerful influence on sexual health behaviours (41).

It has been shown that E-E interventions such as soap operas generate a great deal of interpersonal communication among the audience members and their spouses, children, relatives or friends who may not have been directly exposed to the intervention (39). Radio or television soap operas engage the listeners in such a way that they create an illusion of face-to-face relationship with characters prompting audiences to develop personal relationships with characters (46). Despite the relationships between the audience and the characters being one sided, over time, the characters develop to be role models and have a loyal following. Therefore, the stories that befall them in the soap opera are discussed by the audience as they would a peer (46). Music, as a form of E-E, may also generate interpersonal communication among the audience and influence them to act in certain ways if the message within these songs is shared among those who would have been directly or indirectly exposed to it.

1.6.4 Conceptual frameworks in the research

Although the two songs under study were not designed by health communication specialists, it is important to understand what principles guide E-E, how communication messages are designed and what factors influence consumption and creation of meaning from any E-E programme. A good edutainment as espoused by Miguel Sabido, who is mostly credited for his role in creating edutainment as a channel for communication for social change is designed following certain principles and guidelines (47, 48). Characters within edutainment programmes provide modeling for behaviour change (49). This is done as the audience identifies with the story lines of these characters (46). An effective edutainment programme should therefore have the good characters who already portray the desired behaviour and the bad characters who oppose the desired behaviour (47-49). A third and important type of character is the transitional character, as this is the character that the audience are more likely to identify with (47-49). The transitional character is the role model that audiences are more likely to identify with as they go on the journey overcoming barriers and using enablers to change behaviour (47-49).

Another important model for reception research is Shannon and Weaver's communication model, who proposed five basic factors involved in the communication process arranged in a linear format (50). A concept of particular interest in the model is that during the process of transmitting a message certain information not intended by the sender, identified as "noise", can be introduced into the message (50). Noise can be internal, influenced by the receiver's own knowledge, attitudes, or beliefs or external that is coming from other sources such as context or the environment. The "noise" either strengthens the intended effect of a message, or weakens the intended effect and therefore create other meanings different from the original sender's intention (50).

While there are several models and theories within Public Health that can be used to guide message design, communication around HIV in the early years of the disease was ridden with messages that tried to instil fear among the population (51), such as using wasted bodies of PLHIV as the representation of the disease; something that Steve Makoni employs a lot in his song. Message design was influenced by the extended parallel processing model (EPPM), which says that success of messages rests on the amount of perceived threat in relation to perceived efficacy to adopt the behaviour has been influential in messages designed with fear appeal (52). Fear messages are effective in getting the audience to adopt healthy behaviours if

they are balanced with efficacy messages, otherwise they risk having a result of maladaptive fear control rather than danger control (52). One of these maladaptive fear controls in the case of HIV and AIDS can be the need to separate yourself or non-association with people that have been infected with HIV (51). The resultant effect is stigma and discrimination of PLHIV brought about by fear messaging.

CHAPTER TWO: METHODOLOGY

2.1 Study Design

This was a cross-sectional study to find out musician intention and audience perception of two songs with HIV messaging. A qualitative methodology was preferred as the most suitable in this instance, to explore study participants' perceptions of the portrayal of PLHIV in two popular Zimbabwean songs and particularly the potential for stigma.

2.2 Study Setting

Migration out of Zimbabwe has been influenced by many factors including extreme poverty as well as social and human rights violations associated with the current regime (53). The different circumstances and reasons for migration into South Africa have led to some Zimbabwean migrants being undocumented. Some migrants have not always felt welcome and have suffered xenophobic attacks and called names such as 'makwerekwere', a derogatory term referring to foreign nationals based on their language (54). Different reasons can be ascribed to xenophobia, but one of the reasons commonly mentioned is foreigners being scapegoats for the social ills and depriving the local nationals of enjoying the benefits of their freedom (54). Of the cross border migrants in the Gauteng Province, South Africa, 38% are from Zimbabwe, making them the largest migrant group in the province (55). HIV prevalence in Gauteng is estimated at around 28% of the population, while the national prevalence is estimated at 29.5% (56). Different districts within Gauteng have different HIV prevalence rates, with the City of Johannesburg at 28%, Ekurhuleni 30%, Sedibeng 31.7% and the West Rand at 32.3% (56).

There is not much documented evidence on the HIV status of the Zimbabwean migrant population in Gauteng (57), despite the acknowledgement of migration as a major contributor to population health. While migration in itself does not make migrant populations more vulnerable to HIV infection, conditions around them including access to health services make them more vulnerable (58). Insufficient evidence on how to target migrant populations are reached with health messaging in the prevention of HIV stigma and discrimination prevails. HIV communication alone cannot overcome challenges relating to health outcomes among populations, but plays a role in building knowledge on services, strengthening social networks and norms that promote healthy behaviours among other things (59). It is important

to understand that this study was carried out within a community that knows that they are not always welcome in social spaces and with some living in South Africa illegally, thereby presenting a challenge for them in accessing public services (53). This makes them vulnerable in many instances to HIV infection and the related effects of being seropositive (11). Through personal observations, I have noted that some of the Zimbabwean migrants maintain attachment and links to their home country through music and this could be exploited as a channel for communication among this community.

The researcher recruited participants from Rosettenville, and Braamfontein in Johannesburg, Gauteng province. Zimbabweans have tended to create clusters of their own communities around central Johannesburg and other places such as Rosettenville, and Braamfontein. Rosettenville has certain features that one can identify with Zimbabwe, such as the type of vegetables sold by street vendors and type of music played in some of the pubs or drinking spots in the vicinity. Students largely populate Braamfontein because of the location of the University of Witwatersrand and University of Johannesburg. A number of businesses such as saloons and restaurants that are mostly patronised by Zimbabweans because of the meals served or the hairdressers who are Zimbabweans.

2.3 Study Population

The study population was Zimbabwean men and women aged 25-45 years, who had lived in Johannesburg, South Africa, for at least six months by December 2013. These age groups were selected, as they would have memories of both songs because of the dates when they were released. The two Zimbabwean musicians who wrote and performed the two songs of interest were interviewed as key informants.

2.4 Study Sample

Zimbabweans living in the areas around Johannesburg; Braamfontein and Rosettenville were recruited as the study sample. Participant recruitment into the study interviews was through a snowball sampling strategy. Snowballing is useful in reaching out to hidden communities such as sex workers, drug users and migrant populations, as it based on personal chain referrals of the population (60). The researcher identified Zimbabwean nationals who in turn identified other Zimbabweans. The table below is a representation of the study sample of the 20 research participants.

Table 1: Research Participants

Age group	Female	Male
25-30	5	5
31-45	5	5

An inclusion criterion was exposure to at least one of the songs. Since the songs used in the research are in Shona, an exclusion criterion was on Shona language competency. This was checked through oral responses in Shona at recruitment. While this seemed an effective way for exclusion, it was not always effective. One male participant was recruited as he could converse in Shona and claimed he had been exposed to both songs that were used in the research. However, during the in-depth interview process, the research assistant realised that the participant could not understand much of the Shona lyrics within the songs. Given the circumstances, the researcher rejected this interview and recruited another participant in his place.

2.5 Data Collection

Data were collected from interviews with the support of interview guides (Appendix 2). The researcher conducted interviews with female participants, while a male research assistant conducted the interviews with the male participants. In instances where participants did not have privacy within their places of residence, a suitable space within the School of Public Health (SPH) was identified and used by the researcher to conduct the interviews. In depth, interviews were also conducted with the two musicians in their homes and workplaces.

Initially, participants were invited to talk about the songs before having them played back to them. At a certain point of the interview, participants had the opportunity to listen to both songs before continuing with the interview. In certain instances, participants asked to have the song that they were not too familiar about played before the interview continued. In such instances, the researcher or research assistant started the interview with the song that the participant was more familiar with. The research assistant would then find ways and techniques to get as much information as they could from the participant before playing the unfamiliar familiar song.

As the research assistant was someone that the researcher is closely linked to (husband), constant debriefing during the data collection process took place. This helped in refining the

questions but still maintaining the original meaning of the questions. Questions that were seen as redundant such as question one and two on the in-depth interview guide were quickly identified during the debriefing process. These were collapsed into one question, as participants felt like they were repeating themselves by answering these two questions separately. However, in some instances, the responses were different while in others, they were quite similar with some words substituted by others.

Following written consent from the participants, the interviews were audio recorded. The researcher and research assistant recorded non-verbal communication. The interviews were conducted using both English and Shona, depending on what the participants were comfortable with. Interview guides were used in the process. Interviews with study participants lasted between 40 minutes to an hour while the musicians' interviewers were between an hour and one and a half hours.

Interviews with the two musicians were held after all data had been collected from the participants using a different set of interview guide (Appendix 3). Through this sequence, the researcher was able to eliminate bringing the intentions of the musicians to the participants and influencing their perceptions of the songs. It also assisted the researcher in alerting the musicians at the point of interview how the audiences perceived different aspects of their songs. This, in some instances, became a point of contention with the musician while in other instances it was an opportunity for the musician to reflect on the unintended messaging in his music.

2. 6 Data processing and data analysis

Before the interviewing process, the research assistant received training on how to conduct the interview. This covered listening to the interviewee and making follow up questions. The research assistant conducted an interview to pre-test his abilities before the actual interviews with research participants. Debriefing was done after every interview with the research assistant. The researcher listened to the interview recording for themes that were emerging as well as to ascertain any leading questions from the researcher or research assistant in order to rectify the mistakes.

The two songs in the study were both sung in Shona. In order to be able to capture the true perceptions of the study participants, responses could be given in Shona or English depending on how the respondent felt s/he could best express themselves. Although

transcription/translation was done as part of data processing, some of the phrases were kept in the Shona language and are used verbatim so as not to lose meaning with direct translation in brackets. Direct quotes in Shona are presented in italics and all other quotes in none italics were either said in English or were translated to the mean what the responded would have said in Shona.

Simultaneous translation and transcription of the audio recordings was done into Microsoft Word by the researcher with assistance from the research assistant and a transcriber after they both received training. An inductive analysis was conducted meaning that the researcher searched for themes that emerged from the participants' interviews, extending beyond stigma alone. Transcripts were coded or grouped by the researcher according to different themes that emerged during the interviews. All the different answers from participants to a single question were first grouped together to analyse the responses. These were further grouped according to common phrases or sentences within the responses. Coded transcripts were sent to research supervisors to assess the face validity of the codes. Transcripts from interviews with the musicians were sent to each one to check accuracy, given their social status and the difficulty of guaranteeing anonymity in the report. Amendments from the musicians after they received the transcripts were taken into consideration.

2.7 Ethical Considerations

Ethics approval to carry out the research was given by the University of Witwatersrand's Human Research Ethics Committee (HREC) (Appendix 1). All research participants signed two informed consent forms before commencement of the interviews, one to participate in the interviews (Appendix 4), and another to have the discussion audio recorded (Appendix 5). Although some participants used their names during the interviews, these were not included in the research report to maintain their confidentiality. As key informants, both musicians signed interview consent form (Appendix 6) and audio consent (Appendix 7), but were informed that keeping their confidentiality would not be possible but the researcher would ensure they were not misquoted through referring to them in data processing. Audio recordings done during the interviews as well as note and transcripts will be stored securely for a minimum of two years after publication or six years in the absence of a publication after which these will be destroyed. Any personal identifiers that could be in the data will be removed before storage. While participants were not required to disclose their HIV status nor were they be asked about anyone's status, the researcher realised that there was a possibility

of the participants suffering psychological stress because of the interview as they might be infected or affected by HIV and therefore have suffered stigma. The researcher had referrals of where participants could seek assistance if need be (Appendix 8). As the researcher and research assistant are both Zimbabwean nationals, the researcher is aware that this could have introduced some bias during the interviewing and the data analysis process.

CHAPTER THREE: RESULTS

Ten male and ten female participants were interviewed for the research. Their age groups ranged from 25 years to 45 years of age. All female participants knew Charamba's song and five of them also knew Makoni's song before the interview. The other five females knew other songs by Makoni and not the one used in the study. Three male participants knew Charamba's song only, while two male participants knew Makoni's song only and the others knew both songs. Both artists were known to all the research participants for at least one of their other songs not included in this research.

