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The role of the collective making of identity in health promotion in the Hlokomela project, Hoedspruit, Limpopo, South Africa.

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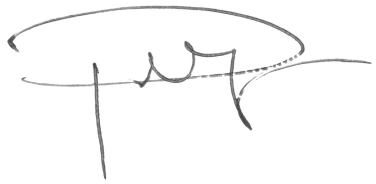
Supervisor:
Dr Nicola Christofides

A dissertation submitted to the School of Public Health, University of the Witwatersrand, in fulfillment of the requirements for the degree of Master of Science in Medicine by research and dissertation.

07 June 2016

Declaration

I, Patrick William Cockayne, declare that this dissertation is my original work. It is submitted in fulfilment of the requirements for the degree of Master of Science in Medicine by research and dissertation, in the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination to this or any other university.



07 June 2016

Dedication

To Janine Simon-Meyer, friend, colleague and inspiration, with whom I shared this journey of discovery.

Abstract

Introduction: Migrant farm workers in South Africa are particularly vulnerable to HIV infection for a multitude of reasons, including a lack of access to health services and to health information. Social norms on the farms, including an acceptance of multiple concurrent sexual partners and transactional sex both for comfort and material gain, tend to worsen women's powerlessness to manage effectively their sexual reproductive health. High levels of stigma also mean that the risks of HIV infection cannot easily be spoken about, further increasing vulnerability. The Hlokomela project sought to use participatory communication processes to empower peer communicators on the farms to engage farm workers in regular, structured discussions on HIV /AIDS and other health and wellness related matters, including difficult conversations around gender inequity. The making of a collective identity for the project was one of these participatory processes. Its novelty in this setting warranted research to answer the question *"How does (or does) the collective making of a project identity help to promote health on the farms of Hoedspruit?"*.

Aim: The aim of the research was to describe and analyse the role of collective identity-making in the Hlokomela project, an intervention to address vulnerability to HIV among migrant and seasonal farm workers in Hoedspruit, Limpopo province, South Africa. The study aimed also to propose and further develop, in the light of Findings, a conceptual framework which would help to explain the effects of the various elements of collective identity-making.

Methods: The research is a qualitative study of the collective identity-making component of the Hlokomela health project. Elements of a grounded theory approach were adopted in the three successive data collection site visits, enabling progressive coding of the data as the collection occurred. Data was collected through two Focus Group Discussions (FGD) with Nompilos (farm worker volunteer peer communicators and care givers) and two FGDs with Gingirikani (farm worker volunteer peer communicators chosen by Nompilos and farm workers to be their deputies on the farms, to facilitate purposive dialogues and thus increase reach). There were also 10 individual in-depth interviews with other key stakeholders and three small group interviews (2-3 respondents) with Hlokomela managers and co-ordinators. All interviews were audio-taped, transcribed and where necessary translated into English from Xitsonga and Sepedi. The voices of those most directly affected by the intervention formed the basis for coding and analysis.

Findings: The development of the collective identity through participatory processes was found to enhance engagement with and among farm workers. This was due to the project's perceived pertinence and local ownership. The collective identity was seen to be relevant and expressing a farm worker reality. Farm workers generally described feeling affirmed, seeing themselves projected into a public space that had hitherto not been open to them. And also in particular, the agents of the project – the Nompilos and their "deputies" the Gingirikani – described at length how being associated with Hlokomela gave them the authority and credentials to work with farm workers on sensitive matters, including establishing a set of values and norms which would be health-protective but which also involved a shift in what was considered possible and desirable. There was furthermore a sense of belonging to the project, not only on the part of the primary "beneficiaries" – farm workers – but also of other stakeholders, including farm owners/managers, municipal office bearers, and local health workers. This bridging social capital further augmented the project's capacity to reach farm workers by, for example, enabling access in working time on the farms, by donations in money and in kind by the local community, and by making visible and normal what hitherto had been hidden – particularly in terms of gender equity and a softening of hegemonic masculinities. Farm workers could take the lead, and women could take the lead also.

Conclusions: The collective identity-making work of Hlokomela had aided the project's agents to nurture a new possible, founded in a slightly altered set of values and norms, which had the potential to reduce vulnerability to HIV infection. The elaboration of a social institution, largely in the symbolic space, had authorised the project's agents, in their own eyes as well as those of their peers, to carry out their often difficult work of facilitating regular dialogues on hitherto rarely broached topics, including gender relations and risky sexual behaviour.

The findings indicate a need for further research into the cost effectiveness and replicability of this kind of identity work in similar projects, perhaps with the addition of quantitative assessments of the extent of projects' reach through collective identity work as well as the value of collateral beneficial effects to participants in resource poor settings.

Acknowledgements

To the farm workers, farm owners and managers of Hoedspruit who gave so generously of their time and knowledge – this work is also your work. A special thanks to the Nompilos and Gingirikani – this research is about you – your work, your commitment, your achievements. A big thanks to the staff and volunteers of the Hoedspruit Training Trust (HTT) and the Hlokomela Project. A special thanks to the Director of HTT, Christine du Preez, the Coordinator of Nompilos, Antoinette Ngwenya, and SBCC Coordinator Teenage Rapatsa, for their inspirational leadership and their support for this research. Thanks also to the International Organization for Migration (IOM) and in particular to Julia Hill-Mlati who boldly ventured where few had dared to tread. Thanks are due also to the Swedish International Development Agency (SIDA) who first funded the Hlokomela project, and then to USAID-PEPFAR for enabling the project to continue for sufficient time for the intervention to take root and flourish. To Professor Lenore Manderson, thank you for encouraging me to embark on this research and for providing guidance and support at critical moments. Finally, and most importantly, a huge thank you to Dr Nicola Christofides for her insights, guidance and patience.

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Acronyms

AIDS - Auto-immune deficiency syndrome

ANC - African National Congress (Governing Party nationally)

BCC - Behaviour Change Communication

FGD - Focus Group Discussion

HBC - Home based care

HIV - Human immuno-deficiency virus

HTT - The Hoedspruit Training Trust

IOM - International Organization for Migration

MCP - multiple concurrent partners

MMC - male medical circumcision

PHAMSA - Partnership on HIV and AIDS

PR - Proportional Representation Councillor in local municipality

SBCC - Social and Behaviour Change Communication

SCC - Social Change Communication

SDC - Sibambene Development Communications

SGD - Small Group Discussion

WHO - World Health Organisation

Definition of terms

[Definitions are those of the researcher unless otherwise stated]

Collective identity-making – refers to the process through which groups of people engage in developing symbolic constructs which have the capacity to enhance social cohesion and a sense of shared values and shared objectives in those groups, for a particular purpose (Maria Elena Figueroa et al., 2002) (in this case, to promote health and wellness on the farms of Hoedspruit).

Nompilo – the name home based carers / peer communicators gave themselves in the Hlokomela project, generally translated from the Sepedi as "Mothers of Care". There was at least one Nompilo on each of the partner farms. By 2010 they numbered approximately 60. The majority of Nompilos were female farm workers.

Gingirikani – Each Nompilo identified a person or people on their farm who could be their understudies and facilitate dialogues among their peers. These deputies called themselves Gingirikani which in Xitsonga means "working busily". The majority of Gingirikani were male farm workers (as opposed to the Nompilos, the majority of whom were female).

Social capital – "is the aggregate of the actual or potential resources which are linked to possession of a durable network of more or less institutionalised relationships of mutual acquaintance and recognition – or in other words, to membership in a group" (Bourdieu, 1980, pp.2-3). For Putnam (1993) social capital refers to "features of social organizations, such as networks, norms and trust that facilitate action and cooperation for mutual benefit" (pp. 35-42). Putnam stresses the value of community values and norms, such as trust in others and expectations of reciprocity that create a spirit of community, favouring cooperation, networking and access to resources. He further makes the distinction between bridging social capital, which expands networks, and bonding social capital, which deepens and strengthens the relations between those in the group (Putnam, 2000).

Symbolic capital – Symbolic capital (as used specifically by Bourdieu) refers to the perception of legitimacy, authority, value and distinction shared by a given group. This might refer to the commonly held perceptions of an entire nation as to what is legitimate and worthy (wherein lies, for Bourdieu, the coercive power of the state or a class within it), or to a voluntary association such as Hlokomela. It may have many sources ... for example, the social capital of a group and its networks, their economic capital, or the cultural capital of a group, or all three together. It is in a sense ideological in that it is a representation in the symbolic space which frames how the world is perceived and categorised. It can be conservative (ie. promoting the status quo) or it can be transformative (ie. establishing new norms and values which a given group of actors recognises as legitimate, distinct, superior). Most significantly "it can only continue for as long as it is able to maintain (in the group or in the eyes of others) a belief in its existence" (Bourdieu, 1997 & 2003, p. 240).

1. Introduction

Research indicates that since 2002 the HIV epidemic has stabilised in South Africa. However, it has stabilised at high levels. The Human Sciences Research Council (HSRC) 2008 survey estimated that the overall prevalence rate was 10.6% (11.4% in 2002), which translates to 5,2 million HIV positive people, the largest number globally (Shisana et al., 2008). The high level of prevalence contributes to continued high risks of new HIV infection and there is general agreement that more targeted prevention interventions are required that are responsive in particular to the socio-cultural drivers of the epidemic at regional and sub-regional levels.

Despite decades of HIV communication programmes at national and regional levels to address HIV prevention, the persistently high levels of prevalence and incidence point to the need for additional prevention strategies at the local level to complement the mass-media programmes. A comprehensive cross sectional nationally representative household survey of 19 predominant AIDS communication programmes conducted in 2006 (Kincaid et al., 2006) indicated that while 92.5% of the population, or approximately 27 million people, were reached by these programmes together, approximately 2.2 million people are not being reached by any of the programmes. Further, while the analysis indicated a significant positive impact of the campaigns on HIV prevention behaviour on those reached – notably condom use and condom self-efficacy (the confidence to use condoms in various situations) in the age group 15-24 and increased uptake of Voluntary Counselling and Testing (VCT) and awareness of HIV status in this age cohort – "no statistically significant effects were found for abstaining from sex to prevent HIV infection, having multiple partners in the last year or last month, or using condoms with non-regular partners" (Kincaid et al., 2006, p.11). Given that multiple and concurrent partnerships have been identified as one of the major drivers of the epidemic in Southern Africa (Hembe, 2009) the survey's conclusion, supported by the conclusions of other studies, that "new strategies are needed to reach the 2 million adults that are still not being reached by the predominant AIDS communication programmes…and that more emphasis needs to be given to non-youth audiences, partner reduction, and avoidance of partner concurrency to prevent infection" (Kincaid et al., 2006, p.2) gives added impetus and urgency to the need to supplement the national mass media prevention initiatives with local prevention strategies in areas and with populations who fall outside the effective reach of the mass communication campaigns and who for multiple reasons are unable to convert knowledge and awareness of HIV prevention messages into safer sexual

behaviour. It should be noted that the notion that multiple overlapping sexual partners was a driver of the epidemic has been criticised as based on too little evidence (Lurie et al., 2009). At the time of the start up of Hlokomela, however, it was still generally posited that Multiple Concurrent Partnerships (MCP) was indeed a driver of the epidemic and this informed some of the early actions of Hlokomela.

Further, there is increasing acknowledgement of the need in contexts where people are economically and politically marginalised to situate HIV prevention and health promotion generally in a broader development context; without also addressing the social, economic and cultural determinants of health – real and perceived – individual behaviour change may be practically impossible ie. information alone, however inventively communicated, may not be sufficient to enable individuals to change their behaviour as they are disempowered in significant ways with regard to overcoming the myriad real barriers to change. In populations where there are high levels of migration and mobility, economic, political and social marginalisation tends to be even more pronounced and the need for empowerment strategies even greater.

1.1. Background

South African farm workers: a history of dispossession and marginalisation

From the arrival of the Dutch at the Cape in 1652, through the eighteenth and nineteenth centuries, to the Land Act of 1913 and the Nationalist victory in the (whites only) elections of 1948 and the subsequent implementation of the policy of Apartheid, indigenous South Africans were progressively forced off their land and only allowed back onto it as labour tenant farmers, share croppers or squatters (paying rent to raise their livestock and crops on now white-owned land), at the say so of the settler owner, culminating in 80% of South Africa's population eking out a living on 13% of the land and leaving little option to people to seek work on now white-owned farms and in businesses in the towns and cities controlled by whites.

Successful black peasant farmers were seen as unwanted competition, which gave further impetus to land seizure by settlers, and the passing of laws to control the movement of black farmers. This was especially so from the mid-nineteenth century, as higher wages became available on the newly established mines, causing many dispossessed black labourers to migrate off the land and seek a better future on the mines. Those who remained found

themselves forced to negotiate access to land with the new "owners" usually as share croppers, labour tenants, or squatters (renting land on which to raise their stock and crops) (Atkinson, 2007). Landlessness and an inability to support families on the relatively poor and increasingly overpopulated land remaining to rural black farmers (the so-called homeland areas of Transkei, Ciskei, Gazankulu, etc.) gave rise to increasing levels of migrancy with its attendant effects of splitting up families and an acceptance that migrant men would take new wives at their place of work. Under apartheid laws, male migrants could not bring their families to "white" areas and were only allowed to remain there themselves for as long as they were employed. The homeland system was effectively a means of maintaining a labour reservoir that could be drawn from when labour was required and to which men would be expelled once their labour was no longer required.

The relationship between formerly somewhat successful black peasant farmers now dispossessed of their means of earning a livelihood, and the white farm owner was in many cases characterised by servility and exploitation, though not only that. The relationship was also often characterised by a paternalism towards the farm workers and their families living on his land, which mitigated to some extent the material deprivations that otherwise pertained. (Atkinson, 2007)

Du Plessis (2004) sums up the situation resulting from 300 years of colonial dispossession and economic marginalisation, further entrenched under Apartheid: "Between 1950 and 1980 anything between 3 and 5 million South Africans were forcibly relocated. This was part of a policy of racial designation of areas, separation of people, and the creation of so-called *independent* states for African groups. That the best statistics we have of the total number of people affected remain so vague, in spite of many excellent research initiatives, bears testimony to the vast scale of the processes that were at work. The affected people were regarded as without rights – unimportant, in the way, invisible". (p.4)

The Hoedspruit area of Limpopo, the site of this research, was classified a white area under apartheid. It was surrounded by extremely impoverished parts of the Lebowa and Gazankulu homelands, constructed broadly around ethnicities (SePedi and Xitsonga-speaking people respectively). These are the areas that still today provide labour to the commercial farms of Hoedspruit. Although since 1994 the government has instituted a land restitution and redistribution policy, this has moved very slowly and often unsuccessfully,

with insufficient resources made available to emerging farmers. The areas of Bushbuckridge and Acornhoek, from which the majority of migrant labourers are drawn, remain impoverished labour reserves offering little by way of employment opportunities. Unlike the migrancy associated with mining, however, it is mostly women who migrate to seek work on farms, mostly seasonal, as pickers and packers.

The vulnerability of farm workers in the Hoedspruit area

It is widely recognised that population mobility increases vulnerability to HIV and AIDS, both for migrants and their partners at home, as reported by the International Organization for Migration (Girdler-Brown, 1998;IOM, 2011;Lurie, 2001;UNAIDS, 2002). The Hoedspruit area of Limpopo province, South Africa, a commercial fruit and game-farming district that was the site of this research, is characterised by high levels of migrancy and mobility among its mostly seasonal farm worker population. Formative research conducted by Pieczkowski and Jönsson (2004) for the International Organisation for Migration (IOM) on 12 commercial farms in the area highlighted the fact that there had been little research into the vulnerability of farm worker migrants to HIV infection and very little reach to this population by existing communication programmes or health promotion interventions (Shisana et al., 2008, pp.58,68). The research conclusions pointed specifically to the sense of disempowerment experienced by farm workers in the area, noting that HIV/AIDS were not viewed by workers as ranking high among the many daily challenges they faced: *"When one's daily life is a struggle in so many respects, HIV/AIDS appears as a distant threat, only one of many faced daily by workers. Interviews with workers give a sense that many feel disempowered, leading them to believe that they have few choices and little possibility to improve, or alter the course, of their lives. They lament that there is little hope for the future, which suggests that workers may have little incentive to act in a manner which will safeguard their health in the long term, or seek help when their health and well-being is threatened."* (Pieczkowski and Jönsson, 2004, p.2)

The research indicated low levels of HIV knowledge and awareness, low levels of consistent condom use, poor access to or availability of health and other services (state and non-state), high levels of myth, misconception and denial, high levels of risky sexual behaviour including multiple concurrent sexual partnerships, and intergenerational and transactional sex.

Significantly too, the research identified social exclusion and a lack of social cohesion as a major factor increasing vulnerability to HIV infection. While there were no HIV prevalence

figures for the Hoedspruit farms for the period, a prevalence survey conducted by Dr Clive Evian after the commencement of the Hlokomela project on the farms showed an alarmingly high HIV prevalence rate among Hoedspruit farm workers (28% overall, peaking at 40.9% in the 30-34 band of seasonal workers) (Evian, 2008) compared with that of the overall population of Limpopo province (8.8%) (Shisana et al., 2008)

Hence, in the Hoedspruit intervention, where there was a marked absence of social cohesion, there was the recognition of a prior need to construct a collective identity with which people could identify, with which they would be willing to associate and which, together with the other Hlokomela programme elements, would begin to create an environment in which individual change might become possible.

Delayed state response to the epidemic increases vulnerability

In the start-up phase of the Hlokomela project (2005 to 2008) the state had only just begun to roll out Anti-retroviral therapy (ART) at some of its clinics, following a period of denial by the State President and the Minister of Health that there was a causal link between HIV and AIDS and that ART offered an effective treatment response. Even by 2005, and after concerted campaigning by civil society for the immediate implementation of the 2003 Operational Plan for Comprehensive HIV and AIDS Care, Management and Treatment for South Africa, only a small number of patients was receiving ART. Simelela & Venter describe the situation as follows: *"The number of people actually receiving ART remained far below what had been targeted. By September 2005, 17 months after rollout began, 85 000 people were enrolled on ART in the public health sector. By then, 199 public healthcare facilities (just over 5%) were providing ARVs for the treatment of HIV".* (Simelela et al., 2014) So it was that Hlokomela had to source its own ARVs and to seek accreditation, which it achieved a few years ahead of the state clinic in Hoedspruit. Without the possibility of offering an effective treatment, prevention work would have been almost impossible, based on the old stand-by's of condoms and safe-sex. At this point, enter the International Organisation for Migration (IOM).

1.2. The IOM's Partnership on HIV and Mobility in Southern Africa (PHAMSA)

The response of the IOM, based on the research recommendations for a targeted comprehensive HIV prevention, treatment and care intervention in the area, was the Partnership on HIV/AIDS and Migration in Southern Africa (PHAMSA) initiative, a pilot project with a group of 18 Hoedspruit commercial farms, launched in 2005. The Hoedspruit

Training Trust (HTT), a local NGO which had begun offering a limited range of primary health care services on the farms, was chosen as the local implementing partner. The local pilot project chose the name "Hlokomela" meaning "care" in Sepedi.

The project interventions were based on the PHAMSA model, an ecological, developmental model (see Figure 1 below) that subscribed to the World Health Organisation's definition of health promotion:

"The process of enabling people to increase control over, and to improve, their health. To reach a state of complete physical, mental, and social well-being, an individual or group must be able to identify and to realize aspirations, to satisfy needs, and to change or cope with the environment." (Source: Ottawa Charter World Health Organization 1996).

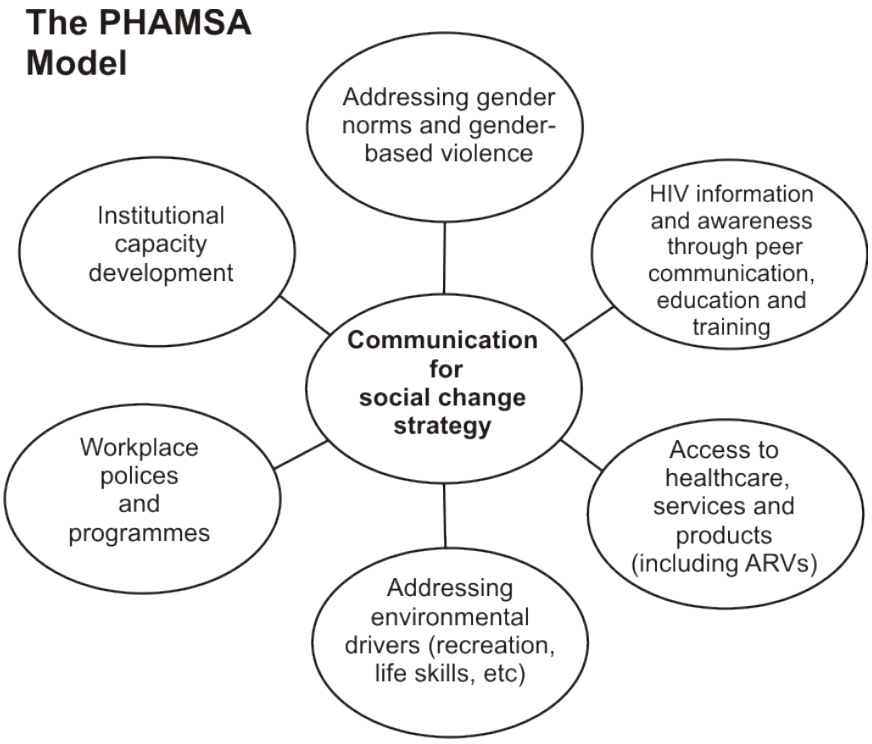


Figure 1: The PHAMSA Model. Source: Sibambene for IOM, 2006

1.3. The communication strategy

Accordingly, the prevention elements of the intervention sought to promote, through participatory communication processes, a greater resilience in individuals to face health and other social and economic challenges – and not simply the challenge of HIV. To this end the intervention employed a communication for social and individual change strategy. The

strategy presupposed the link between increased social cohesion, a sense of ownership and collective efficacy (social cohesion in a given community that enables members of that community to act for the common good) (Sampson, R.J et al., 1997) on the one hand, and self-efficacy (the individual confidence to undertake new practices) on the other (Maria Elena Figueroa et al., 2002, p.32) and aimed through its communication activities, where HIV was not necessarily the main or primary focus, to build social and symbolic capital as a condition for enabling both social and individual change.

1.4. Collective identity-making

One of the elements of the strategy was the development through participatory processes of a local project identity, or brand. Project staff were guided to facilitate the collective making of an identity for the project. The processes undertaken included applying participatory approaches to the development of a name, slogan, and logo – common brand-building devices – and a value proposition or promise – "Farm Workers Care for Each Other". At every step it was emphasised that, to succeed, this promise would need to correspond to the actions of the project (its “product”).

The aim of this purposive identity-making work was to help provide structural coherence to the programme, affirm farm workers, build social cohesion and social capital, facilitate action for change, enable connectivity for farm workers to services and resources and to raise the profile of the project and its activities to both promote further participation by farm workers and to mobilise additional resources for enhanced sustainability. It is this aspect of the intervention – the collective making and broadcasting of a project identity – that is the focus of this research. Figure 2 illustrates the relationship between the identity-making process and the other programme elements.

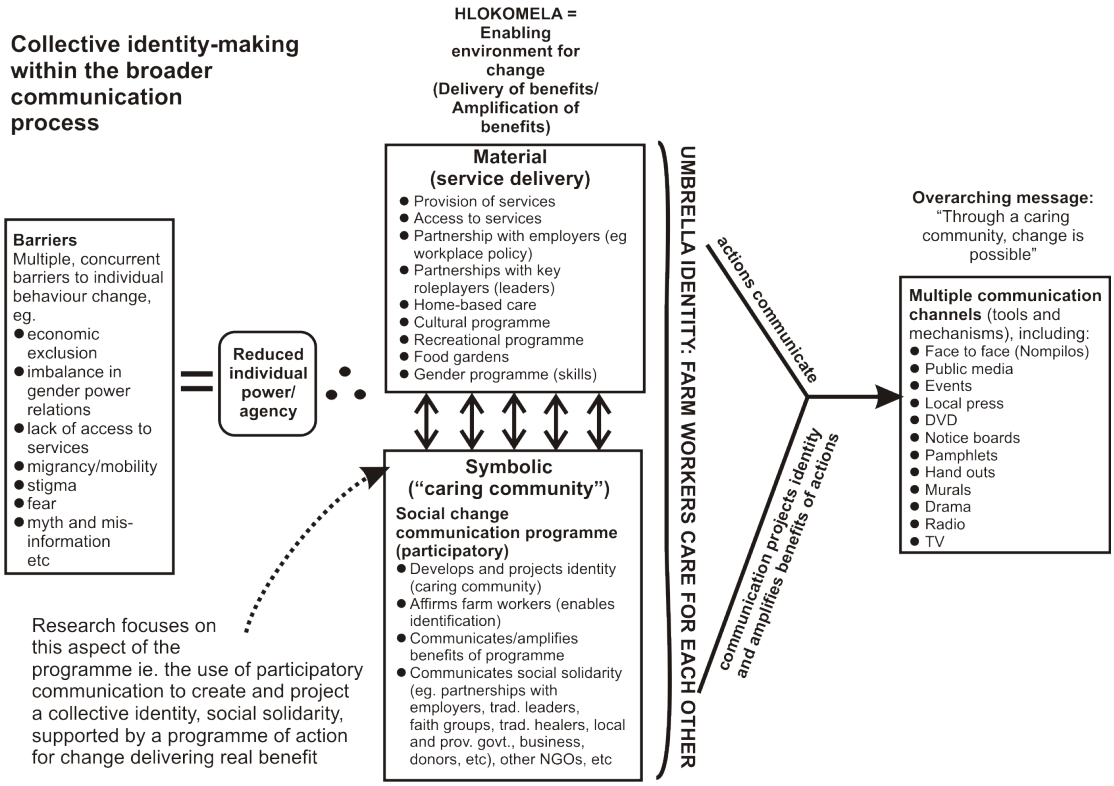


Figure 2: Collective identity-making within the broader communication process

Graphic by P Cockayne 2008

1.5. The researcher's role in the Hlokomela project

The researcher was a partner in Sibambene Development Communications (http://www.sibambenedev.co.za/Our-Work/), the communications service provider contracted by the IOM to design and support the implementation of, initially, a Behaviour Change Communication (BCC) programme (2005/6), and later a Social Change Communication (SCC) programme (2007/10), with the specific brief of supporting the Hlokomela project's Home Based Care providers (called Nompilos) and staff to work to reduce the vulnerability to HIV of farm workers on the project's partner farms (18 farms in early 2006, +60 farms in late 2010). The collective identity-making processes described in the research formed part of Sibambene's participatory communication strategy design. The researcher was thus intimately engaged in facilitating the process described and analysed in this research, through initial intensive capacity building of Hlokomela staff and Nompilos (early 2006), and thereafter through remote mentoring and support and bi-annual on-site in-service training provision. In this sense, the researcher was, periodically, a participant observer in the development process of the Hlokomela project, in addition to conducting the formal qualitative research for this thesis in late 2010. The insights gained in the process of

designing and supporting the implementation of the communication strategy informed both the research design and analysis of the findings.

The element of the communication process that was the subject of this research – collective identity-making and projection – rested in the first instance on the concept of **identification** in the sense both of a *process* of making an identity – of signification – and also how that identity was *received and perceived* when it was projected into the public space, ie. How did people identify with the symbolic construct?

The research also sought to describe and analyse the relationship between the concept of identification and other key concepts. In particular, how and to what extent did the process of collective identity-making **affirm** individuals and promote their **engagement** with the collective, thereby enabling **connectivity** to resources (including information) and services?

Did it, and if so, how did it facilitate the taking of collective **action** to address identified development challenges and barriers to individual change? Did **projection** of the collectively made identity, through locally developed media and other communication mechanisms, enhance outreach, promote engagement and help to unify and build critical mass for the intervention? If so, how?

2. Literature review

The inability of significant numbers of people in economically marginalized communities to convert awareness and knowledge of HIV into modified behaviours to protect themselves from infection is well documented. In Southern Africa, the drivers of the HIV epidemic are multiple and occur at almost every level – individual (cognitive, affective), community (cultural), and societal (social, political and economic), a challenge to health communication for change noted by Baranowski, Perry & Parcel (2003). The ability of individuals to change their behaviour in the face of these multiple obstacles is extremely compromised due in part to the fact that action at the societal level is often a prerequisite for the removal of barriers to individual change, for example, with respect to gender relations (CFSC, 2010).

Even in developed societies with relatively high levels of individual competence and agency and relatively high levels of social support, the importance of the social in determining individual behaviour was well illustrated by Bandura (1989). In the Southern African development context, moreover, many cultures emphasise adherence to the collective over the individual, as observed by Airhihenbuwa and Obregon (2000). Additionally, as stated by Coovadia et al (2009), at the local level in particular there has been a signal failure by the state to deliver basic services and facilitate social cohesion. Hence the centrality of the socio-political factors as determinants of individual behaviour is even more pronounced. The significance of this for HIV prevention work is that an appeal may need to be made in the first instance to the collective in order for changes at the individual level to be possible. In this sense the constructs of social cohesion, collective efficacy and social support are necessarily among the first steps to creating an enabling environment for individual (and social) change.

Collective identity-making is most commonly associated with the often expressly politico-ideological development agendas of social movements, with high levels of community participation and control, a very limited role for external agents and an orientation more towards what Castells (1983) described as relating to the construction of identities which make collective behaviour more likely and more coherent. In social movement theory collective identity is conceptualised variously as antecedent to social action or, significantly for this research, from an epistemology of action perspective, as a process of participation, mobilisation and intervention that generates collective identity and shared vision for social change (Castells, 1983; Hellman, 1994; Melucci, 1989; Stern, 2000).

Both social movement theory and participatory communication for development approaches emphasise the centrality of dialogical processes (as opposed to information transmission models) as the mechanism for enabling the expression of people's experiences, perceptions and hopes and through which they are able collectively to construct identities and plan and execute actions for change (Beltran, 1980) (Freire, 1970) and whose use in participatory development interventions is therefore advocated by among others Fals Borda (1998).

The basic premise is that change can best be effected not simply by providing information to poor people (although this is important), but also by recognising with Quarry & Ramirez that participatory communication may also "help people become aware of and articulate their position, exchange knowledge and skill to take control over their lives, reach consensus and manage conflicts, and improve the effectiveness of organizations." (Quarry et al, p. 4, 2004). Further, that the chief aim of this participation is to enable "giving voice". At the World Congress on Communication for Development in 2006 organisations agreed that "the right and possibility for people to participate in the decision-making processes that affect their lives" (Warnock et al, 2007, p.17) is central to any development effort. It follows logically therefore that collective identity-making will make use of participatory communication processes in order that the identity that is generated represents the values, aspirations, hopes, fears, goals and qualities of its constituents and can justifiably purport to be their "voice". The issue of "who is going to produce these representations of identity? …..How are these representations produced and circulated?" (Mato, 2004, p.679) poses a challenge for any external agency attempting to catalyse and facilitate processes of community participation in identity-making while balancing the need for health promotion input that must be made (and which may not spontaneously emerge through the participatory processes). This aspect of the making and diffusion of a collective identity through participatory means will be examined in the research in particular as it concerns authorisation – who is authorised to speak, how and why.