3.1 Context of songs (musician's intended messages)

Mhinduro Iripo by Charles Charamba was composed and released in response to societal behaviour around people infected and affected by HIV. From his observation, the musician noted the abuse of PLHIV and he wrote the song to address the abuse being inflicted by relatives and care givers. Charamba felt that although there was an increase of HIV infection within the community, there was a lot of mockery, insults and denigration of the sick by those who were seemingly not affected by the virus.

> Mhinduro Iripo mainly focuses on the issue of stigmatization. That's why even in its video you see some, actors who would be trying to mimic and trying to, what I would say, imitate what ill-treatment someone who is ill faces, the abuses that were associated with the disease. It was my conviction that a number of people were getting more and more affected due to the treatment they were getting from their own immediate environment. (Charamba)

As a pastor within the Christian religious sector, Charamba was trying to show people that were infected by HIV that they could find hope, comfort, love and acceptance within the church through Jesus / God. As the nation was facing the challenges brought by HIV, his role was to intervene so that those infected would not suffer alone as they could find solace by inviting Jesus into their lives, which could in turn bring them refuge in the Christian family.

> This song was answering to demands, societal demands of that day. We are talking about a time when once your hair started thinning out, then those days people were so sceptical about your future. To them there was a public judgement that would relegate you to the graveyard. Your younger sibling would not face you, your relative too

> could not face you, and your spouse also could not face you. Hence the encouragement to say, your answer is there, the only company that you can have at this moment in time is Jesus. He is the only one *"asingasemeswe nevanhu, ndiye ega asingashori vanhu"* (he is the only one not nauseated by people; he is the only one who doesn't despise people). (Charamba)

While Charamba sings about hope within the Christian fellowship, he was aware of the role of biological relationships found within the family structures. These relationships are meant to be even more important in offering comfort and solace in the event of death or disease. They provide help and support to the one infected or affected to find a way forward in life.

> *Nyarara kuchema mkoma kani, nyarara, inga zvatoitika* (stop crying brother, stop, this has already happened) so that there is no crying over spilt milk. If you are HIV positive already, it has happened, so now let's face the future. Additionally, if someone has already died through HIV, let's not worry much, ok. Even you mother and father, stop crying see death has come to us. To our loved one who has gone and left us, it is painful and it breaks the heart, but now let us plan for the future. (Charamba)

While Charamba sings gospel music and calls on people to find comfort in God, he also recognises that people have earthly needs and aspirations and therefore seeks to address these issues in his music including Mhinduro Iripo.

> I believe that I have to preach a holistic gospel, I have to talk to a person who is in this world, leading today's life with, with, with aims and objectives and aspirations of living in this world, whatever of living in this world, with life after death. I don't just want to encourage people to seek heaven while they neglect their own earthly life, no. (Charamba)

Therefore in composing his song, Charamba uses examples of societal disciplinary measures such as the prison system or corporal punishment, which he reckons are not solutions to correcting human behaviour, especially regarding HIV infection. His ultimate answer to all this is that hope and comfort can be found in Jesus / God.

Steve Makoni said his song Vakasasana, targeted those not yet infected by HIV. The song was released before the advent of ARVs in the country and his approach then was to warn

people to change their behaviour as there was now a stark difference on the health outcomes of sexually transmitted diseases (STDs) because of the advent of HIV.

> Basically my belief towards, my approach towards HIV is that we would rather see it through prevention, instead of curative. Like I said, by its status that currently it is not yet curable, I would rather see it in an advisory perspective of avoiding or prevent its procurement or the actual means of getting infected, rather than waiting for a cure that doesn't exist when you have it. So it's more on the side of preventive health advice as opposed to curative because like it's very obvious, there is no cure. (Makoni)

In his song, Makoni set out to talk in a direct way about sex; a subject he said is taboo to speak about in the Zimbabwean local language and context. He engaged the use of images, and statements often used within the community to express his views in an effort to urge people to protect themselves from HIV infection.

> The whole idea is to state the reality that is there; whether someone appreciates or not, but for the message to get through straight to the core. Because, I noticed that we, in our language generally, we are very soft towards things that involve sex. We don't want to state, to call a spade a spade. We would rather circumvent it and say it in an idiomatic way. You know, I feel that we actually have to hit the nail on the head, get the message straight. ... Those are the points that I wanted to say that we can't run away from those points right there. (Makoni)

Makoni used artistic components such as images, idioms, anecdotes, and humour to express himself and emphasize the message that he was trying to put across. By doing this, he wanted the target audience to get "the stark reality" of the situation regarding the spread of HIV and the impact it has on one's life and physical appearance.

3.2 Perceived key messages of the songs among study participants

Although the songs were meant to address different target audiences within the population and their intended messages were different, the perceptions by the study population did not always reflect the same intentions. In most instances, the two songs were perceived to be sending out similar messages and addressing the same target audience, contrary to the musicians' intentions.

Charamba's song was perceived to bring hope through God / Jesus to both those infected and affected by HIV and AIDS. Unlike the musician's intention of addressing the behaviour around those infected, study participants interviewed perceived the music to be addressing both infected and affected and offering hope to both of them as they experienced loss brought about through HIV, either as an illness or the loss of a loved one.

> I feel like, like I said it gives people hope, that even if you going through difficult times, even if you are experiencing hardships especially at a time of HIV and AIDS there is still hope and you can always turn to God, also to help yourself to avoid to get infected. (27 years Female-RM Braamfontein)

> I think the whole, in summary the song is about giving hope to somebody who has lost a loved one in whatever death situation or everything. They are just telling the song tells people or anyone in that situation that you should never lose hope because the answer is Jesus. We get comfort in Jesus when such things happen to us; I think in short that is it. (45 years Female-LD Rosettenville)

In some instances, the spiritual beings in the song were perceived as the guide in people's lives, which in turn would alter the human being's behaviour and therefore prevent the occurrence of problems.

> So in other words, once you have Jesus in your heart, in your spirit, in your life, Jesus and the Holy Spirit in particular will now enable you to be able to triumph over adversity, triumph over problems, you actually transcend the limitations of your flesh. You transcend the limitations of your flesh and you will be able to rise above temptations and the temptations that actually create or lead you to the problems. (45 years Male-PKC Braamfontein)

While participants perceived hope in the song; there were some who felt that Charamba's emphasis on leaning on God and the spiritual being was spelling doom and hopelessness to the nation in the face of HIV and AIDS. The idea that hope was in God only, created perceptions among participants that human beings were failing to do anything to protect or cure themselves in the face of HIV.

> For me I don't know (heavy sigh) it gives the feeling of hopelessness in a way that we can't do anything at all. I mean that, yah as much as he is saying we can turn to God for the answers, but it seems like he is saying that we are doomed at the end of the

> day. So it's a, it's not really a sad song, but it's a song of doom (laughter). It's saying yah things are happening this way, we might, we can turn to the Lord but, it gives the impression that we are doomed there is no hope. (39 years Male-KC Braamfontein)

Some participants interviewed received the same message as intended by the musician. They mentioned that the song was addressing HIV and AIDS and the effects that it had on communities.

> I think there is a part where he talks about the fact that the disease is there and we should treat those who have it with dignity (30 years Male-AM Braamfontein)

> It's also trying to educate the people that no matter a situation a person is in, even if the person is HIV positive, let's just treat him in a way, which shows that we are human and the person you are referring to is also human. (27 years Male-BD Rosettenville)

Other participants identified the HIV and AIDS theme in the song, but also added that his focus was directed at the scale of the problem, because there were so many people dying irrespective of age, ethnic grouping or socio-economic status. Participants felt the artist was trying to address the defeatist mood that was setting into people.

One female participant, however, felt that the song was a commentary on the Zimbabwean situation in general and the hardships that people are facing. It was not directed at any specific subject by was almost a prophetic call for people to turn to God as they go through these problems. The problems being addressed were economic, political and social.

> It almost felt like a commentary of what's happening now, present day in Zimbabwe..., our socio-economic situation in Zim ... what people are going through, what we are experiencing as Zimbabweans. So, if you look at the health system, it's collapsing, if you look at the politics, it's not stable, the economic situation is in a mess, family unit I think it's also, obviously because of everything that's happening in Zim, I just feel like the family it's not as neatly tight as let's say I don't know; when my mother or my grandparents were growing up. So for me it was like a commentary on each aspect of the society. (28 years Female-NM Rosettenville)

Steve Makoni's song was perceived as nostalgic or a lamentation of the present situation in the face of HIV and AIDS in comparison to the past. Participants noted how Makoni

compared the past situation to the present in terms of sexual relationships and how HIV and AIDS has affected the population and how people engage in sexual relationships.

> I almost feel like ok, an image of back, I wasn't even born, but I am just thinking back in those days when everything was just okay like. We didn't know about HIV and AIDS or we knew about it, but it wasn't so much of a big deal then. Back in the days, people were so free, everything was just rosy. I was seeing like an image of maybe two people, whatever, in a relationship or an affair of some sort, but being analysed in the sense of everything was just okay. There was no fear of diseases or HIV and AIDS; it wasn't really talked about, no one really cared, no one knew about it, people just did what they needed to do, lived their lives, had their affairs, relationships, whatever, did what they did. (28 years Female-NM Rosettenville)

However, in comparison between the past and present, things have drastically changed because of HIV and AIDS.

> It is like you are dating a snake of which it can turn around and bite you. So for me it's that as well that the two worlds…, back then and now courtship has changed and one needs to be, to be careful, yah. (28 years Female-LG Braamfontein)

The same perceptions were echoed by other participants in the research.

> I think (sigh) he is actually saying to me that having careless sex, that's not the problem. That's how I got it. The problem is we are living in a different time now, we are not as lucky as the people from the past who could sleep around and never got sick. Or they got sick and all they did was they went to the doctor and got an injection and they were healed. (43 years Female-SC Braamfontein)

Participants also noted that through Makoni's song, death and the weight placed on death itself no longer had the same meaning or effect as in the past because of the number of people dying due to HIV and AIDS. Unlike in the past where death was a sacred occasion and only the elderly attended funerals, with the advent of HIV and AIDS, death was described and perceived by the participants as an everyday occurrence and something that had turned to be a very cheap affair. The frequent occurrence of death had even resulted in people engaging in courtship and kissing while sitting on graves.

Unlike in Charamba's song, where most of the participants noted that the musician places hope and comfort in God / Jesus, in Makoni song only one person spoke about how Makoni evokes the spirituality in seeking protection over societal issues. The difference is that Makoni evokes ancestral spirits as the ones that offer protection. The participant felt that both musicians have the same message of HIV prevention, although they target different faith beliefs.

> What it simply means is that don't play with mud where there is no water. Don't do things which you know that; you will be trying to say that your ancestors will protect you. Can ancestors protect you from HIV infection? They don't protect you from HIV infection. If you engage in sexual intercourse and you anticipate that your ancestors will protect you, it's just like Charamba where he says Jesus is the answer. What we spoke about that hope is there to Christians but it doesn't mean that if HIV is transmitted biologically in fluids, through exchange of fluids it will not be transmitted. (42 years Female-JM Braamfontein)

3.3 Context and response to focus on HIV in the song

While participants perceived the songs as a form of education of the community about HIV and AIDS, certain elements within the songs or their individual context, affected the songs' acceptability. The geographical context in which people listened to the song made it relevant or not as a form of health education. Some participants felt that listening to Charamba's song while living in South Africa, made the content of the song irrelevant, as they could not easily identify with the happenings. One female participant felt that because of the differences in the ARV treatment availability between Zimbabwe and South Africa, issues around stigma became irrelevant, as most of those who needed ARV treatment were able to access it, accompanied with good nutrition in South Africa.