The social psychology literature on subcultural identity-making supports the notion that collective identity can have the effect of affirming participants and hence making more likely both collective and individual efficacy (Schwalbe et al, 1996). Further we find that engagement – the participatory nature of identity-making, what is termed "the essential collaborative activity" – is central to the formation of a collective identity.

Schwalbe *et al* further highlight the value of symbolic resources in the construction of a collective identity, emphasising the work undertaken to "create the signs, meanings, and codes that enable all kinds of identity work to go on. …… As we see it this is the generic process through which people create and learn to use symbolic tools needed to give facticity and coherence to themselves and others" (1996: p.115).

Placing a marker in the symbolic space is deemed to be a vital step in the creation of a collective identity that has the potential to be performative, especially in the sense of adherents being able to envisage a new possible and to shape their actions accordingly, in ways which were formerly not possible. "Subcultural identity work thus begins with the creation of a symbol, image, or name that represents, in more than one mind, a group of people. The representation may encompass people who share a physical trait, behavior, attitude, activity, place, history, language, or social location" (Tajfel, 1981). "Once the name exists and takes hold as a social representation – which is to say, once the name is widely used, with roughly shared understanding about who it refers to – both the group and a new identity exist as part of the culture. It then becomes possible for people to signify themselves in new ways."

The work of Pierre Bourdieu takes discussion of what might be meant by the term "social representation" a step further. His work on "distinction" has particular relevance for this research as it describes and analyses the processes through which people "signify themselves in new ways" (Bourdieu, 1982: pp.150-151) through the social institutions which they form and through which they are formed. In "La Distinction" (Distinction) and "Ce Que Parler Veut Dire" (What Speaking Means) Bourdieu describes what he terms the "institutional effects" (Bourdieu, 1982: pp. 121-134) that flow from the elaboration of a social institution; these include the generation of symbolic capital which has the effect of strengthening a sense of belonging and the value of association, and the validation of the agents of the social institution, in their own eyes as well as in the view of the "members" of the institution – processes of so-called "credentialisation". This is the process through which an institution is able to exert its influence because its adherents authorise it to do so (Bourdieu, 1982: pp. 103-119). It should be noted here that Pierre Bourdieu was not originally part of the literature consulted prior to the field research. Borrowing again from a grounded theory approach, concepts which emerged during the interview process with those most centrally affected by the project, the so-called emic data (Lett, 1990), and which had not been anticipated (for example, the effects of institutionalisation, the centrality of

symbolic capital, and the importance of credentialisation) could not be adequately explained by any of the bodies of theory already consulted and required a re-visiting of the literature to address concepts arising from the data collection process. The work of Pierre Bourdieu was able to provide a theoretical grounding for more than one of the key findings and helped to accommodate the tension that Lett describes (1990) between insider knowledge and outsider, scientific theory – the etic data, a feature of grounded theory approaches.

Sandstrom in his analysis of identity construction among gay HIV positive men shows how the process of identity-making can provide "the social and symbolic resources necessary to fashion revitalizing identities and to sustain a sense of dignity and self worth" (Sandstrom, 1990, p. 293). Significantly Sandstrom's analysis sheds light also on the link between identification and action. For the gay men involved "the identity work was not purely ideological or a matter of group talk; they affirmed the qualities implied by their remade identities by dedicating themselves to activism" (Sandstrom, 1990: p.294). Sandstrom further signals the importance of "joint action to create symbolic resources that may not yet exist, to teach new members how to use these resources, and to give support in the face of a hostile culture". "It was important that men saw each other doing good work (eg. community education). This was powerful affirmation of the moral character implied by *person with AIDS*." (Sandstrom, 1990: p. 294) Sandstrom's study thus illustrates how identity-making "can remake not only meanings, through talk, but lives, through action" (Schwalbe et al, 1996: p. 115).

Social marketing theory was also able to elucidate some of the research findings, particularly in terms of marketing methodologies deployed for social purposes, as discussed by by Lefebvre and Flora (1988), although the manner in which these marketing methodologies were operationalised at a local level and by an NGO with limited resources was necessarily not typical. In particular, scientific research into the specific needs, desires, beliefs, and attitudes of "target adopters" advocated by Kotler and Roberto (1989), which is central to most social marketing undertakings became, in a communication for social change context, more a process of eliciting and capturing dialogue among participants (hearing and responding to "voice") than systematic surveying. It should also be stressed that whereas social marketing is generally applied to efforts to promote the use of a more or less tangible product (eg. condoms, mosquito nets) in order to promote behaviour change, and includes a degree of consultation with the "target audience", social change communication approaches to health promotion tend not to favour notions of "target" and "audience", preferring

participatory processes that subvert the sender/receiver dyad. Jesus Barbero (1993) emphasises how "audiences" are not mere decodifiers of messages but in fact also produce them. The identity-making process employed in Hoedspruit gave equal weight to both of these processes. Another and related significant adaptation is that whereas the social marketer will adapt messages and other programme design to what the intended users want and need (Andreasen, 1995), in communication for social change processes the expression of perceptions, needs and wants emerges from the participant community and is transformed by them, with very little mediation, into whatever communication tools or processes are deemed necessary or possible. Perhaps most importantly, the adoption of proven marketing techniques in projecting and amplifying identity is valuable if, as Colle contends, "communication activities require a certain critical mass – of resources, intensity and duration – if they are to realise their full potential in mobilizing people for development action and become self-sustaining in this role" (Colle, 2007: p.20). The application of marketing methodologies and technologies – in particular the processes around branding – to the extent possible in the local environment, could enable the projection of identity to achieve this critical mass.

In summary, the literature across a wide variety of disciplines informed the development of exploratory research hypotheses. These were further shaped, in line with the grounded theory approach, in iterative response to the data, ie. were grounded in the data. These hypotheses suggested that, through collective identity-making processes, we might expect to find outcomes including *inter alia* individual and collective empowerment, institutional cohesion around a newly elaborated set of explicit health-supportive values, a granting of authority to the agents of the institution contingent on the actions of the institution being perceived as invaluable and superior, a sense of belonging based on perceptions of pertinence and local relevance, and a willingness by key stakeholders to engage with the project and mobilise resources for it. Testing these hypotheses in the research process, it was expected, would enable the research question (see 2.3. below) to be answered.

2.1. Problem statement

In light of the above, the problem that the IOM PHAMSA project sought to address was precisely the failure of existing HIV/AIDS communication initiatives to reach the farm working population in the Hoedspruit area. Further, even when information was made available there was an obvious disconnect between knowing about HIV, and acting to

dataprotect oneself and one's family and networks from becoming infected. In this regard the communication aspects of the intervention sought specifically to use communication processes to counter the marginalisation of farm workers – the sense revealed in the Pieczkowski and Jönsson (2004) formative research that there was nothing that could be done against the epidemic, a sense of powerlessness and lack of agency, and an attendant fatalism. The collective identity-making process was developed for its potential, it was believed, to provide multiple and repeated opportunities for individuals to experience a sense of belonging, of improved morale, a consensus around goals, trust, reciprocity and a cohesive and supportive network (Maria Elena Figueroa et al., 2002, p.33) – in other words to enhance social cohesion among farm workers. It was hoped that farm workers could come to believe that through collective action they could themselves halt the epidemic.

2.2. Justification for the study

Given that the application of a collective identity-making strategy as part of a broader developmental communication strategy in a local health promotion intervention was relatively novel and untested, further research was warranted with a view to better understanding the impact and challenges of such a strategy. It was further hypothesised that the research would be able to identify and analyse possible collateral developmental advantages to collective identity-making work in the context of HIV prevention programming. This would include critical aspects of the broader social ecology – in particular, gender rights and issues of ownership and control of development processes at a local level, in economically marginalised communities. Finally, it was hoped that the research would add to the body of evidence, specifically in the research setting, around the application of participatory communication approaches in contexts where the default tends to be the more or less unidirectional dissemination of information.

2.3. The research question

Practically and simply, the research question needed to lead to insight into the value of the communication approach taken. It was formulated thus:

"How does (or, does?) a collectively made local project identity help to promote health?"

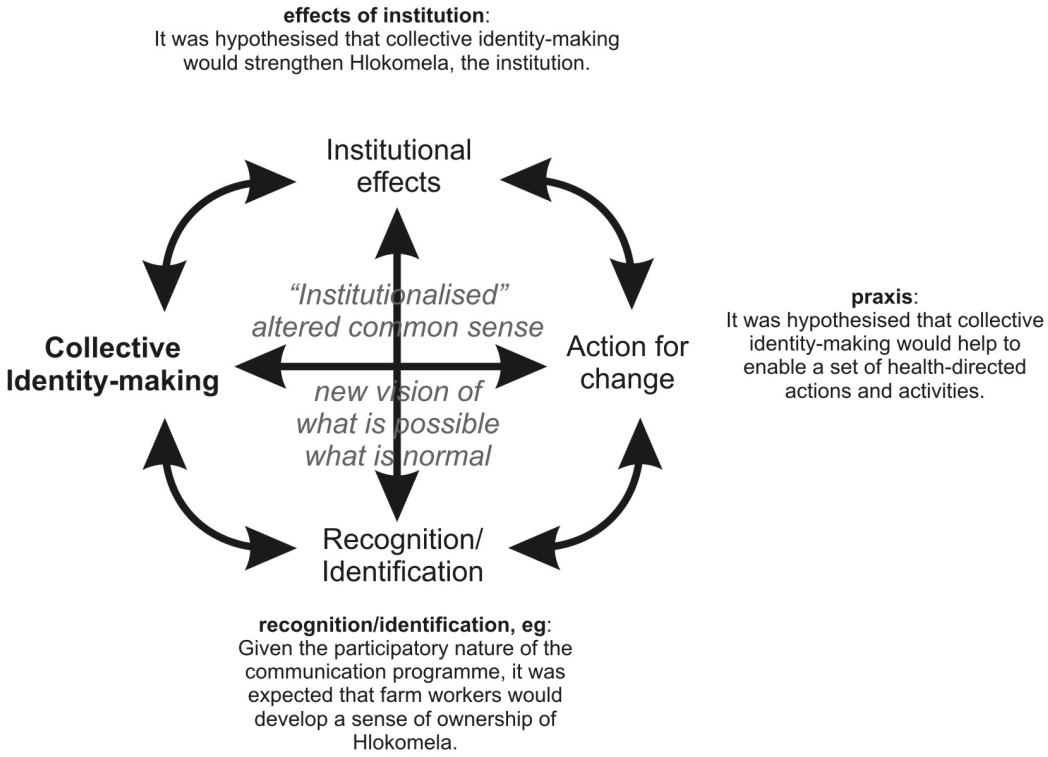
The research question anticipated findings that would suggest there had been an empowering effect on all those identifying, to a greater or lesser degree, with the "Hlokomela" identity, and in some cases in the conscious elaboration of that identity. It

sought to better understand what this "empowerment" entailed – how were different people empowered, and in what ways, and what was the effect of this? The research question was also open to the possibility that no-one had been empowered, or that other things had happened.

2.4. Research conceptual framework

In light of the literature and linked to the communication programme design as illustrated in Fig.2, as well as the research question in 2.3. above, the following research conceptual framework was developed (Fig.3).

Figure 3: Research conceptual framework



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It was hypothesised that all components of the intervention would be mutually reinforcing, ie. that a strengthened institution would further promote the adoption of the collective identity making process, and would better promote a sense of ownershipon the part of farmworkers. This in turn would make project actions easier to undertake (conducting dialogue, for example.

It was further hypothesised that collective identity-making would have positive effects in terms of health promotion in the Hoedspruit area. Specifically it was envisaged that both the activity and its "product" (the collective identity, albeit fluid and not easily grasped) would produce an environment in which the Institution (HTT and its project, Hlokomela) would be strengthened to the point of being able to lead processes of engagement around health and wellness among farmworkers and in the broader community. In addition it was anticipated that a sense of common purpose might be nurtured among farm workers and the broader community, as well as a sense of ownership by farm workers of the process of securing health for the farming community. With the institution strengthened and a sense of mutuality in the farming community, a set of actions to promote health would be enabled, under brand Hlokomela. This would include purposive, regular, structured dialogue, planned and directed by Nompilos and other farm workers, partnership building and social mobilisation around health and wellness on the farms and in the communities. And most importantly, an expectation that a sense of pride and the restoration of dignity would flow from the elaboration of a farm worker-centred identity, projected large into the public space and that this would enhance collective efficacy (and individual self efficacy) and strengthen social capital, with its capacity to mobilise people and material resources. These are the research concepts or hypotheses that the study aimed to address.

2.5. Aims of the study

The research aimed to describe and analyse one aspect of the communication strategy in the Hoedspruit project – collective identity-making and projection through multiple communication channels and activities. Beyond this, also, it was hoped that the hypothesis that collective identity-making could contribute to positive health outcomes would be subjected to close scrutiny and result in the further elaboration of the Research Conceptual Framework, which would signpost more clearly what exactly the effects of collective identity-making were (see Figure 4).

2.6. Objectives

Specifically, the research sought to:

- Explore theories from multiple disciplines to better understand collective identity and the factors contributing to collective identity in the context of health promotion
- Unpack and analyse the evidence of collective identity-making and the component elements from the multiple stakeholders involved in Hlokomela

- Explore specifically the multiple stakeholders' views regarding the role of collective identity (as pertained in Hlokomela) in shifting values and norms, and in openness to discussions and altered behaviours for improved health
- Identify the components of collective identity-making, based on the study, that emerge as critical for the success of an initiative like Hlokomela.

Taken together, these objectives would provide for a description and analysis of collective identity-making in this setting and allow also an enhanced understanding of the effects of its various components such that a more complete Conceptual Framework would emerge, grounded in the experiences of those most affected. This would enable at least the beginnings of an assessment of the value of collective identity-making processes when employed in interventions like Hlokomela.

3. Methodology

3.1. Study design

This research is a qualitative study of the collective identity-making element of the PHAMSA intervention to address vulnerability to HIV among migrant and seasonal farm workers in Hoedspruit, Limpopo province, South Africa.

3.2. Study site

The site, the Hoedspruit commercial farming district, forms part of the Maruleng Local Municipality, in the Mopani District Municipality of the Limpopo Province, South Africa. In 2005, 18 commercial farms partnered with the IOM and Hoedspruit Training Trust (HTT) to form the Hlokomela project. By 2010 the number of partner farms had risen to 60. Historically the Hoedspruit area was a white-owned commercial farming area in the former Transvaal Province, with most of the indigenous population confined to labour reserves in adjacent apartheid-created homelands, Gazankulu and Lebowa, and permitted in the area only to provide labour. This is no longer the case today – all South Africans enjoy constitutionally protected freedom of movement. However, the legacy of geographical and racial exclusion persists with large concentrations of population in towns and peri-urban areas in the former homelands. The Bushbuckridge District Municipality, which includes the town of Acornhoek, supplies most of the seasonal labour to the Hoedspruit farms. The Bushbuckridge unemployment rate is 52,1% and the youth unemployment rate is 64,6% (Statistics South Africa, 2011). Commercial agriculture remains the largest single employer of labour outside of public sector employment, with a relatively small number of permanent farm workers supplemented by seasonal workers drawn from the surrounding former homelands, areas further afield in South Africa, and from neighbouring Mozambique, with smaller numbers arriving also from Zimbabwe. The main seasons are Citrus (winter – May / July) and Mangoes (summer – November / March).

3.3. Study population

Farm workers on commercial fruit and game farms, as well as staff employed by the Hoedspruit Training Trust for its Hlokomela project, and other key stakeholders in the project, for example farm managers, and traditional leaders.

3.2 Sampling

Purposive sampling – in which units (e.g., individuals, groups of individuals, institutions) are selected "based on specific purposes associated with answering a research study's questions" (Teddlie et al, 2007) – was applied from the outset. This form of sampling ensures that ''particular settings, persons, or events are deliberately selected for the important information they can provide that cannot be gotten as well from other choices'' (Maxwell, 1997). Purposive sampling ensured that those most closely involved in the process of identity-making were able to express what for them were the salient features of this process.

Table 1 lists the respondents, ie. those deemed to be key to addressing the research question and the research objectives.

Table 1 – Purposive Sample

1st site visit (27/28 August 2010)

Sample	**Method**
1 x Farm owner and Chair of HTT Board	Individual interview – stakeholder
1 x Municipal PR Councillor in Maruleng Local Municipality	Individual interview – stakeholder
Nompilos (8 women, 3 men, half from original 18 farms, half from the 60 post-2007 expansion) [1]	FGD
Project Director	Individual interview
2 x Hlokomela Programme Managers[2]	Small group interview
Human Resources Manager on participating farm (a land claim restitution farm)	Individual interview – stakeholder

2nd Site Visit (24/25 September 2010)

Sample	**Method**
Nompilo monthly meeting (23rd September)	Observation
Heritage Day (HD) (24th September) large group dialogue conducted by Programme Manager with approx. 80 participants,	Observation

followed by sporting and cultural activities	
Nompilos (7 female, 3 male)	FGD (facilitated by Nompilo on Heritage Day)
3 x Coordinators (2 female, 1 male)	Small group interview
Clinic sister, Hoedspruit Clinic	Individual interview – stakeholder
Kruger to Canyon Newspaper editor	Individual interview – stakeholder
Nompilos (6 female)	FGD
Traditional Leader (in Mabins, an area from which farm labour is drawn – 70kms West North West of Hoedspruit)	Individual interview – stakeholder

3rd visit (29/30 November 2010)

Sample	**Method**
Gingirikani 1: (night, Bavaria School) 3 female, 2 male	FGD
Gingirikani 2: 6 male, 2 female (Hlokomela Training Centre) [3]	FGD
General Manager Bavaria Estates (Bavaria Estate Offices)	Individual interview – stakeholder
Young male farm worker [3]	Individual interview
Senior Supervisor (male), Bavaria Estates	Individual interview – stakeholder
2 x Coordinators (male) [3]	Small group interview
6 x Nompilos (male) [3]	FGD

Notes:

1. Eleven Nompilos purposively selected – half from the original 18 partner farms and half from farms joining the partnership in the 2007 expansion (to approx. 60 farms). Some of the participants had been more closely involved in the development and production of Hlokomela identity-making and media and were able to speak to the significance for them of the process of engagement.)
2. Two Hlokomela staff members most closely involved in the conceptualisation and development of Hlokomela identity, communication processes and media.
3. In the third round of on-site data collection, an effort was made to interview and conduct FGD and small group discussions specifically with male respondents, given that the two previous site visits had engaged mostly with female participants.

Between each round of interviews theoretical sampling was applied where necessary to conduct additional interviews to further explore emerging concepts to the point of saturation (the point at which no new ideas, points of view or concepts emerge) (Mason, 2010). Theoretical sampling is important in a grounded theory approach as it enables the researcher to select for study people or events that have the potential to elucidate further emergent theoretical constructs or concepts and to ensure that these are based in (grounded in) the real life experience of those most affected. (Cohen, 2008)

Specifically, in the second round of interviews (September) it was possible to arrange to observe two Nompilo-led events – the monthly Nompilo feedback and planning meeting, and a sporting and cultural programme to celebrate Heritage Day on 24th, at which one of the Co-ordinators led a large group dialogue with approximately 80 participants on the topic of couple counselling, and a Nompilo led an FGD of mixed farm workers and Gingirkani in an FGD on culture, HIV and vulnerability. In the third round of interviews (November) male-only interviews were organised in order to explore possible differences between men's and women's responses. It had been ascertained that most of the Gingirikani members were male and so the 2 Gingirikani FGDs were scheduled, as well as an additional FGD with male Nompilos only, as well as a small group interview with 2 male coordinators and an in-depth individual interview with a young male farm worker who was considering whether to become a Gingirkani.

3.3. Data collection and analysis

3.3.1. Data collection

The primary data were collected through in-depth interviews using a semi-structured interview guide, in either Focus Group Discussions (FGDs) with 8 or more participants, or small group interviews (SGIs) with 2 or 3 respondents, or individual interviews.

Focus group discussions were conducted at the Hlokomela Training Room (attached to the Hlokomela Clinic) or at the Farm School on Bavaria Estates, depending on which of these was more convenient for participants. Both Gingirikani FGDs were conducted after work hours at the School because Gingirikani members were not able to be released from work in the day time.

All prospective respondents/participants were informed in detail and in their preferred language about the nature and purpose of the study and were encouraged to ask questions and seek clarifications at any stage. Those who agreed to participate were asked to sign a consent form in their preferred language with the understanding that they were free to withdraw their participation at any time should they so choose.

In addition, extensive field notes, site visit reports and visual material gathered over a five-year period of work at the site provided additional supplementary data.

There was an initial series of in-depth interviews in the form of two small group discussions (SGIs) (with Nompilos and other farm workers respectively) and individual interviews with project staff, and a minimum of eight individual interviews (with key stakeholders). In all but one case (farm workers) the researcher conducted the interviews/SGIs and FGDs, borrowing from grounded theory methods which "*work best when the grounded theorist engages in data collection as well as data analysis"* as this allows for a greater degree of flexibility to deepen exploration of meaning and shift the focus of questioning as fresh insights emerge (Charmaz, 2006, p.34).

In these cases respondents/participants were competent to converse in English. Nevertheless, a trained assistant researcher/interpreter who spoke both predominant local languages (Xitsonga and Sepedi) was present so that a participant could at any time express themselves in mother tongue.

In the case of FGD no. 3 (Interview Guide 3 – farm workers) the FGD was conducted by a trained interviewer proficient in Xitsonga and Sepedi.

FGDs lasted from two to three hours with the exception of FGD 1 with project staff which required two separate sessions. Individual interviews and small group interviews lasted approximately one hour each. All participants were full-time employees either in the project, on the farms or in other institutions and due regard was taken of this when scheduling the interviews/SGIs/FGDs to minimise inconvenience to participants. Interviews took place in private rooms on the farms, at the Hlokomela project offices or at people's places of employment.

Respondents/participants were given a reimbursement for their participation (R50.00) to help to cover the costs of transport and childcare for the duration of the interview. All respondents were allocated a unique study participant number to avoid personal identification on any materials.

Where appropriate, extant texts such as project quarterly and annual reports and records of peer communicator monthly meetings were used as supplementary data, as well as quarterly and annual reports from technical support providers, with due regard to the context in which these were generated and with a view to gaining analytical insights from possible relative congruence/incongruence between professed organisational aims, identity and performance and actuality (Charmaz, 2006).

3.3.2. Content of interviews

The content of the interviews addressed the concepts related to the research question. This included the exploratory hypothesis that collective identity-making could facilitate health promotion on the farms. If this was the case, the interviews/FGDs/SGIs were turned to uncovering in what ways and to what extent. Given the difficulty of addressing relatively abstract concepts in this setting (most respondents were at least partly familiar with participatory communication practices as these were applied in the project but not the theoretical/conceptual underlay and discourse), extensive use was made of visual prompts such as laminated A4 full colour photographs, to initiate discussion, from which springboard the interviewer/facilitator was able to probe to elicit participants' perceptions and experiences of both the process of collective identity-making and its products. The obvious physical markers of identity (name, logo, slogan, communication tools) were used as an entry point to explore in-depth the perceptions of the values and attributes that attach to the project's identity or "brand" through both communication and allied service delivery processes (the actions of the project) and the experience that people had of the project in their daily lives. In addition the line of questioning specifically for project staff aimed at eliciting the practical challenges that the Hoedspruit Training Trust (HTT) – originally a training and health service delivery NGO – faced in enabling collective identity-making in the Hlokomela project as well as project staff's perceptions of the value of this innovation. Questions for key stakeholders aimed to elicit what effect their perception of Hlokomela's identity (the meanings they attached to the project) had had on their relationship to the project.

3.3.3. Data analysis

All interviews/SGIs/FGDs were audiotaped. In addition FGDs and SGIs were videotaped, following respondents' granting of informed consent for this, as stipulated by the Wits Human Research Ethics Committee. The video data were used to clarify transcription queries (for example, who was speaking and what they were saying) where the audio data were not clear.

Audio and visual tapes were transcribed verbatim and where necessary translated into English. This was done after each round of interviews/SGIs/FGDs. There were three rounds, each a month apart, providing time for transcription and translation between each round.

Elements of a grounded theory approach (Charmaz, 2006) (Glaser et al. 1967) were used to analyse the transcribed texts. This approach was chosen because it allows the discovery of attitudes, perceptions, and real-life experiences as expressed by those most affected and where little is known in advance about these experiences.

Texts were subjected to successive levels of coding: initial, focused, and theoretical, using Max QDA software to manage the text data and coding. This process allowed the researcher initially to break down or deconstruct the data into the smallest units of signification (words, phrases and sentences) and then to reconstruct, through analysis, the emerging or confirmed conceptual categories into an incisive analytical whole, grounded in the data (the experiences and perceptions of the interview subjects) but subjected to successive levels of comparison and analysis. Initial coding was a thematic word by word and/or line by line coding of the text and was guided, initially, by the exploratory hypothesis for the research, itself informed by the data collected over five years of project work at the site and the disciplinary perceptions brought to the process by the researcher/analyst. The codes derived from this process were provisional and best fitted the data. Codes were progressively reworded where necessary to better fit the data. In the focused coding process data were compared to data (eg interview with interview) to refine the initial codes and the most significant and/or frequent codes were identified. These were then organised into substantive categories. At this stage of emerging substantive categories a greater degree of analytical coherence was possible. In the theoretical coding process, theoretical, integrative 'families" of codes were applied to enable analysis particularly of relationships between the substantive categories. Where necessary, theoretical sampling was applied to

further explore the substantive categories to the point of saturation (ie. until they yielded no new insights).

The stages of coding, categorising and analysis listed above were not necessarily sequential or exhaustive and allowed at any stage for the emergence of new insights and categories. At any stage, gaps in the data could be identified and addressed through further data collection. In the event, there were no major shifts from one coding stage to the next. Only one significant change to the original interview schedule was found to be necessary – that was the need to conduct an SGI with male Hlokomela staff and two FGDs with mostly-male farm workers in order to identify any significant differences in perception by men and by women. In most cases, the initial lines of questioning reached saturation relatively quickly. The interviewer was able then to pursue other lines of questioning that had not necessarily been anticipated in the original questionnaires but rather emerged through the interview process.

3.4. Ethical considerations

Ethical clearance for this research was obtained from the Wits Human Research Ethics Committee (approval number M091161 – see Annexure J). Proper regard was given to enabling informed consent by all participants and to preserving confidentiality. All participants were given information about the research and asked to sign an informed consent form if they decided to participate in the study. Participation was voluntary and non-participation or withdrawal from the research would not affect the participant in any way, including their role in the project and their access to services.

Opportunities for the sharing of information and analysis with participants through appropriate mechanisms will be explored with Hlokomela to ensure that the project benefits from the research process and findings. Creative ways will be sought, in particular, to communicate back to farm workers the knowledge and insights that they had shared with the researcher and the findings that emerged through analysis of the transcribed texts.

4. Findings

4.1. Introduction

The findings described and analysed below are derived from the responses to a series of questions asking respondents initially to express what they thought or felt when shown a picture of the Hlokomela project's logo and images from its media (billboards) or when they heard/saw the name "Hlokomela" or heard/read its slogan "Farm Workers Care for Each Other". These responses were to the formal, material representations of Hlokomela's collectively developed identity.

Subsequent questions sought to uncover why respondents made these associations. It is important to bear in mind that for the purposes of understanding the processes and perceived effects of collective identity-making, the extent to which people's perceptions of Hlokomela corresponded to reality is less significant than that they had these perceptions. The perceptions shaped how they responded to Hlokomela and how they viewed themselves and others in the light of this response.

A further line of questioning was followed with those who had directly participated in making the Hlokomela logo and media. The aim was to uncover what their involvement in this process had meant to them. How did their perceptions of participation in developing representations and communications approaches, as part of the identity-making process, affect their work and their sense of themselves within the project. Taken together it was hoped that the responses would reasonably indicate the effect that Hlokomela's collectively made identity had had on the various stakeholder groups (farm workers, project staff and agents, partners and other stakeholders) and how their perceptions of Hlokomela had influenced the work of the project (and vice-versa). In short, it was hoped the data would enable answers to the research question: **"How does (or, does?) a collectively made local project identity help to promote health?"**

To a greater extent than had been anticipated, the effects of identity-making that emerge in the findings are circular, mutually influencing and synchronous; they are presented under separate headings for convenience's sake but it will be obvious that most could and probably should equally have been treated under one or more of the other headings. For example, the finding that most people felt an affinity with Hlokomela is dealt with in Section

4.3: *Hlokomela Belongs to all of us*, but this sense of belonging also to an extent explains and is explained by the effect that education and the sharing of knowledge and information had on participants, as well as the sense of empowerment that agents of the project reported when carrying out their duties – facilitating communication and providing care for their peers, addressed under 4.4. Equally, the oft-cited good standing of Hlokomela explains and is explained by the equally often quoted excellent service delivery of the project that respondents reported had set it apart from services provided (or not) by other institutions. Because the notion of collective identity and identity-making is so diffuse, the interplay between representation, perception, action and outcome needs constantly to be borne in mind.

4.2 The "branding" of Hlokomela

4.2.1. Hlokomela, it's standing out

The first finding to emerge from the data was the fact that most respondents viewed Hlokomela as something unique, a standout in the local space. This perception of uniqueness and of high quality was reported not just by Hlokomela staff but by all respondent groups including stakeholders who had little reason to needlessly praise Hlokomela. The project had clearly succeeded in representing itself as distinct, special and pertinent to the farming community, setting itself apart from other service providers, in particular the government clinic in Hoedspruit town.

Hlokomela is a project of the Hoedspruit Training Trust (HTT), yet farm worker respondents, other than Nompilos, indicated that they either had never heard of HTT or gave a confused definition of what HTT was, suggesting for example, that it was a clinical acronym like "HIV". One respondent stated that he had written the letters in a book "*somewhere*" but could not remember what it meant. In terms of the projection of the identity of Hlokomela, these responses suggest that the name Hlokomela had been successfully projected in the farming community (a suggestion confirmed broadly in both emic and etic data – for example, those gathered from farm workers, local government officials, the Queen of Mabins, 60 kilometres away) to the exclusion of HTT and that the central and catalysing contribution that the parent body had made was largely unrecognized and invisible, which has implications for the sense of affinity and belonging that farm workers were able to feel for Hlokomela.

> *"To be honest **I don't know anything about HTT**" (3rd respondent, male farm worker, Hlokomela Clinic group interview, para 61).*

> *"Myself when we come to the meeting here **they teach us even these words 'HTT'**. I have paper [a book] where I must write everything to make sure after work when we are finished the focus group. So **I forgot the book because that is where I explained these words // it's not only HTT. There are some others // even HIV //** I won't call it HIV by the way we were learning by now" (1st respondent, male farm worker, Hlokomela Clinic group interview, para 62).*

As might be expected because of the greater engagement that Nompilos had with Hlokomela staff and management, Nompilos generally had heard of HTT but equally knew very little about it and did not express any sense of ownership of it. At most they related HTT to farm management and to the provision of agricultural training – HTT, before it launched the Hlokomela project, had been a farm worker training institute serving the needs of farm management for a skilled workforce. As was generally the case with descriptions of perceptions of Hlokomela, what had made Hlokomela distinct was that it provided care specifically to farm workers, "*the people*".

> *"Ah I'm not sure (of the difference between HTT and Hlokomela), but **Hlokomela it's like looking after the people**. Then HTT is where **people get trained** in order to Hlokomela (provide care for) the people" (1st respondent, male Nompilo interview, para 23).*

A farm senior supervisor, not an agent of Hlokomela though in regular contact with its workings on his farm, expressed the same notion of the distinction between Hlokomela and HTT suggesting that even those relatively distant from Hlokomela have the perception that it is "for" farm workers (the people) and is strongly associated, in the public view, with addressing people's health and personal needs, as opposed to HTT which is viewed, if at all, as a training arm of farm management. He, like others, expressed no sense that Hlokomela is in fact an HTT project.

> *"HTT – I think. That's me, my opinion. According to my opinion, that's HTT, I think, this ah, **because Hlokomela is the project which is always helping the people, HIV,***

> ***what what private issues, giving them the tablets or the treatments and sending them to the hospital*** *…* ***but HTT, but this group is always – they are keeping us to train us, what we have to do in order to, don't do this, to do this, do this*** *– they show us the examples. You do this you do this" (Senior supervisor, para 40).*

Hlokomela staff were generally more descriptive of the difference between HTT and Hlokomela and were clear that the distinction was not accidental but rather a deliberate strategy to foreground the Hlokomela "brand" at the expense of HTT, because, they felt, the Hlokomela brand could and should be (and was) seen by farm workers as being for and about them. They also expressed the notion that the brand was strengthened and made effective by *"the work that we are doing"*. They further described that the work of projecting the Hlokomela identity included both projection (eg. through the name and logo) and messaging in media (newspaper, TV, posters, branded paraphernalia) as well as by word of mouth – they as agents of the project using the name "Hlokomela" at every occasion, and members of the community doing likewise. Their descriptions of the perceived success of brand projection suggested that for them – and for the community at large – the brand had been thoroughly incorporated, literally.

> *"And* ***of course the work that we are doing*** *and again* ***the one that is standing out most*** *in the billboards* ***you see the Hlokomela logo****, not HTT. The other thing is all the learning materials – the ID wallets where it has images, numbers you know (emergency phone numbers), the posters and everything, you know,* ***Hlokomela it's standing out****. When you started you asked us what do we think of thatF.* ***It was the first thing to come out before the HTT logo. Hlokomela logo came out before the HTT logo****. So I think* ***the logo has impacted more on the organisation*** *because* ***it was first to come out and was standing out most for the time****. When you look at the newspaper* ***it's the first thing that you see, the Hlokomela logo,*** *it's there. Yeh,* ***it's popular****. I don't know whether to say* ***it's famous*** *(laughs). Hlokomela,* ***it's always Hlokomela, Hlokomela in our mouth****.* ***When we think of the organisation, it's Hlokomela****" (Female Programme Manager, 1st staff interview).*

Her colleague expressed a similar view, that through the deliberate broadcasting of the Hlokomela identity in the public space, Hlokomela had become well-known, whereas HTT had remained relatively obscure and in the background.

4.2.2. People know what Hlokomela is and what Hlokomela does

Many respondents made the link between what they perceived as being Hlokomela's distinctiveness – its "stand-out" status in the locality, its success – and the quality of the services it provided and the quality of the project's interactions with people generally.

A male Coordinator stated that for him the reason for Hlokomela's popularity was not simply because the name was projected successfully but because *"people know what Hlokomela is and what Hlokomela does".* He made the link that was made by almost all farm worker respondents between their identification with Hlokomela – the name – and Hlokomela's actions and suggested that this link was what gave the name substance and credibility.

> *"It is the same. When we go out* ***people don't know about HTT****. Only the farmers (owners/management) who know about HTT, who talk about HTT, we are going to HTT. But* ***people on the ground, people around this area, if you can go to Polokwane, I will never say I am from HTT. The reason will be they will never know what is HTT****. It will take time to explain but* ***if I can say 'Hlokomela' because they saw it on TV, they hear about it on the billboard, everywhere they go people talk about Hlokomela, they know Hlokomela not HTT****. Sometimes it's confusing because people will ask me questions. HTT, it's Hlokomela what? – because it's starting with "H" – Hlokomela, what? It's the Hoedspuit Training Trust. So what's the relationship between HTT and Hlokomela? On the vehicle on the right hand side it's HTT and on the left door it's Hlokomela. What's that? – I say, no it's the one thing. But* ***I prefer to call it Hlokomela because it's more popular and people they know what Hlokomela is and what Hlokomela does****" (Male Coordinator, 1st staff interview,).*

He further stressed that Hlokomela's actions were always carried out under the name of Hlokomela – that the link between brand and action was the result of a deliberate branding activity.

> *"(How do they know) About Hlokomela?* ***The good work that we have done to the Hoedspruit community****.* ***Everything we have done we have done in the name of Hlokomela****. Hlokomela* ***they feel that Hlokomela it's their own thing****. It's not like HTT. HTT it's more on the farming institution but* ***Hlokomela it's for the farm***

> ***workers****, not for the management.* ***The farm workers feel that it's for them, Hlokomela****" (Male Cooridnator, para 68).*

One stakeholder respondent, a Democratic Alliance proportional representation Councillor on the local municipal council, with sometime ties to the project, described the distinctiveness of Hlokomela in slightly different terms, equating Hlokomela with unbuntu, but equally stressed the quality of the work, its groundedness in the local and the apparent uniqueness of the scope of its inclusivity – elsewhere noted to be a unique feature of Hlokomela's representations of its identity – as being key to its success in defining a unique space for itself in the locality, and one which was capable of attracting the interest of influential politicians (a perception anchored in fact):

"Ja, there was one NGO sponsoring the whole Mpumalanga province and Limpopo pumping lot of money but when you go to the reality, the work, the work it's not there. But when it comes to Hlokomela it's ***really very, very unique****. And remember, one positive thing about Hlokomela****, it's pure farming area****, it's pure farming area. And the municipality it's pure rural poverty stricken, that's why now they want to learn from Hlokomela to say let's go down to the rural and see why are they achieving in the rural area. Why is it these farmers different – remember the racial polarisation in South Africa and Hlokomela is coming, is coming….even the previous MEC of health in Limpopo will come and attend Hlokomela events because practically it is not only because they have events, they have sharing sessions, knowledge sessions, all these issues because sometimes politicians read, they read and they see a South African NGO in a rural area doing very well, they start to want to know more, what is happening with that rural NGO in fact wherein farmers….when South Africa, the paradigm shift in South Africa, we view things in terms of race now but because you have whites, blacks involved, South Africans involved, that generate a lot of interest we want to know what is happening because of the paradigm shift – but Hlokomela's coming to say people, we are all South Africans, we can do…HIV and AIDS affect both, both the farmers and the employees, deep down to the level of the family and the productivity, and the business ……. // ……. that's why government the interest, I think they they also want to learn from Hlokomela" (Stakeholder interviews, PR Councillor, male, para 28).*

4.2.3. We are "doing that message"

Responses indicated that people make a strong link between the project identity (name, logo, etc) and the actions that are undertaken in its name (health care /advice/ support/ communication/ teaching/ togetherness/ change). To use the language of branding, it appears that **the "brand proposition" is demonstrated and validated in action.**

Respondents consistently reported that the markers of project identity – name, slogan, logo – evoked for them positive qualities, actions or experiences that they associated with Hlokomela. This suggests that the markers were not empty signifiers but rather signified something real with which respondents strongly and positively identified, and which were pretty much consistent across all respondent groups. This is perhaps best summed up in the expression that "*they (Hlokomela) are doing that message*" – ie. that words or

representations (the symbolic identifiers of Hlokomela) were perceived to be strongly supported by beneficial actions, which were wide ranging (ie. not limited to HIV only but including the provision of information, advice, care, help, bringing people together (enabling communication, restoring dignity).

> *"I can say every time I look at the logo, mmm… more especially the circle, for me **it's a non-stop communication**, it's a circle of di….., it's a circle of everything, looking at the two arms and the hands **it reminds me of the Nompilos and what they do on the farm, helping, taking care** – it's the **comfort hands** to the farm workers" (male coordinator, 1st staff interview, para 9).*

Similar reactions to the logo were expressed by respondents not directly connected to Hlokomela and therefore who might be expected to have less of a personal investment in its identity and no ulterior motive for giving positive testimony of its work. The Clinic Sister from Hoedspruit Clinic stated that for her Hlokomela puts into practice what its slogan expresses, referring specifically to clinical care and to the fact that it was farm workers, in the form of Nompilos, who administered the care:

> *"**I think it's true** (the slogan) because if **Nompilos is one of the farm workers** – because if someone is coughing … because that day when I visited them, at Hlokomela, they (the Nompilos) told me – because they know the signs and symptoms of TB, if someone is coughing they advise him or her to use the toilet paper and not to spit the spittle because others can be infected. So **they are caring for each other because if they see that this one is ill, they refer him or her to Hlokomela then that patient can, they can even refer that patient to the clinic**" (clinic sister, Govt Clinic, Hoedspruit).*

Similarly, a Human Resources Manager from a group of land restitution farms that had been a Hlokomela partner for two years reported a strong association between the logo and his sense that Hlokomela had brought real benefit to farm workers, both in terms of providing accessible clinical services and in terms of restoring dignity to a neglected and vulnerable population:

> *"And I think it (the logo)* ***is a very good sign for me*** *because as you know that on the farms really our farm workers, some, or most parts of the country* ***they are very neglected****. And when we get an organisation like Hlokomela which is really have* ***taken that effort to try to help the farm workers*** *and ehh in this situation they are I think really* ***they have made a big difference*** *to me* ***when I always see these signs I feel happiness in myself because I feel happiness for the workers*** *because our workers they are very poor, some of them are very vulnerable, the clinics are very far and* ***Hlokomela is bring that intervention that feel that the dignity of our workers has been restored"*** *(Farm HR Manager, para 28).*

Other respondents expressed the feelings evoked in them by the logo less in terms of what they *do* than what they *think should be done*, suggesting that there is a strong identification for them with the particular set of values that Hlokomela sought to project, and their role in giving effect to these – to a shared intentionality. Some Nompilos, for example, spoke about the need for helping, togetherness and inclusion – most likely a reference to a need to mitigate the isolating and excluding effects of fear and stigma:

> *"The hands will …* ***must hold each other*** *to trying to* ***help people*** *who have the disease or something illness, to make, to make, to live,* ***to live together****.* ***Not to separate each other****, to just* ***live together*** *…" (Male Nompilo interview, para 14).*

> *"To me there is this thing, they say 'ah, ah* ***Mbanani, let's hold together****', so* ***every time I see this sign I just think of holding together****, whether you HIV positive or negative" (Male Nompilo interview, para 13).*

4.2.4. It's always Hlokomela in our mouth

For the staff respondents there was an association between Hlokomela and the spoken word (*"It's always Hlokomela in our mouth"*) and with informality, as opposed to HTT which existed *"in the files"* and which *"we don't speak about",* suggesting that the staff were conscious that Hlokomela had a different register or tone that set it apart from HTT (informal versus formal, popular versus corporate, oral versus written) one that was for "*people on the ground, people around this area*" though they did not expressly articulate here what the value of this distinction was, implying simply that it was, in their view,

enabling of identification and recognition on the part not only of farm workers but of other stakeholders too.

> *"Well, umm. That is a tricky one. For me **Hlokomela it's a more popular name**. You know when I introduce myself wherever I go I will say I am (name) working for Hlokomela as a coordinator or programme manager – **I don't put HTT that much**. …..How can I put it? ….**HTT I will say is just the name of the organisation which is somewhere in the files** but **we talk more about Hlokomela**. And **even the government will talk more about Hlokomela**, Hlokomela. But **HTT is something else we don't speak about**, it's something… **it's the registered name**, how can I put it…. it's the NPO, the non-profit organisation, the name, it's the overall name of the organisation which **we normally don't use** but we like to bring it up but **it's not always in our mouth**. I would say **we don't normally speak about HTT** (laughs)" (Female coordinator, para 64).*

Her colleague, who had played a significant role in the development of Hlokomela media since its inception, further described how the Hlokomela name had succeeded, for him, in attaching to itself in the public eye the quality of the familial, the personal, the informal – as opposed to the institutional formality of HTT, the registered body. Through this shift in register the project had become accessible to "*most people*" ie. the adoption of a register that was less formal and more popular had enabled an identification by the broader community with Hlokomela. He also recognised the catalysing role of HTT but suggested that the project now had a life of its own, independent of its initiator – the project was now the entity that carried out the actions in its own name. The analogy used to describe this transfer from HTT to Hlokomela was that of a person shifting from the use of a formal surname to the less formal first name implying a shift from an initially formal register to a more intimate, warmer friendship and cordiality.

> *"…. HTT to me is **a person who has seen that it is important to have Hlokomela**, but **I see Hlokomela doing lots of things than eh HTT**. I'll say like, I'm Sipho Ngwenya [not real name], then the surname is HTT, the main person who is known is the Sipho one. So I take this (Hlokomela) as Sipho and HTT as my surname. **Most people** don't know my surname. So I'm not known to **most of the people** um – it's just **that most people may identify me** with Sipho Ngwenya. They say Sipho which one, the*

> *Ngwenya one so. But you find that* ***most people they know me as Sipho, they don't know me as Sipho Ngwenya - they don't know the surname****. So it is the same thing that is happening with HTT/Hlokomela. So it's Hlokomela, the surname of Hlokomela it's HTT.* ***So most people they don't know HTT, they know Hlokomela*** *(1st respondent, male coordinators interview, para 14).*

4.2.5. It tells people let's get united

In developing media, Hlokomela expressly set out to embody a broad inclusion and a sense of community.

Many respondents representing different stakeholders noted that for them it was significant that Hlokomela media included a broad range of social partners – local role players in the farming community. A coordinator, referring to one piece of Hlokomela media – a billboard – stated that projection of a broad inclusivity through Hlokomela media was a deliberate strategy of the project, in part because it would enable Hlokomela to be associated with recognised opinion leaders, but also because the communications were trying to reach the whole community and should therefore reflect the whole community. He underlined a perception expressed by other respondents involved in the development of Hlokomela media that the effect of representing broad inclusion in Hlokomela media would likely enable an identification – an identity affinity – in the minds of those viewing the media.

> *"OK, from the beginning this billboard (Annexure G, the Oaks)* ***is talking about…..is aimed in the community*** *(the Oaks). We have* ***took the community members*** *like we have Chief XXX (traditional leader in a nearby settlement) and some of the beneficiaries, some of them are patients in our clinics, Nompilos, people from our municipality, the farmers, some community members, staff members, just* ***a combination of all the stakeholders coming together****.* ***These people have got an impact, ja, they are the role models in the community*** *– so when people look at this kind of a billboard and reading the message it's like* ***those words are coming from those peoples mouth, they will listen and maybe, because they respect those people, taking the message seriously****" (Male coordinator, 1st staff interview, para 54).*

Many respondents noted that the difference between representations in Hlokomela media as compared to other media was that Hlokomela media depicted a wider range of stakeholders standing together, and that this indicated for them that Hlokomela was locating the fight against HIV within a broad partnership, within the community. They noted that this representation of inclusion would be read as a call for united action. And, significantly, this call for united action would be located locally, that it *"shows that they fight from the community"*.

> *"I can see the difference because this one (Annexure A) for Government is saying the Government is fighting HIV so that makes me think that it's Government staff that are fighting for HIV from the (local) Municipality up to the National (level).* ***And then this one*** *(Annexure B)* ***is mixed – it has stakeholders, community, you see NGOs, Hlokomela and it looks like it's for Limpopo but this one (A) looks like it's for the Government only*** *and it talks about Government // according to me. People here (A) are from Municipal until National but this one (B)* ***shows that they fight from the community*** *not from // I don't know how to put it……" (Female Nompilo, 1st FGD, para 212).*

> *"And you check this one (Annexure G - the Oaks)* ***is in most cases both leaders and workers****, this guy is HIV positive, normally comes from Zimbabwe, this is the tribal leader, this other ANC PR councillor around the town, and the Nompilos and the likes, and the farmer there at the back,* ***and it tells people let's get united****" (PR Councillor, male, para 46).*

There was generally an imprecision in descriptions of the "community" that Hlokomela was perceived to constitute, a blurring of the boundaries of who was included or excluded, with implications for the effects of bridging and bonding which are seen as critical to the building of social capital and will be analysed further in "5. Discussion".

Who Hlokomela is "for" was variously described as "we", "all of us", "everyone", "the farming community", "Hoedspruit", "the Hoedspruit community", and "Limpopo" but respondents did not venture to further define exactly who belonged in any of these categories. Generally, farm workers were expressly included, but as for who else might be included, the door was left open. This is typified in the response of a male coordinator (who

began his association with Hlokomela as a Nompilo) who described his sense of the Hlokomela collective as follows:

> *"Ok, when I say "we" I am still having this mind, by this mind **I see myself as a farm worker**. When I say "we" I am talking about **the farming community in large**. When I am saying "we". Not specifically for the coordinators or all the staff members, but **I am talking about the entire community**. When I am saying "we". For example, if we are going to paint the mural somewhere, it's not all about the Hlokomela staff members who are going to paint those murals. **We as the Hoedspruit community**, we are going to paint that mural. If we are going to have an event, it's we as the Hoedspruit community **because what we are doing we involve everything we are doing, everything together as one**. That's why I am saying we, we, we, we. **It's all about the entire community"** (male coordinator, 1st staff interview, para 71).*

4.2.6. We are one big family

The familial was a theme expressed repeatedly by respondents in reference both to the broad inclusivity that they perceived Hlokomela to represent – *"we are one big family"*– as well as to relationships between staff and management – *"we are like a family"* – and even to a perceived contrast between the formality of the parent body, HTT, and the project Hlokomela, which was viewed by staff in particular as embodying a familial disposition (described by one respondent [see above, section 4.2.4.] through the analogy of a person's surname (taken to be HTT) used in formal situations, distancing, versus the first name (Hlokomela) used between friends and family and indicating a closeness, a warmth, a caring). Respondents generally expressed a sense that in its activities Hlokomela practised and communicated qualities that are generally associated with familial behaviour – intimacy, caring, sharing – relative to a potentially more threatening, less dependable "outside world". Responses of staff in particular indicated that they viewed the ideal family as the model for the kind of behaviour and relationships that they were attempting to reproduce, both through media messaging, information, communication and the quality of care – a real and loving care. Staff viewed the project as a family, they viewed the broad social partnership as being "one big family" and they viewed the project's proposition (caring for each other), as expressed in its slogan, as being the central tenet of their practice.

> *'Farm workers care for each other' – every time when I look at this (the slogan), it gives me this, we are, as a farm workers* ***we are one big family*** *– you know* ***there is a good relationship between the farmers, the farm workers and the people in the community, which means we take care of each other*** *– it goes back to the name Hlokomela, we are just taking care of each other" (Male Coordinator, 1st staff interview, para 13).*

> *"I know the Nompilos for some of them for the last 18, 19 years now. So, um,* ***they are like my friends now*** *– that is what Hlokomela // it is* ***a big family"*** *(Project Director, para 21).*

Farm workers commonly reported that through Hlokomela they had come to place a renewed emphasis on family – on caring for the family. They indicated that the "teaching" that Hlokomela conducted and the dialogues that ensued, in which they *"remind each other"* of what caring means, have engendered a strong association between Hlokomela, the family and care. Men in particular indicated how they now considered that caring for the family should be a focus of their attention and concern.

> *"I think it's because* ***we all share our problems*** *like* ***to remind each other how to look after our families, how to take care of our families and so it's all about family issues"*** *(Male Gingirikani member, individual interview, para 114)*

> *"Okay,* ***when I look at Hlokomela (logo) with the two hands I think of my family. I think of my wife and my children*** *that* ***I need to have one partner that is my wife*** *and I need to* ***look after my children. When I look at the two hands it means coming together with my family*** *I must have one partner based on the information that I have got. So it means that* ***I must take care of my family*** *and be careful whatever I am doing (Male farm worker, 3rd Gingirikani group interview, para 22).*

Staff also stated that it was a deliberate strategy of the project – in its media and in its actions – to emphasise family as the unit needed to respond to the HIV challenge, and also in terms of health service delivery, to make the service accessible and responsive to families. For example, the Programme Manager stated that it was an express aim of the project to

project the importance of family in facing the challenge of HIV collectively and not individually:

> *"This time (Annexure D)* ***it's more on sort of the family****. We took pictures for different people including staff members. We involved children to be in the picture, a father and a mother, you know, farmers' wives and stuff like that, so that* ***as family we also need to fight this –*** *it's* ***not like it's an individual person – it affects families as well*** *so* ***it's more a family thing****" (see the box below: Observation) (female Programme Manager, 1st staff interview, para 49).*

Similarly the Project Director placed an emphasis on family when describing the quality of care that the project attempted to deliver: *"We are not sending anybody away because we really want them to have holistic //* ***it's children, the mothers, the fathers, the whole community****!" (para 33).*

Observation: Heritage Day Celebrations, December 2010

At Hlokomela's Heritage Day celebration in 2010, it was observed that whole families attended the event, including young children, and that together they watched and participated in dance, song and dramas dealing with HIV and healthy relationships. Old and young stood too, around a large tree, to take part in a large group dialogue (approx. 70 people) on the topic for that month: "What stops us from going for couple counselling (HCT)". In keeping with the celebration of heritage, there were dance performances by different tribal groupings, including by migrant groups from Mozambique. There was also a mixed gender football match enthusiastically supported by those in attendance. It was apparent that the accent on the familial and the notion of inclusion that were emphasised in Hlokomela imagery and messaging found expression too in activities conducted under the aegis of the project.

4.2.7. The pictures (…) identify the message to the community of Hoedspruit

The Guidelines developed for the Hlokomela project on the making of local media stressed the strategic importance of the use of local imagery as a means of enabling an identification with the project by farm workers and other stakeholders. It was specified that a successful communication tool:

- Affirms client community (portrays client community in a positive light, as local

"heroes" and agents of their own development) and communicates the possibility of change

- Uses local language, culture and imagery.

(Annexure I – Checklist of an effective tool)

The principle of pertinence that the Guidelines stressed was remarked upon by many respondents.

In responding to samples of Hlokomela media, respondents commonly remarked on the use of local imagery, which for them strongly linked Hlokomela with Hoedspruit, the Hoedspruit community, and even more specifically with the Hoedspruit farming community. This was true both for responses to Hlokomela media and when describing their experiences of the project and activities seen to be associated with it.

Responding specifically to Hlokomela media, several respondents noted that for them Hlokomela media was distinct from any other media in that it represented local, well-known personalities and that this enabled farm workers in particular to identify with and feel some affinity with what was being represented, and with the health messaging.

> *"**The pictures (…) identify the message to the community of Hoedspruit with the people that they know** them to get understand (?) in time and easier…." (Male Nompilo, 1st FGD, para 213).*

> *"You see when you get the Hlokomela communication system differs, that's why I like the way they speak, **this is the farm workers** this is the other guy Annexure C – condoms) I was speaking about, XXXX, he works at Bavaria farm, **how does this helps? They are well known, people know them, that's how it helps"** (PR Councillor, male, para 46).*

There were a number of references made to the power that the visual representation of local people had in enabling local people to connect with Hlokomela. Recognition was stated as a valuable effect of Hlokomela media, something that could enable people to consider change, particularly when the image was linked to a positive demeanour – smiling/happiness – and a valuable service – notably that provided by the Hlokomela clinic and by the project Nompilos.

One respondent also observed that this effect was in contrast to what he inferred was more commonly the case with media in a rural area – that people could not "recognise" those depicted:

> *"And as people around this area when we see that picture and especially as you recognise that face and we are in a rural area where some of the billboards you see a person that doesn't recognise, but when you recognise something or somebody on the billboard that you can attach the face to that person, it makes a change. And I think that in this area this pictures really shows us that because some of the people that you see here, this is the people that maybe I know, and ehh some of the guys they know these people, and when you see these people their faces are like this and it just shows you that something is happening, something is being done at this clinic, something that can change other people's life, something that can really make other people happy, this is what this picture is telling me" (HR manager, para 40).*

For another respondent the appearance of locally known people in the Hlokomela media would make people proud (note: the same respondent described elsewhere how he felt proud, as a farm worker, to be displayed in public, in Hlokomela media). He ascribed what he thought would be people's positive reaction to seeing people they know in the media, set in the local landscape, to the fact that they would be able to relate the image to their own experience, that they would see it as a representation of their own lives in their own locality and that this recognition would provoke a stronger response than if the image depicted something from elsewhere. For him, the sense of place that was projected in the media was important because he felt that by emphasising place it would indicate also the possibility of change in this place:

> *"Um, **I think they are proud**. Because, like myself I am there – I've got others who are there, ja I've got, I see a change agent (Nompilo) who is there, farm management, **people who are here on the farms**, that's what I see. So people have got something to talk about. When they look at this they look at the mountain, they see that this is where we are. **It somehow gives a thinking that this is about us, this is about where we are staying**, so rather than being a billboard that may be coming from …. Hlokomela or anyone on the logos, but **it is about them, it is about what is***

> ***happening here***. *I don't think the people will say this is a billboard from Gauteng, we are trying to umm.. advertise Omo washing powder.* ***But the people will say that this is about something that is happening here in Hoedspruit, looking at the setting and the people who are there"*** *(Male Coordinator interview, para 31).*

This respondents' assessment of the effect of localized imagery was borne out in other respondents' reactions to Hlokomela representations. Several respondents recounted a personal narrative relating to people they knew on a billboard, suggesting that the effect of local recognition was capable of effecting an internalized response directly related to their own experience.

> *"When I see A (name of a person in the billboard E with vendor stalls – Annexure E) I feel proud because she works at* (farm name) *where B works* (a friend of the respondent) *and this woman knows her status and B encourages her. Just because of health talk* (10 minute health information sessions held before the first morning work shift, several times a week) *she did come to me that she is in the farm because she wanted to work even though she doesn't feel well…….still she is not feeling well and then I asked her if she did a HIV test before and I advised her to test and I told her that now there are ARVs for people who work on the farm. After talking to her she did the test and she found out that she is HIV positive as I am speaking now she gets ARVs" (Female Nompilo, 1st Nompilo FGD, para 249).*

Farm workers generally reported that accessing clinical services at Hlokomela was made easier for them because they had seen some of the clinic personnel in the Hlokomela media, that these were people they knew, and that as a result this made them feel more comfortable to approach the service. Their responses suggest an interplay between the projection of familiar characters in the local setting, linked to Hlokomela, and the real experience of a superior service at Hlokomela that is linked to these projections.

That the characters were known would not on its own necessarily explain why the respondents felt more at ease to go to the Hlokomela clinic – indeed it is commonly reported that many HIV patients would rather travel some distance to attend a clinic where they are not known, for fear of a breach in confidentiality. Rather it is the fact that they are known, *and* they are part of Hlokomela, *and* they are projected prominently in the public

space, *and* the service they deliver is experienced as one of high quality. It is through this complex interplay that the projection of identity was fully performative – that is, identity appears to function to optimal effect when it embodies other key and valued components of the project.

> *"The **person who helped me the day I went there was Sesi*** [name – a Nompilo who appears in the Hlokomela media being responded to]*" (Male farm worker, HD FGD, para 217)*

> *"(I like) this one (billboard A) because it has **people who work at Hlokomela and I know them**" (Female farm worker, HD FGD, para 215)*

> *"I like this one (billboard A) because people who are here **I know them** and when I go to Hlokomela **I find them and they don't treat me badly – they treat me well**" (Female farm worker, HD FGD, para 215).*

4.2.8. People can look at us, and we can take care of each other

Farm workers in particular noted how empowering it was for them to be seen, in the Hoedspruit locality, either in billboards or in the press, all the more so because it had never happened before.

> *"OK, looking at this billboard it reminds me of that time. Actually for me it was a starting point. I was feeling that, **now** we are, **I was feeling that we are owning the programme, the whole thing**, **now as farm workers we are on a billboard**, I was so happy, looking at this picture – every time I look at the billboard and the posters with those pictures, farm workers, it always **motivates me that we can, as a farm worker** – because most of the people still have this mind that farm workers are the people who are not educated, the people who are at the lower level – and **now we can come up, and we did, we are out now**. **People can look at us, and we can take care of each other**, that's what we are here for. Yeh!" (Male coordinator, 1st staff interview, para 18).*

The perception that Hlokomela had restored the dignity of farm workers was repeated by other respondents.

4.2.9. Pictures speak louder than words

In addition to the localness of images being reported as significant, several respondents also made reference to the power of the image as opposed to the written word, and in particular to the power of images of people's faces. This was well summarized in one respondent's observation that previous media in the area had relied on the written word, described as "*just writing, talking, reading*" whereas Hlokomela representations emphasized the human. One participant said: "*now we are reading a people's faces*". The visual representation, local and familiar in content, and expressing positivity, was felt to have a far greater power to communicate than words.

> *"We are no longer talking about adverts, we are talking about **advertising with people**. **And people that are happy**…..there (the government billboard A) we are just writing, talking, reading, now (with the Hlokomela Billboard E) we are reading a people's faces and when we are reading a people's, **a person's face it tells you a story**, it tells you something" (Farm HR manager, para 39).*

Others too noted the value of an image, rather than words, to communicate a message, and commented that this would be particularly effective given that some did not know how to read and write. This was indicative of an intuitive appreciation on the part of farm workers and other participants of a basic communication principle – that the form of the message has to be appropriate to the receiver (ie. they have to be able to receive it) *(*Bovee et al., 1992). This runs counter to a commonly held view that non-experts, like farm workers, would not have the capacity to develop effective media.