> ... but now when somebody sings it in South Africa for somebody who has access to ARVs anytime, treatment, who cares; but obviously in Zimbabwe, especially in the deep rural Zimbabwe where you know that people are deprived of access to medication you know. Because here in South Africa you can't point to anyone and say this person is HIV positive. I think also the picture in his video he shows somebody so frail, thin you know. Unlike here in South Africa it's a different context. ... You would actually see that this issue of HIV /AIDS is something else to them. To them, they are on medication; they actually say this one is on medication and that one

> is on medication and they live their lives. They are not scared or even ashamed …. And they are willing to say it, but in Zimbabwe, you can't openly say that you are HIV positive. You see, I think with migration also, people tend to have a different view, change of perceptions; they have hope because they have food on a daily basis on the table.... They just say life is normal. (42 years Female-JM Braamfontein)

Some participants' perception was that when the trials and tribulations such as hunger, disease and death brought about by HIV and AIDS were far removed from people, the song ceased to have the same effect, as opposed to listening to it in Zimbabwe.

> I think, you know when you are here, in South Africa as a foreigner, we are not…, I don't know how to put this, but I just feel this disease and issues around death and illness are so far removed from us because when you hear of "*nhamo*" (death) it's someone back home not here. Because here we are…, so it's like I have never attended a funeral here in South Africa and in Zimbabwe I was at a funeral almost every weekend. (laughs) So when I listen to this song here in South Africa, I just listen to it as an entertainment song. (43 years Female-SC Braamfontein)

However, one male participant felt that Makoni's song in particular was a wake-up call for Zimbabweans living in South Africa to rethink the way they were living their lives, especially in relation to HIV infection and prevention.

> But what happens is that you actually think that the life being lived by Zimbabweans who have migrated to South Africa, people tend to like to be more adventurous when they are in South Africa. But after listening to this song, you go back to your senses and you have to appeal into your inner sense and tell yourself that HIV is for real and it's still there. (27 years Male-BD Rosettenville)

For some participants, listening to the songs in South Africa was not linked to anything that related to the content of the song. Since both songs are sung in Shona, it provided them with an opportunity to take a break from the English language that has become the medium of communication on a daily basis. Therefore, listening to any Shona songs brought relief and a reconnection to their country through language.

> When I'm in Zim this is like, it's more general because I'm at home and it's in Shona. But when I'm here it's like, what you call it, (long pause) like longing for home. Something that comforts you, because ok, you like, I'm in South Africa and mostly

> like my surroundings we hardly, I hardly speak Shona, you know. I can go the whole day without speaking Shona because my, the people around me or the people I work with, we using English. So you find that when I listen to this, its kind a …, in some way as much as it is a very condensed heavy song it's more like relieving. (28 years Female-LG Braamfontein)

Although most participants were not sure of when both songs were released, the time element also determined how relevant the songs were. Some participants felt that the songs had outlived their relevance because they seemed to address the audience during a time when there was no access to ARVs. They felt that hope and comfort in God offered in Charamba's song was the only option then, unlike now when life can be prolonged through ARV treatment.

> … I think also what is important is context. I don't know which year, this song was released and I think AIDS hadn't, especially in Zimbabwe, in the Zimbabwe context those years, I don't remember which year… I think the, it was a time that, the HIV disease was still, was still, ARVs were not available. It's only now things are beginning to change. In those days, it was almost like a death sentence, if you get AIDS... (38 years Male-CC Braamfontein)

While Steve Makoni says that he wanted the audience to get the "stark reality" about HIV and AIDS, this was perceived by audience participants as using fear tactics to get people to avoid behaviours that could lead to HIV infection. Although this could be criticized if employed in the current day, one male participant felt that because of the time and context when the song was released, it was an effective approach to use.

> But then I would say, then in the context or in the time in which this song was released, I think it was important and necessary. Because for starters, it was a relatively new condition, there was not much known. So it was better I would say if people had that kind of fear and not engage in such behaviours if it would help in any case. So I think it was important and better then, because there was not much understanding in terms of HIV and AIDS unlike today like I said before. (30 years Male-AM Braamfontein)

Research participants felt the song made them think about their actions and adopt behaviour that would ensure they do not get infected.

> So for instance like the way I am and think of it if I'm to look at his song saying you go black and I'm thinking haa, so it's that…, I wouldn't want to get to this extent, so he puts it in a way that is like shocking when you compare being light skinned into the blackness of midnight. The contrast of the two, for me as much as the song is like, he sings mockingly about it, for me it comes back to that questioning... But also there is something I like about the song, which encourages…, for me it's encouragement to go testing because at some point he says you have to be very careful, cause the person you might date or sleep with, they might be a snake. And for me in this instance the snake is the person who is positive, so if you don't take responsibility of getting to know them or getting to be tested and knowing their HIV status, then at the end of the day you might be for instance bitten by a snake in that sense. (28 years Female-LG Braamfontein)

The content and style of the two songs were also perceived as relevant, depending on whom the study participants perceived as the target for each song. While Charamba mentioned that his main target audience were caregivers of those infected by HIV, study participants perceived the song to target people both infected and affected by HIV as well as those with affiliation to the Christian religion. Therefore his message and style were perceived as relevant to that particular audience.

While Makoni set out to target everyone who was not yet HIV positive, audience participants felt that his target audience was the mature age, mostly those having completed tertiary education and within the working class and found most probably in pubs and other social spaces that include alcohol consumption. This made his style to instil fear relevant and acceptable in sharing the HIV prevention message.

Although to most participants the two songs were poised as distinctly different in terms of secular and religious music, Charamba's song was mentioned as having been relevant and had crossed the line, creating debate even within secular social spaces.

> Although I think in comparison to that time when it was released, you would find that it was a time when Charamba's music was becoming a bit more receptive and being played even in bars which was not like the norm to find gospel music being played in a bar set up. (30 years Male-AM Braamfontein)

3.3 Perception on portrayal of PLHIV

Some participants felt that the description provided by Steve Makoni was so graphic that it created perceptions of a person in a hopeless situation and only waiting for their death. One participant cited the different images that he used in the description in detail and this enabled her to create a visual image in her mind of someone living with HIV and inducing sad feelings in the process.

> I don't know, like he really is very like explicit in the way he explains, the way he like portrays someone that, I'm seeing someone full blown, for me that's what I'm seeing. I'm seeing a hopeless case; I'm seeing, I don't know, I'm just seeing a walking grave. I'm seeing like hair falling, I'm seeing you know like how the complexion changes and then you can tell. The complexion, the hair, the skin, the nails, everything, I'm just seeing; I'm not seeing someone you still think you know what actually maybe with ARVs we can really do something to boost their immune. I'm just seeing someone that's gone. Yah, which is very sad (moaning sound). (28 years Female-NM Rosettenville)

The description by Makoni, for other participants created a perception that PLHIV are those who like to have fun and are outgoing and not in any committed relationships and frequently engage in casual sexual intercourse with different people. This perception is created mostly by the words that Makoni used in the song.

> People who like fun. (laughs) "*Vanofar*a" (they have fun), you know, even the words he is using of "*kudanana and kusasana*" (loving each other and having a good time with one another) you know. It is not about people who are in a committed relationship. It's like people who pick each other up, in the bars, its people who are having fun, "*kufara*" (having fun). (42 years female-SC Braamfontein)

This description suggests that HIV infection is something they deserved. Therefore, Makoni was perceived as actually mocking and jeering at PLHIV for their past actions.

> I think he has a way of kind of lampooning people, I mean laughing at them because, I mean, he is saying ... I mean, you are reaping what you sow. (44 years Male-Dr DM Braamfontein)

While most of the participants said that Charamba's song provides hope, there was a perception among the participants that he portrays PLHIV as needing some sympathy and love from the general population. They perceived his song to be addressing the general population on behalf of PLHIV and pleading that they be taken care of in a good way. The description of PLHIV and the words he uses with special emphasis on the word *"veduwe*" (please) perceived as a cry to end stigma.

> I think he portrayed them well from my view, in the sense that he is addressing stigma, like these words ' *ndakamuona umwe ayisekwa, ayirwara nemukondombera, musadaro veduwe'* (I saw one who was being laughed at and was sick with HIV and AIDS, please don't do that). (45 years Male-PKC Braamfontein)

Charamba's lyrics around discipline and disciplinary measures that are meted out by the social systems created impressions of HIV infections being a result of loose morals or careless behaviour by those infected.

> I think it's sort of like the people who are HIV in the song have loose morals or they are careless, because he talks about the young people and the father's mischief and children's mischief. So it's like linking the disease to some loose or careless living. (42 years female-SC Braamfontein)

In his song, Charamba made distinctions between PLHIV, stating different possibilities of how a person can contract HIV, such as mother to child transmission, through medical procedures and through infection from one partner to the other. In the some participants' view, these distinctions created different perceptions about PLHIV, with one portrayed as victim and the other being the perpetrator.

> The way he puts it across saying it is not this one's fault; so definitely you want to see who is to blame. Something has happened between two people and he has been specific that it is not the man's fault; therefore whose fault is it? It is the woman. So you tend to blame the woman because she brought the virus to the man. Yes, because she is the one who brought it. She brought the virus and it is different from a case when you don't really know. You don't know who caused what to who, you just say maybe they found themselves positive and we don't know who between the man or woman, but when it has been specified that the woman is at fault, definitely (laughs a bit) I won't feel sorry for her. (30 years Female-LC Rosettenville)

However, Charamba explained that in the context of the song, this was not about finding fault with one person in order to secure conviction but rather an explanation of the different methods that HIV infection could happened without seeking retribution.

> It was not about blame shifting, that is why if we want to back, everything should be taken in a context and also know that languages. The word *"mhosva"* (cause/ fault) is not always something that has conviction. We are talking about a cause and how the (infection) found access. (Charamba)

While most participants, both male and female spoke about hope in Charamba's song and felt that PLHIV would find solace and comfort in the song, when asked what they thought PLHIV would feel when listening to these two songs, there was more discomfort with Makoni's song. One participant shared her conversation that she had with PLHIV at one time in Zimbabwe detailing feelings of being insulted by descriptions given by the community and translated into songs like Makoni's song.

> It's a hard feeling. I remember when I was in Zimbabwe I was speaking to, not a group as such, to people with this disease when they were describing how they get insulted with some of these songs and descriptions, what other descriptions people give, they don't feel comfortable and they don't listen to the music. Like someone was saying she gets offended when she hears this description, when she knows that she is living with HIV and then someone sings something like this. It doesn't go down well with her, so she doesn't listen to this type of music. Instead, she prefers gospel music that comforts her. (38 years Female-MM Rosettenville)

The hard feelings expressed above were confirmed by one female participant when asked what they thought PLHIV would feel if they listened to Makoni's song.

> Wooooo, that's, that's heavy now. (long pause) They could feel like down trodden. I feel like it would be, (sigh) what's the… *unobatikana* (it affects you), I think. Like so this musician and he thinks of us this way and so I think of that moment when you are positive you would be like, so in some way it could be stigma, around being positive. (28 years Female-LG Braamfontein)

Another participant said she would go as far as try to avoid getting an HIV positive person even hear the song because of the negative effect she perceived it would have.

> If it plays, I will switch off the radio for them, I would switch it off. The first one yes. (This is in reference to Charamba's song) This one, I don't see, I don't see any, like any positive undertones in this song. It's just so negative. It almost says look, you had the chance, but I don't know because it refers to the past and how things were okay, but now, no, no. So for me, this one is so negative. It's actually not giving you a positive outlook to anything. It's saying you had the chance or you didn't actually do anything about it, so you face whatever, the negative consequences. That's what it says, so this one, no. But the first one yes. (28 years Female-NM Rosettenville)

However, one participant thought that PLHIV would capture the humour in this song as has been happening with the recent economic meltdown where Zimbabweans have developed and circulated jokes around the situation.

> It allows them to laugh at themselves, as well, because you see, it's not personalising, it's a generalising of the problem and I would imagine if someone who is in the situation listens to this song, they would not necessarily get enraged, they would identify with the song and perhaps be able to laugh at themselves, and I think the point really is, when we laugh at ourselves, (pause) that's the power of irony, when we laugh at ourselves, the idea is to change us, to say, you know, why should you do something, so stupid? I think it's a typically Zimbabwean thing, if you look at the more recent crisis in Zimbabwe, and just look at the amount of humour that has come out; you get a better understanding of how Zimbabweans use humour, as a way of dealing with problematic situations. (44 years Male-Dr DM Braamfontein)

3.4 Female versus male perceptions

Having interviewed an equal number of men and women, there was no clear distinction in participants' perceptions of the songs based on their sex. However, there were notable perceptions mentioned that feed into the literature of HIV epidemiology. One female participant perceived HIV as a gendered disease and felt that Charles Charamba had misrepresented societal beliefs when he mentions that "some men were buried because of the woman's fault". She questioned if in the composition of his music, Charamba had taken into consideration the social norms around marriage and how a married woman would behave that leads to reduced opportunities of her getting infected first.