> *"I see all those **people with smiles** so if I don't know how to read or write I will see that those people // **that means they are happy** (…) about use of condoms, because when I look there I see condoms and **I see smiles** to those people" (Male Nompilo, 1st FGD, para 251)*

> *"The workers from the farm um **they are working together, they are working together and also the workers and the farmers**, they say **all of them**, **they shout***

that we must all know our status, ***they smile they are happy*** *they know their status, and they know how to use a condom, I think so" (Male Nompilo, 1st FGD, para 252).*

"….and you also see the murals when you walk, ***the painting the murals, it speaks a lot****, because remember when you say the others when you know you see this sign (crosses his arms in front of him) it's danger/gevaar –* ***even someone who doesn't read and write can associate themselves with the murals, that's how it is important, it's not only about those who can read, you see this message even someone very literate****, (condom billboard, Annexure C) the man saying get yourself tested, condomise and the female saying using a female condom, all those issues, it's how, I like the way they speak" (PR Councillor, male, para 46).*

4.2.10. Now it just shows you that how big has this people now grown

Many respondents across respondent groups noted that Hlokomela media depicted a broad local partnership in the fight against HIV, that the imagery represented a united stand, that farm workers themselves featured prominently in the representations and that the people represented were well known locally. These characteristics were cited as having a positive effect in terms of being able to communicate with farm workers, to attract their attention, to indicate that something positive was happening *in the locality* and to encourage engagement.

Further, though, in responding to images of Hlokomela billboards, many respondents made no distinction between the image as a sign, a symbol with metaphoric and metonymic properties, and the thing being signified in the image, between the image and an external reality. It was as if the image was taken as evidence (documenting a reality) rather than as construct (a narrative inviting change, a self-fulfilling prophecy, something to which people might want to aspire). Respondents slid seamlessly in their descriptions of media images from describing what they could actually see – *eg. "the workers from the farm"* – to statements that indicated that they believed that these images represented an actual reality – eg. *"they know how to use a condom, I think so"*. For most respondents the image was *evidence* of a reality rather than merely a figure, a representation, a symbol. So for example, respondents would state *"Now it (the billboard)* ***just shows you that*** *how big has this people now grown…." (HR manager)* indicating that for him the fact that there were many people on the Hlokomela billboard was *a demonstration* that Hlokomela had greatly extended its

reach. One respondent stated: *"You know you can see the smiles* (in the image), *I think there is nothing wrong to speak about HIV and AIDS any more" (Programme Manager)* indicating that for her the smiling faces on the image were *proof* of a generalised happiness and a greater openness about HIV brought about by Hlokomela.

> *"Now it (the image on the billboard) just shows you that* ***how big has this people now grown to replace****….it's no longer* ***we are not longer just writing****, we can show by* ***numbers of people*** *that this thing has now grown so much and we can also* ***show by the faces*** *of these people that we have reached so many people that people* ***doesn't need us to write something****, it needs us to* ***show the face of people*** *that this is where we have reached people" (HR manager, para 39).*

It is further worth noting that even though the respondent was not a staff member or agent of Hlokomela, he used the first person "we" when describing the process of transformation that he believed Hlokomela had effected. As an outsider (non-farm worker) he was eager to consider himself part of Hlokomela. This same willingness to associate with the project was evident in other non-Hlokomela respondents and is described elsewhere in these findings.

A Gingirikani member agreed that what was depicted in an image prefigured a reality when he stated that *"according to me I would like to add on people (to a billboard image) so that Hlokomela can continue" (Male farm worker, HD FGD, para 264)* – ie. that the more people there are in the image, the stronger Hlokomela will be.

A related effect of imagery as something that enabled the viewer to surface and narrate personal associations, was demonstrated in many respondents' responses to seeing a simple image, the logo for example, which would unleash a lengthy narrative and train of associations that bore only a tangential relationship to what was actually figured in the image. So, for example, the logo (which is two hands tied with a red ribbon, in a circle – Annexure H) evoked the following lengthy narrative about the meaning of Hlokomela for the participant:

> *"I can say every time I look at the logo mmm more especially the circle, for me* ***it's a non-stop communication****, it's a circle of di….., it's a circle of everything, looking at the two arms and the hands* ***it reminds me of the Nompilos and what they do on***

> ***the farm, helping, taking care*** *– it's the* ***comfort hands*** *to the farm workers" (Male coordinator, 1st staff interview, para 9).*

And similarly the image of a group of Hlokomela partners simply looking out smilingly at the camera gave rise to a lengthy narrative about the perceived effect that Hlokomela (the Hoedspruit community) had had on the fear (stigma) and isolation that people had experienced previously in regard to HIV and seeking help.

The pertinence of the images was able to evoke a powerful set of associations related to individuals' lived experiences, perceptions and hopes, which in turn appeared to play a role in how they constructed and shaped those perceptions and hopes.

4.2.11. Now we are…now we are as farm workers on a billboard

In addition to the lines of questioning that have been reported above, relating to stakeholder responses to Hlokomela's media and "brand" identity, respondents who had participated directly in the development of the media were asked to describe what this process had meant for them, in order better to understand how participation in the processes determining how the project would represent itself – from messaging, to planning and facilitating dialogue, to developing mass media – might affect both the participants and the broader work of the project. Responses indicated two key effects that might play a role in strengthening the ability of the project to promote health in the area: participation in media-making (the formal aspects of identity-making) was experienced as individually and collectively affirming – previously untapped capacities were released and the relative "invisibility" of the farm worker community in the public space was overturned; and, the process meant a closer engagement by participants in the issues facing the community in terms of HIV and hence an enhanced understanding of the challenges faced.

A staff respondent (a Nompilo at the time of the development of the first billboard who had since risen to a staff position as SBCC coordinator) noted how participation in the process of media-making had extended his sense of what was possible for farm workers, including himself, to achieve.

Participation for him was closely associated with ownership and also with a sense of progression – from "*that time…a starting point*" when the experience was novel, to the

present when it could be inferred that he felt a greater familiarity with and mastery of the process. He further expressed an insistence that this taking ownership had been too long deferred: "*now we are…now we are as farm workers on a billboard*". Finally he conveyed a sense of the restoration of dignity and respect – no longer the people who are "*at the lower level*" but rather people who have "*come up*" and who are "*out now*" as if released from some hidden state that appearance in public media conferred. He ended by stating that "*people can look at us*" with a sense of jubilation and liberation and linked this new-found sense of recognition in the public eye to an increased capacity to perform his duty: "*and we can take care of each other*".

4.2.12. So from that day which Hlokomela developed I saw the changes, changes, yes

The project's guidelines for developing media and messages expressly underlined the need to communicate a consistent set of values or properties concordant with the project's actions and the behaviour of its agents and which promoted the possibility of change. The central value was care, and especially mutuality – caring for each other. A set of allied values and themes, linked to and supportive of the behaviour and social changes aimed for, also needed to be communicated consistently. A line of questioning sought to elicit what these values were perceived to be, by the various stakeholder groups, and how this perception influenced their views of themselves, the project, and others, in order later to analyse and describe how these effects might have enabled or otherwise the promotion of health in the area by Hlokomela.

Respondents across all groups consistently referred to a common set of values or qualities that they associated with Hlokomela. Chief among these were care – for oneself and for others – passion (in work), communication (including through dialogue), education, teaching, learning, knowledge and information (often linked to improved prospects for survival and a longer life and to taking their health and their lives seriously), and change for the better. More respectful and caring relationships between partners, and for children, and the link between this and the possibility of improved survival in the face of the HIV epidemic, was also frequently described in response to questions about what people felt when they heard the name Hlokomela. And finally, there was a strong sense of a before and after Hlokomela – that Hlokomela represented something new and positive.

*"When I look at the value of this billboard (Annexure F) it's the **passion** and the way people are **communicating** ehhhh the message that is there that shows that **we really care** as farm workers ummmm and then the…. you know, the **involvement**, people are **involved** in this you know. I don't know if…… looking at the picture again, people are not looking at the camera - it seems like **they are very serious** about the issue that they were **discussing**" (Programme Manager, Staff group interview, para20).*

4.2.13. Care / caring – "we really care as farm workers"

Care was by far the most cited quality associated with Hlokomela across all respondents. It occurred in reference to association with the project's markers of identity (name, slogan, logo) and media, as well as to the services provided by Hlokomela, the relationships between Hlokomela personnel and the community, an imperative felt by Hlokomela staff, Nompilos and Gingirikani, and the chief reason cited for people wanting to engage with Hlokomela. The Programme Manager defined her understanding of care as having a broad scope: *"it could be health related issues, it could be social issues, it could be any other issue that they (staff and Nompilos) come across, labour related issues…."*. Respondents indicated that they associated Hlokomela with care in each of these areas.

*"So **they are caring for each other** because if they see that this one is ill, they refer him or her to Hlokomela then that patient can, they can even refer that patient to the clinic" (Clinic sister, Govt Clinic, Hoedspruit).*

*"And is easy for them to go to Hlokomela because they get use to see our faces//we always go to the farms to **offer support**, to adherence sessions//just for farm visit to monitor. They always see us **if they got a problem they will just stop the car//I got this problem err we try address the problem**. And then when a person get help//when if that person it might happened that err that person will come to the clinic one day he will just see the same faces that they saw in the farms. And they get use of those faces and they feel more welcome" (Male Coordinator, Coordinators' SGI, para 173)*

4.2.14. The quality of Hlokomela care is distinctive

Among farm worker respondents the most frequently reported benefit that they associated with Hlokomela was the delivery of a *quality* health care service. As noted above, farm

worker respondents in particular frequently conflated the name "Hlokomela" with the Hlokomela clinic, sliding between describing the project in general terms to talking specifically about the clinic and its services.

Every respondent group remarked on the difference for them of the quality of care they associated with Hlokomela and that which they experienced or believed to be the case in relation to state-provided services – notably, the difference between the Hlokomela clinic and the Hoedspruit clinic, or the state clinics in the villages. Frequently respondents stated or implied that this was an important reason why people were drawn to associate with Hlokomela and why Hlokomela was well known and well regarded. The comparison between the perceived inferior quality of service at state institutions and that provided by Hlokomela was particularly strongly observed by farm workers, who experienced this difference most immediately and beneficially.

> *"When you go to Hlokomela you find **the nurses are working all the time**, they do not say today you don't get medication like at the village clinics. They will say they don't have medication but **if you go to Hlokomela you get medication any time** when you go there" (Female farm worker, HD FGD, para 166).*

> *"The thing that makes Hlokomela to be well known is because it **treats people well** and when we go from here and we go there **the nurses do not talk to us badly**. And others, I can tell them if I have a problem **they will listen to me or understand me**. **They don't look down at a person**" (Female farm worker, HD FGD, para 159).*

> *"It's **not the same as the clinics that we have in the villages**. Like if you go to one of those clinics if you go there sometimes they tell you that **it is hot now just come back tomorrow**."*

> *"Hlokomela here at the farms **helps us in many ways**. The thing that I learned from Hlokomela is that when you get there **you don't queue** like when you go to other clinics. Other clinics you have to be in the queue and you can end up not even seeing a doctor. **They do not care about you**. And then tomorrow again you will go to the same queue. So that means Hlokomela helps us in many ways……And again the time you go home you will already **have received the answer that you wanted**. And if*

*you believe that you are going to be better you will become better. You were not in the queue and the time you go home you feel alright because **everything is settled**" (Female farm worker, HD FGD, para 163).*

As was found in responses to Hlokomela media representations, there was general reference made to locality and sense of place when talking about the quality of service. Respondents highlighted that Hlokomela operates "*here at the farms*" and "*it is really good here in the farms*" which would suggest that the projected identity of localness described earlier in these findings is supported in people's experience of the project – ie. that local *is* different, superior and is tailored to meet the needs of farm workers in ways that are not met elsewhere.

4.2.15. We are doing things in a way that we invest more with beneficiaries' lives to bring the changes

Several staff respondents remarked on a perceived competition between Hlokomela and the state services and implied that this was a point of pride for them – even though they reported that there were high levels of practical cooperation between themselves and the government services, particularly regarding referral processes. It appears that the competition was a motivating factor for Hlokomela staff – they identified Hlokomela with excellence and were aware that people generally had the same perception (because it was so widely reported and acknowledged – even by Hoedspruit clinic staff).

*"Ya, we think now **we are a threat (to the state services) because** what we doing we are doing things in a way that **we invest more with beneficiaries' lives to bring the changes**" (Male coordinator, 2nd coordinator interview, para 165).*

*"….and people are now healthier and everyone is going to Hoedspruit clinic is just said that no **I need to go to Hlokomela**. As if **Hoedspruit clinic is no longer a clinic** so those people (the Hoedspruit clinic staff) they feel that we are talking the whole programme out of their hands and they are Government employees and **we are doing better**//and we are just an NGO. You know this is very err//I think they are concerned but they don't say this out but physically you can see that there is this feeling" (Male coordinator, 2nd coordinator interview, para 167).*

4.2.16. Education and learning

Education – teaching, learning, and the sharing of valuable information and knowledge – was frequently mentioned as an attribute that respondents associated with Hlokomela. The sense of the importance of learning, having new life-saving information, and having the "chance" to change behaviour in ways that would protect health and life, was strong throughout but particularly among Gingirikani members, who were perhaps more vulnerable than Nompilos or staff.

> *"Err, as it is written Hlokomela that means **I must look after myself** wherever I am going like as I manage to be here err **there are lots of things that I will be doing right now if I was not here**. But as I managed to come here **it will make me go far with my life** like I can go up to forty-five years if I look after myself. **The thing is I am learning or they are educating us about something and after that I will know how to look after myself and educate us about condom use in order for me to live for many years**" (Male Gingirikani, 2nd Gingirikani FGD, para 32).*

> *"I feel sharp [great] because where we are from **we didn't have anything like Hlokomela** and **Hlokomela helps us fighting against diseases**" (Female Gingirikani, 2nd Gingirikani FGD, para 35).*

> *"When I look at the picture or logo of Hlokomela it reminds me that in my life Hlokomela gave me a **better life** because if I look right now with the people I am sitting with it **makes me feel better about my life** and it **makes me feel like I will live a longer life**. If I look at this chance it makes me think that **I must look where I go and to be careful** with other people and then **look after myself, look after my wife and my children**. And my children must be clean and this means **we are all faithful to each other** and we **must respect other people** because this is the way **Hlokomela educates me**. And it shows me that I can live a longer life with my children and my family **if I just do what Hlokomela teaches me** (Male Gingirikani, 2nd Gingirikani FGD, para 43).*

> *"According to me when I look at this circle it shows that where there are two hands that can manage to look after each and are helping each other by sharing knowledge*

– (Vutivi) or share (Vutlhari) intelligence. And this means it is one family because there is this circle (Female Nompilo, 1st Nompilo FGD, para26).

One respondent, a senior supervisor, noted that for him there had been changes in the behaviour of farm workers, especially in levels of violence between men and women. This same perceived change – linked to Hlokomela – was also noted by farm workers:

"Ja, it's true [the slogan "Farm workers care for each other"]. If you compare the farm – I can't remember when it started – but ***before, this, this, er, Hlokomela it was very difficult to live in the farms****, especially in the compound, with the workers* ***there was a fighting, man and a woman, fighting, and drinking alcohol, drugs, police they come, daily, even the ambulance****, to take someone to send the hospital. So* ***from that day which Hlokomela developed I saw the changes, changes, yes****" (Male Senior Farm Supervisor, interview, para 23).*

Farm workers also remarked on the changes in behaviour that they had observed or experienced and that they attributed to Hlokomela.

"Other farm workers//let me talk about the farm workers where I work. They really like Hlokomela a lot and Hlokomela changed people's lives. Like when you go to the farm that I was working on // if you wanted work the person who hired people will tell you that if you have sex (masangu) with him he will give you a job. But ***since the time I arrived there when we had a focus group (Gingirikani) they changed their behaviour*** *(mahanyelo) and* ***now the thing of having sex with someone for a job doesn't work anymore****" (Male farm worker, HD FGD, para 181).*

"From the beginning when we started at the farms there was a lots of fighting, drinking at the farms and the people were//if we were looking for a job you must sleep with someone to get the job in some exchange like that. But the word change it means a lot to people, the supervisors//the farm management and the people//the farm workers//even the farm owners because sometimes people at the farms they don't come to work or whatever. But now the word change means a lot // they did start to know about their self//they plays some games instead of going to drink some beers or having some sex the whole day. So now it's already// always busy by

keeping themselves by the//we called it HLAT//the life style change//changing life//plays some games like tiketo (a game with stones) and muravarava (similar to checkers). Or soccer or netball something like that so there is no more time to sit at the camp nothing to do // so it's very//very better that's why they did came with that name change agent (Female Nompilo, 2nd Nompilo FGD, para 17).

4.2.17. Togetherness

Togetherness was a frequently reported quality associated with Hlokomela.

*"To me there is this thing, they say ah "**Mbanani**", **let's hold together**, so every time I see this sign (the logo) **I just think of holding together**, whether you HIV positive or negative" (Male Nompilo, Male Nompilo FGD, para 13).*

*"The hands (in the logo) will … must **hold each other** to trying to help people who have the disease or something illness, to make, to make, to live, **to live together**. **Not to separate each other**, to just **live together** …" (Male Nompilo, male Nompilo FGD, para 14).*

4.2.18. A "dark" then and a brighter "now"

"Then" versus "now" was a common construct in responses, expressed in relation to a wide variety of Hlokomela's actions and communications. For example, the time before Hlokomela (then) was characterised as a time of "words" in contrast to a present (now) that was seen as a time of "people".

Hlokomela was, across all respondent groups, universally associated with, and credited as having enabled positive change at both an individual *level – "I was not Buti (not real name), the other Buti, I wasn't Buti like the way I behave now"* – and a community level – *"when Hlokomela takes over (from government) and talks about HIV/AIDS, it makes people to be aware and people are happy"*.

There were frequent references to "*then*" as a time of greater difficulty and a fear of HIV and "*now*" as a time of hope. Hlokomela was commonly specified as the presence that had enabled increased knowledge, a sense of addressing challenges collectively through engagement – "*by working*, *interacting with people*"– more choices for individuals – *"my mind was limited to some of the things"* – choices that would enable them and their families

to survive, including choices around gender identity – *"that's what changed me to be, to know what is a real man"* – less denial and greater openness, and a new belief that HIV could be and was being addressed, in the locality – "*they know that with our power we can cut it (HIV) down"*.

Farm workers commonly reported a link between participating in Hlokomela and personal change or growth. Through engagement with Hlokomela they had come to a new understanding of who they were and how they needed to behave in order to survive.

> *"Being at Hlokomela, ja,* **it changed***, for example,* ***it changed me****.* ***Being at Hlokomela it changed me****, because I was not Buti (not real name), the other Buti, I wasn't Buti like the way I behave now.* ***My mind was limited to some of the things*** *– by working, interacting with people and going out and getting more information* ***that's what changed me*** *to be, to know what is a real man" (Male coordinator interview, para 67).*

> ***I changed my life*** *because people know me as someone who had lots of partners on the farm ... I decided not to have too many partners anymore. And now I am a straight person and* ***I am a changed person****, and I teach people how to use condoms.* ***So Hlokomela has changed my life*** *and I no longer have many partners on the farm" (Female Nompilo, 1st Nompilo FGD, para 73).*

4.2.19. They know that with our power we can cut it down

Significantly for a programme aiming to reduce vulnerability to HIV, respondents indicated that for them Hlokomela represented a reduction in fear and stigma and an increased openness. One Nompilo respondent, in reference to what was evoked for her in billboard B (Annexure B) , began by referring to a time five years previous, before Hlokomela, which she described as:

> *"...the time when people were scared to go and test for HIV and people didn't want to hear anything about HIV. Like if you heard someone talking about HIV on the radio you will just turn off the radio and if it is on TV you will just leave the room and go and stand somewhere else..." (Female Nompilo, 1st Nompilo FGD, para 221).*

and then added that now:

> *"...people accept it and they know that with our power we can cut it down."*

Several respondents raised the fact that in the early days of Hlokomela billboards, a common response from farm workers was that everyone appearing in the billboard must be HIV positive but that over time this response had changed to one of an interest in what message the billboard was conveying:

> *"The negative one was that those people who were on the billboard are HIV positive…. like pointing fingers to those particular people it means when they are on the billboard they are HIV positive, so it was not nice" (Female Programme Manager, para 28).*

> *" 'Those people who are on the billboard they are HIV positive, do you know that (name), do you know that (name), he is HIV positive…ja, he's there on the billboard'" (Male Coordinator, para 29).*

> *"But **as time goes on they started to understand** because we were going out for disseminating information to the people – they were **now trying to come to an understanding** that these people (in the billboards) are talking about how can we take care of ourselves. This was a wake-up call to the farm workers. Stop pointing people with fingers. Just look at yourself. The best thing you can do is to take care of yourself and your partner" (Male Coordinator, para 29).*

> *"But **as time goes**….these are the Nompilos on the farms (in the 4th generation billboard, by vendors) (Annexure E) …. As time goes people would go individually to these people on the billboard and ask them actually what was happening in the*

> *billboard…. So this saying the people on the billboard are HIV positive it's disappeared and we don't hear much" (Programme Manager, para 38).*

From these respondents' perspective, the continuing programme of mass media depicting Nompilos and known personalities, combined with work on the farms to emphasise the messaging's relevance to individuals' own lives, had led to a greater openness and a lessening of stigma and accusation. This perception was supported by reports that farm workers had come to compete with each other for the chance to appear in Hlokomela mass media.

4.2.20. Now as Hoedspruit community to take control

Other respondent*s,* again expressing what was evoked for them by Hlokomela media, reported a strong link between Hlokomela and talking control, and again emphasized the importance of the local – that control over the epidemic had been brought closer to home. Respondents spoke about *"when Hlokomela takes over"* and "*now as Hoedspruit community to take control*" with a sense that now, because control was in local hands, it was possible to address the epidemic. This was noted in contrast to a time before Hlokomela when either there was no perceived locus of control of the struggle against HIV, or it was in the hands of government and hence distant.

> *"This one* (billboard A – Limpopo Provincial Government) (Annexure A) *is when HIV was just started and which say the Government takes the lead is when the HIV problem was not as bad as now" in contrast to "And then* ***when Hlokomela takes over*** *and talks about HIV AIDS it makes people to be aware and people are happy because they know their status" (Female Nompilo, 1st Nompilo FGD, para 217).*

This sense of the effectiveness of local control was linked also to the quality of service that Hlokomela was seen to provide, including the sense that confidentiality would be preserved, as well as to the presence of a local, inclusive team of providers, including Nompilos – people who were known and could be trusted. Taken together, these factors were seen as demonstrating that the Hoedspruit community had taken control and that this relocation of control was proving effective in the fight against HIV. As with other findings (a sense of broad inclusion, the value of local representations, caring, respect) the association between Hlokomela and positive change was motivated by an association between Hlokomela and

the delivery of quality services (particularly in contrast to the service provided by government – happily now changing!), addressing a need where previously this need was not being addressed.

> *"(Talking about the Hlokomela Billboard in town – Annexure B) Another thing when they are at home others are scared to go to Government clinics because they don't feel comfortable or they are scared to be seen by other people who they know.* ***Now as Hoedspruit community to take control people go there*** *because there are nurses and the community, black and white, the counsellors and the Nompilo" (Female Nompilo, 1st Nompilo FGD, para 223).*

4.3. "Hlokomela belongs to all of us"

4.3.1. Who is Hlokomela for?

As the data presented in Section 2 above shows, there was a deliberate intention by Hlokomela to create, represent and project an inclusive community working for change in relation to its health promotion objectives. Central to this intent was the desire for social mobilisation, ie. that by creating and representing a community united in action, the representation would become real (a self-fulfilling prophecy) and that the broadest possible coalition for action could be mobilised that would have at its heart farm workers but would also embrace other key stakeholders, in particular the farm owners and management whose buy-in and support was deemed essential for the success of the project. To this end Hlokomela's communication processes and the representations that flowed from them were by design as inclusive as practically possible. Monthly meetings of Nompilos and Gingirikani ensured that all communication themes, topics, messages and other communication were in tune with the needs and culture of farm workers but equally care was taken to include farm management, as well as the local health authorities and municipal and provincial officials wherever possible. The intention was to generate an identity for Hlokomela that would be perceived as being inclusive of all the stakeholders in Hoedspruit. The extent to which the broad range of stakeholders was able to feel some affinity for Hlokomela is therefore an important gauge of the success of this strategy of inclusivity, and by extension, of the capacity of the project to build social capital in relation specifically to its health objectives. In other words, were stakeholders able to feel sufficiently implicated in Hlokomela as to

enable them to play whatever role was possible for them to play in the collective effort to reduce vulnerability to HIV in the Hoedspruit area?

When asked the question "Who owns Hlokomela?" typically from farm worker respondents there was chuckling and general amusement before people responded. Non-farm worker respondents were generally surprised at being asked this question and paused for reflection before they answered. Certainly this was not a question that people generally had posed themselves and the notion that Hlokomela could or should be "owned" by anyone seemed strange. However, thereafter, most respondents had no hesitation in claiming that Hlokomela is owned by, or is "for" the Hoedspruit community in general and farm workers in particular. The range of stakeholders from farm workers to town councillors and farm management expressed a sense of belonging to and investment in Hlokomela, though for diverse reasons.

4.3.2. The name Hlokomela is for the community of Hoedspruit

Virtually every respondent indicated that in the first instance Hlokomela "*belongs to*" farm workers though frequently the expression used, especially by farm workers, was Hlokomela "*is for*" farm workers, rather than the more proprietorial "*belongs to*" or "*is owned by*". Further, respondents strongly related the sense of "belonging to" to the actions of the project and in particular to the caring, problem-solving and information provision that they generally associated with Hlokomela (as described above – note that many of the responses clustered under this section could equally have been – and sometimes were – considered under section 2 because respondents generally linked their sense of belonging to Hlokomela to its provision of services and to what many perceived to be the unique qualities of this service provision and of the behaviour of Hlokomela's agents).

> *"Okay, I think **the name Hlokomela is for the community of Hoedspruit**//I think so according to me (…) **because it is to care for the Hoedspruit workers, farm workers**" (Male Nompilo, 1st Nompilo FGD, para 169).*

> *"Err…Hlokomela is not for sick people only, it's **for all people who work around Hoedspruit** in order to **come if they have problems or if they want information**" (Female Nompilo, 1st Nompilo FGD, para 173).*

Many respondents linked a sense of belonging to Hlokomela to a sense of place, to Hoedspruit, suggesting that in addition to associating Hlokomela with action/service there was also a strong linking of Hlokomela with locality – "*here*", "*on the farms*", "*in Hoedspruit*". We should remember that representing the local was a specific principle/quality to be applied in the making of project media.

The Gingirikani – who at the time of the interviews had been directly associated with Hlokomela for less than a year, gave similar responses to those of the Nompilos. Without hesitation respondents generally identified Hlokomela with farm workers and again used the term "for" rather than "owns", suggesting that they identify with Hlokomela in terms of its provision of services meeting their needs – which were widely expressed as being knowledge/learning, health care, advice, and simply *being there* – rather than as proprietors. These respondents, too, frequently made a link between belonging and locality (the farms, Hoedspruit, Limpopo).

> *"It is **for us farm workers**//it is **for all of us the workers who work in the farms**" (Female Gingirikani, Bavaria Gingirikani FGD, para 33)*

> *"**Hlokomela is for us farm workers** as we are the workers **here at Limpopo**" (Male Gingirikani, Bavaria Gingirikani FGD, para 33).*

4.3.3. It is not for farm workers only it is for all of us

Generally farm worker respondents suggested that even though Hlokomela was "for" the people of Hoedspruit, it should be extended to include people from other areas – even for the whole of South Africa. The reason generally given for wanting to extend ownership to a broader geographical area was because the perceived excellence of services provided by Hlokomela was needed by everyone. This was especially true of Gingirikani respondents – those farm workers furthest from the centre of decision-making within Hlokomela and hence with less direct investment in the project.

Gingirikani also generally reported on the value for them of the benefits they perceived Hlokomela to have brought. For them, belonging to Hlokomela was most strongly associated with a belief that Hlokomela addressed specific needs that were shared by most of their peers – all should be included because all had a need for its services. For these

respondents the desire to see a broader inclusivity was most strongly associated with action – "*work*", "*help*", "*giving information*" or *"change"* – ie. belonging was strongly linked with the delivery of a service. Included were those who needed the service, who were seeking the service or who delivered the service – regardless of where they came from.

> *"Okay **Hlokomela means caring** and the slogan says 'farm workers care for each other'. And **it cares for farm workers in Hoedspruit** but yes, I can say **it's for farm workers who work in Hoedspruit** but we end up having **people who stay next to Hoedspruit** they also come to Hlokomela. So that means it doesn't work with Hoedspruit people only **it works with different places**. But after doing what they want to do they go back home to the villages. But **it was aiming for people who work in the farms here at Hoedspruit but we also help people from outside Hoedspruit** but it **belongs to people from Hoedspruit**" (Male Nompilo, 1st Nompilo FGD, para 176).*

> *"Yes, Hlokomela is for **all of us here in Hoedspruit** but as well as they are saying **Hlokomela is growing** and there are **people who come from different places, here in Limpopo, there are people who comes from Mpumalanga** each and every day. Yeah, Limpopo at Hoedspruit. So I can say that **Hlokomela is for South Africa** because I hear people from **Acornhoek** saying we have seen you on TV teaching people about HIV and AIDS so that means they are not showing, they are not **doing that message** (only) at Hoedspruit, that message is going **all around in South Africa**, that means that **Hlokomela is giving information for all over**, and is growing" (Male Nompilo, 1st Nompilo FGD, para 180).*

> *"Hlokomela is **not for farm workers only** it is **also for people from the villages because they get help from Hlokomela** as we are a health agency for here in the farms. Even **where we are from** (the villages), **we change people's lives**. It is not for farm workers only **it is for all of us**" (Female Nompilo, 1st Nompilo FGD, para 181).*

There was generally a conflation of "farm workers", "the community" and "Hoedspruit" or "the Hoedspruit community" suggesting that people perceived that while farm workers were at the heart of Hlokomela, it was "for" a wider range of stakeholders – generally all those who played or could play a role in some way in the project and/or were beneficiaries of the

project, for example, farm management, social workers, people from the villages, and prisoners – indicating a desire on the part of respondents to include in their sense of the Hlokomela community all those who were associated with, needed, contributed to or benefitted from its practice.

> *"I think **all the people around Hoedspruit**. Like **the farmers** – if the farmers are not there, then there would be no Hlokomela. But if, because of Hlokomela helping on the farms or the farm workers, **it's for everybody**. I think so" (Male Nompilo, Male Nompilo FGD, para 17).*

> *"Hlokomela **belongs to Hoedspruit** like **people who work in the farms, people who are in jails here at Hoedspruit and all the shops and even the schools//all the crèches"** (Female Nompilo, 1st Nompilo FGD, para 172).*

> *"Hlokomela **is big and it doesn't work with sick people only** and we have (cross talk) counsellors, social workers and police forums (Female Nompilo, 1st Nompilo FGD, para 174).*

(It is useful to note that generally Nompilos referred to other farm workers as "they" even though they were themselves farm workers. This was despite the fact that in response to questions about ownership of the project they generally stated that *all* farm workers owned Hlokomela and frequently reverted to the first person plural – "we" and "us". This indicates a clear sense of differentiation by Nompilos of their identity and role within Hlokomela as being something particular and set apart from the general farm worker population – a finding that is significant in terms of the research question and which is further discussed below in Section 4.4. as well as in section 5. Discussion.)

As was the case with Nompilo respondents, a number of Gingirikani respondents also indicated that for them "ownership" was or should be extended to a broader range of people than only the farm workers of Hoedspruit. Again, their sense of who Hlokomela was "for" was strongly linked to the need for a valued service, leading some respondents to state that Hlokomela was for "*all of us*" without specifying who "us" was, but implying that it was "for" everyone in need.

*"Hlokomela **belongs to all of us**" (Male farm worker, Hlokomela Clinic FGD, para 53).*

*"Hlokomela **belongs to everyone in this world** like **all of us we need to look after our lives**" (Male farm worker, Hlokomela Clinic FGD, para 57).*

*"Hlokomela is **for the whole country** [or for all countries] but the problem is it won't cover all the countries but to be honest **when they do things it's a prediction for all in all**" (Male farm worker, Hlokomela Clinic FGD, para 59).*

In terms of who might own Hlokomela, two individuals were frequently mentioned by name, by Staff, Nompilos and Gingirikani. These were the Project Director and co-founder of the project, and the Programme Manager, generally in connection with their perceived drive, sense of commitment, passion and leadership, and generally with a sense that their contribution to the project was remarkable and indispensable. There was no evidence that a sense of reliance on these two individuals in any way diminished the feeling of belonging expressed by farm workers, staff or project agents – in fact the opposite seemed to be true: their leadership was seen as a reason for the success of the project and a good reason to be associated with it.

4.3.4. I am worried if somebody will say I (the Director) own it

The Project Director stated that she was aware that she was seen by many as the central driving force behind the project and that this was a concern for her, in terms of the sustainability of the project. She doubted that every single farm worker viewed Hlokomela as "theirs" but equally she was certain that there was broad farming community ownership or belonging and that Nompilos in particular had a strong sense of ownership and investment.

*"Ag, I think **everybody** (in the farming community owns the project), I really think (…)//I am worried if somebody will say I (the Director) own it…..I think so. Not everybody // slowly // I mean, there is lots of, there are thousands of them (farm workers). But **the Nompilos, I think they really /mmm/ think it is their organisation**. And **they are really proud**, I must // my feeling is that **they are proud to be part of that**" (Project Director, para 49).*

4.3.5. It is really important to link with other organisations, with other stakeholders

The Project Director was clear that broad inclusivity was a deliberate strategy. She described how she personally set out to build a broad coalition of stakeholders:

> *"So, um, and **the linking**, really I have // for me it is **really important to link with other organisations, with other stakeholders** – I am doing **lots of networking**, um, so it is not that I feel that this is my project and only my thing" (Project Director, para 33).*

4.3.6. If at all it's the community

Farm management expressed a desire for association with the project, for a variety of reasons ranging from the pragmatic (the project helps to manage the impact of HIV on their enterprise) to the affective (a sense of pride in the perceived success of the project) to the moral/ethical (because caring is the right and Christian thing to do). There was also the rather basic desire to follow what everyone else was doing (other farms are Hlokomela partners, so mine should be too). Farm workers generally included farm management in their descriptions of who "belonged" in Hlokomela, again for a variety of reasons, from the strategic (it couldn't work without farm management involvement) to the generous (Hlokomela is for the whole community, including farmers).

Whereas farm workers generally initially described Hlokomela as being "for" farm workers, and then broadened their definition to include the "*farming community*" or "*the Hoedspruit community*" or "*the whole of South Africa*", farm management generally expressed the view that Hlokomela is owned by the farmers (owners/managers) but then modified this also to the broader category of "*the farming community*", a phrase frequently used by management.

> *"Err, well **the farmers** (own Hlokomela), I think so, I think so, ja. **The community, the farming community** is err, what I would say, because without them, err Hlokomela would just be a shell. So and without any clients, or well people to serve then, I mean, funders wouldn't fund you and so ja, **so I think you could see that it is owned by the farming community I suppose**" (HTT Board member and farm owner/manager, male, para 4).*

The hesitancy displayed in this response suggests the respondent hadn't previously arrived at this conclusion and was only now arriving at it through a process of reflection occasioned by the question "Who owns Hlokomela?". This is an indication, possibly, of a *process* of inclusion that is ongoing, emergent, that was expressed by other management level respondents too.

Another farm manager, in answering the same question about ownership, in a separate interview, also moved to the notion of *"the farming community"* after initially stating *"I don't think it belongs to anybody".*

> *"Who owns Hlokomela? (Pause) I don't think it's belonging to anybody – **if at all it's the community**, which is **most probably** the farm workers and the management of farms, farm owners – I don't think it really belongs to anybody **except if you can say** it belongs to the community" (Farm manager, male, para 6).*

Again, the hesitancy in his response suggests that he was having to think on his feet about a question he had not previously posed himself, but on reflection he reasoned that *"probably"* it was *"the community".* There appeared to be something novel about this particular use of the word "community" – embracing both farm workers and farm management – which is perhaps why it is not the first thing on the respondent's lips but is only arrived at through a train of reflection, and in a sense, as a last resort, to define something that has no obvious, single "ownership" but is rather a space of affinity – a symbolic space. We will analyse this symbolic space (as opposed to a bricks and mortar institution) in Section 5 Discussion, as its usefulness proved indispensable).

When pushed to define further what he meant by "the community" and specifically in relation to the ownership of HTT, he was able to arrive at a more precise definition of Hlokomela's broad ownership. Whereas HTT … *"is more a management-type thing you know and with far less ownership by affected people"* ….. *"Hlokomela is **much wider than that**, that **also includes people that are affected**".*

What was recognised by farm management respondents, albeit somewhat hesitantly, was that Hlokomela – despite being the product of management-owned HTT – is a collectively-owned undertaking that somehow constitutes "the farming community" and includes both management and workers, a novel alliance in this setting.

Most respondents spoke of a sense of Hlokomela being broadly inclusive – both in terms of their own desire to be associated with Hlokomela, as well as a welcoming and embracing of this association by other groups, ie. we want to be a part of Hlokomela, and we want you to be a part of Hlokomela, in particular by farm workers.

4.3.7. We are also farm workers

Several management-level stakeholders – both black and white – who are not farm workers, nevertheless defined themselves as farm workers, and indicated a desire for association across hierarchical boundaries and a sense that the conventional categories can and should be broken down. The respondents emphasised a commonality of place, speaking, for example, of *"everybody who is involved in farms")* and a commonality of purpose, for example, in *"caring",* as being the reason why they could be considered farm workers in Hlokomela.

> *"For me the slogan 'Farm workers care for each other' **it's broad**, umm … it could be farm workers caring for one another ……. you know, for me **it mustn't necessarily go to farm workers as people who think they are working on the fruit, people who are working on the farms picking or packing oranges**, the same **should go** to the management, whether this person is in particular it's a farm owner or is a farmer or person who is managing a farm – **everybody who is involved on farms** working whether as a domestic worker or **any other person** ….. whatever kind of work you are doing, including myself because **I class myself as a farm worker** and then that **caring embraces us all**" (Female programme manager, 1st staff interview, para 14).*

The Project Director, whose husband is manager of the largest commercial farm in Hoedspruit, recounted an anecdote that expressed a similar sentiment, indicating a desire to be included in the category "farm workers".

> *"Ja, ha, it (the project slogan – 'Farm workers care for each other') is a reality. You know the other day my son said 'You know maybe you should start changing these 'farm workers' and 'farmers' [ie. the use of the term "farm workers" in Hlokomela media]. So my husband was sitting there and said 'No, **we are also farm workers**. So they don't have to change; it is already there so'. Ja, so the first time ever I thought **okay but we are all farm workers because we are all on the farms**. It is not only farm workers picking. **We are all farm workers** and um the slogan is so short and*

> *sweet and ya // I really feel that we are doing that – **we really care for each other** / mmm /" (Project Director, para 23).*

This desire by members of a significant stakeholder group (management) to be identified as farm workers through association with Hlokomela suggests a bridging effect of identification across class boundaries with implications for resource mobilisation through the inclusion of the more affluent and resourced class, and a potential for cross-class mutuality. This will be further explored in the Discussion, Section 5.

There was ample evidence also of a sense of affinity from "external" stakeholders indicating that there was identification with the project by significant actors in the locality. A PR councillor, who had also spent some time on the Trust's board, expressed his sense of belonging to Hlokomela, in his interpretation of the project's logo:

> *"The first thing I see when I see these two hands. I see two people representing the one the farm workers, the other side the farmers, the other side the HIV positive people and the Nompilos as a group now forming a community, an organisation, forming Hlokomela – they are involved, they are united, they are one and they share that partners in HIV AIDS" (PR Councillor, para 16).*

The same respondent was able to view himself as part of this partnership and was clear also that perception – the sense of belonging – had been key to building the alliance that Hlokomela was seen to represent: *"if the farmers think they belong to Hlokomela….."* – implying that is what was important for building an organisation, a project, for development.

> *"I also say I own it because the sense of belonging is there. I think in development in community a project is a sense of belonging. If the farmers think they belong to Hlokomela, if the farm workers comes here and they say this is our organisation, I also say it's my organisation and I also say I own it because I am also involved in it and I am also proud in it" (PR Councillor, para 32).*

The PR Councilor was equally certain that the sense of pride and the desire for association was widely shared, from the upper echelons of provincial government, through local

government and to the humblest of shacks, a belief anchored in verifiable fact and explicable in terms of the distinctive performance of the project:

> *"When in Council, in Council sitting when I stand up one day in congratulating Hlokomela, especially farmers and farm workers for doing the area proud, the whole Council stood up, the whole council stood up in recognition of Hlokomela. And I think they even also gave Hlokomela an award, an award, I think so. Even the statistic award wherein Hlokomela was nominated as the best NGO in the area beating the other four municipalities from Phalaborwa, Tzaneen, until Giyani, wherein even the District municipality gave Hlokomela an award and showed that the recognition is there. That's why sometimes, I don't remember this year but the Premier of this province was here and with some support staff to come and visit Hlokomela…it shows they start to recognise the way Hlokomela is working, even probably I think last year, the Wellness, the Wellness workshop for the municipality* (training run by Hlokomela for the municipality), *it shows recognition" (PR Councillor, para 26).*

The Councillor further emphasised the alignment between the inclusivity projected by Hlokomela in its media, and the reality, and also the link that people made between Hlokomela and HIV, suggesting that for him, as for other respondents, Hlokomela had come to be viewed as the lead agent for addressing HIV in the locality:

> *"Hlokomela communicate in different of ways, you can have memorabilia like T-shirts and the likes, they use them and they use billboards. Err, Hlokomela you see this billboards (looks at the pictures) this is the other one from the around the Oaks and the other one from around town, where you see the Speaker of Council, the most important person, the Chairperson of Council, involved and she's ANC – remember it's not a political thing – and when you go around you see when they have the sports activities, even when you pass the shacks this person belongs to Hlokomela even without any Hlokomela thing linking me to Hlokomela they will say this person is involved with Hlokomela, and when they have the soccer tournaments and the like you could see the conversation and the likes, the conversation around the people, and in most instances people link HIV/AIDS to Hlokomela now, when they talk of HIV/AIDS they will talk of Hlokomela. Ja." (PR Councillor, para 27).*

Significantly in terms of the finding around inclusion, Hlokomela projected itself and was perceived as operating across party political lines (including representatives from the DA, the ANC and the PAC, among others), as well as across race lines and that more than one respondent attributed the project's perceived success to its ability to represent itself as broadly inclusive, enabling it to gain support from workers, employers, the municipality and the province, and from a broad range of resourced individuals in the community.

4.3.8. A lot of things aren't strange anymore

There were few references made to race across all stakeholder groups. This is perhaps remarkable in the South African context, and in the Hoedspruit context especially, where racial divisions remain deeply entrenched and economic exclusion on the basis of race (and class) is systemic and structural (de Vos, 2013). Farm workers remain an underclass and there have been tensions around land restitution and land reform. In South Africa at large there is an ever-louder political narrative around the plight of farm workers and the perceived intransigence and callous indifference of employers to their employees' humanity and needs.

Two farm worker respondents made explicit reference to race. One noted that it was significant for her that Hlokomela media expressly depicted multi-racial inclusion. In the context of marginalised farm workers and the sense that they are viewed and have viewed themselves as *"the people who are at a lower level"* (male coordinator) and *"very neglected"* (Farm HR manager), the fact that black people are not alone in being vulnerable to HIV but that *"all kinds of people"* are facing the same challenge, can be assumed to have been reassuring and affirming for her.

> *"If I look at these pictures it looks the same but not really, like on this picture (Annexure B) I can see different people, there are* ***white people, Indian and black people*** *and that shows that* ***it's not only black people*** *who must go for HIV tests –* ***it can be all kinds of people****" (Female Nompilo, 1st Nompilo FGD, para 219).*

Another respondent, referring to the same billboard, noted that people go to the Hlokomela clinic in preference to the Hoedspruit clinic *"because there are nurses and the community, black and white" (Female Nompilo, 1st Nompilo FGD, para 219)* suggesting that the inclusion

of community members both black and white had for her a positive value. One Nompilo made passing reference to condoms being *"whites' things".*

For the rest, some white (management level) respondents included fairly typical racial othering in their discourse – referring to black people as "they" and emphasising cultural differences. But these same people expressed pride in their association with Hlokomela and described their supportive involvement and promotion of Hlokomela and their pleasure in what they perceived to be its success.

There was also a sense from some white management level respondents that their experience of Hlokomela – with its typically "black" rites and practices (singing, dancing, embracing) – was enabling of a shift in their own sense of racial boundaries, and that Hlokomela's presence in the area was a contributing factor to a reduction in racial exclusion.

> *"A lot of things aren't strange anymore, so there is a lot of good that has come out of this whole things, apart from err, healing people, or not healing but helping them, um, there is also, a different outlook" (Farm owner, para 61).*

> *"Although you can see some people still don't really want // but overall // anyhow a lot of the blacks will give you a hug, which is phew you know and you can imagine some of these tough farmers (laughs) but they might accept it now. And that has changed! So, ja" (Farm owner, para 59).*

> *"And then of course the dancing and singing and that, that's old XXXXX (project director) she likes to tempt me with all of that. Because then at the end of the year function then they ask me to say something. I say that is fine, but I am not going to dance because // and this is how they do // so the next speaker has to come up, and this one dances all the way up to the podium, you know it's something that we (white people) are not used to. I don't know, you know. So if you want to dance, dance afterwards, but agh I accept it now it's // that's part of the whole story. But it is a strange set up (laughter)" (Farm owner, para 102).*

Black respondents very commonly included farm management in their descriptions of who Hlokomela "is for" which suggests that for them Hlokomela is also "for" at least some white

people – those who are seen to be associated in some way with Hlokomela and making a positive contribution.

4.4. The name is talking, meaning

There was strong evidence in the responses of farm workers – including those who were agents of the project – that the Hlokomela "brand" had had a "push/pull" effect in terms of both empowering the agents to act in the name of the project, and of encouraging farm workers to engage with the project. Because farm workers felt a belonging in regard to Hlokomela – a pertinence that was seen to be for and about them and their interests (in contrast to the state health services which were seen as lacking in pertinence) – they were encouraged to engage with its agents. These agents, because they acted under the umbrella of a project that was perceived to be supported by "the farming community" and to represent a certain excellence, felt empowered by their affiliation and better able to carry out their duties as its agents.

4.4.1. When I put this name tag on it makes me feel proud

Nompilos – and to a lesser extent Gingirikani – generally reported a sense of confidence provided to them by association with the name Hlokomela. One participant expressed this sense of confidence thus: "*when I put this name tag on it makes me feel proud*". He indicated that this confidence had empowered him and his fellow Nompilos to carry out their role as agents of Hlokomela. The name and the emblem were seen to express a significant message – *"This name is talking, meaning"* – which conferred an empowering status on the bearer. They also generally reported that bearing the insignia of the project enabled interaction with community members and provided opportunities to publicise the project and its services*: "When people see me with this T-shirt, they ask me….so I told them….so I can say"*. There was also generally a sense expressed by Nompilos that they could confidently proclaim their association with Hlokomela because they perceived it – and they believed that others perceived it – to be delivering on the proposition contained in its name and slogan – namely, that Hlokomela was indeed *caring for everyone: "So I can say Hlokomela takes care of each and every person".*

> *"Ja…..It is like **when I go wearing this T shirt**, when eh people see me with this T-shirt, they ask me where did you get this T-shirt? So I told them I got it from*

> ***Hlokomela Hoedspruit**. So they say 'that name it sounds, what is its meaning? Hlokomela it means you can Hlokomela us, you can take care of us?' **So I can say Hlokomela takes care of each and every person**, so that (…) **this name is talking, meaning**" (Female Nompilo, 1st Nompilo FGD, para 187).*

4.4.2. As they realised that what I told them it helps, they want me to come

Nompilos consistently reported that they were able to engage with the community because people saw that they were associated with Hlokomela*: "As they know that I am part of Hlokomela….I can share"* – ie. that they came in the name of an institution that was recognised as having legitimacy and authority – and that, moreover, through *their* actions, this legitimacy was confirmed or reinforced*: "they realised that what I told them, it helps….they want me to come…."* – ie. that the reputation of the project was validated through the performance of the project.

> *"**As they know that I am part of Hlokomela** and **I can share with the parents of the child the time they were sick** but they didn't know what's killing them and I also didn't know. But **I was just giving them advice and counselling** and the time they were better their child started to be not okay and they took her to the clinic. **As they realised that what I told them it helps they want me to come and talk to their child maybe the child will feel better**. But after talking to them I spoke to the child and I phoned the child again and she sounded better" (Female Nompilo, 1st Nompilo FGD, para 183).*

This effect of empowerment through association – of legitimisation – was also noted in relation to the appearance of Nompilos in Hlokomela media, which was reported to enable a connectivity with community members. The projection of the Nompilos was seen to enable an engagement which in turn provided opportunities to unpack, dialogically, the messages communicated in the billboards.

> *"….but **as time goes**….**these are the Nompilos on the farms** (in the Billboard E) …. As time goes **people would go individually to these people on the billboard** and **ask them actually what was happening in the billboard**…." (Programme Manager, para 38).*

4.4.3. It makes me feel happy and strong as I educate people

Nompilos similarly reported the dually performative effect of the projection of their profiles in the media *stating that "It was something that helps*" – as both individually affirming*: "I am happy to be in the newspaper"; "I am so proud of myself"; "it makes me feel happy and strong"; "I can manage to help many people and I can try to rescue other peoples' lives",* and enabling connectivity to community members, providing opportunities for promoting Hlokomela services, both pastoral [educative/dialogical]: *"they would like to come and visit me [to talk]"* and clinical *"they said they want to come to Hlokomela for HIV tests"; "After that they become strong to go to the clinic",* corresponding to the dual role that Nompilos reported was their allocated function –*"I have been trained at Hlokomela as a caregiver or educator".*

> *"Even me **I am happy to be in the newspaper** (Kruger to Canyon) and one day I was catching a bus then three ladies in the bus and they said **they would like to come and visit me at Hlokomela** and I told them that I am not working at Hlokomela (clinic), I am working at (name of workplace) err…I have been trained at Hlokomela as a caregiver or educator. And I told them **if they want to ask me questions they can come to my place over the weekend** and the three of them came at the weekend and they said they want to come to Hlokomela (the clinic) for HIV tests but I don't know if they did go there or not but they even said they don't want to go to the clinic (government) where people know them because people talk" (Female Nompilo, 1st Nompilo FGD, para 283).*
>
> *"**To be in the newspaper it makes me happy** and **it was something that helps** and I remember the time I was in the newspaper even though many people know that I work at Hlokomela but they didn't know what is happening at Hlokomela. And I remember at the last meeting that we had **they did call me** and the reason for that it was someone who was sick and the person was very sick and she died in front of everybody even though I tried to help. And **I am so proud of myself because I can see that to appear in the newspaper err…I can manage to help many people and I can try to rescue other peoples' lives**" (Female Nompilo, 1st Nompilo FGD, para 281).*
>
> *"For me to see my picture in the newspaper **it makes me feel happy and strong** as I educate people at work and **after that they become strong to go to the clinic***

*because **many people were asking** how come my picture is in the Hoedspruit clinic (profile on the notice-board in the government clinic). And then **I said it's because I am working with Hlokomela** so after knowing or hearing something **I will come and tell you what I heard there**. And each and every person that I was talking to **I told them that they need to go to the clinic for an HIV test** and if they don't go they will tell (me). And when they go there (the govt. clinic) they (clinic staff) will ask them where they work and they will ask them who the caregiver is there (Nompilo on that farm) and **they will know in this farm there are caregivers and it is so and so**" (Female Nompilo, 1st Nompilo FGD, para 279).*

4.4.4. It's the Nompilos, this is the work that are really taking the message across

The value of Nompilos to the project was universally acknowledged by all respondents, as typified in responses by a Coordinator and the farm HR Manager who noted the power of the physical presence of a person over other forms of communication and the valuable bridging role that Nompilos played.

*"Let's just take this picture now so that we take off the Nompilos, it's going to be a problem because errr **it's a link that err the message goes through to the farm workers**. If you can remove the Nompilos which means we just **remove the bridge** so there's no any way you can jump to that side of the river, it's very much important. It values a lot to have Nompilos on board working with them hand to hand, because **it's our bridge to go to them, to talk to them, it's our communicator from Hlokomela management and the farm workers**." (Male Coordinator, Coordinator Interview, para 28).*

*"To me a pamphlet, I cannot use a pamphlet to me because I have seen what is happening with that pamphlets, and even when I come in 2007 you will find the pamphlets at the notice board but nobody is going at the notice board, nobody is reading those pamphlets and **the Nompilos cannot be replaced by a pamphlet**…….**it's the Nompilos, this is the work that are really taking the message across**" (Farm HR Manager, para 56).*

Given that raising the profile of the Nompilos was a deliberate "branding" strategy – the very first objective of projecting the project's identity, both because this would affirm

Nompilos (seeing themselves thus projected) and would enable connectivity to farm workers – it is significant that both of these effects (Nompilos were affirmed and they were seen to carry the authority of the project) were reported by respondents.

4.4.5. You can't work at Hlokomela because your attitude is not right

The Project Director noted that the role of Nompilos (and staff) was crucial to the success of the project in that they had succeeded in becoming people that farm workers "*look up to*" – ie. they had a credibility and status in the eyes of their constituents. "*I think our staff [are role models]….Ja, okay actually I think so. Ja, I think they look up to people [Staff] and coordinators. Ja if they are more exposed to them // like my feeling is // and Nompilos….*". She attributed this success as role models to the quality of the people who had been chosen to be Nompilos (and staff) but also to what she saw as being the transformative experience of being part of Hlokomela – "*it is people who have a standard two, who have [had] nothing, and everybody thinks they are wonderful now*" (para 24) and suggested that caring, the core attribute of the project, was the defining quality that made all the difference. In an anecdote about how many people want to work with Hlokomela, she recounted how the one key criterion for involvement as staff or Nompilos was "attitude" or "friendliness", clearly indicating that there is a quality assurance screening that aims to ensure that staff and Nompilos will be able to be role models and represent the values of the project in practice.

> *"The other day she [a farm worker who works at the farm crèche] said 'you know you are helping everybody but I also want to work at Hlokomela, why did you take all the others'. I said 'because I will never take you. I mean I must be honest, you are not friendly……you can't work at Hlokomela because your attitude is not right…… But if she changes then that is transformation or something then maybe she will be part of that, ja" (Female Nompilo, 1st Nompilo FGD, para 24).*

4.4.6. We need to change our behaviours in order for people to listen to us

Nompilos generally reported that they saw themselves as being the key agents of positive change on the farms and in their communities, and that this change was not only required of others but perhaps even more importantly, of themselves as the agents of change.

> *"Even **where we are from** (the villages), **we change people's lives**. It is not for farm workers only **it is for all of us**" (Female Nompilo, 1st Nompilo FGD, para 181).*

Nompilos and Gingirikani generally reported an awareness of the need for their own behaviour and comportment to be in accord with the values that the project embodied as without this they would not be able to be agents of change.

> *"I am a woman who is working in the farm and my husband is at home and I stay in the compound in the farm **so I used to do jika jika** (run around with lots of men) in the compound where I stay in the farm. But after coming to Hlokomela they educated me about HIV/AIDS. I just told myself that **I need to change my life because they told us that if we want to be care givers, change agents we need to change our behaviours in order for people to listen to us**" (Female Nompilo, 1st Nompilo FGD, para 73).*

Gingirikanis also reported an awareness of the importance of personal conduct that came with the title "Gingirikani" and indicated that they had been tutored as role models when they were inducted as Gingirikani.

> *"I remember (name) he said to me this work of Gingirikani that Christine chose us for it's like we are chosen by God and he also said **he likes the way we behave**. And other people said the same thing and I hope they are just like me and I said to them **it depends to you as a person if you want people to know you about good things** or you want people to know you about bad things but it's up to you. If you are a person and you are with other people you mustn't want people to see you all the time or even if you are in a group of people don't have that show off [attitude] or pride and **if I respect other people they will respect me back**" (Female Gingirikani, Bavaria Gingirikani FGD, para 101).*

> *"If you behave you have pride and you also don't care about other people you see other people as something else// people are not going to listen for you. **So you must be a person who is responsible//who is accountable** to be where I am today as a Gingirikani person …… **I see myself as a role model or as a leader** as many people tell me that they like the way I behave ……the other thing is that I don't like fighting, I*

don't like drinking alcohol and I don't insult other people" (Male respondent, Bavaria Gingirikani FGD, paras 104 and 108).

It is clear from the responses of both Nompilos and Gingirikani that assuming a specific role within the institution was seen to entail a degree of personal change in order that this could be demonstrated to other farm workers – that with the title came a responsibility to demonstrate the values of the institution conferring the title. They would henceforth be required to be the bearers of a changed identity that embraced the qualities or values noted earlier in this section, ie. caring, willingness to learn and to change behaviour, respect towards others, "seriousness" (self-respect?). Most respondents expressed the idea that personal change and adaptation in order to be an agent of the project was seen as a positive transformation, both personally and in terms of their roles as agents.

4.5. Summary of the findings

The findings which emerged from an analysis of the data collected for this research strongly suggest causal linkages – often circular – between on the one hand collective identity-making and projection and on the other the enabling of collective efficacy – a collective confidence in the "farming community's" ability to address the challenge of HIV – and the capacity of individuals to act for health, and specifically for HIV prevention, in the research setting.

Commonly those involved reported that they felt validated and recognised through being part of the *process* of creating and projecting an identity for "their" project and even that they recognised something different, transformed, about themselves as a result of engaging in this process.

Respondents reported a sense of ownership or belonging to the institution – the perception that it was there "for us" and that this encouraged an engagement with the project across the broad range of stakeholders, from farm workers to farm owners, management and provincial government officials.

Hlokomela was perceived as representing a shift in the response to HIV from a distant and remote centre of control (when government was in control) to a locally-owned and managed

institution and its processes. This local response – with its familiar imagery and content – was perceived as being more effective because it was local, recognisable, familiar and pertinent.

There was a perceived temporal shift – from a time before the establishment of the local institution, when HIV was not being addressed effectively – to a time after its establishment, when it was perceived that HIV was now being properly addressed.

All stakeholder groups claimed that they identified with the institution's projected values, actions and objectives, although for different reasons, and all expressed a willingness to make a contribution to the realisation of these values.

Respondents reported recognising a legitimacy and hence authority in the social institution. It was apparent too that they conferred legitimacy and authority on the institution and its primary agents (Nompilos and coordinating staff) and to a lesser extent the secondary agents, the Gingirkani. There was evidence too of a resultant willingness by farm workers and others to engage in the activities carried out in the name of the institution.

The primary agents reported experiencing a sense of empowerment as a result of their association with the legitimated institution and a sense of their own authority and confidence as representatives/spokespersons/messengers/facilitators) of the institution.

It was apparent that respondents' perceptions of the institution were strongly influenced by the benefits they experienced from the actions that were carried out in its name – specifically the actions of caring (clinical and other), learning (through the provision of knowledge and information), and communicating (including in peer-facilitated dialogical engagements) – all of which were generally noted to be either novel (eg. the opportunities for men and women to speak to each other about their vulnerabilities to HIV) or notably superior to any existing similar services (eg. the perceived excellence of the Hlokomela clinical service and care versus the service provided by the government clinics (now improving!). Male respondents acknowledged the fact that Hlokomela had provided an opportunity to consider different kinds of relationship with their partners, which included a greater sense of responsibility to care and to learn. Women respondents generally reported a sense of increased agency regarding their relationships with men. Although not surfaced

expressly in the data, the fact that by far the majority of Nompilos were women could be observed to be shifting perceptions (at the Heritage Day dialogues, for example) on the role of women in the farm setting, enabling them in many cases to lead discussion around sexual and other health and social challenges.

Respondents felt that the reach of the project, through the projection or presence of the Hlokomela identity – through both media diffusion or through the continued presence on the ground of its agents and its activities – was widespread, successful and even "famous" and was by extension something which people wanted to be associated with and involved in.

5. Discussion

5.1. Introduction

Discussion of the conceptual framework

The findings enabled the completion of the research conceptual framework as they provided results for each of the conceptual categories: effects of institution, recognition and identification, and actions for health. In some key respects, such as, for example the notion that a sense of ownership would be an outcome of collective identity-making processes, or that Hlokomela as an institution would be strengthened, or that farm workers would be affirmed in the process and that social capital would thereby accrue.