> Culturally, considering our culture in Zimbabwe we know very well that once a woman is married, definitely they try by all means to stick to their partner, they subordinate themselves to the partners , trust their partners, try to walk straight you know what I mean. Try to be faithful and so forth, because basically then I think by the time that song was sung I think it was the stereotype that was dominant by then in Zimbabwe, was men are the ones who bring HIV because they go out and look for prostitutes. And there is also this migration issue, where by men would work in urban areas, they leave their wives in rural areas; I don't know whether it was taken into account. Because the set up that where we are and even when we see them from his videos like a rural set I am not quite sure. So I thought it was the opposite, its men who bring HIV to… the women (42 years Female-JM Braamfontein)

Her opinion was that if the same song had been written by a female musician such as Shingisai Suluma or even Mrs Charamba, maybe that line could have changed to reflect what society knows.

On the other hand, one male participant felt that Makoni's song put all the blame for HIV transmission on women because of the phrase that he repeated throughout his song. Makoni used the word "pfambidzana" which he coined to give emphasis to what he wanted to say in his song and can be literally translated as he said to prostitute with one another. The word is coined from mixing "fambidzana" which means walking or travelling together but in reference to relationships could mean that there is an affair going on and most unapproved and "pfambi" meaning a prostitute. The use of this phrase is therefore perceived as blaming women for the spread of HIV.

> He blames them, not only just people that are HIV positive, but especially women, some of the words that he used are gendered. Some of the words especially, where he says prostitutes, whatever, in Zimbabwean context, to say a prostitute you are referring to woman…yes, (laughter). There is an element of gender as well that he apportions blame to the women, that women are prostitutes, that they prostituted a long time ago, and so on and so on. Here it is as if the male image that he is... sometimes he displays it, but at other times he doesn't, he apportions most of the blame to women especially. (38 years Male-CC Braamfontein)

The same perception of using the word that has explicit reference to prostitution meant that the active party was a woman according to one of the female participants. This she said was

based on what she heard as a child growing up, although currently the benefits of the trade were not the same for the women.

> Like for instance when he says back…, those who had good times together did that a long time ago, maybe there were financial benefits; it could be a thing… I have, I have always looked at this situation where I know of some prostitutes back in the day in Harare you would be told mother of so and so who stays over there built her house from her proceeds of her "ventures" in bars you know. But then you look at it now, women who are doing prostitution, on what really are they doing. Because for instance now if you are comparing the situation even in Harare, the dollar doesn't have that value then of being able to build a house, sending children to school and all that. (28 years Female-LG Braamfontein)

Although another male participant also picked on the idea of prostitute and that being in reference to a woman, he however felt that Makoni actually blamed men for the spread of HIV because of the images that he used together with the phrases attached to them. The image of the snake which can bite and contains poison was perceived to be in reference to men with the penis being likened to a snake and semen being likened to the poison which carries the virus.

> But there is the power of the image of the snake, the snake as, the symbol of the source the disease, of the poison and then talk about kissing the snake and taking the disease and so on. But I think he also plays around, with this as an image which you can look at the gendered aspect of the disease. When you look at the snake as a phallic symbol, from that point where you are talking about the snake spits; so does the penis. So you have that image of the source of the diseases. So, it could be sort of an advertent warning to say that men are the source of the disease. If you stretch it, that way, but it is interesting because the typical discussion about HIV, the source of HIV, is the prostitute, and the prostitute is a woman...right. But now he is talking about this snake, and this snake can be easily associated with man (44 years Male-Dr DM Braamfontein)

CHAPTER FOUR: DISCUSSION

The aim of this research was to find out how audiences in the diaspora perceived the portrayal of PLHIV in two songs from Zimbabwe. The researcher recruited participants to the study from Zimbabweans who had lived in South Africa for at least six months as well as two popular musicians. The research envisaged contributing to the body of knowledge on communication channels and knowledge of reception of socially relevant messaging that could carry health messaging especially around sensitive topics that often invite stigma and discrimination such as HIV and AIDS.

4.1 Is there stigma in the songs?

My assumption at the beginning was that music could potentially play a role in delivering health messages if it is relevant and addresses the needs of the targeted population; otherwise it runs the risk of creating unintended consequences such as stigma. How the audience perceives the music has a bearing in terms of how they will react to the song and therefore determine if music is an effective channel of communication or not. In discussing the portrayal of PLHIV within these two songs, it was not conclusive in the research whether participants perceived these as stigmatising or not.

The context of participants influenced much of how they perceived the portrayal of PLHIV in the song. Participants felt there was need to consider the time and context of the disease when the songs were released. The context justified the musicians' choice of images, especially in Steve Makoni's song. In the earlier of HIV in Zimbabwe, participants felt it was necessary for the musician to be blunt and use fear messaging through the uses of scary images and detailed descriptions of PLHIV in order for the population to change their behaviour. However, in their present context, the depiction of PLHIV using images that instil fear were said to be stigmatizing. Depending on the participant perspective, the gendered aspect of HIV was assigned to one sex over the other through the use of either the choice if words in the song or the images and description of how infection occurred from one person to other. In that regard, there was no strong evidence of HIV being perceived as a gendered disease which would invite stigma. In their different perceptions, HIV was a disease that could be spread by both men and women. While choices of words used by the musicians were a reflection of the local narratives at the time of release of songs, in the current context they were perceived to have the potential of stigmatizing PLHIV. In regard to the above, it is

therefore imperative to engage in discussion with what is it that participants would consider in popular music such as Charamba and Makoni's songs that could ultimately create perceptions leading to stigma against PLHIV.

4.2 Edutainment or just popular music

When Charamba and Makoni composed their music, their intention was to send out a message to their listeners regarding HIV and AIDS based on their personal observations as part of the nation. They did this as artists, not on the behest of a development agency or with the support of communication specialists. Charamba's intention was to address stigma and discrimination against PLHIV and Makoni's intention was to create awareness about the effects of HIV, thereby encouraging prevention from contracting the virus. In general, the overt intentions of both musicians are in sync with the purpose of edutainment; creating awareness and sharing knowledge that could potentially lead to behaviour change (47). Since both Charamba and Makoni are not behaviour change specialists, it is highly unlikely for them to have been exposed to the Sabido principles of characters in edutainment. However, their style of communicating to audiences directly seems to be something that musicians employ to deliver messages. With the Ebola outbreak in West Africa, musician crafted songs to create awareness about the disease such as 'Africa Stop Ebola' (61) written and performed by a group of popular West African musicians including Salif Keita and 'Ebola in Town´ by Shadow (62) seemingly employing the same style like Charamba and Makoni in portraying characters in their narratives. The same can be argued for songs commissioned by development agencies working with behaviour change specialists such as UNICEF as reflected in their official UNICEF Ebola information song for Liberia (63). In relaying their messages, the three characters as espoused by Sabido are difficult to identify. However, what is clear in all the songs mentioned including Charamba and Makoni's songs is that the musicians take on roles of storytellers and as such are able to tell the devastation of the diseases and recommend action directly to the audiences. It can therefore be argued that in songs, unlike other edutainment, the audiences do not identify with the characters in the songs, but rather with the musicians as storytellers (64). Without portrayal of characters, the musicians narrate the ills that have caused the disease and the extent of damage caused by the disease. This could be in moral decay, such as when Makoni speaks of actions and behaviour that contribute to the spread of the virus, e.g. those 'who have lost respect for the dead and will propose and kiss each other in graveyards', the ones that will be having 'good times together' *(vakasasana)* and 'prostituting with one another' *(vakapfambidzana*).

As noted above, the role of the musician is different from that of a script writer for other forms of edutainment. Although not necessarily following the Sabido principles of characters in edutainment, both musicians use their roles as storytellers to talk directly to their audiences and enrol them as characters in their songs. Booth argues that unlike in a soap opera or radio drama series, the audience identifies with the musician as the storyteller and therefore feelings drawn from the audiences listening to a song are directed to the musician who takes on a role within the song (64). This seems to have a direct effect on how audiences respond to the songs and see themselves as characters within the song, although still as listeners (64). In different ways, both musicians include 'aside' comments which talk directly to the listeners as prompts for action. These aside statements are done in consistency with the music genre and the target audience they sing for. In Charamba's case, these take on the tone of a preacher, consistent with his gospel music, while Makoni takes on more of a comic role, something that he is well known to include in his music. In this regard, it would therefore appear that both Charamba and Makoni' characters and personalities as musicians would have an impact on how audiences perceive their music.

Despite the diversion of songs from the principles of edutainment in terms of creating three types of characters as ideal in edutainment programmes; through the musicians' role as storytellers, they managed to capture the audience attention to their messages as shown by the responses of the research participants. Listeners exposed to the songs might not have created a para-social relationship as espoused by Horton and Wohl (46), but were able to engage and relate with the story through storyteller; the musician in this case. Moyer-Guse´ contends that audiences get involved in edutainment through involvement with characters through identification and similarity (65). In identification, the audience takes on the role of the character emotionally and cognitively, while in similarity, the audience makes an assessment of their similarity with the character in physical attributes, demographic variables, beliefs, personality, or values (65). Research participants identified with the stories as described in the songs. Some narrated personal experiences of infected family members and their personal responses of not wanting to be associated with them once they knew their HIV status as sung by Charamba. Others could relate to Makoni's song through his description of someone in hospital infected with HIV as experiences they had observed. In essence, although literature talks about three types of characters in edutainment that would make it effective (47-49), it would seem like music as part of edutainment does not follow this principle, but still enables audiences to identify with the various parts of the stories in the songs.

Research is viewed as a cornerstone to designing good edutainment programmes such as the Soul City series (47). The Soul City Institute for Health and Development Communication, which is recognised widely in South Africa and beyond for creating effective edutainment programmes, spends a substantial amount of time carrying out formative research provides the basis for designing the edutainment series (47). As artists and popular musicians, both Charamba and Makoni did not carry out scientific research to inform the content of their songs, but relied on their observations of what was taking place within the population because of HIV and AIDS. However, both musicians felt their response as artists was to compose and release songs that would talk to people addressing what they perceived as the social problems created by the virus. They designed messages according to their understanding of what was the most important thing they needed to communicate while at the same time still maintaining their creativity as artists.

As local artists, writing about local issues could possibly make their messages more socially relevant and acceptable to the audience because of the local knowledge they possess as compared to songs composed by 'outsiders'. In the case of songs during the Ebola outbreak, Band Aid; a group of British and Irish popular artists who used the song 'Do They Know It's Christmas' to raise money for humanitarian needs in Africa in 1984, reworked the same song to raise money during the Ebola outbreak (66). Critics of this song, such as Adewunmi, have expressed feelings of the song being patronising, focusing on the West saving Africa and ignoring local success stories such as Nigeria's combating of spread of Ebola in their country (66). This feeling is in contrast to that evoked by the another Ebola song by a group of West African artists who used their local knowledge and tried to address issues based on what they had observed happening, such as the mistrust in doctors (61). While Band Aid seemed to have had good intentions in contributing to stopping the spread of Ebola, their song seemed to have unintended consequences based on their nationalities and lack of local knowledge. In regard of the above and in an effort to harness both local knowledge and engage in research to inform songs, the challenge raised is how SBCC practitioners can harness this potential in popular musicians so that their songs are good edutainment while maintaining their artistic form. While this might be possible to do with a few selected artists, there is a challenge presented in what needs to be done with other musicians who continue to release their songs with public health massages without any SBCC practitioner guidance and run the risk of creating more harm in the public health space. This is more so because audiences are not a

homogenous group and therefore how they listen and interpret meaning in songs is influenced by various things, such as context and experiences of individuals (50).