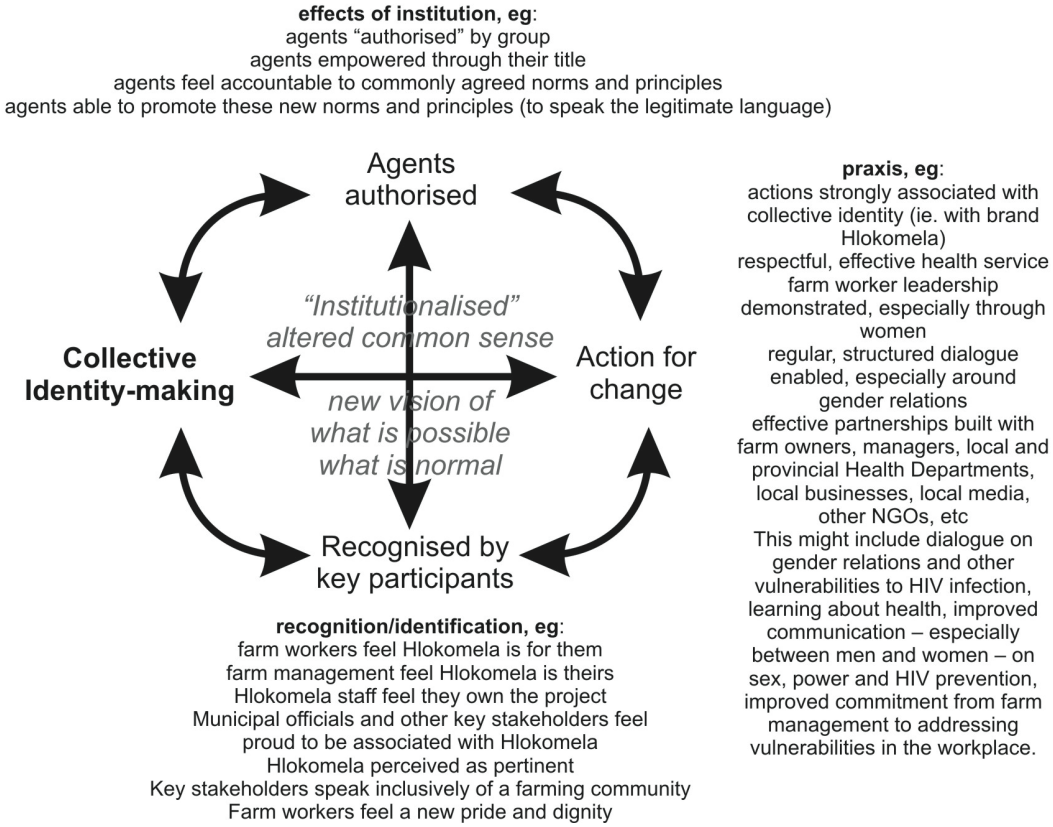
Further, however, the findings also surfaced some significant additions to the initial understanding. In particular, there was detailed new information about the effect of credentialising. Nompilos and Gingirikani spoke at length about how working within the Hlokomela brand – that had been elaborated principally by farm workers and was perceived as pertinent and legitimate by farm workers – meant that they felt more able to undertake the tasks asked of them, especially when these tasks were difficult. There were effects of accountability too, within these processes. A sort of social compact had been established within the brand which made agents of Hlokomela feel accountable to farm workers and constituted a form of quality assurance. They had to be seen to be doing what they said others should be doing. The findings shed more light also on exactly what the values and norms of Hlokomela were: chief among them care, respect (especially between men and women), knowledge and learning, and communication. These were the principles that underscored the new possible that was aimed for, that is, an environment in which information about HIV and AIDS and vulnerability could begin to be broached and solutions found from within the community. Although it was not possible in this research to quantify health improvements and attribute these to collective identity making, there was evidence enough that norms had shifted enough for at least the first steps to be taken to addressing vulnerability and promoting health in the area.

What follows in this section is an in-depth discussion of these key conceptual findings, in line with the research objectives and question, ie. analysis and exploration of the various stakeholders' perceptions of collective identity-making and its effects, so that it would be

possible to theorise t some extent at least which components of the process had what effects and which of these was critical to the success of Hlokomela (given that all respondents felt that Hlokomela was successful, and that it continues to operate to the day – 2016).

Discussion of conceptual framework

Figure 4: Findings conceptual framework



Graphic: P. Cockayne 2016

The participatory approach

The challenge faced by Hlokomela and any other communication-driven intervention seeking to reduce vulnerability to HIV in marginalised communities in sub-Saharan Africa is succinctly stated in the PANOS pilot study on multiple concurrent partnerships (MCP) and Male medical circumcision (MMC) in Uganda conducted in 2009. The study found that there was a "*need to complement any roll-out of programmes on MCP and MMC with social communication programming that addresses the structural and social drivers of HIV.* ***Technical interventions which do not take into account these social dimensions*** *of HIV may not be very effective.* ***It is important to find ways to help surface and promote community dialogue on both issues of Medical Male Circumcision (MMC) and Multiple Concurrent***

Partners (MCP), and support community-generated solutions to any emerging issues *(my emphases)*" (PANOS, 2010,p.4). The same can be said of HIV Counselling and Testing (HCT), or Prevention of Mother to Child Transmission (PMTCT) or any other intervention to address HIV. One key informant in the PANOS study noted: *"Getting people to change behaviour is the missing link in current HIV prevention communication. For example, the HIV prevention messages encouraging reduction in numbers of partners* ***is not effective practically****"* (PANOS, 2010, p.4). The same study further concluded that: "*MCP and MMC policies, programmes and communication do not take into account the traditional norms and perceptions surrounding masculinity that shape individual attitudes towards both issues. Messages about MCP are ineffective unless issues like domestic violence and stigma related to condom use and HIV testing are addressed*". And finally: *"****More research is needed to explore how participatory approaches could best address MCP and MMC, particularly with people who have less power and access to information****. Approaches which can* ***facilitate debate on how people can take small practical steps in their own contexts to reduce harm*** *can be one area for exploration"* (PANOS, 2010, p.4).

The Hlokomela project set out precisely and expressly to "find ways" to institute an approach that would be participatory, that would seek to enable dialogue around the social and cultural drivers of HIV, that would enable community-generated solutions to any emerging issues to surface.

The project's modus operandi

The project structured its interventions around several key activities which included: the delivery of clinical services at its own main clinic (including HIV counselling and testing (HCT), the provision of ARVs for the first time in the area, the institution of an effective PMTCT programme, referrals to state services where required, having a presence on each partner farm in the form of at least one Nompilo and her supporting Gingirikani, able to negotiate with farm management around the upholding of their Workplace Wellness Programme (developed with Hlokomela) and to deliver first aid and basic home-based care (Nompilos were all trained in Home-based care and received a stipend from the state for delivery of this service), and practising their communication facilitation skills in formal dialogue groups of around ten people each, on themes and topics decided by the Nompilo corps at their monthly meetings. For the purposes of this dissertation, perhaps the most significant institutional arrangement was this monthly meeting of Nompilos, at the Hlokomela Training

Centre. Half of this day-long meeting was to receive feedback raised by participants in the previous month's dialogues in the farms. This was followed by planning the following month's topics and themes for dialogue, preparing to source materials for this purpose and practising the questions that would be used as prompts to open discussion. Nompilos were also able to ensure that their communication programme was aligned to the other programme components (on the agenda for the second half of the meeting), which would include clinical matters and further learning inputs from health professionals. Outreach activities would also be planned here, for example, to the Municipal Council, to the prison, to the Air Force Base, to shebeens (taverns). In this way the communication programme was fully integrated with the other programme elements. This had the effect of ensuring also that every activity undertaken by the project would be perceived as a Hlokomela project, ie. its benefits would be perceived as coming from "the brand", demonstrations of the brand promise, which would help to legitimise the project and its agents and cause farm workers to regard it in a positive light. This is turn would make dialogical engagements between farm workers easier to facilitate, even on difficult subjects. This process of feedback, reflection planning and practice also meant that those most effective were at the heart of programme decision-making, implementation and monitoring and evaluation.

The intention of the processes described above was that the programme would enable those most affected to "*take small practical steps in their own contexts to reduce harm*". In addition, the project sought to explore what it would mean to "address" HIV and AIDS in a marginalised setting. How could participatory processes be promoted that would allow "people who have less power and access to information" to "debate" and "take small practical steps in their own context" to reduce harm. What institutional arrangements would be required to allow this to happen?

The founding assumption of the Hlokomela initiative was that it required an institution that enjoyed legitimacy in the local community and whose agents were authorised by that community to initiate and facilitate discourses around embedded and naturalised cultural and social norms and practices – in particular gender norms and practices. Programme planners felt it was unlikely that the community would be able or prepared to submit these practices to scrutiny or to consider behavioural and/or social adaptations that would protect health, without appropriate institutional support.

One of the instruments selected for achieving these ends was the elaboration and projection, through participatory processes, of a collective identity. This process would it was hoped raise the profile of the project, establish the authority and credibility of the project, represent a set of health protective values, including critically those supportive of gender equity. Most critically, elaboration of a collective identity would promote, encourage and enable direct participation by those most affected in face-to-face dialogue and other collective activities through which behaviour change or adaptation could be contemplated and enabled.

The process and effects of community dialogue and other activities that ensued is not the subject of this research but was described briefly in the Background. The effect of the identity-making process and its projection *is* the subject of this research, and in particular how this did or did not enable those processes of engagement and action – especially dialogue around the difficult subjects of gender, culture and social norms – to occur, as steps along the road to reducing vulnerability to HIV.

5.2. Collective identity

There is no single commonly agreed definition of what constitutes "collective identity" or "collective identity-making" – indeed there is broad consensus that this is a fluid and elusive concept. Referring to definitions of collective identity in social movement theory, Wolford cautions against "assuming and assigning an ontological coherence …. a solid 'thing-ness' that is rarely tenable on the ground" (Wolford, 2010) to definitions of social movement and hence also to collective identities. Holland et al. emphasise the impossibility of attempting a single definition: "As multi-faceted and dynamic cultural productions which form and reform in local and sociohistoric time/space, collective identities defy static description, and the concept itself resists definition. How can a phrase or two convey, among other complexities, the ***always emergent quality*** (my emphasis) of a collective identity? How can it signal the fragile dependence of a collective identity on the peripatetic relationships of individuals to a movement; on visions for change that have not yet, and may never be, institutionalized; on forms of organization – including acephalous (lacking a governing head or chief) ones – that transform over the life of the movement, and on shifting relations of power within and outside of the movement?" (Holland et al. 2008).

As a further complication to fixing the notion of collective identity, the findings suggest that, in the case of Hlokomela, the effects of identification and identity-making work in the symbolic space cannot be disaggregated from the effects produced through the other areas of work in the Hlokomela project (eg. health service delivery including HIV counselling and testing (HCT), Prevention of Mother-to-child Transmission (PMTCT), Anti-retroviral Therapy (ART), the development of a rights-respecting workplace policy, cultural and sporting events, savings and loans groups etc. – which is expressly a "combination approach" to HIV and health. (Combination approaches recognise that single strategy approaches to HIV prevention are less likely to be successful than multi-faceted approaches that include bio-medical, behavioural and structural components.) (UNAIDS, 2010) In fact, quite the contrary. It is precisely the interplay between the various elements – symbolic and material/practical/biomedical – that is significant and which could in the case of Hlokomela be seen to be a motor of both identity-making and practical action. Respondents frequently described how they perceived Hlokomela in terms of what Hlokomela *does*, or what *they do* in the name of Hlokomela – so the link between identity, identification and action is clearly critical. The literature supports the value of this interplay and the need for a deliberate effort to work in the symbolic space – the space in which identities and meanings are constituted – in addition to the practical/material spaces (Campbell, 2000), for example, underlines the importance of collectively formed social identities – and the social capital that accrues through these – in creating the enabling environment for enhanced individual capacity to develop and adopt health-protective behaviours:

> *"…health enhancing behaviours are determined more by collectively shaped social identities than by individual rational choice, as assumed in traditional information-based health education. Secondly residents of communities with high levels of social capital are most likely to have high levels of perceived control over their everyday lives. This is important for health given that people who feel in control of their lives in general are more likely to take control of their health through health-enhancing behaviours or through the speedy and appropriate accessing of health services"* (Campbell et al, 2000, p.267).

The fragility of collectively made identity that Holland *et al.* point to is, in the case of Hlokomela, strongly mitigated by the fact that its vision for change appears indeed to have been institutionalised – through a deliberate and concerted act of collective identity-making,

as opposed to the non-catalysed and more organically emergent collective identities that often characterise politically-invested social movements.

5.3. Symbolic capital enables action for health

The findings indicated that, in combination, the identifications with the idea of Hlokomela, the meanings people attached to it and the qualities of the actions they associated with it, the complex and interwoven processes through which Hlokomela's collective identity emerged, was projected and received, created a new "distinction" in the symbolic space – a form of symbolic capital (Bourdieu, 2003: pp. 142-147) – strongly supported and validated through actions in the "real" space.

Work in the symbolic space – specifically around collective identity and institutional rites – that brings about alterations in individual dispositions is enabling of shifts both in people's view of the world, their place in it and the choices available to them, and also consequently in their practice (supported concretely and symbolically through the institution whose identity they helped shape) (Bourdieu, 1994: pp. 15-35). The work in the symbolic space (around the meanings, values and representations that respondents associated with Hlokomela) was seen to underpin and support the practical work that the agents of the project engaged in. In turn the agents' practical work and their ability to perform as agents was supported and validated by the work on identity in the symbolic space (Bourdieu, 1982: pp. 97-149). In the process the hitherto closed discursive spaces around HIV and the underlying drivers of HIV infection were opened. The legitimacy that Hlokomela was reported to enjoy among all stakeholders as a locally-owned, locally pertinent, locally representative institution contributed significantly to enabling the engagements – the structured dialogues, the one to one interactions on the farms and in the hostels, the door to door work on the farms, in the neighbouring villages, on the buses – all of the face-to-face engagements with and among farm workers. The dialogues in particular were a necessary first step to openly considering the social and cultural norms that increased vulnerability to HIV, and the possibility of individuals making adaptations in behaviour (albeit in small steps) that could mitigate or prevent these vulnerabilities, specifically and principally in the area of gender norms and identities. Dialogues and other face-to-face interactions were also seen to promote access to the prevention, treatment and care services delivered under the auspices of the institution, including in the project's clinics, as well as by the state.

The evidence strongly suggests that Hlokomela also resembled in some important ways – specifically those concerning group identity – a social movement for health, one which had elaborated a new social imaginary (Castoriadis, 1987), and I will accordingly draw in this discussion on relevant social movement theory literature. I will draw too, extensively, on the sociological literature – in particular the work of Pierre Bourdieu on symbolic distinction, meaning-making and the effects of institutionalisation on social agents and on collective and individual dispositions – what he terms "habitus" (Bourdieu, 1979, 1982). Fleming describes Bourdieu's use of the term "Habitus" as: Cultural habitat which becomes internalised in the form of dispositions to act, think, and feel in certain ways. A set of culturally determined bodily dispositions which have no representative content and at no stage pass through consciousness. E.g., the disposition to stand different distances from people in different circumstances; the disposition to behave or think in a racist way (e.g., someone who simply sees people from another race as 'shifty' or 'arrogant'). … Habitus is acquired through our aculturation into certain social groups such as social classes, a particular gender, our family, our peer group, or even our nationality (Fleming, 2012). What is useful for our purposes is that habitus (plural) are durable, which explains to some extent the difficulty of behaviour change. At the same time, though, Bourdieu identifies primary habitus – chiefly disposition that is fashioned within the family – and secondary, which is inculcated later and through different mechanisms (school, church, clubs, different affiliations) and which is available to transformation, under certain conditions. He further distinguishes habitus that is proper to different fields, for example, the field of work, or pass-times, or music, and which likewise is subject to transformation, though not readily, and not without difficulty and certainly not through symbolic action alone (Bourdieu, 2003: pp. 259-260) *"without any transformation of the conditions of production and reinforcement of dispositions"* (p.260) which have shaped in a profoundly embedded way, the way people see and understand the world.

Bourdieu's work on the effects of schemes of perception and appreciation (the classificatory schemes that for any given social grouping normalise a particular vision of the world and establish the limits of what is perceived as possible, what is desirable, for that group, in a given field) (Bourdieu, 1994) – proved useful in attempting to understand and explain the findings particularly as regards the possibility of shifting, even slightly, dispositions so that they might allow the adoption of health protective behaviours.

Further, I will draw on the literature on branding: Hlokomela expressly employed simple branding techniques in the development and projection of its identity and it is therefore appropriate to consider from both a programming and conceptual point of view the relevance and effects of this approach in aiding or not the promotion of health, and specifically, HIV prevention work in the local area.

From the economics and branding literature there is ample evidence that symbolic work produces symbolic capital which holds value and can be deployed to aid the production of goods and services. Thomas Piketty, for example, is clear on the value that lies in the symbolic space and its use value for achieving institutional objectives:

> *"The market value of a company often depends on its reputation and of that of its brands, on its systems of information and modes of organisation, on the material and immaterial investments that it makes to enhance the visibility and attractiveness of its products and services"* (Piketty, 2013, p.87).

I was initially hesitant to place much emphasis on the concept of "branding" and on marketing terminology for an explanation of what was happening through the identity work of the Hlokomela project. However, the understanding of the effects of "immaterial capital" or "capital symbolique" expounded by Piketty and Bourdieu respectively convinced me of the merits of exploring this area, together with the fact that it had been an explicit strategy of the project.

5.4. The effect of "Distinction" in the symbolic space

5.4.1. We need something to attach this whole story to (Chair of the HTT board)

> *"Etre distinctif, être significatif, c'est la même chose" (To be distinctive, to be significative – is one and the same)* – (Benveniste, 1974, pp.223-224)

> *"Whenever a community participates and develops a way of knowing about itself and others, it is, by the same token, instituting itself as such, inviting a future for what it does and indeed, actualising the power it holds to participate in shaping a way of life"* (Campbell et al, 2000, p. 267).

The notion expressed above by Swiss linguist Benveniste that meaning is constructed through difference/distinction points to the possibility that to effect a change in behaviour it might first be necessary to lay down a distinct marker in the symbolic space around which new meanings can be generated, and a different view of the world – and different practice – may be instituted (Bourdieu, 2003, p.140): for Bourdieu it is difficult, if not impossible, to adopt an altered vision of what is possible from within a disposition that already has set the limits of what is visible, what is possible. Of course, the symbolic construct will not, on its own, constitute a new vision of the world or lead to altered practice. It will need at the same time to be perceived to be pertinent (Bourdieu, p.153), which includes a sense that the changes could be "for me", i.e. are close enough to what I know and understand as to not seem utterly impossible. And this pertinence will depend also on the extent to which this symbolic institution is accompanied by actions and values that deliver real benefit and can be perceived as superior to what went before – especially in terms of offering a practical response to what is perceived to be a crisis. The literature suggests that the newly constituted symbolic space and the accompanying beneficial actions may lead a group to consider real changes (Bourdieu, 1982: p.150).

By putting down a distinct marker in the symbolic space – the name, logo and slogan – the identity-making work of the Hlokomela project took a first step to creating what Bourdieu terms a "distinction" or "division", a classification or category in the symbolic space, where one did not exist before. This distinction represents, and makes visible, an existing difference in the social space – a representation of the largely marginalised and invisible farm workers, or the "farming community". This requires a rupture with the established order (what Bourdieu terms a "subversion hérétique"), the established way of viewing oneself and one's place in the world, and one's vision of what is possible.

> *"The heretical rupture with the established order and with the dispositions and representations that it engenders in agents shaped precisely by its structures presupposes an encounter between critical discourse and an objective crisis, capable*

> *of breaking the immediate concordance between the incorporated structures and the objective structures of which they are the product, and instituting a sort of practical épochè, a suspension of the primary adherence to the established order"*
> (Bourdieu, 1982, p. 150).

5.4.2. A conversion in the vision of the world

Bourdieu sees subversive action in the symbolic space as a pre-requisite to a "cognitive subversion" or "a conversion in the vision of the world" (p. 150). Respondents across stakeholder groups indicated that the establishment of a new distinction in the symbolic space – Hlokomela and "this farming community" – signified something which had not been represented hitherto. It signified the dignity and agency of farm workers as worthy citizens and active social agents, and made this dignity and agency visible to the world and to themselves. This is particularly evident in the findings that described the emergence of a new possible; that changed the perception and appreciation of how stakeholders saw the world and how they were able to categorise what they saw. There was evidence that the farming community had begun to institute itself, invite a future for itself and participate in shaping a way of life.

These “schèmes moteurs” or driving schemes/frameworks of perception – that are not generally available to consciousness but rather are “incorporated” (sometimes translated inadequately from the French as “internalised”, which fails to capture the way they perform beneath and beyond consciousness, like muscle memory) – trace the horizons of possibility for individual consciousness and as such are constitutive of social and cultural norms – the normalisation of commonly held perceptions and the limits of choice (Bourdieu, 1979, p.549). They determine how one can be seen, and how one can see oneself, in the social space. In “La Distinction” Bourdieu describes the social construction of this “sense of place” (ie. the sense of one’s proper place in the social structure) and the “structuring efficacity” that it exerts on social agents as follows:

> *“Through the intermediary of all the hierarchies and classifications that are inscribed in objects (notably cultural works* [in the French context]*), in institutions (eg. the family, the school system) or simply in language, in short through the intermediary of all the judgements, verdicts, classifications, injunctions (rappels à l’ordre) that institutions arranged precisely for this end – like the family or the schooling system –*

> *effect, or which arise continually in the engagements and interactions of ordinary life, the social order is inscribed progressively in the brain (cerveau). Objective limits become "sense of limits", a practical anticipation of objective limits acquired through the experience of objective limits, a "sense of one's place" which leads one to exclude oneself from that from which one is excluded (goods, person's, places, etc)*"
> (Bourdieu, 1979, p.549).

The changes which respondents described experiencing – both farm workers and non-farm workers, in the environment and in their own lives and practices – suggest that the elaboration of a distinction in the symbolic space, populated with values and actions that were a counterpoint to established norms, had altered the incorporated "sense of limits" and "sense of one's place" of many of the respondents and thereby enabled them to see and consider new choices and new possibilities, from within a situation which was described as having been considered cataclysmic and in the face of which they felt powerless. For example, farm workers could now see themselves as important, capable of taking the lead. Care and caring could be seen as possible and central to healthy human relationships. Talking about taboo subjects like sexuality and gender relations could be normal and might even preserve and save lives. HIV could be survived, contrary to original expectations, through a modification in practice. Fear of and discrimination against people living with HIV could be substituted with care and support.

In this sense, the distinction that is Hlokomela had breached the closure of the established social habitus – without overthrowing the fundaments of people's sense of who they are. Respondents noted that the agents of Hlokomela were distinct, exceptional, special, but did not suggest that through this they were now alien or other. The alteration in the symbolic space had begun to suggest that small steps in a health-seeking direction were possible – steps like accepting that a spouse might have another girlfriend, but negotiating with them both that they must all always use condoms, or accepting that people will consult sangomas but agreeing that they will check with the clinic that there is no conflict between what the sangoma dispenses and the ARVs provided by the clinic. These changes have been enabled through the symbolic work – the presence of a new symbolic entity that represents the possibility of a particular kind of change – but only because this entity has progressively established legitimacy and pertinence in the eyes of the community it is seen to represent and serve, as will be further discussed below.

Bourdieu notes further (Bourdieu, 1994) that a closure around culture (and hence a narrowing in perception of choice and possibility and a lessening of ability to see one's world from the outside, and hence to question elements of one's behaviour) is particularly pronounced in conditions of marginalisation. In the absence of access to capital of various sorts – in particular, economic and educational capital – social groupings (those who share a scheme of perception in a particular field or fields) tend to barricade themselves behind the capital that is available to them – notably cultural capital and social capital which can be available in abundance. Cultural norms and a reliance on networks of peers and the status and practical benefits that accrue through these relationship are doubly valued. Those less endowed with other forms of capital (economic, linguistic, political, educational, etc.) tend to exclude themselves ("that is not for us") from the choices that groupings with greater overall capital have at their disposal (Bourdieu, 1979).

This phenomenon is significant for HIV prevention work in marginalised settings in southern Africa. Here some of the vulnerability to infection resides precisely in cultural practices and norms, particularly those around gender power inequity (Jewkes, R. 2010) A lack of reflection, through lack of openness and/or lack of opportunity, on what an inflexible adherence to established cultural norms might mean in terms of health risk, especially in relation to gender norms and associated risky practices (eg. MCP and the difficulty of negotiating condom use) is understood to be a principal driver of the epidemic. This has led to what has been described as the "disconnect" between HIV prevention messaging – for example, the "One Partner" message (Soul City, 2010) (Airhihenbuwe, 2000) (Schultz, 2007) – and the near impossibility, within the confines of a multiple partner-sanctioning, male dominated culture and the massively uneven distribution of capital to respond practically to that message. It speaks to the need to "open" the cultural boundaries sufficiently for communities to be able to consider alternative views. Work in the symbolic space (supported by practical work to enable community engagement and to deliver quality beneficial services) is one approach to opening the cultural boundaries to reflection and possible adaptation (Campbell, 2006)

5.4.3. A sustained visibility, presence and reach

It is increasingly recognised in HIV prevention practice in marginalised communities that a sustained presence is required to address the more deep-rooted, cultural and social drivers of the epidemic, as opposed to the three-month "in-out" campaign-type responses or the

communication initiatives that are solely media-based (Pepfar, 2011). This recognition has been slow in coming, particularly by donor organisations who traditionally have felt the need to see immediate or short-term returns on their investments, pressured as they are by taxpayers in their home countries (Jackson, 2012) It is therefore significant that the largest of these organisations in terms of investment in Southern Africa, USAID Pepfar, now states that sustained presence is a necessary element of a successful intervention:

> *"Some prevention investments can be implemented relatively quickly and have a rapid impact on the epidemic. Others, including those that address cultural, structural, and institutional determinants of vulnerability, may require more time to achieve change. These longer-term investments are important. Without them, the HIV epidemic cannot be successfully contained and reversed, as factors that drive vulnerability will remain in place"* (Pepfar, 2011).

Respondents noted as significant the sustained presence of Hlokomela and its high visibility over a long period of time: *"Because ah, always keep on talking about this transmission, and how is the relationship and what is the behaviour during the weekends and er, it's very important. Because even myself I saw the changes, I saw the changes"* (Senior supervisor, para 28). Given the difficulty of the task of enabling shifts in norms and practices to promote health (SADC, 2006) it is significant that the distinction is also perceived by the community as a constant presence, not a punctual, in-out intervention but rather one rooted in the local space. It is a feature of identity-making work, and of the performative affirmation effect of a recognised symbolic entity, that it is a constant presence. One respondent described how every time he saw the logo on his farm, he felt that there was a friend there for him. Farm workers all stated how the presence of the Nompilos on their farms, and in their home communities, made them feel reassured.

Respondents generally reported Hlokomela's high visibility, through its media, its agents and its activities. This "fame" extended beyond the confines of the Hoedspruit farming community and into the surrounding villages and settlements. Nompilos reported how, largely as a result of the coverage their profiles had received in the local Kruger to Canyon newspaper, they received telephone calls from strangers in the broader community and how in their home settlements people somehow found out that they were associated with Hlokomela and called on them for their services.

5.5. Institutions and institutional rituals/rites

5.5.1. Institutionalisation – The push to conformity with a legitimized collective identity

The evidence suggests that the symbolic distinction that Hlokomela represented functioned as an "institution" which conferred on those who identified with it, felt a belonging to it or an affinity with it, an identity (among other identities). At the same time this identity was seen to impose on the authorised agents of the institution as well as the adherents, an *obligation* to conform to the values and precepts of this identity:

> *"The act of institution is an act of communication, but of a special kind: it signifies to someone their identity, both in the sense that it represents the identity for that person and at the same time imposes the identity on him/her by expressing it in front of everyone, hence notifying him/her, with authority, what he or she is and has to be."* (Bourdieu, 1982, p 126)
>
> (Bourdieu notes that the Greek word from which the word "category" derives – kategoresthai – meant originally "to accuse publicly" – ie. to be obliged to view and judge oneself as others view and judge one.)

Simply stated, rites of institution which accompany the act of belonging to/identifying with an institution involve assuming a position, through a process of "officialisation", which brings with it judgement by others (*notoriété publique*) – the public glare – and imposes an identity in the social space, one which has boundaries which may not be transgressed – and which requires of that person that they see themselves as different or particular in some way from those who are not associated with the institution (Bourdieu, 1982, p.126). Their disposition and actions will also be judged in some way by both the "group" within the institution, as well as by those outside the group, in terms of the values and precepts that the institution is seen to embody.

5.5.2. Aristos – a drive to distinction

Somewhat linked to the rites of institution and officialisation described above, Bourdieu further outlines a process in which an institution is perceived to represent opportunities for something superior or better (for example, a renowned college, an avant-garde art movement) to emerge – and hence reconstitutes people's identity as something superior to

their existing identity. People who are part of the movement (or programme) are transformed in how they view themselves and perceive themselves to be viewed by others, from inferior to superior, low to high, down to up, worse to better. This dynamic was particularly evident in the findings. Agents saw themselves as having moved up in the world ... in relation to where they were in a previous time and in relation to other agents in the same field ie. health workers in the state system. Similarly, farm workers who engaged with Hlokomela discussed how they felt their lives had improved for the better, how through Hlokomela they had come to an appreciation of how modifying their behaviour, in terms for instance of gender equity, made them feel better about themselves and at the limit preserved their lives.

In the competitive social and symbolic spaces where every social agent is positioned hierarchically in the dominant classificatory system (Bourdieu, 1982, p.127) social institutions (family, school, workplace, church …… Hlokomela) set and reproduce the terms for what is legitimate, worthy, valuable, superior. The choice is to remain as you are, or to re-constitute yourself as something other, better. Simply stated there is, motivated by self-respect, a desire to be seen and to see oneself as the best, *aristos* (Bourdieu, 1982, p.127). Bourdieu conceives of this drive to be – and to be seen to be – better, superior, and linked to the accumulation of symbolic capital validated through a social institution, and the investment of that capital in a transformation. This is the other sense of the term "distinction", meaning "with excellence". In the case of Hlokomela there was evidence of this effect in that the symbolic capital gained through association with Hlokomela, incorporated as part of the individual's habitus or disposition in the field of health, was shown to enable a shift in the individual's view of the world, choices available and practice, albeit often in relatively small steps.

5.5.3. Conforming to "the basics"

The effects of institutionalisation and the constitution of identity described above are clearly at play in the effects that Hlokomela's collective identity-making and projection work was reported to have had on its participants. There was a push/pull to conformity with a represented identity or institution in the symbolic space that included agents' acceptance of an obligation to align themselves with the project's explicit or implicit values, precepts and injunctions. The agents, along with participating farm workers through regular dialogues and other activities, had established and continued to define, collectively, what these values

were. The adoption of these values and precepts was critical to enabling those involved to open for consideration their behaviour and how this might affect their vulnerability to HIV, both individually and within groups.