4.3 Audience media consumption

Music induction and perception could be influenced by the context in which the music is listened to the social and cultural context that the song is listened to (67). Therefore, in the context of the song, it is notable and is in concurrence with the above statement where perception of these two songs took a different meaning between listening to them in South Africa as opposed to Zimbabwe. Research participants identified geographical location as potential of external "noise" that weakened the meaning of the intended message. Participants noted that listening to the music in South Africa as opposed to listening to it in Zimbabwe made some of the messages irrelevant, as the economies of the two countries were different. Whereas in South Africa, people could easily access ARVs and nutritious food because it was affordable and accessible, this was different from the situation in Zimbabwe.

When a song is composed, such as the two songs in the research, it explores or expresses issues that are current and by virtue of the type of art become static (64). The time difference between composing a song and hearing the song can render the message less relevant. This is something that Charamba acknowledged about his song, although emphasizing that the 'Jesus message' in his songs remains the core and would still be relevant even in today's world. Through an anecdote of a knife bought especially for cutting the cake on a wedding day he explained his thoughts of the relevance of the song a decade after its release;

> We buy a knife specifically for a wedding, when we are preparing for a wedding; it is possible to buy a knife that will be used to cut the wedding cake. So what the knife was really bought for and its real memories are the wedding. Upon completion and upon expiry of this event of the wedding, the knife is still going to be useful at home. It will keep being relevant, but what we know is that it was bought specifically for a certain setting, though it remains instrumental in the future. I think that is how the song Mhinduro Iripo remains relevant. It was released specifically for a particular setting, but it doesn't lose its taste because that year has lapsed. No, it continues to be effective in people's lives. (Charamba)

It would seem that Charamba as a musician could be aware of the static nature of his song that once a song has established the issues that need to be addressed, not much can be changed within the same song to cater for future situations without breaching much of the original identity of the song (64). In response to this, Charamba has composed and released a follow up song "Mukondombera Imhandu" (HIV/AIDS is the enemy) as a way of showing progression in his response to the effects of the virus within the nation. Therefore, the two songs having been released about 10 years ago have remained with their message that was directed at that particular time although they continue being played by various people in different spaces. In this regard, the time element between the release of these two particular songs and the research undertaking proved to be external noise creating different perceptions among research participants. Participants noted that both Charamba and Makoni released these songs when ARVs were not easily accessible and affordable for the general population. A message by Charamba that gave hope to those who suddenly found themselves HIV positive was a necessity at the time just as some participants felt the fear message in Makoni's song was relevant to start conversation around HIV, a subject not spoken about during that period.

While the static nature of messages could be true of both songs, working with SBCC practitioners can help guide musicians to create songs that can evolve with passage of time as opposed to being static. This could be truer where core messages identified by musicians are based on something that exists in every lifetime such as the "Jesus message" in Charamba's song. As a musician, Charamba feels that his core message of Jesus as the answer still remains valid today as it was ten years ago when he released the song. His view is that PLHIV will still need the higher power to ensure they are protected from adverse side effects and this is a message that would still be carried in follow up songs. As research participants perceived the 'Jesus message' in Charamba's song, it could be argued that while this remains static, it is possible to keep it relevant even in the future when using his songs to address HIV related issues. Therefore, working together with SBCC practitioners who would help craft relevant health messages, it could be possible for musicians to create songs that could have lasting shelf life with reduced unintended consequences as part of edutainment

Since there is at least a ten year gap between the time the songs were released and data collection, some of the research participants were between the ages of 15 and 18 years at time of release of the songs. Change of context as individuals made younger female participants

perceive the song differently. At the time of release, with reference to Charamba's song in particular, they mentioned that they had listened to it as part of entertainment only and had not taken much cognisance of the lyrics and their meaning. This is not to say that music as a channel has not been used to target younger audiences, since music such as hip-hop has been used to target teenagers with messages promoting behaviour change in relation to HIV (33). As stated in the Shannon and Weaver model, context can serve to strengthen the effect of the message (50). The same participants who had earlier listened to the song as entertainment only, now as young adults with their families, lyrics in Charamba's song showed them how vulnerable to HIV infection their own children could be and created a sense of fear, resulting in urgency for them to ensure that their children are protected from the virus. While some participants felt that fear in messages such as one instilled by Makoni's song had a negative effect on listeners, in the case of Charamba's song, the fear among the young female participants seems to have resulted in a positive thought process to behaviour change.

4.4 Fear messaging

The early years of health communication on HIV and AIDS were dominated by fear messages with the hope that these will assist people to adopt and practise healthy and protective behaviours (51). Research participants noted how Makoni uses words and images in his song that instil fear around contracting HIV to the audiences. Makoni uses images of kissing venomous snakes with the resultant skin changing to pitch black like the night darkness symbolising the effect the virus has on someone. His description of the hair texture and the patient lying on a hospital bed not able to keep any food down no matter how small the quantity; all resemble characteristics of fear messaging akin to posters of very thin people or human skulls used in the early years of HIV communication, as reflected in research conducted in Tanzania (68). While Makoni set out to show the harsh reality of what HIV could do to an individual and hopefully influence their behaviour, perception by research participants was different. In the current context, where the reality of the HIV epidemic is different from 10 years ago because of availability of ARVs, the descriptions given by Makoni in his song seemed not to create the effect he intended resulting in possibility of adverse behaviour being taken up by listeners. This is similar to results of a study that showed an increase in HIV infection among the gay community despite continued use of fear messaging opposed to earlier decline and adoption of protective health behaviours when the fear messages were in sync with the community witnessing death of people they knew (69).

While research participants did not speak about possibility of risky behaviour such as unprotected sex, they mentioned other risk factors such as stigma against PLHIV caused by the fear messaging in Makoni's song. The message created stereotypical images of PLHIV that had become redundant and like findings from other research has shown, had the adverse effect of stigma and discrimination against PLHIV and children orphaned by AIDS (68).

Although research participants felt the messages in Makoni's song were stigmatizing, it does not mean that fear messaging does not totally work in health communication in general. Even though there has been no extensive research on what role music has played in the Ebola communication; there seems to have been the balance that was struck within the recent Ebola outbreak with the Ebola communication contributing to positive behaviour. Some analysts have noted that the Ebola music such as one done by Shadow could have created fear and stigma much like the earlier HIV prevention communication of no touching and kissing which in reality do not lead to the spread of both viruses (62). However, following the premise of the EPPM, some of the Ebola music, like the one commissioned by UNICEF (63) and another performed by a West African musicians (61), included efficacy messaging such as encouraging 'air hugs' and what to do when suspecting infection (70). There have been suggestions that in Uganda, fear messaging combined with efficacy messaging in songs and other messages such as those delivered by President Yoweri Museveni managed to bring about positive behaviour reducing HIV infections substantially (71). Popular musician Philly Lutaya used fear messages to educate his audiences using his own HIV status and his imminent death (71). Fear messaging has been credited to pragmatic reflection of the reality of the effect of HIV on the population and personal experiences (71). Arguments have been made that individuals take time to assess threat and efficacy in messages and once these reach a certain threshold can then individuals react to the messages (70). My opinion is that the assessment of reduced threat in the HIV messaging in Makoni's song over time could have led to fear control responses leading to stigma perceptions (70). The same erosion of effect on fear messaging was experienced in addressing men who have sex with men (69). One male participant agreed that the time when the song was released, fear messaging was important and it got the population talking about HIV whereas in the present day, the messages could reinforce stigma and discrimination.

4.5 Words or phrases.... HIV gendering

When audiences listen to music, they do not necessarily listen to every lyric that is contained in the song. Often they listen, hear and recognize phrases and lines within the song and create meaning of the new whole song based on these recognized elements (64). Phrases and lines that are repeated over and over in the song usually form the basis of meaning (64). In both songs, the two musicians had phrases that they repeated repeatedly throughout their songs that gave meaning of the songs among the different research participants.

Steve Makoni in his song takes a common word *'kufambidzana* (meaning walking together) and changes it to *'kupfambidzana'* (meaning prostituting with each other). '*Kupfambidzana*' is derived from the word *'pfambi'* (meaning prostitute). The word is combined with another word *'vakasasana'* (meaning they had a good time together). '*Vakapfambidzana*' and '*vakasasana'* are used in his song repeatedly as part of the chorus. Although the two words are prefixed with *'vaka'*, which is in plural meaning 'they', the use of *'pfambi'* invites blame towards females as carriers of HIV as mentioned by one male participant. This concurs with other research that in the Shona language, the use of the word *'pfambi'* or any other word denoting identification of sex work such a *'hure'* implies the actor to be female (72-75). Although both some of the male and female research participants concurred with the premise that the word made women carriers of the virus, therefore generating stigma against women living with HIV as perpetrators, this does not necessarily hold true. The fact that Makoni precedes with *'vaka'* which is in plural form, indicates that he is talking about at least more than one person within the relationship. This implies his inclusion of the man as an active player. The same is clarified by the musician speaking directly to the assertion that the use of the word '*Kupfambidzana*' is a doing word as opposed to a gendered construct.

> '*Kupfambidzana*', in its sense, it removes the fact of who is the prostitute because '*kupfambidzana*', or you hear someone saying "*murume wangu ari kuhura*" (my husband is prostituting), or "*mukadzi wangu ari kuhura*" (my wife is prostituting). It's the act now that is taking place between the two. It has nothing to do with gender, because it takes two to tango. (Makoni)

While the word '*pfambi*' which is akin to '*hure'* seems to imply female (72-75), the use of the symbol of a snake was perceived by one male participant to indicate a male actor and therefore implying man as the one spreading the virus. The snake was perceived as a phallic symbol for the penis which spits out venom in the form of semen just like the snake. The

women in this instance were perceived as the ones who mostly bore the burden of infection perpetrated by men. This perception was further strengthened by some female participants' views on gender roles in relation to married women and behaviour within the marital institution, which is in line with some of the existing literature (76).

Unlike Makoni, who seemed to follow Shona language etiquette, Charamba seemed to speak directly using words such as *'mukondombera'* (word used for both HIV and AIDS in Zimbabwe). Apart from naming the disease directly, Charamba also tries to show the different ways in which HIV transmission takes place, which is perceived by some female participants as gendering of the virus by his example of the woman infecting the man in a heterosexual relationship where women are viewed as perpetrators that spread the virus. This could be informed by arguments that relate to identification of the musician as the storyteller in the song (64). In this regard, it would be argued that Charamba's character and personality as a musician would have an impact on how audiences perceive his song (64). This could give reason to some female participants questioning if Charamba's wife or Shingisai Suluma (both female gospel artists) would have used the woman as the one who infects the husband in a heterosexual relationship.

Despite both musicians used words, phrases or symbols that could imply one particular sex over the other, it can be argued that their songs did not necessarily create HIV as a gendered disease where one sex can be clearly distinguished as a victim and the other a perpetrator. The victim / perpetrator is not always fixed as both sexes have the potential to infect the other as observed in serodiscordant couples (77). In Makoni's song, both sexes are implied as active participants in the spread of HIV through his use of *'vaka'* a plural prefix he places before he talks about the act of prostitution. While Charamba uses the example of a woman in a heterosexual relationship, his main aim in context of other examples given in that stanza was to show how infection happens rather than apportion blame on a particular individual.

While suggestions are made in the above, that language used could be inclined to a gendered epidemic; participants' responses were not divided according to gender identities. In instances, some of the male participants felt the musician implied men to be the ones spreading HIV while in other instances some male participants also felt the musician implied females were responsible for the spread. Some female participants inferred that it was only women who benefited from "kupfambidzana" back then as sung by Makoni, other female participants expressed that this would not be speaking to the traditional married woman as

societal expectations allow only men to have extra marital affairs. As a researcher I had an assumption that participants' responses on the gendered aspect of the virus would be clearly along the binary lines of male and females, but this is not what the research showed.