Further, the effect of *kategoresthai* – of being accountable for a different, distinct, newly legitimised kind of behaviour by virtue of an association with a new and distinctive institution, was strongly noted by Nompilos. The Nompilos generally reported their sense of obligation to be role models – the idea that, as an agent of Hlokomela, to be seen to be acting counter to what was expected of an agent of Hlokomela, was simply unacceptable. Further, there was a strong sense of the need to monitor the boundaries of what was acceptable or not, for agents or representatives of the institution – to insist on adherence to the new and collectively delineated value set (care, respect, learning, change) – what the Director of the project referred to as "*the basics*". This might seem contradictory in the context of an empowerment process. Yet this did not appear to the participants to be at odds with their goals. Empowerment in this context did not appear to mean absolute freedom. Rather, the notion of being accountable was seen to play a powerful role in an otherwise quite chaotic setting that had left people extremely vulnerable to HIV and a host of other health and life-threatening behaviours. What was advanced through Hlokomela was a new conformity, not a *laissez faire* anything goes.

Nompilos and Gingirikani commonly reported how they intervened to address instances of behaviour that they deemed unacceptable in terms of what they had learned through Hlokomela. Other farm workers similarly described how they had modified their behaviour – especially men's behaviour towards their families, the women and children – in light of "*what Hlokomela teaches us*". The Director told how she had refused to appoint a farm worker who implored her for a position in the project "*because your attitude is not right, but you can never change because that is her way of doing it for years. But if she changes then that is transformation or something then maybe she will be part of that, ja*".

She further drew attention to this sense of obligation to act in a particular way, the way prescribed by the institution, in recounting this example of a transgression that could not be tolerated:

> *"You know one of our staff members has um // I saw him once in a um soccer thing with another girl there, and he is married. So I went to him on the Monday and I said*

> *'(name), I think the two of us must talk. He will never, ever like it if I am there at the soccer and I am there with one of the other farmers and what do you think will (my husband) say? Everyone there is knowing I am married but I am doing this, it is just not the example. So you cannot work here if you do that. That is out. If you are going to do that you are out. I am telling you today you are out.....You know because if you can't be an example for others // I don't say we must be angels I mean there are basic things that we are all (? Word) and lots of stuff but the basics we must do right. So we must be role models. If we are not then um we are going to have problems."*
> (Project Director)

Since the distinctive identity that Hlokomela represents was (and continues to be) created and confirmed by farm workers themselves, through ongoing processes of participation, and since they (especially Nompilos) were the principal agents of its projection – both in the development of media and through the practice of facilitating dialogue and other opportunities for engagement on the farms and in the communities – the fact that they feel obliged to conform to its norms and values means in fact that they are committed to upholding values and practices that they themselves have determined to be legitimate and necessary. Were it not for the fact that the identity was collectively constructed, Hlokomela's capacity to expect conformity would, in terms of broader development objectives of empowerment and agency, be questionably dictatorial. As it is, farm workers *obliged themselves* to transform their practice. Fortunately, too, one of the values of the institution was tolerance and acceptance of diversity, so those who do not wish to associate with "the basics" are free not to – but they may not then be agents of the institution.

In effect, the establishment in the symbolic space of a symbolic distinction or institution can be seen to contribute in part at least to the evolution of altered social norms in that to identify with that new distinction that is Hlokomela requires a conformity to the collectively agreed and legitimated values and practices that the institution represents, and re-represents, over time. Importantly, people experienced an iterative process with their participation at its core. The very acts of ongoing dialogue and engagement in ways that sought and valorised the inputs of farm workers, was a significant element of the possibility of change at both collective and individual levels. This was evident in how respondents commonly expressed a will to identify with Hlokomela, a sense of pride in their association – pride in themselves as agents of Hlokomela and pride in its achievements, which were seen

as distinctly superior to those of any other agency at work in the area, especially the state health services.

Moreover, through a kind of "double jeopardy" effect – a circular causality – adherence to these values and practices further legitimises the institution (because it is seen to be consistent with its own values and promises), which then further legitimises the adherents and agents, and so on. This effect was particularly marked among coordinators and Nompilos, and to a lesser degree Gingirikani members who stressed the importance of being seen to be living up to Hlokomela's promise of care, communication and respectful relationships.

5.5.4. People imagine and act as world-making collective agents

There is support too for the value of work in the symbolic space to institute a new social institution in the literature on social imaginaries, which Gaonkar defines as *"an enabling but not fully explicable symbolic matrix within which a people imagine and act as world-making collective agents"* (Gaonkar, 2002). Castoriades, an early leading exponent of this concept, posited that it is in the imaginary – the symbolic space – that societies constitute their identity and their unity – that over and above all of the other determinants (biology, the internal work of transforming "psychic monads" into socialized individuals, the inertial effect of the existing instituted society – the drag of history, as it were, etc.) – what he terms "this originary structuring component" or "the central signifying-signified" (Castoriades, 1989). Every society – and every sub-group in a society – constructs its unity and its identity through representing itself in symbols, myths, legends, etc. and, pre-eminently, through language – all of which have an "ensemblistic-identitary" dimension. What is perhaps most significant for our purposes is that it is in the space of social imaginaries that new horizons of possibility arise and changes to existing orders are most and first made possible – that change has first to be imagined as possible before it can be countenanced.

What is clear in the Hlokomela experience is that the deliberate act of putting down a marker in the symbolic space – a symbolic distinction – had enabled a shift in the disposition particularly of those most closely involved in the process – the staff and the Nompilos. This had in turn opened up an altered vision and appreciation of possible other ways of being. Inspired by this sense of a new possible, these agents were able to begin to model it for their peers, in their own conduct. In a circular process of causality, they were able to enjoy

increased legitimacy as the representatives of this new social imaginary. In this way, empowered with symbolic capital (respect as leaders/recognition, good reputation, legitimacy through pertinence and good action) they were able to begin engagements with their peers around the difficult, culturally embedded practices and beliefs that make people vulnerable to HIV – especially the gender-linked practices. At the very least, they were able to talk, with authority, and to enable others to talk, about taboo subjects that were previously not open for discussion.

5.6. Legitimizing the agents of change – delegation

> *"The institution of an identity is the imposition of a name, that is, a social essence"* (Bourdieu, 1982).

> *"By conferring on him/her the name or the title that defines him/her…..these acts of performative magic allow and demand of the recipient both that they become what they are, that is to say – what they have to be…….and that they enter body and soul into their function, that is, their social fiction and assume the image or the social essence that is conferred upon them"* (Bourdieu 2003, p. 348).

5.6.1. The contextualising authorities

It can be reasonably asserted that in communication with and within traditional communities, there is a need for modalities of communication that are culturally appropriate in that they observe "the procedures for control and identification" required in traditional communication (for example, those catalogued by the Palo Alto School, from Bateson to Watzlawik) and which include, for example, "*the identity defined and definable by names, prior recognition or physical presence*" (Guillaume, 2008, p. 30) – what Guillaume calls "*the contextualising authorities*" and which are markedly different to the codes at play in the the mass communication effort that is central to much health promotion work in southern Africa. The latter have tended to be anonymous procedures "*without any controlling authority or procedures for identification……private and disconnected from the cultural sedimentation of established conventions*" (Guillaume, 2008, p.31). What is at issue here are principles of provenance (where is the message coming from?), identity and recognition (who is speaking, and with what authority? Why should I listen?).

If, as the evidence strongly suggests, the symbolic distinction or institution that is Hlokomela enjoys legitimacy in the eyes of the community it constructs (symbolically), represents, and serves, through the quality of its actions, the benefits it is perceived to deliver and its pertinence in the local social space, then the official agents of the institution also benefit from that legitimacy and authority through a process that Bourdieu terms the "delegation of authority". This term describes both the conferral of authority by a group on an institution which it perceives to represent it (and to satisfy a perceived need), as well as on the agents of that institution who are defined as "porte paroles" (literally the "bearers of the word" or more commonly "spokespersons" or those who speak the "authorised language").

Significantly for Bourdieu the power of words (and also of representations/messages) – in their institutional usage – resides not in the language (or image) itself but in the "social conditions of the use of those words" ie. in a social process external to language itself (a phenomenon of language first clearly elaborated by Fernand de Saussure who distinguished internal linguistics (the science of language) from external linguistics (the science of the social usage of language) and found the production of meaning to reside principally in the latter).

> *"It is only exceptionally – that is, in abstract and artificial conditions of experimentation – that symbolic exchanges can be reduced to relations of pure communication and that the informational content of the message fully exhausts the content of the communication. The power of words is nothing other than the* ***delegated power*** *(pouvoir délégué) of the bearer of the word/spokesperson (porte-parole), and his/her words – that is, indissociably, both the matter of the discourse and the manner of its delivery – are rather a witness (témoignage), a witness among other witnesses, to the* ***guarantee of delegation*** *that is invested in the speaker."*
> (Bourdieu, 1982, p. 105)

Bourdieu illustrates this point simply with the example of the Latin liturgy which for many centuries enthralled Catholic congregations with its "magic", despite the fact that most of them could not understand the literal significance (the content) of the words. The words were, rather, a form of symbolic exchange imbued with meaning through their provenance from a source whose legitimacy was recognised by the adherents and conferred by them on the institution – the Church – on its rituals and its agents (the priests) (Bourdieu, 1982: pp. 103-113). This act of delegation of authority in a sense effectively constitutes both the

group and the institution as it recognises a binding interrelation between the two. It is the social recognition of the institution's agents that authorises them to be the spokespersons of the institution – to represent them in the institution and the institution to them. This is markedly different to the "anonymous procedure" of mass media communication described by Guillaume in which "*identity, identification, the nomen and therefore the nomos disappears*". (Guillaume, 2008. p. 31)

> *"In effect, the usage of language – that is both the manner and the matter of the discourse – depends on the social position of the speaker (locuteur), which determines the access he/she has to the language of the institution, to the official, orthodox, legitimate word. It is access to the legitimate instruments of expression, hence participation in the authority of the institution, that makes* ***all*** *the difference – irreducible to the discourse itself – between the simple imposture of masqueraders that disguises performative affirmation as description or simple statement (constatation), and the authorised imposture of those who do the same thing but with the authorisation and authority of an institution. The spokesperson (of an institution) is an impostor bearing the skeptron*.* (Bourdieu, 1982: p. 107)
>
> (*Skeptron – reference to Homer and the staff, the skeptron, carried by an orator as a symbol of his/her authority to address people in the public space.)

What was clearly evident in the findings was that Nompilos and to a lesser degree Gingirikani felt empowered to speak and engage with their peers because they saw themselves as the spokespersons/agents of the institution, Hlokomela. Their peers *conferred this authority on them* because they recognised the value of the institution for them. This gave their words and their engagements (and themselves) the power of "performative affirmation" (performative magic) – i.e. a symbolic exchange value beyond the mere meaning of the words and imbued with symbolic capital (the honour/status, socially conferred, attached to the official position). This "sacralisation" or "consecration" of the agents of the institution was evidenced in reports of the power Hlokomela's agents reported experiencing when acting in the name of Hlokomela and which was validated for them by the way community members generally accepted and responded to their authority.

> *"In the struggle for the imposition of a legitimate vision….****agents (of authorised institutions) possess a power proportionate to their symbolic capital, that is, to the***

> ***recognition that they receive from a group*** (my emphasis): *the authority which establishes the performative efficacity of the discourse is a percipi, a known, recognised being, which enables him/her to impose a percipere (a perception, a learning, a feeling), or, better, to impose him/herself as one officially entitled, before all and in the name of all, to impose consensus on the meaning of the social world which is the basis of common sense."* (Bourdieu, 1982: p. 101)

The findings showed that agents of Hlokomela felt and were authorised to perform in the space of shifting norms – they were able to propose the possibility of an altered consensus especially around previously unchallenged gender identities and practices and sexuality. This manifested through topics chosen by them, such as *"Keep off my desire"* – focusing on the commonly held belief that men cannot and need not control their sexual urges and are entitled to sexual satisfaction whenever and with whomsoever, or the question: *"One partner is enough?"* focussing on MCP and the possibility that multiple partnerships increase vulnerability to HIV, without prescribing what possible remedies might be available. There was also evidence that through these interactions individuals were taking small but significant steps to align their practice with this adjusted consensus. Some of these steps included: the expressed belief that men should be more caring in relation to their partners and children, more proactive and responsible (a frequently used term was "serious") in securing their health by having check-ups at the clinic, knowing their status and using condoms; and that women were feeling more able to negotiate previously unquestioned behaviours by their male partners and were themselves more aware of the risks of having more than one partner. Some were even proud to publicly announce that they had formerly been known as "promiscuous" women but were now proclaiming the virtues of sticking to one partner.

Further there was evidence that the silence around HIV was being broken, and that the incidences of stigmatising those suspected of being HIV positive were declining. Through the narratives, this was linked directly to the sustained programme of face-to-face engagements led by Nompilos and Gingirikani, and to the media coverage to increase awareness of HIV, in which Nompilos and other farm workers featured prominently, in spite of the possibility that appearing in public under the banner of Hlokomela might cause others to assume that they were HIV positive.

It is reasonable to infer that the confidence and self-assuredness of Nompilos and Gingirikani members to intervene in the space of social norms is in part at least enabled by the authority and legitimacy that they felt they enjoyed as a result of being associated with Hlokomela. In this sense the symbolic capital that accrues around the collective identity of Hlokomela is significantly supportive of health promotion efforts – linked of course to practical actions to improve access to and quality of clinical services in the area, provided by Hlokomela.

There was further evidence of the value of generating symbolic capital through processes of institutionalisation linked to a collective identity in Nompilos reporting that they felt that their status was special and distinct, within the broader Hlokomela identity. They felt too that this status needed to be maintained as distinct from other farm workers. For example, one respondent noted that Nompilos needed apparel that was distinct from the Hlokomela T-shirts that were distributed to the general population, so that people would instantly recognise that they were not merely followers of Hlokomela, but were its agents. Although this was justified in terms of the need for farm workers to be able to identify Nompilos as the people who could provide them with a vital service, it was also clear that status was also involved – further borne out by the reported competition for the position of Nompilo (Bourdieu describes this effect of differentiation conferred by rites of institution – the title "Nompilo" – as that which separates those who have not undergone the rite from those who never will – ie. that it establishes an exclusivity that enhances authority – both for the bearer of the title and in the eyes of those who recognise the institution).

Although there is a potential downside to this desire for distinctiveness – the possibility that Nompilos might act with aloofness and superiority towards their peers – there was in this case no evidence of such behaviour. Rather, the aspirational pull to be a Nompilo seemed to indicate a sense of empowerment through the title and role that was a necessary condition for being able to undertake the tasks of a Nompilo – tasks that require a certain positional gravitas and authority. Again, symbolic distinction or difference – represented in the collective identity of Hlokomela and the sub-identity of its agents – can be seen to play a positive role in enabling the health promotion work of the project, in so far as without an empowered, respected and authorised *"bridge to the community"* no work would be possible.

5.6.2. Leading and being led – derogation

An effect observed in the findings and allied to that of delegation was that of derogation; the willingness of respondents – especially Gingirikani members, but also of Nompilos – to be led. There was evidence of a hierarchy at work – from the Project Director and Programme Manager, through the Coordinators, the Nompilos and the Gingirikani (God also could be included at the top of this chain of command) – with each level expressing a willingness to derogate power to the level "above", and in turn to be leaders for the levels "below".

> *"But after coming to Hlokomela they educated me about HIV AIDS. I just told myself that I need to change my life because they told us that if we want to be care givers, change agents we need to change our behaviours in order for people to listen to us" (Female Nompilo, 1st SGI, para 73).*

This suggests that the participatory processes at work in the collective identity-making of the project are not a flat democracy (everyone does not decide everything) but rather one in which responsibilities and authority are assigned to specific agents – and which allows what Jean Baudrillard describes as "*extrapolating one's own life and desire through the Other*":

> *"The Other is not involved as a separate, opposite term. I devolve my desire and will to the Other and he or she is involved in the process of alterity. And even if we do not find a destiny – it is not that strong – the Other becomes an agent of my own life because he or she is in the end the foundation of this operation. I no longer account for the operation of my life; I refer it to the Other, who takes charge."* (Baudrillard, 2008: p. 119)

This notion of a shared agency is important in that it qualifies the notion of absolute, individualised agency that is often taken to be the objective of work to empower individuals to perceive and make choices – something akin to an idealised notion of free will (what Baudrillard terms "a voluntarist morality"). Far from being a "*negative form of desisting, renouncing, defeat or voluntary alienation*" this transfer or diverting of responsibility for our beliefs, wants or knowledge should rather be viewed as a strategy of resistance or even an offensive strategy. Baudrillard further notes that this phenomenon is particularly marked in some cultures (and it can be argued in many traditional cultures in southern Africa):

> *"Some cultures do this (derogate) systematically on the symbolic level. Someone else always takes charge of your life. In a hierarchical order, you do not have responsibility for your own life. Everything is taken in charge, either by a subsequent Other or a previous life (ancestors). Almost all cultures know that no one has his or her own desires or will, that it is a utopian illusion. They know that things function better through a system of transfers, metaphor and devolution. The Other takes charge of your life and you take charge of someone else's life." (*Baudrillard, 2008: p. 120)

The legitimacy and authority conferred on Hlokomela and its agent through the symbolic processes of institutionalisation can be seen to have enabled the establishment of an alternate hierarchical order which opens spaces for the transfer or circulation of new knowledge, beliefs and capabilities which, in the existing hierarchies (especially the prevailing gender hierarchy) would, if individualised, have the potential to be conflictual.

> *"Wanting, capability, belief, knowledge are functions that would cause us to be in complete contradiction if we took them on ourselves since we would have to oppose them to others. Our relationship to the Other would then be a relationship of force. This is not true of the symbolic relationship connecting each to the Other through desire and will."* (Baudrillard, 2008: p. 120)

There is of course the potential for this process of general derogation to be compromising – for example through the abuses of a charismatic leader. However, in the case of Hlokomela what can be seen to be operating through general derogation is what Baudrillard registers as the difference between "making" and "letting" – for example, "making happen" and "letting happen" (laisser-faire), "making know" and "letting know", etc. No one is compelled, through their investment in the Other, to believe, know or do anything. Rather, the process allows a consideration of an alternative vision and different choices without the violence of compulsion.

> *"Sometimes letting something happen works better than direct will or action. It is probably more powerful, more subtle to let someone believe than to make someone believe. While the media have the belief that their techniques make people believe,*

> *these techniques are probably less effective than letting them believe."* (Baudrillard, 2008: p. 119)

The compulsion lies at one remove – in the Other – where, as we have seen, there is an obligation to be and act in a particular way, consistent with the values of the institution. For those "below" in the hierarchy, who have deferred responsibility to the Other, there is simply the option, the choice. Capability, knowledge and want are not abandoned but are "managed at a remove" (p 121).

The collective identity of Hlokomela is an enabler of processes of interaction that are less about the communication of messages (though there is some of this) than about the performative affirmation of communication, of the circulation of meaning and identity in the symbolic space, and of making it possible for adherents to be agents of change for each other, to grant others the authority to represent what we want to be and thereby also to be representatives for others of what they can be, should they so choose.

5.7. Collective identity-making, mutual recognition and group mobilisation

> *"A group, mobilised by and for the defence of its interests, cannot come into being except through a collective work of construction – inseparably theoretical and practical; but all social groups are not equally probable and this social artefact that we call a social grouping is far more likely to come into existence and to have durability if the agents who come together to constitute it were already closer in the social space (this is true also of a unit founded on an affective relationship of love or friendship, whether or not it is socially sanctioned). Put differently, the symbolic work of* ***constitution*** *or consecration which is necessary to create a unified group (the imposition of names, acronyms, signs around which people can rally [signes de ralliement], public demonstrations, etc) has so much more chance of success if the agents on whom they are intended to act are more inclined, by virtue of their proximity in the social space and hence also in dispositions and interests, to* ***be able to have mutual recognition and to recognise themselves in the same project*** *(political or other)."* (Bourdieu, 1994: p. 55)

The Hlokomela project made a concerted effort to publicise its presence and raise its profile through the use of media created through participation and purposefully representing the local. The fact that farm workers participated fully in the development of the media tended to mean that the representations were local and relevant – a fact that was observed and appreciated by most respondents. The imagery also deliberately included the broad range of stakeholders and these stakeholders similarly reported that they were "proud" to appear in these media and to be associated with Hlokomela. The images used in the media representations – in billboards and posters and regular newspaper articles – reflect, almost naively, a "farming community" that is positive and inclusive. Although farm workers feature centrally, the media also include management, local and provincial government leaders, traditional leaders and healers, business people … a fairly broad swathe of local stakeholders.

Hlokomela's representations are simple, banal even. Their power (as reported by many respondents) lies not in the representation itself but rather in the context (farm workers have never figured prominently in the public space, have never had the opportunity to be "celebrities", have been the invisible presence in a space dominated by whites who have had a monopoly over the space – social, economic and symbolic). It is the act of laying down a marker that represents farm workers that is most significant and most empowering – the communication effect of "performative affirmation" that Bourdieu describes. Defining a distinct place in the public space that is "farm worker" space and imbuing that with significance and value (capital). This capital is then deployed to further mobilise farm workers (and others) to protect their health. In this way, the content of the message is sometimes less important than the effect of the communication.

5.8. *A unique vision of its identity, and an identical vision of its unity*

An allied effect to that of pertinence through proximity and recognisability is that of the capacity of the representation to make real that which it represents, where there is a readiness on the part of the perceiver to invest in it a sense of the real (consecration) – to believe that the representation can be the thing itself.

> *"The image has the particular capacity to produce that which literary critics call 'the effect of the real' – it can cause to be seen, and cause to be believed that which is*

> *seen. This power of evocation has mobilising effects. It can bring into existence ideas or representations, but also groups……reporting (rapporter) always implies a social construction of reality that is capable of exerting effects of social mobilisation."* (Bourdieu, 2008: p. 21).

In their responses to being shown representations produced by Hlokomela (Billboards, posters, etc.) many respondents did not distinguish between the representation and the thing represented, frequently stating that what they saw in the image was in their view the real thing. For example, one respondent stated "(*name) is using a condom, therefore, we are all now happy to use condoms*"). Others expressed a will for something to be the case, and took the image to be a figure or a validation of their will. So for example, one respondent said *"farm workers should care for each other, therefore, as confirmed in the image, they do".* When asked about the project slogan "Farm workers care for each other" respondents almost universally said that they believed the Hlokomela slogan to be a statement of fact (only two respondents indicated that this might not be the case) – though in fact there is ample evidence that mutual care is not in fact universally practised on the farms or in communities. Similarly, when shown the logo respondents narrated detailed personal experiences of Hlokomela that were not in fact objectively represented in the image. The lack of distinction that respondents generally made between image and reality – where the one is able to stand in for the other – speaks to the power of representation to bring into being that which the viewer/receiver wishes to have brought into being. In simple terms this is the effect of the self-fulfilling prophecy.

Bourdieu illustrates the effect of a representation, a fiction or a word that draws on proximity, recognisability, pertinence and a desire for something to be the case – to bring into existence the thing represented – through the example of the word "Occitan" attached to a dialect spoken in South Western France, which in fact is not a language at all but a disparate collection of quite different usages, but which has nevertheless come to be recognised by those in the area as describing a language, a region, even a nation, apart from others.

> *"The act of social magic which consists in attempting to bring into existence the named thing can succeed if the one who undertakes this act is able to have others recognise the power that the term assumes (falsely), through a provisional or definitive usurpation – namely that of a new vision and a new division of the social*

> *world: regere fines, regere sacra, the consecration of a new limit"* (Bourdieu, P. 1982 p.140).
>
> *"The efficacity of the performative discourse that seeks to bring into existence that which is enunciated through the very act of enunciating it* ***is proportional to the authority of the enuniciator*** *(my emphasis): the formula "I authorise you to leave" is only eo ipso an authorisation if the pronouncer is authorised to authorise, has the authority to authorise. But the effect of cognition (connaissance) that this objectivisation through the discourse exerts does not depend solely on the recognition accorded the enunciator; it depends also on the degree to which the discourse that announces to the group its identity* ***is founded in the objectivity of the group to which it is addressed****, that is to say* ***in the recognition*** *(reconnaissance)* ***and the belief accorded to it by the members of the group****, as well as* ***in the economic or cultural properties that they have in common****, because it is* ***only by means of a determined principle of pertinence*** *that the relationship between these properties is able to appear."* (Bourdieu, 1982: p. 141)

It was clear from the data that the representations developed and projected by the project (by farm workers themselves, in the more formal aspect of the collective identity-making work – ie. media making) was indeed perceived to be pertinent and recognisable and capable of eliciting identification and of motivating common action. *"The power over the group that is being brought into existence as a group is inseparably a power to make the group by imposing on it* ***common principles of vision and division****, hence* ***a unique vision of its identity, and an identical vision of its unity****"* (Bourdieu, *1982*: p. 141).

5.9. Belonging and social capital

A sense of belonging to Hlokomela was one of the strongest findings to emerge from the data, across all stakeholder groups. A sense of belonging and identification, together with autonomy and control, and social networking, is identified as one of the constitutive domains of social capital (Morrow, 1999). This in turn is recognized as being supportive of positive health outcomes. Citing Ottejber's 2005 work to assess definitions of social capital across disciplines (including Bourdieu's usage), Morgan and Haglund conclude that social capital is found to be:

> *"… a resource for societies as it recognizes the importance of informal and formal networks in supporting individuals and communities through difficult times and increases their opportunities for improving and sustaining health through better access to information and resources"* (Morgan et al, 2005).

Pierre Bourdieu places recognition and identification – ie. a symbolic function – at the core of social capital, which he defines as:

> *"…the aggregate of the actual or potential resources which are linked to possessions of a durable network of more or less institutionalized relationships of mutual acquaintance and recognition – or in other words to membership of a group – which provides each of its members with the backing of the collectivity-owned capital, a "credential" which entitles them to credit, in the various senses of the word"* (Bourdieu, 1986, p.248).

The fact that the distinct and largely symbolic institutional character of Hlokomela's collectively-made identity was found to be sufficiently open as to allow identifications by a diverse range of stakeholders, each with their own "capitals" – economic, symbolic, cultural – would, in Bourdieu's understanding of the functioning of social capital, suggest that the collective is able to benefit from the "collective" aggregate of the "credit" or multiple capitals that each of the "members" brings. This is borne out in the case of Hlokomela by the fact that the broad range of stakeholders that expressed a sense of belonging to Hlokomela do in fact deliver some substantive "credit" to the project's workings and to its individual "members": farmer managers/owners enable access to their premises and recognise, through formal workplace policies, the role and authority of Hlokomela Nompilos to mobilise farm workers around health-related issues – some provide material support to the project and to their employees; businesses in Hoedspruit (eg. Spar) provide material support in the form of donations to the project; the local health services augment Hlokomela's own clinical services through a referral network that provides TB treatment and a range of other services not provided by the Hlokomela clinic, provincial government provides ARV medication; farm workers provide voluntary labour (or labour for which they receive only a modest state stipend); the local newspaper offers preferential rates to the project and gives what its readership sometimes claims is inordinate coverage of its activities; personal, family networks are tapped for their resources – for example, the Director's son provides graphic design and layout services; traditional leaders and healers

promote Hlokomela in their constituencies; and, all stakeholders augment the symbolic capital which is the name and reputation of the project in their advocacy for its work.

All of the above is clear evidence of one of the two kinds of social capital identified by Putnam, namely "bridging" – ie. relations between different groups, networks that are outward looking and encompass people across diverse social cleavages (Ottebjer, 2005). This bridging that is enabled in part at least through the collective identity work of the project, and which in turn augments the symbolic value of that identity and also its performative capacity, can be seen to "improve the efficiency of society by facilitating coordinated actions" (Putnam 1993: 167), in addition to aggregating and making available the various capitals to which the diverse range of actors have access and which can be seen to enable the health promotion activities of Hlokomela.

Putnam's second kind of social capital, bonding, ie. the *"norms of reciprocity and trustworthiness"* that may operate within homogenous groups (groups of similar interests and properties) (Putnam, 2000, pp.18,19) was also clearly in evidence as the Hlokomela identity was seen to bring into being and sustain a sense of identification and belonging or group affinity among farm workers, around the objectives and values of the project.

What is significant too, in the social capital reading of collective identity work, is Bourdieu's contention that the social networks that are constitutive of social capital are also the conduits for the distribution of and access to power, for individuals. Generally speaking, for Bourdieu, the dominant institutions (family, school, etc.) – which are themselves networks constitutive of social capital – play a significant role in reproducing existing power relations and maintaining the social order, individuals' positions within it and hence their "vision", their sense of what is possible for them. However, Bourdieu also sees a transformative role for institutions and the social capital that they represent and generate where these mark a difference or distinction – a new symbolic division – over and against the existing structures, which enables a new vision, a new sense of the possible.

Through new "institutions" with new rites and relations and differently constructed credentials, individual "members" gain access to power (capital) that they would not otherwise have. Coordinators, Nompilos and Gingirikani members all expressed a sense that they had been empowered through their identification with Hlokomela, that the collective

identity had enabled them to reconstruct their sense of who they were, their individual identities, and that this in turn enabled them to perform differently, more effectively, as agents of change. In this regard, Coleman's definition of social capital where he underlines its productive, action-enabling effects is useful:

> *"(Social capital is) a variety of entities with two elements in common: they all consist of some aspect of social structures, and they facilitate certain actions of actors – whether persons or corporate actors – within the structure. Like other forms of capital, social capital is productive, making possible the achievement of certain ends that in its absence would not be possible"* (Coleman, 1988: p. 98).

While there remains much debate about the definitions of social capital, and especially around cause and effect – whether social support, social cohesion, reciprocity, identity, sense of belonging and civic engagement are constituents or consequences (I think it's clear they are both) – there is general agreement that social networks are a valuable asset for both individuals and collectives in securing positive health outcomes and indeed in broad social development (building democracy, citizen participation, self and collective efficacy, etc.). The evidence from the Hlokomela research suggests that the properties or indicators for social capital are both cause and effect and that from an operational point of view, to promote identity, reciprocity, belonging and engagement – through symbolic and practical work – generates social capital. This social capital in turn may continuously be re-invested to further promote identity, reciprocity, belonging, social support, etc. Through this, actions to support the narrower health promotion objectives of an intervention are made easier. To the extent to which the identity work of Hlokomela can be seen to have supported the development of a social network, collective identity-making can be assumed therefore to have enhanced the possibility for health promotion, particularly in enabling engagement around the difficult areas of the gender, cultural and social norms and practices that increase vulnerability to HIV.

5.10. Social Branding – a programmatic tool for collective identity-making

There is general scepticism in discourses about human rights – including health rights – as to the appropriateness of the application of branding techniques.