Makoni, in his song, uses very strong images to portray the impact that HIV has on the individual once infected. Words and phrases such as *'ndo, midnight'* (pitch black like the midnight); *'vhudzi rongomhoresa vatorwa'* (hair that has thinned out and easily blown around by the wind) as well as the description of the sick patient that fails to hold down half a banana were said to be stigmatising PLHIV. The words and phrases chosen by Makoni, while they assist him in portraying the devastating nature of a killer disease among the nation, created meaning among research participants of a musician who lampoons PLHIV. However, Shona language critics disagree that such words and phrases necessarily stigmatize PLHIV. They argue that matters considered as taboo such as death and matters relating to sex are not spoken about directly (72). Since HIV is transmitted mostly through heterosexual intercourse in Zimbabwe, it then follows to be a taboo subject. Rather metaphors, colloquial expressions, euphemisms and in some instances slang is used to communicate the source, physical symptoms and the impact of while still observing the language culture etiquette (72). Communication is usually done in jocular talk derived from traditional styles such as those known as 'bembera', 'chihwerure' (72). 'Chisahwira', which some participants perceive Makoni to employ, fall into the same traditional communication style. They argue that the motivation is often to influence behaviour in a non-confrontational, humorous, but polite and respectful way as expected of the language culture etiquette (72). At the time of releasing the song, with limited availability of ARVs, changing behaviour in order to prevent further spread of HIV was Makoni's priority and I would assume he tried to employ the traditional style of communicating the gravity of the effect of HIV in composing his song as a Shona speaking person who would possibly practise 'Chisahwira'.

Suggestions have been made of the effectiveness of music in social change because of its ability to be presented using different styles, to address diverse topical issues (78). I would argue however, that from this research, while the musicians' intentions were well meaning, research participants perceived some of the lyrics to be stigmatising PLHIV. Words repeatedly used by Makoni in his song created perceptions of people whose moral values and standards were questionable and therefore deserving of HIV infection. Perceptions of HIV as a gendered disease were created through words and imagery. However, the gendered aspect was not consistent since words created perceptions of HIV being female driven but images

used made males responsible for the spread HIV. On the other hand, Charamba was perceived as confirming the gendered aspect of HIV by his example of heterosexual transmission with the woman being the one infecting the husband. Although recognised as the Shona language etiquette, indirect talk and style used by Steve Makoni was perceived by research participants to create images that stereotype PLHIV which was no longer relevant in the present day.

4.6 Limitations

Both Makoni and Charamba's songs were released over 10 years ago when management of HIV and AIDS had not progressed to the level where it is today. Therefore, limitations arise when evaluating songs that were released more than a decade ago when the medical context of HIV was very different from the current context. Music, on the other hand, does not evolve to suit the context but stays the same once it has been released into the market. Therefore, while a particular song could have been relevant ten years back, an audience perception study in the current context presents limitations in terms of audiences contextualising the messages in the lyrics of the songs. By including participants up to the age of 45 years meant there could be a potential of these participants basing their perceptions on the time the songs were actually released.

Edutainment programmes are often guided by certain principles in design and implementation. Charamba and Makoni's songs are part of edutainment as both musicians stated that they were seeking their audiences to change their behaviour through the messages they embedded in them. Since the two musicians are not SBCC practitioners, an assessment of their songs based on the Sabido edutainment principles could in the future drive away popular artists as they are held accountable for principles which they are not preview to. In the same instance, there is need to set minimum standards which could be used in future when using songs through engagement of popular artists by SBCC programmers.

Both the researcher and research assistant as Zimbabwean nationals conducting the interviews could have introduced their own perceptions and prejudices into the interviews. This could have led to some participants responding to some questions in a way they felt would be acceptable to the researcher and research assistant.

CHAPTER FIVE: CONCLUSION AND RECOMMENDATIONS

5.1 Conclusion

Music as a form of edutainment can possess many edutainment qualities, but some key distinctions were noted in this study. Although Charles Charamba and Steve Makoni composed songs with the aim of influencing behaviour among their listeners, rendering their songs a part of edutainment; as popular artists and not SBCC programmers, they were not aware of the principles of designing an edutainment programme as set out by Sabido and therefore did not always follow these principles. Unlike other forms of edutainment that rely on characters to model required behaviour (49), the musicians took on that role as storytellers within the songs (64). Despite the difference, this did not deter listeners from perceiving the educational message within the songs. What remains debatable is whether the listeners perceived the message as intended by the musician and did they adopt the desired behaviour as encouraged in the song.

Edutainment may offer a more effective way to influence attitudes and behaviour than traditional persuasive messages by arousing less resistance through the messages being contained within a narrative (65). Edutainment can be presented in different forms ranging from TV soap operas, radio drama series, stage theatre performances, as well as music. TV edutainment programs such as the Soul City series in South Africa have shown to impact on behaviour among audiences (79). Edutainment was first introduced by Miguel Sabido and this followed certain laid down principles that would enhance the programme's effectiveness in achieving behaviour change. Character construction and the role that characters take in edutainment are central to the idea of para-social relationships and their impact on individual adopting the desired behaviour as espoused in the programme (48). Formative research and putting up a plan for audience feedback are also important components in the design of edutainment (48).

When musicians write and compose music, the song takes on a social commentary role of that particular time and space when it is composed rendering it static in form (64). However, a song once composed and released to the market continues to be played irrespective of the changes that occur within the society or across settings. With the passage of time or within a different social context and setting, a song that could have been perceived in one way and had

a positive impact on listeners, could create different perceptions to the same or different listeners depending on the time and context of listening to the song (50). Both Charamba and Makoni's song having been released when ARVs were not readily available in Zimbabwe were perceived by some participants as relevant then, but have taken a different meaning for people listening to the same songs today. With the availability of ARVs, participants perceive that hope is available in medicine for someone to live a healthy longer life as compared to the time when hope could have only been in divine intervention as HIV infection meant death. The same goes for Makoni's song. People are no longer dying in the numbers as to make death child's play as portrayed in his song because of ARVs. Therefore, although these two songs could have made people change their behaviour when they were first released; a question that is in itself debatable since no scientific research was conducted then, there is no clarity if the two can achieve the same effect in the present day.

Words and phrases play an important role in giving meaning to a song. Whereas in a TV or radio drama series that has other effects and at times visual cues such as in TV that adds to the creativity of edutainment, music relies on the use of words for the same effect (64). These words are delivered in different ways such as jokes, proverbs, euphemisms, colloquial language, and images created by use of words. While the musician has one particular intention when he decides how to put his or her words together, the interpretation of the result is subject to each individual listener's perspective. Additionally, how the words and what words are used by the musicians is influenced by the language and the cultural ethics around using words relating to the subject matter (72). Both Charamba and Makoni are Shona speaking musicians and therefore are assumed to observe the Shona language cultural ethics and etiquette while maintaining their creativity. In addition to the language, Charamba being a pastor in the Pentecostal churches would be expected by gospel listeners to use certain words different from Makoni who sings secular music. Although they both sing on the same subject matter of HIV and AIDS, their messages are bound to be perceived differently by different listeners because each one seeks to observe both the language cultural ethics and their social context in terms of target audience.

Listeners do not use the whole song to make meaning of a song and the intentions of the musician. Key messages are perceived through identifying words and phrases and often the ones that are repeated mostly in the song or those that resonate with everyday experiences. Charamba's song was perceived to be giving hope through God / Jesus to those infected and

affected by HIV based on the chorus in the song that contained the words *'nyarara, nyarara kuchema'* (be quiet, be quiet don't cry) combined with *'mhinduro iripo, Mhinduro ndiJesu we Nazaretha'* (there is an answer, the answer is Jesus of Nazareth) repeated over and over again throughout the song. However, his effort to single out HIV stigma against PLHIV as a main concern and pushing people to change behaviour was not easily perceived. Although Makoni has two words that he uses repeatedly, his combination of the two words *'vakasasana'* and *'vakapfambidzana'* with other phrases and images that resonated with everyday experiences when the song was composed gave the meaning that created the negative perceptions of portrayal of PLHIV in his song.

5.2 Recommendations

Songs are a part of everyday life and mobilizing them as an edutainment channel within public health could prove to be beneficial to many SBCC interventions. While this research provides insights that could contribute to the growth of understanding among SBCC planners on using songs as edutainment, there remains a need for further research in this domain. With the recent Ebola outbreak in some West African countries, there is scope for evidence based research using theory on how these songs contributed to the control of Ebola outbreak and how unintended consequences such as stigmatizing those who had been infected by Ebola was addressed or reinforced within the songs. This could provide insight to further use of songs as edutainment in any similar public health campaign, without the time lag limitations of the current study.

Other songs addressing other public health issues such as child vaccination and maternal health have been released by Sulumani Chimbetu and Charles Charamba respectively. While the two issues addressed by these musicians are public health concerns, their epidemiological progression tends to be different from Ebola and HIV and carry less potential of stigmatization. It remains important to understand if the music influences listeners to adopt the behaviours being prompted in the songs as well as understanding what components within the song actually influence listeners positively. Further research to understand effectiveness of music as an edutainment channel in terms of public health issues is also recommended.

It is important for SBCC programmers to further think of how musicians are engaged in any SBCC programme as is happening in some instances where popular musicians such as Oliver Mtukudzi are engaged to become ambassadors. Apart from them bringing in their

personalities, values and attitudes, they still remain popular artists and that is a huge part of their career. In the public sphere, they are recognised more for the music they churn out to the audiences. Therefore it is recommended that SBCC programmers need to think carefully in terms of how balance can be created by bringing popular artists into a space where they might be judged based on academic principles which they might not be preview too. Apart from contracted musicians, SBCC practitioners need to consider how they will use music released by popular artists at their own initiative.

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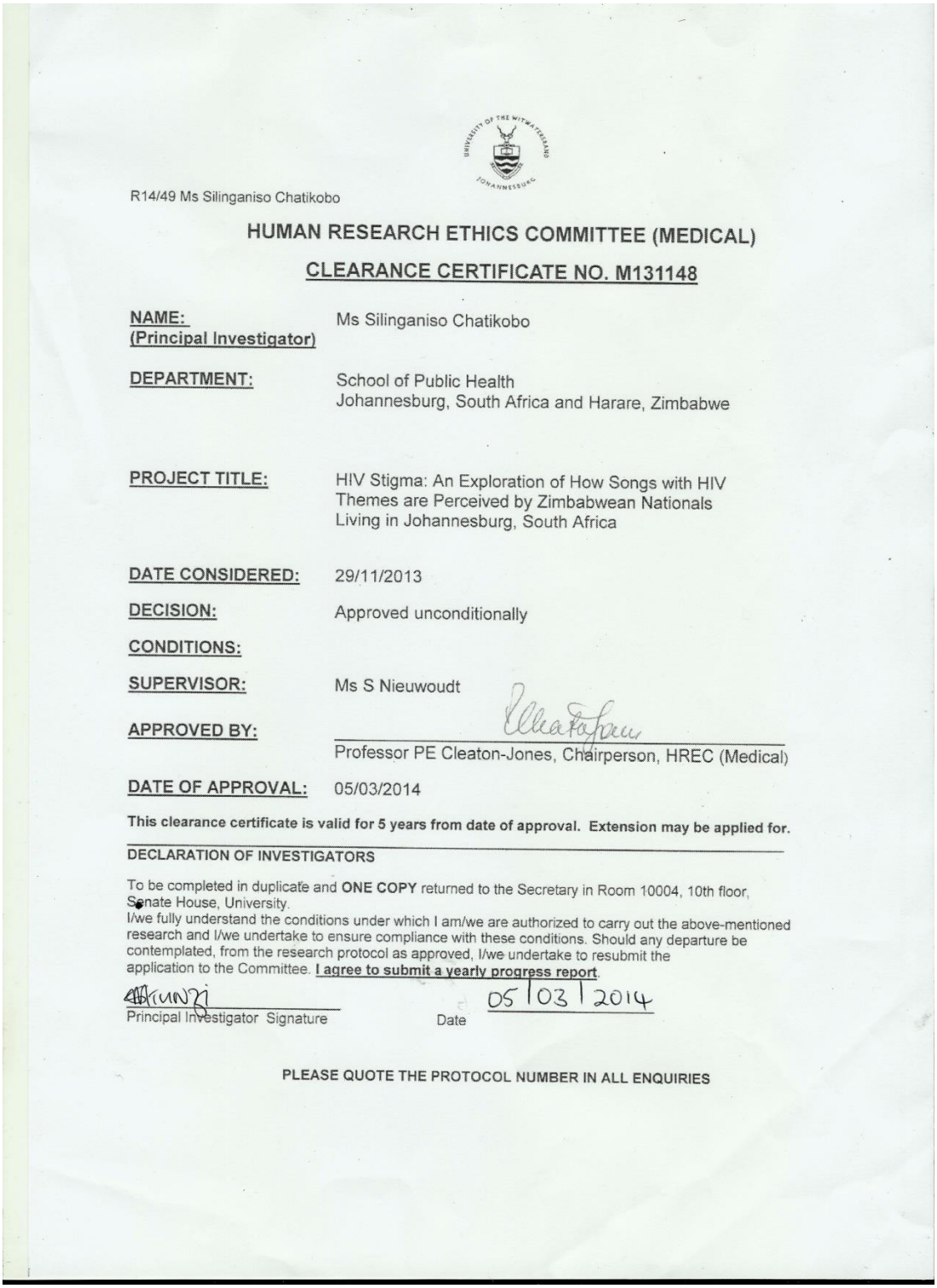
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Appendices

Annex 1 HREC certificate



R14/49 Ms Silinganiso Chatikobo

HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)

CLEARANCE CERTIFICATE NO. M131148

NAME: (Principal Investigator)	Ms Silinganiso Chatikobo
DEPARTMENT:	School of Public Health Johannesburg, South Africa and Harare, Zimbabwe
PROJECT TITLE:	HIV Stigma: An Exploration of How Songs with HIV Themes are Perceived by Zimbabwean Nationals Living in Johannesburg, South Africa
DATE CONSIDERED:	29/11/2013
DECISION:	Approved unconditionally
CONDITIONS:	
SUPERVISOR:	Ms S Nieuwoudt
APPROVED BY:	Professor PE Cleaton-Jones, Chairperson, HREC (Medical)
DATE OF APPROVAL:	05/03/2014

This clearance certificate is valid for 5 years from date of approval. Extension may be applied for.

DECLARATION OF INVESTIGATORS

To be completed in duplicate and **ONE COPY** returned to the Secretary in Room 10004, 10th floor, Senate House, University.

I/we fully understand the conditions under which I am/we are authorized to carry out the above-mentioned research and I/we undertake to ensure compliance with these conditions. Should any departure be contemplated, from the research protocol as approved, I/we undertake to resubmit the application to the Committee. **I agree to submit a yearly progress report.**

Principal Investigator Signature

Date 05/03/2014

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES

Annex 2 Vakasasana Translation

Vakasasana ivava	They had a good time together
Vakasasana karekare, nguva yaivepo	They had a good time together a long time ago, there was time for it
Vakapfambidzana	They prostituted with one another
Vakapfambidzana karekare	They prostituted with one another long ago
Zvichida zvaibhadhara,	Maybe it was worthwhile
Zvichida zvaive nemari	Maybe there was a financial gain
Uye zvairapika varume	And it could be treated
Kare waiti utano hukakuwomera –ahh-	Back then if your health failed you
Kwati kwati nachiremba, jekiseni dyu	Stuck closely with a doctor and got an injection
Pasina mazuva mana wadzokera kumabiko	Before four days you will be back partying
Rufu haruchina chiremera	Death is a no longer an issue....
...Ukaona tuchembere tuya tunotengesa michero	....If you see the old women selling fruits
Dzingava mango, madomasi, mabanana,	Be it mangoes, tomatoes or bananas
Zvinhu zviya zvinoda kudyiwa uchiri mutano	You need to eat these when you are still healthy
Zvokuzvionera kuchipatara, kana muviri wacho unenge wavakutovhunza kuti chii ichi	When you eat these in hospital even your body will be questioning what it is
Ndopanozonzi “aswere sei murwere”?	That is when people ask, “how is the patient”
“Hayiwa aswere zvake”	“The patient is feeling better”
“Wadya here”?	“Did they eat”?
“Hongu, half yebanana, asi azorutsa”	“Yes half a banana, but later vomited”
Aarrhhhaa!!!!!....	Aarrhhhaa!!!!!....
.....Mazuva ano varume, kuzezana nerovambira	Nowadays it’s teasing each other with a mamba
Mazuva ano varume, chihwande hwande	Nowadays it’s playing hide and seek with

namubobo Kutsvodana nemhakure Ukangorumwa, ganda ndondondo, tsvaa, midnight Vhudzi rongomhoresa vatorwa, pasina mhepo 'hello, hello' Aarrhhhaa!!!!!! Ndiwe? Heh mawhani.... ....nguva yaivepo	(another poisonous snake) It is kissing a cobra Once bitten, your skin goes black like midnight Your hair greeting strangers in the absence of any wind 'hello, hello' Aarrhhhaa!!!!!! Is that you? Heh unexplainable.... ....there was time for it

Annex 3 Mhinduro Iripo Translation

Mhinduro Iripo mukoma	There is answer brother
Mhinduro ndiJesu weNazaretha	The answer is Jesus of Nazareth
Mhinduro yamaitsvaka yakawanikwa	The answer you were searching for was found
Mhinduro ndiJesu weNazaretha...	The answer is Jesus of Nazareth
..Nyarara kuchema mukoma kani	Please stop the weeping brother
Nyarara kuchema, ingazvatoitika...	Stop weeping, it has happened...
...inga rufu rwatowanikwa...	...death has occurred...
...Kune mudikani hama yedu atisiya uyo	...a beloved a relative has left us
Zvotirwadza zvotibaya moyo asi ngatirongei ramangwana...	It is painful and pierces the heart but lets us plan for tomorrow
..Vanamai, vanababa kudzimba uko, tariraika zvaite nyika,ko inga yaparara	Mothers and fathers at home, see where the world is heading, it's been destroyed
Vakomana vasikana kumigwagwa uko,	Boys and girls out on the streets
kumafaro uko chionaika kwaenda nyika	In the leisure places see where the world is heading
Muvambi nemukwanisi wekutenda kwedu	The beginning and end of our faith
Jehovha, kana tikasamudaidza, yaparara nyika..	Jehovha if we don't call him the world will be destroyed
....Mhinduro iripo....	There is an answer
Shamhu haipedze musikanzwa wemwana,	A whip will not end a child's mischief
anogona ndiJesu weNazaretha	But Jesus of Nazareth can
Nyangwe jere haripedze misikanzwa wababa,	Even jail will not end a father's mischief
chinogona iropa repamuchinjikwa...	But the blood from the cross will
... Ndakumuona mumwe waisekwa,	I saw him, they were laughing at him
Wairwara nemukondombera,	He was sick with HIV/AIDS
Musadaro veduwe	Please do not do that
Ndakaiona hama akavata panhovo	I saw a relative lying on a reed mat
waitambudzwa nehama	Relatives were ill treating him
Musadaro veduwe	Please do not do that
Mufunge kunavanamai vatakaviga pasi apa	Imagine there are mother buried down here
Vasina mhosva yavakatadza,	Who did nothing wrong

mhosva ndeyachiremba	It was the doctor's fault
Kuna vanababa vakatendeka vakabatwa nedenda irori	There are some faithful man who are infected with the virus
Mhosva ndeyamai	It is the wife's fault
Uye kune vana vamwe vakadai sevacheche,	There are also some babies like these
Vasina zvavanoziva amen allellua	Who know nothing amen allellua
Uye kune vana vamwe vakadai sevacheche	We also have babies like these
Vasina zvavakaita kovakaiteiko	Who have never done a thing
....Nyangwe vataitsiura ivavo vachiramba,	Even those we admonished
hama ngativayamurei, inga mweya waMwari	Friends lets us help them, they are God's spirit
Pavanoda kudya nokugeza nokupfeka,	In need of food, a bath or clothing
vaitireiwo zvakanaka inga mweya waMwari	Do good for them, they are God's spirit
Mhinduro iripo.....	There is an answer....

Annex 4 In depth Interview guide –Participants

A. IDI Preparation Checklist

The following preparations should be completed before each IDI:

- ☐ 1 extra copy of consent forms
- ☐ 2 copies of audio-recording consent forms
- ☐ Digital audio-recording equipment (tested for working condition)
- ☐ Backup batteries for audio recorder(s)
- ☐ Audio player
- ☐ Recordings of the two songs to be used
- ☐ Notebooks for interviewer
- ☐ Private room

Name and Signature of Study Staff: _____ *Date:* _____

B. Checklist for Facilitator

The IDI shall only progress once the following are confirmed:

- ☐ Interviewee confirms she is age 25-45
- ☐ Study ***consent form has been signed*** and ***copy given to interviewee***
- ☐ Interviewee has ***signed audio-recording consent form***

Name and Signature of Study Staff: _____ *Date:* _____

C. Introduction Exercise

Note: Start recording

Once the consent process is complete, to build rapport, have the interviewee introduce a little bit about herself/himself using her/his pseudonym which will be used throughout the interview, age, and types of music he/ she likes to listen to.

Note: Check that recorder is working before proceeding

D. IDI guide

Note: Start recording

1. Could you tell me in summary the lyrics of Charles' Charamba's song "Mhinduro Iripo".
2. What are your thoughts on the words of this song?
3. Please explain to me how you feel when you listen to this song.
4. How do you relate to PLHIV in the song?
5. How do you think PLHIV are portrayed in the song?
6. Are there any images within the song that catch your attention and how?
7. Please may you share your experiences listening to the song in Zimbabwe and in South Africa.

   Facilitator plays Charamba's song
8. Having listened to the song now, what are your thoughts on the lyrics contained in the song?
9. Could you tell me in summary the lyrics of Steve Makoni's song "Vakasasana".
10. What are your thoughts on the words of this song?
11. Please explain to me how you feel when you listen to this song.
12. How do you relate to PLHIV in the song?
13. How do you think PLHIV are portrayed in the song?
14. Are there any images within the song that catch your attention and how?
15. Please may you share your experiences listening to the song in Zimbabwe and in South Africa.

    Facilitator plays Makoni's song
16. Having listened to the song now, what are your thoughts on the lyrics contained in the song?

Annex 5 In depth interview guide– Charles Charamba

A. IDI Preparation Checklist

The following preparations should be completed before each IDI:

- ☐ 1 extra copy of consent forms
- ☐ 2 copies of audio-recording consent forms
- ☐ Digital audio-recording equipment (tested for working condition)
- ☐ Backup batteries for audio recorder(s)
- ☐ Notebooks for interviewer
- ☐ Private room

Name and Signature of Study Staff: _____ *Date:* _____

B. Checklist for Facilitator

The IDI shall only progress once the following are confirmed:

- ☐ Study ***consent form has been signed*** and ***copy given to interviewee***
- ☐ Interviewee has ***signed audio-recording consent form***

Name and Signature of Study Staff: _____ *Date:* _____

C. Introduction Exercise

Note: Start recording

Once the consent process is complete, to build rapport, have the interviewee introduce a little bit about himself.

Note: Check that recorder is working before proceeding

D. IDI guide

Note: Start recording

1. Could you tell me in summary the lyrics of "Mhinduro Iripo".
2. What is the intended message embedded within the song?
3. Please explain to me the feelings you anticipate when people listen to this song.
4. How would you like the audience to relate to PLHIV through the song?
5. Are there any images within the song that you would want to draw attention to and how?
6. Is there anything else that you would like to tell me in relation to this song in particular?

Annex 6 In depth interview guide Steve Makoni

A. IDI Preparation Checklist

The following preparations should be completed before each IDI:

- ☐ 1 extra copy of consent forms
- ☐ 2 copies of audio-recording consent forms
- ☐ Digital audio-recording equipment (tested for working condition)
- ☐ Backup batteries for audio recorder(s)
- ☐ Notebooks for interviewer
- ☐ Private room

Name and Signature of Study Staff: _____ *Date:* _____

B. Checklist for Facilitator

The IDI shall only progress once the following are confirmed:

- ☐ Study ***consent form has been signed*** and ***copy given to interviewee***
- ☐ Interviewee has ***signed audio-recording consent form***

Name and Signature of Study Staff: _____ *Date:* _____

C. Introduction Exercise

Note: Start recording

Once the consent process is complete, to build rapport, have the interviewee introduce a little bit about himself.

Note: Check that recorder is working before proceeding

D. IDI guide

Note: Start recording

1. Could you tell me in summary the lyrics of "Vakasasana".
2. What is the intended message embedded within the song?
3. Please explain to me the feelings you anticipate when people listen to this song.
4. How would you like the audience to relate to PLHIV through the song?
5. Are there any images within the song that you would want to draw attention to and how?
6. Is there anything else that you would like to tell me in relation to this song in particular?

Annex 7 Participant Information Leaflet and Informed Consent

Audience Perception Study

1. Introduction

Good Day, my name is Silinganiso Chatikobo/ [name of Assistant researcher]. I would like to invite you to consider volunteering to participate in the above mentioned research study, which is being done in partial fulfilment of my/Silinganiso Chatikobo's academic studies at the University Of Witwatersrand School Of Public Health in Johannesburg.

Before volunteering to participate in this study, it is important that you read and understand the following explanation of the purpose of the study, the study procedures, benefits, risks, and your right to withdraw from the study at any time.

This information leaflet is to help you decide if you would like to volunteer. You should fully understand what is involved before you agree to take part in this study. If you have any questions, do not hesitate to ask me.

This consent form may contain words that you do not understand. Please ask me or other study staff to explain any words or information that you do not clearly understand. You may take home an unsigned copy of this consent form to think about or discuss with family or friends before making your decision.

If you agree to take part in this study, we will ask you to sign this form to show that you want to take part. We will give you a copy of this form to keep.

It is important that you understand the following:

- Taking part in this study is completely voluntary.
- You may refuse to take part in this study or leave it at any time.
- Your decision will not affect your ability to take part in other research studies.

2. Purpose of the Study

I am inviting you to take part in a research study. This research study is about how your perception of Charles Charamba's song Mhinduro Iripo and Steve Makoni's song Vakasasana. I am inviting you to take part in this study because you were referred to me as Zimbabwean national living in South Africa.

This study involves participating in an interview. In this study, I would like to learn more about your perception, feelings, and attitudes towards the song in relation to PLHIV. I am mainly interested in this information because I want to learn how music can be used to communicate health messages. I will be asking you questions about your experiences listening to the music while in Zimbabwe and now when you are living in South Africa.

3. Length of the Study and Number of Participants

This study is being conducted with 10 males and 10 females in the Gauteng province. Both musicians, who are in Zimbabwe, also are part of the study.

The total amount of time required for your participation in this study is no more than 90 minutes. The interview will take place in a private room and is a one-time event. No other visits are required.

4. Study Procedures

The researcher will be conducting the interviews. With your permission I would like to record the interview. The recording will be used as a referral source of information when I conduct the data analysis. The questions asked will be used to help me:

- Learn how you perceive HIV related messaging in songs
- Learn what emotions and attitudes the songs can evoke
- Understand how the songs influence your relationship towards PLHIV
- Understand how you respond to the same songs in different settings

While I hope that you will participate actively throughout the interview, you may skip any questions you don't want to answer.

5. Will any of these Study Procedures Result in Discomfort of Inconvenience?

While the researcher is trained, the interview may raise issues that are personal and of a sensitive nature that may make you feel uncomfortable. There is no requirement to share your migration status or HIV status during the interview. You may skip any questions that you don't want to answer or stop the interview at any point. What is said during the

interview will remain confidential and your name or anything that may lead to your identification will not be used.

6. Benefits

You will not benefit directly from taking part in this study. Information gathered from this study may help health communication workers explore ways of using music in the design of health messages.

7. Costs and Reimbursement

There is no cost to you for being part of the study.

8. Right as a Participant in this Study to refuse to take part

Taking part in the study is your choice. If you decide to take part, you can always change your mind. You can stop the interview at any time.

9. Ethical Approval

This study protocol has been submitted to the University of the Witwatersrand, Human Research Ethics Committee (HREC) and written approval has been granted by that committee.

10. Confidentiality

The researcher will make every effort to ensure that your comments are confidential in any reporting on the discussion, as follows:

- I will use the pseudonym as agreed at the beginning of the interview instead of your name for any quotes transcribed directly from an audio recording.
- Audio recordings done during the interviews and transcripts will be stored securely for a minimum of two years after publication or six years in the absence of a publication after which these will be destroyed.
- All information obtained during the course of this study, including personal data and research data will be kept strictly confidential. Data that may be reported in scientific journals will not include any information that identifies you as a participant in this study.

- This information will be reviewed by authorised representatives of the University.
- The information might also be inspected by the University of the Witwatersrand HREC.

11. Sources of Additional Information

If you have any questions about this study, you may contact Ms. Silinganiso Chatikobo at the University of the Witwatersrand School of Public Health on (Cell: 084 483 0111). If you have any questions about your rights as a participant, you may contact Prof Peter Cleaton-Jones at the University of the Witwatersrand, Human Research Ethics Committee: Secretariat (011 717 1234)

INFORMED CONSENT INTERVIEW:

- I hereby confirm that I have been informed by the researcher (Silinganiso Chatikobo) about the nature, conduct, benefits and risks of the Audience Perception Study.
- I have also received, read and understood the above written information (Participant Information Leaflet and Informed Consent) regarding the study.
- I am aware that the results of the study, including any personal details will be anonymously processed into a study report.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.

PARTICIPANT:

Printed Name Signature / Mark Date and Time

I, _____ herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

INTERVIEWER:

Printed Name Signature Date and Time

Annex 8 Audio recording consent form -participant

The reason for audio-recording the interview has been explained to me.

I am aware that I may choose whether to participate or not to participate in the interview and to be recorded.

I am aware that I may stop the interview at any point.

The researcher will take measures to make sure that the recording is kept confidential and safe.

I understand that the audio recordings of the interview will be stored securely for a minimum of two years after publication or six years in the absence of a publication after which these will be destroyed.

I consent to having the interview audio recorded.

PARTICIPANT:

Printed Name Signature / Mark Date and Time

INTERVIEWER:

Printed Name Signature Date and Time

Annex 9 Musicians Information Leaflet and Informed Consent

Audience Perception Study

1. Introduction

Good Day, my name is Silinganiso Chatikobo. I am a student at the University of Witwatersrand School of Public Health) in Johannesburg. I would like to invite you to participate in the above mentioned research study. This study is in part fulfilment of my academic studies. I have selected one of your songs as a case study in my interview.

Before participating in this study, it is important that you read and understand the following explanation of the purpose of the study, the study procedures, benefits, risks, and your right to withdraw from the study at any time.If you have any questions, do not hesitate to ask me.

This consent form may contain words that you do not understand. Please ask me or other study staff to explain any words or information that you do not clearly understand.

If you agree to take part in this study, I will ask you to sign this form to show that you want to take part. I will give you a copy of this form to keep.

It is important that you understand the following:

- Taking part in this study is completely voluntary.
- You may refuse to take part in the interview or stop it at any time.

2. Purpose of the Study

I am inviting you to take part in a research study. This research study is about how you designed your song and what you intended the audiences to get out of the messages in the song. I am inviting you to take part in this study because I purposely selected your song as a case study.

This study involves participating in an interview. In this study, I would like to learn more about what you intended the audiences to perceive, feel, and act towards PLHIV in relation to the song. I am mainly interested in this information because I want to learn how music can be used to communicate health messages.

3. Length of the Study and Number of Participants

This study is being conducted in the Gauteng province among 20 Zimbabwean nationals.

The total amount of time required for your participation in this study is no more than 60 minutes. The interview will take place in a private room and is a one-time event. No other visits are required.

4. Study Procedures

The researcher will be conducting the interview. With your permission I would like to record the interview. The recording will be used as a referral source of information when I conduct the data analysis. The questions asked will be used to help me:

- Learn what messages you intended the audience to perceive in the song
- Learn what emotions and attitudes you want the songs to evoke
- Understand how the audience should relate to PLHIV through the song

While I hope that you will participate actively throughout the interview, you may skip any questions you don't want to answer.

5. Will any of these Study Procedures Result in Discomfort of Inconvenience?

While the researcher is trained, the interview may raise issues that are personal and of a sensitive nature that may make you feel uncomfortable. You may skip any questions that you don't want to answer or stop the interview at any point. The researcher will ensure that what you say has been captured accurately through crossing checking the transcript with you.

6. Benefits

Information gathered from this study may help practitioners of SBCC explore ways of using music in the design of health messages. Same information will be shared with you and this might help you understand the audience reaction to your song and how you can use the results in future designing of any new songs with health messages.

7. Costs and Reimbursement

There is no cost to you for being part of the study.

8. Right as a Participant in this Study to refuse to take part

Taking part in the study is your choice. If you decide to take part, you can always change your mind. You can stop taking part at any time.

9. Ethical Approval

This study protocol has been submitted to the University of the Witwatersrand, Human Research Ethics Committee (HREC) and written approval has been granted by that committee.

10. Confidentiality

As a key informant in this study, it is not possible for the researcher to guarantee anonymity or confidentiality in any form. However, the researcher will ensure that your comments are captured appropriately from the audio recordings and will cross check quotations with you before final submission.

Audio recordings done during the interviews and transcripts will be stored securely for a minimum of two years after publication or six years in the absence of a publication after which these will be destroyed.

11. Sources of Additional Information

If you have any questions about this study, you may contact Ms. Silinganiso Chatikobo at the University of the Witwatersrand School of Public Health on (Cell: +27 84 483 0111) If you have any questions about your rights as a participant, you may contact Prof Peter Cleaton-Jones at the University of the Witwatersrand, Human Research Ethics Committee: Secretariat (011 717 1234)

INFORMED CONSENT INTERVIEW:

- I hereby confirm that I have been informed by the researcher (Silinganiso Chatikobo) about the nature, conduct, benefits and risks of the Audience Perception Study.
- I have also received, read and understood the above written information (Musician Information Leaflet and Informed Consent) regarding the study.
- I am aware that the results of the study, including any personal details will processed into a study report.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.

Musician:

Printed Name Signature Date and Time

I, _____ herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Researcher

Printed Name Signature Date and Time

Annex 10 Audio recording consent form- musician

The reason for audio-recording the interview has been explained to me.

I am aware that I may choose whether to participate or not to participate in the interview and to be recorded.

I am aware that I may stop the interview at any point.

The researcher will take measures to make sure that the recording is kept confidential and safe.

I understand that the audio recordings of the interview will be stored securely for a minimum of two years after publication or six years in the absence of a publication after which these will be destroyed.

I consent to having the interview audio recorded.

MUSICIAN:

Printed Name Signature / Mark Date and Time

INTERVIEWER:

Printed Name Signature Date and Time

Annex 11 Referrals contact details

Organisation	Telephone	Address	Service	Hours Available
National AIDS Helpline	0800 012322	10th Floor North City House, Cnr Melle & Jorrisen Street, Braamfontein	counselling	24 hrs
Lifeline	011 728 1347	2 The Avenue, Cnr Henrietta Street, Norwood, Johannesburg	counselling	24 hrs
LoveLife	0800121100/ 0800121900	48 Wierda Rd West, Wierda Valley, Sandton	counselling	Mon-Fri 0800-2100hrs Sat& Sun 1200-1700hrs

Faculty of Health Sciences, Postgraduate Office
Phillip V Tobias Building, 2nd Floor
Cnr York & Princess of Wales Terrace, Parktown 2193
Tel: (011) 717 2745 | Fax: (011) 717 2119
Email: Mathoto.senamela@wits.ac.za

PLAGIARISM DECLARATION TO BE SIGNED BY ALL HIGHER DEGREE STUDENTS

SENATE PLAGIARISM POLICY: APPENDIX ONE

I _Silinganiso Chatikobo_____ (Student number: __600693_____) am a student registered for the degree of __Master of Public Health___. in the academic year _2015_.

I hereby declare the following:

- I am aware that plagiarism (the use of someone else's work without their permission and/or without acknowledging the original source) is wrong.
- I confirm that the work submitted for assessment for the above degree is my own unaided work except where I have explicitly indicated otherwise.
- I have followed the required conventions in referencing the thoughts and ideas of others.
- I understand that the University of the Witwatersrand may take disciplinary action against me if there is a belief that this is not my own unaided work or that I have failed to acknowledge the source of the ideas or words in my writing.
- I have included as an appendix a report from "Turnitin" (or other approved plagiarism detection) software indicating the level of plagiarism in my research document.

Signature: _____ Date: ____30/06/2015_____