> *"Cultures of course have always branded themselves through art and ritual, but verbal discourses internal to a culture have, in the past, not tended to perform a branding function. However, as cultures increasingly are thrown together and interleaved in globalized symbolic exchanges, verbal branding of cultural essences tends towards the nature of visual branding – towards art or image. But even bearing these things in mind, can it possibly be correct to situate the ways in which we talk and write about people's greatest needs, most severe oppressions and most vital aspirations – which is what rights discourses are nominally about – in these terms?"* (Chanock, 2002, p. 52).

Similarly, in reference to the practice of "cultural branding" or culture-centredness as an antidote to the domination of English as the global language and Western images imposed on non-Western societies, especially in the most vulnerable of indigenous communities, Chanock et al suggest *"the danger is that one is contributing to a weakening of just claims for recognition, respect and resources"*(Chanock, 2002: p. 53).

The implicit assumption in such arguments against the use of branding processes in the human rights sphere is that *"these discourses appear to have more in common with the language and techniques of advertising* ***behind which no truths lie*** *(my emphasis)"* (Chanock, 2002: p. 52) – ie. that branding techniques in some way inherently subvert truth through a pernicious, deceiving symbolic manipulation and as such "weaken just claims". It is without question true that branding in the service of profit in the commercial sphere can and often does perform a sort of symbolic violence in that it induces a false consciousness and plays on often largely unachievable aspirations.

However, as an operational technique in the realm of the symbolic, there is nothing innately evil about branding. It functions, much like any other symbolic system, to establish distinction, to interpellate subjects (to propose identifications and affinities) and to propose choices. What is significant in this context is who determines what that distinction is and what the reasons for its elaboration might be. If it is acceptable, for example, to "brand" a mosquito net or a condom, as is commonly the practice in social marketing, or to brand the UN, the Red Cross, or the Nelson Mandela Foundation, why would it be any less necessary or acceptable to "brand" a local institution aimed at health promotion, or a local social movement mobilising for positive and mutually agreed social change and development

outcomes, particular if the branding process is participatory, and determining brand image and brand values and brand propositions involves the community most affected, who are then also voluntarily brand representatives and brand advocates?

Further, a local project does not operate in a symbolically neutral terrain – there are many other "brands" competing for attention in the same space, not only in the consumer sphere but also the "aid brands" of the agencies funding development. As MacLachlan (2010) *et al* note:

> *"if buildings or equipment have foreign logos emblazoned across them, one could understand how it might be thought in the receiving country that this signifies ownership by someone else – say the donating agency – and so this might be taken to imply that the local community need not get involved in their maintenance or use"* (Maclachlan et al, 2010: p. 114).

This competition can lead to *"unexpected and counter-intuitive risks"* where "*aid comes at the expense of identity. Identity is undermined in an insidious, cumulative way, first by unwitting dominance and second through unwitting injustice"* (Maclachlan et al, 2010: p.117).

By implication, where a local community emblazons its own identity on everything it does, there should be an increased likelihood that that community will "*get involved*". In this regard, a particularly significant finding in this research was that the local implementing agency, HTT, had almost by default backgrounded its organisational identity thereby allowing the collectively-made identity of Hlokomela to "*stand out*". The effect of this was to enable a strong sense of identification by farm workers in particular, but also by other local stakeholders, with Hlokomela, whose brand was seen to be owned by everyone and by no one, and to be recognisably "for" the farming community and of Hoedspruit.

Vestergaard notes that there is an increasing convergence between the practice of for-profit and not-for-profit organisations where the former are becoming more ethical (applying values-based or principles-driven branding techniques) and the latter more commercial (applying some of the principles of marketing) in their recognition of the need for and pursuit of credibility, visibility and a marketable identity (2008). From the marketing

perspective this same convergence is noted, in particular, the need for corporate social responsibility, which the UN Global Compact/sustainability statement defines as *"…business that embodies transparency and ethical behaviour, respect for stakeholder groups, and a commitment to add economic, social and environmental value*". (Neal et al. 2008: p. 55) What is significant for our purposes is that commercial branding is increasingly aligned with values that all stakeholders subscribe too and the recognition that brand attributes are created not only by the company but also "*assigned or created by the various stakeholders in a market in a manner not often envisioned by the company who ostensibly owns the brand*". (2008, p. 55) Further, that "*you must work hard every day to make sure that what you promise is what your stakeholders experience*".

The Hlokomela project set out expressly and consciously to brand itself. The analogy between collective identity-making work and branding processes was an obvious one to make to farm worker activists who could easily recognise the power of the brands they commonly encounter in their space – KFC, Coca Cola, MTN, etc. – and the suggestion therefore that they should employ these same techniques, with some notably different aims and an absence of guile, was readily grasped. The techniques of branding that they employed aimed specifically at attracting support from without by raising the profile of their project, strengthening the project internally through affirming the participants, articulating and projecting values identified by themselves as central to their mission, and articulating and broadcasting a promise ("Farm workers care for each other"), which would establish and hold everyone accountable for its realisation and hence secure positive reputation, which would make their work for change easier and more effective.

A notion central to branding – the building of "brand equity" – was placed at the heart of the Hlokomela branding process. Brand equity rests on two pillars: the attribution of a set of core values to the brand – in the case of Hlokomela, the core value was care and its derivatives – values that can be recognised and shared by all stakeholders; and, the demonstration of these values in a positive experience of a service (brand experience). What is significantly different, in what could be termed "social branding", is that this equity is not "monetised" in company sales, profit or stock value. Rather, the equity is the symbolic capital described above (respect, dignity, legitimacy, authority, etc.) which is available to the institution, its agents and adherents for investment in social mobilisation and development

processes – in the case of Hlokomela, the delivery of a caring service that included, centrally, community dialogue in "safe spaces", and respectful treatment in clinical services.

Another key similarity as noted in the findings is the "pull" effect to consistent performance, both within an organisation and among its stakeholders, that alignment with a set of core values is able to effect and which serves as a "quality assurance" mechanism internally (that staff and brand representatives/advocates align and measure their performance against core values and are held accountable to these), and a guarantee of performance and service for the "customers". This was particularly evident in perceptions of the performance of the Hlokomela "brand" in relation to one of its key "competitors" in the health service provision field – the state health services. It was almost universally reported that Hlokomela delivered on its promise of care, in sharp contrast to the experience of the state services which were at best indifferent and in some cases abusive and lacking in respect. Further, staff and agents reported a sense of obligation to conform to and demonstrate the values of the institution – values which they themselves had participated in formulating. This effect resulted in brand loyalty and affinity, on the part of stakeholders, and hence an increase in the esteem with which Hlokomela was held – its reputation.

Is this pre-figuring of a reality in a brand and its representations not simply propaganda? And is that necessarily "bad"? The Portuguese poet, Pessoa, described propaganda as "*not only written and spoken discourse but really everything, direct and indirect action, everything that can predispose minds to a free society and weaken all resistance to its advent*" (Pessoa, 2007, p28). What is clear in the application of marketing techniques, as in any other communication technique – in work in the symbolic space, where meaning is constructed and attributed, identities are made, and social fictions elaborated – ethics and ethical leadership are determinant.

5.11. Study limitations

Selecting one element of a multi-faceted communication strategy, while allowing for in-depth analysis of that single element, necessarily limits the ability to analyse and assess the effectiveness of the overall communication strategy, or the impact of the other elements on the communication element, including the identity-making work. This is offset in part by Janine Simon-Meyer's research into the role of the Nompilos in promoting dialogue, which provides additional relevant data and insights (Simon-Meyer, 2013).

An obvious limitation was the fact that the researcher spoke neither of the predominant local languages – Sepedi and Xitsonga. This necessitated the use of an interpreter with the awkwardness that this introduces. However, as the interviews / SGIs were all audiotaped and transcribed, it also had the advantage of providing two separate English translations, one "live" of the running interpretation, and the other from the transcript of the audio tapes. Where there were significant differences between the two translations we were able to query why this was so and arrive, hopefully, at a more faithful, contextual translation.

Multiple languages, including local dialects, meant that some transcribed interviews had to be translated into English with attendant risks of misinterpretation. Where possible local translators with knowledge of the dialects and of the farm worker context were engaged. The researcher worked closely with the translator where there appeared to be ambiguities in the translations.

An important limitation was the reliance, within the study design, on reported perceived effects of the communication processes and products. It is natural for people to speak glowingly of processes in which they are more or less invested. However, it was apparent from both emic and etic data that there was a high degree of unanimity about what Hlokomela meant and what Hlokomela had achieved and how this had affected respondents' lives.

A further possible limitation was the awkwardness of eliciting responses to questions about collective identity, which is a conceptual category most farm workers were not likely to be familiar with. To mitigate against this possible obstacle, visual prompts to discussion (billboards, logo, newspaper extracts) were used, together with broadly open ended questions like: "What do you think/feel when you see ....". Most farm worker respondents were also already familiar with talking about communications. At monthly meetings Nompilos decided on the Theme (quarterly) and Topics for the following month's dialogue and gave feedback on the dialogues they and the Gingirikani had conducted/facilitated the previous month. The researcher observed one such meeting during the data collection phase, in addition to several other meetings over the five-year period of working with the project.

The fact that the researcher had played a central role in developing the communication strategy for the project and in strengthening the capacity of staff and Nompilos to plan communications, conduct dialogues and facilitate the development of media could be construed as a weakness and lead to bias in the findings. However, from the very first engagement between the researcher and Nompilos, in 2005, Nompilos were encouraged and enabled to see themselves as the key facilitators of communication and they very quickly assumed this role. By 2006 the researcher's inputs were limited to two two-day visits a year, and remote mentoring of Coordinators by e-mail and telephone. Most Gingirikani and some Nompilos were not aware that I had played a key role at the inception of the project and spoke to me about the project as if I were an outsider who would not understand concepts that they had taken ownership of ... like "cycle of dialogue" ... (which they had converted to "Circle of Dialogue" because farm workers sat in a circle of about 10 people to conduct dialogues). In most cases SGIs were conducted by a local person familiar with the project's work, in mother tongue.

A mixed methods approach would have been useful but was precluded because of time and resource constraints. The addition of a reach and reception survey, for example, would have given a better sense of the overall reach of the identity work, which could only be inferred from the qualitative data and anecdotal evidence. From the project monitoring and evaluation processes we were able to know that 70% of farmworkers were reached at least once a month in face to face dialogues whose topics addressed critical social and cultural determinants of HIV infection (including multiple concurrent partners, women's inability to negotiate condom use, the effects of hegemonic masculinities and acquiescent femininities, the dislocation of families through migration, etc.). When we conclude from the qualitative data that Hlokomela was able, because of its reputation for excellence of care, to attract the participation on farm workers, this is more than an assumption. Linked to the limitation of a qualitative approach only was the fact that only one farm worker who was not directly involved in the Hlokomela project was interviewed. This was partly by design – it had been decided to focus on those who had had a direct role in the elaboration of the project's identity – but also the result of limited time and resources.

6. Conclusions

6.1. The enabling environment – symbolic and social capital

"Transformation (and conservation) requires work – both symbolic and practical – the deployment of symbolic and other forms of capital to enable changes in disposition" (the way individuals view their position in the social field, the choices that are available to them and hence their practices). (Bourdieu, 1994, p.55).

This study had set out to learn and understand what symbolic and practical work had been required to effect transformation in the health of farm workers and communities in Hoedspruit. Expressly to understand the effects and role of collective identity-making in the Hlokomela Project, the research question had asked how, if at all, the collective identity-making processes had enabled Hlokomela to promote health. The answer is: Yes, it did. The 'how' was principally uncovered through applying the research conceptual framework and the four research objectives. The research conceptual framework (Figure 3), which had been hypothesised on the basis of both experience in the project (participant observation by the researcher) and the application of theory from a broad range of disciplines, proved to be appropriate and was able to be further developed in the light of the findings (Figure 4), which provided more detail in each of the conceptual categories.

In the three main conceptual areas – Institutional strengthening, recognition and identification, and, action for change – there were significant findings that had not been hypothesised upfront. These included, under the conceptual category recognition/identification, that farm workers were less concerned with *ownership* per se than they were with a sense of belonging and knowing that the institution was there for them and reflected their reality (pertinence). This was a strong finding and requires that this feature of the collective identity work be considered indispensable to the success of such interventions.

Another related and equally indispensable element in the same conceptual area, was that, surprisingly perhaps, farm owners / managers and other residents of Hoedspruit with no particular tie to Hlokomela, also expressed the belief that they belonged to Hlokomela (although it had been noted in the Background section that historically, farmers' relationship

to their farm workers, in South Africa, had often been one of beneficent paternalism – with many notable not-so-beneficent exceptions – so perhaps this finding should not be surprising). This form of bridging social capital – possibly bonding also – brought indispensable benefits to Hlokomela's health promotion efforts on the farms as it meant employers were eager to be members of the partnership and removed possible barriers to access for the Nompilos and Gingirikani, as well as participating in media making which declared to the whole world that farmers were part of the process: "Farm workers care for each other".

Work on a collective identity, in the symbolic space, representing a slightly altered scheme of perception, one with modestly adjusted or freshly highlighted terms of reference – care versus indifference, talking versus silence, respect versus abuse, etc. – the findings suggest, had enabled a modification of “common sense” – the naturalised and incontestable cultural status quo – placed at the heart of the conceptual framework as being the shift required before any significant improvement in health would be possible. This included around shifts in gender norms, the transformation of which was thought to be key to a reduction in vulnerability to HIV. This transformation, the slightly altered scheme of perception, cannot be attributed solely to collective identity-making. Rather, the existence of a unifying identity strengthened the other elements of the intervention, which in turn increased the social and symbolic capital available to further engage with farm workers and other stakeholders. The third conceptual category – action for change – was seen to be greatly facilitated by the effects of the other conceptual areas. Because of the elevation in status of the agents and the award to them of the authority to lead, by farmworkers, Hlokomela was able to undertake its array of farm-worker led activities, including dialogue, health talks on the farms, partnership building with state health centres and the municipality, cultural, sporting and recreational events, training, outreach to other institutions (eg. the Air Force base, the prison, shebeens, etc). Respondents (and the literature) strongly emphasised the importance of action in building symbolic capital and in processes of identity formation and behaviour change.

This interactional relationship in which all components of the intervention (and the conceptual framework) were mutually reinforcing, is illustrated graphically in Figure 4. This too, the integrative and mutually reinforcing aspects of a participatory programme also

deserves to be considered indispensable and becomes entirely possible at the local level and through participatory processes.

In short, collective identity-making was found to enable health promotion in the locality by strengthening the institution and its agents, whereby the project's agents had been able to suggest and nurture, in their interactions with their peers, a new possible in which farm workers would be less vulnerable to HIV. This new possible explicitly included learning around key aspects of vulnerability, including mutual respect, the need for open communication especially between men and women, and generally the adoption of more caring attitudes in the farming community. In terms of the conceptual framework, these findings around the new possible point to the centrality in identity work of efforts to alter perception. In the case of Hlokomela, this was achieved through a corps of feet on the ground, facilitating dialogue and engaging with their peers in respectful and supportive ways, all under the umbrella of an identity on which farm workers and others had conferred legitimacy and authority and which continues in 2016 to emerge through the adherents' ongoing participation.

6.2. Recommendations

6.2.1. Local NGOs

NGOs working with marginalised rural communities might consider the empowerment potential of taking a collective identity-making approach to their communication and social mobilisation work. There could be merit in transferring a large degree of power and control to the face-to-face agents of change (care givers, peer communicators) such that the interface with communities – the social institution – is perceived by those communities as coming from within. The agents of change may benefit from development of their leadership capacity and skilling in managing participatory communication processes. The respect and authority they can enjoy through these processes can strengthen their ability to engage their peers, address issues of norm-change, and affirm all local stakeholders.

6.2.2. Local Municipalities

Local municipalities, like Maruleng in this research, stand to benefit from the support for service delivery that they can gain from an empowered and independent local social institution. Hlokomela was able to run training workshops for the municipality on

communication and on HIV prevention, treatment, care and support. It is however important to note, with Quarry (2004: p.17) that "different institutions are comfortable with different types of communication interventions" and that "it is not always practical to try and get a government body to implement a participatory process. It may, however, be useful to help government develop their awareness programs and to encourage government to work with intermediary groups (NGOs) to implement the participatory approaches". Equally, not all NGOs will be familiar with participatory communication practice or prepared to cede some of their power to the communities where they work.

6.2.3. Local health facilities

Partnerships with social institutions such as Hlokomela can significantly enhance the outreach capacity of a local clinic or hospital service. In the case of Hlokomela, the farm worker Nompilos were able to engage farm workers on the farms – something that had proved very difficult for the outreach staff from the clinic to achieve. Equally, the Nompilos were able to function as referral support ... referring patients to the clinic for TB treatment and acting as a go-between to ensure compliance with treatment regimens. The closeness and respect that the Nompilos enjoyed helped to allay the fears of patients about the way they might be treated at the clinic, with the Nompilos playing a hand-holding role.

6.2.4. Further research

This research indicates a need for further research into the cost effectiveness of this kind of identity work, perhaps with the addition of quantitative assessments of the extent of projects' reach through collective identity work as well as the value of collateral beneficial effects to participants in resource poor settings. Such additional research should tie in to the monitoring and evaluation processes of such interventions, wherein change can be measured more rigorously against a set of indicators looking not only at health behaviours but also at broader development goals so as also to assess whether the Ottawa Charter's injunction that "*individuals or groups must be able to identify and to realize aspirations, to satisfy needs, and to change or cope with the environment*" has been satisfied (World Health Organization, 1996). It would be extremely useful to know more about the health status of participants, perhaps using medical records and clinical assessments. Similarly, a more accurate understanding of changes in gender norms, including perhaps incidences of reported domestic violence tracked through, for example, the police and traditional leadership.

There would be room too for research into the broader networking and partnership building processes that Hlokomela engages in and that certainly significantly boost its symbolic capital and access to other resources (eg. international and National HIV/AIDS Conferences, Soul City, Provincial Government, Municipal Government, Employer's forums, local business, etc). However, the project's work is extremely constrained by limited resources and the idea that Hlokomela, because of its perceived good practice, could or should at any scale work even more intensely with broader national/regional advocacy coalitions for health might be unrealistic. Hlokomela already engages to the best of its ability with numerous local agencies and concentrates its efforts on transforming the local. Therein, perhaps, lies its strength.

Finally, an examiner suggested that two additional frameworks would be interesting to pursue and carry forward some of the findings, namely: Social Network Analysis that would enable a mapping of the process of collective identity-making and its reach into the farms and communities, as well as Weick's notion of sensemaking as a way of facilitating organisational change (Weick et al., 2005), relating back to the findings around the status of Hlokomela within the Hoedspruit Training Trust (HTT) and how this appeared to enable a richer participation process than had HTT attempted to implement as HTT.

There would be room too for research to unpack further what exactly constitutes an enabling environment for collective identity-making. The current study provides some sense of this (strong and committed leadership, an intervention based in a locality, a supportive local government response, the buy-in of employers) but further research would fill in some of the gaps in this knowledge and further test the conceptual framework. It would indicate too the factors affecting the sustainability of this kind of intervention (noting that Hlokomela is still going strong 11 years after its inception. Light could be shed too on the replicability of this type of intervention.

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8. Annexures

Annexure A – Limpopo Provincial Government – intersection Phalaborwa Road

(Billboard A)



Annexure B – Hlokomela billboard replacing Provincial Govt. billboard

(Billboard B) – in Hoedspruit town, intersection with Phalaborwa Road, replacing Provincial Government Billboard A)



Annexure C – Condom use negotiation billboard

(Billboard C)



Annexure D – "Family" billboard

(Billboard D)



Annexure E – Billboard at vendors

(Billboard E)



Annexure F – First billboard

(Billboard F)



Annexure G – The Oaks billboard

(Billboard G)



Annexure H – Hlokomela Logo

HLOKOMELA

Annexure I – Checklist of an effective tool

A1 poster developed by Patrick Cockayne and Janine Simon-Meyer for SBCC training by Sibambene Development Communications, 2011.

Checklist: An effective SBCC communication tool or activity:

Sibambene development communications

- Has been identified in the communication plan
- Is linked to themes and project actions
- Expresses project identity (brand) and raises project profile
- Enables connectivity with project – ie contact details of project, service etc
- Affirms client community (portrays client community in a positive light, as local "heroes" and agents of their own development) and communicates the possibility of change
- Uses local language, culture and imagery
- Is appropriately segmented (designed for communicating with a specific audience/s eg client community, broader community, key stakeholders etc)
- Is cost effective (ie Its impact justifies its cost)
- Has a clear message developed through participation
- Has an appropriate HIV prevention message
- Is developed through participation
- Integrates project gender objectives

Annexure J – Ethics Clearance Certificate

Ethics Clearance Certificate issued by Wits Human Research Ethics Committee (approval number M091161)

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG
Division of the Deputy Registrar (Research)

HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)
R14/49 Mr Patrick Cockayne

CLEARANCE CERTIFICATE	**M091161**
PROJECT	Development and Communication: Local Strategies for Agency and Empowerment in HIV Prevention Programmes. The Role of the Collective Making of Identity in Health Promotion in the Hlokomela Project, Hoedspruit, Limpopo...
INVESTIGATORS	Mr Patrick Cockayne.
DEPARTMENT	School of Public Health
DATE CONSIDERED	2009/11/27
DECISION OF THE COMMITTEE*	Approved unconditionally

Unless otherwise specified this ethical clearance is valid for 5 years and may be renewed upon application.

DATE 15 /03/2010 **CHAIRPERSON** .....
(Professor PE Cleaton-Jones)

*Guidelines for written 'informed consent' attached where applicable
cc: Supervisor : N Chritosfides

DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and **ONE COPY** returned to the Secretary at Room 10004, 10th Floor, Senate House, University.
I/We fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee. **I agree to a completion of a yearly progress report.**

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES...

Annexure K – Permission from HTT to conduct research at their site

Hoedspruit Training Trust

P.O. Box 1265

Hoedspruit

1380

Christine Du Preez – Project Director

Cell: 083 300 2933

Office No: 082 560 0248

19 August 2009

Att: Patrick Cockayne and Janine Simon-Meyer

Re: Permission to conduct research at Hlokomela

Dear Janine and Patrick

The Hoedspruit Training Trust has studied your request, dated 10.08.2009, to conduct research into aspects of the PHAMSA social change communication programme at the Hlokomela project in Hoedspruit.

We hereby grant permission for you to conduct the proposed research, noting that all participants will be properly compensated in accordance with standard academic research practice and that you will adhere to standard academic research ethics. We note further that you will endeavour to conduct the research in such a manner as to avoid disrupting the programme or adding an additional burden to our already extremely busy staff.

Further, we note that the research findings will be made available to the project and its stakeholders and participants in an appropriate format and at an appropriate level. We trust that you will at all times communicate with project management to ensure that we remain fully appraised of the progress of the research and that you will at all times act in a manner that enhances the standing and reputation of the project and the Hoedspruit Training Trust.

Yours faithfully

Christine du Preez
(for the Hoedspruit Training Trust)

Annexure L – Participant's information sheet and informed consent form

PARTICIPANT'S INFORMATION SHEET AND INFORMED CONSENT FORM

Study of the role of the collective making of identity in health promotion in the Hlokomela project, Hoedspruit, Limpopo, South Africa

Introduction

Hello and welcome. Thank you for giving me your time. My name is Patrick Cockayne. I am working with the Hoedspruit Training Trust and the International Organization for Migration on the Hlokomela project to promote health on the farms of Hoedspruit. I am registered at the University of the Witwatersrand to do research to get a better understanding of the challenges faced by farm workers and to improve the work of the project.

You are invited to volunteer to participate in this research study that is being conducted on the Hoedspruit farms; you should not agree to participate in this study unless you fully understand what is asked of you and are completely happy with all the procedures involved. If you do not understand the information or have any other questions, feel free to ask the researcher/interviewer.

Purpose of this interview

The purpose of this study is to collect information so we can understand what farm workers think and feel about the Hlokomela project. We ask you to take part in an individual interview; in this interview we will ask some information about you. We will also ask you to tell us what experiences you have had with Hlokomela and what you think about Hlokomela. The interview will take approximately 1 hour.

You have been invited to participate because you are a member of Hlokomela staff and your views about Hlokomela will help us to understand the project better.

What procedures are involved?

You are being asked to take part in an individual interview. With your consent, I / the interviewer will be asking you some questions about your life and about Hlokomela. There are no right or wrong answers to the questions; we want to know about you, your opinions and experiences.

I will be using this digital voice recorder to record what you say. [With your permission I will use this video camera to video tape the interview. No-one will see the video tapes except for the research team.] The audio and video tapes will be destroyed after 2 years. After the interview, the recordings will be written down word for word and then translated into English. I will be using these written documents to write my research report. Your name will not be written in the documents – only a unique identification number that you will be given, so no-one outside of the interview/focus group discussion will be able to tell, from the written documents, what you have said.

I may want to ask you more questions at a later stage. If this is the case, I will again ask for your written consent to take part in additional interviews and/or group discussions and again your continued participation will be entirely voluntary.

Are there any risks or discomforts from participating in this study?

We will conduct the interview in a private and safe place for both you and the researcher/interviewer. The only potential risks from participating in this study are:

- You may feel uncomfortable answering some of the questions that may deal with some sensitive issues.
- If the interview is video taped the research team will be able to see what you are saying.

Remember, though, that you are free to not answer any question that makes you feel uncomfortable.

Possible benefits of this study

There are no direct benefits that you may get from participating in this study. However the information collected from this study may be helpful in improving the lives of farm workers and other workers in South Africa and other places in Southern Africa where PHAMSA is running projects. Your answers will help us make sure that the views and experiences of farm workers like you are taken into account in improving the existing projects and in designing future community programmes.

What are your rights as a participant?

Your participation in this study is entirely voluntary. You can refuse to participate or stop at any time without giving any reason. Some of the questions might be very personal. Please remember that you are free to not answer a question if it makes you feel uncomfortable. Also, you are free to leave the interview at any stage and for any reason.

Confidentiality

I give my assurance that neither I nor the research team will give your personal information to anyone outside the team. The consent forms that you will be asked to sign will be securely stored and access will be limited to the research team: Patrick Cockayne, Janine Simon-Meyer, transcriber, Nicola Christofides and Lenore Manderson at the University of the Witwatersrand. The consent forms cannot be linked to the answers you give to the questions. The results of the study will be presented in a respectful manner and no information which could enable anyone to identify you personally will be reported. We will work with the Hlokomela staff to make sure you are kept informed about the progress of our research project and to share with you any reports or publications we produce. [In the event that the focus group discussion is video-taped only the research team will see the video recordings.] The audio and video recordings will be destroyed at the end of the project, after two years.

Costs

There is no cost to you for participating in this study.

Reimbursement for time

You will be given R50 to reimburse you for the time you spend at the interview and for transport and child-minding costs.

Has this study received ethical approval?

Yes, the Ethics Committee of the University of the Witwatersrand has given written approval for this study. The Ethics Committee makes sure that all research undertaken by Wits students respects the rights and dignity of participants. If you have any concerns about your rights, you can contact the Wits Ethics Committee at the following:

Information and contact person
If you have any questions about the research you may contact:

The researcher, Patrick Cockayne
Sibambene Development Communications
Cell: 083 659 0952
fax: 011 614 2592
email: patrick@sibambenedev.co.za

PO Box 53701
Troyeville
Johannesburg
2139

If you want any information regarding your rights as a research participant, or you wish to make a complaint regarding this research study, you may contact Professor Cleaton-Jones, the Chairperson of the University of the Witwatersrand, Human Research Ethics Committee (HSEC), which is an independent committee, established to help protect the rights of research participants. Prof Cleaton-Jones' phone number is (011) 717-2301.
You may also contact the Secretary of the Human Research Ethics Committee (HSEC), Ms Anisa Keshav on the phone number (011) 717 1234.

INFORMED CONSENT FORM

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study. I am aware that my voice will be recorded and also that a video recording with my voice and my face on it may be made.

I have received the information leaflet for the study and have had enough time to read it on my own and ask questions. I feel that my questions regarding participation in the study have been answered to my satisfaction.

I have been told that the information I give to the study will together with other information gathered from other people, be anonymously processed into a research report and scientific publications. I am aware that this report, and any publications from it, will be shared with Hlokomela and other farm workers, and that Hlokomela will keep me informed about the progress of the research.

I am aware that it is my right to withdraw my consent in this study without it affecting my work or my taking part in future events. I hereby, freely and voluntarily give my consent to participate in the study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name……..(Please print)

Witness's signature……Date……

INFORMED CONSENT FORM – Audio-tape

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study.

I am aware that my voice will be recorded. I have been told that only the research team will hear the audio recordings. I have been told that the audio recordings will be destroyed at the end of the project, after two years.

I am aware that it is my right to withdraw my consent in this study without it affecting my work or my taking part in future events. I hereby freely and voluntarily give my consent to be audio-taped in the study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name……..(Please print)

Witness's signature……Date……

INFORMED CONSENT FORM – Video-tape

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study.

I am aware that the interview I have agreed to participate in will be video-taped. I understand that only the research team will see the video recordings. I have been told that the video-recordings will be destroyed at the end of the project, after two years.

I am aware that it is my right to withdraw my consent to participate in this study without it affecting my work or my taking part in future events. I hereby freely and voluntarily give my consent to be video-taped in this study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name……(Please print)

Witness's signature……Date……

Annexure M – Interview guide – project staff

Interview guide 1 – Project staff

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1. **What do you think/feel (and/or What comes to mind….):**

   when you hear/see the name Hlokomela?

   when you see the Hlokomela logo?

   when you hear/read the Hlokomela slogan "farm workers care for each other"?

2. **What does the picture in this billboard make you think/feel (and/or What comes to mind when you see this picture)?**

3. **Do you work for the Hoedspruit Training Trust or for Hlokomela? What (if anything) is the difference?**

Visual trigger:

First Hlokomela Billboard (outside Bavaria Estates)

(Hi-res A3 playouts to be provided to respondents)



Probes for A might include:

1. What values* do you think Hlokomela embodies?
2. How are these values expressed in the media Hlokomela produces and the activities it undertakes? (billboards, face to face work, murals, newspaper articles, recreational activities, cultural activities etc).

- Check first for participants' understanding of the term "values".

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4. What comments, if any, have you heard people make about thi? (what feedback have you received about the billboards?)

5. What did you intend people [Nompilos**, other farm workers, others] to think or feel when they see the billboard?**

Visual trigger:

4th generation Hlokomela billboard

(Hi-res A3 playouts to be provided to respondents)



Probes for B:

The interviewer should use the images in the billboard as a prompt to further discussion around the perceived effect on people of:

- the localness of the image
- the portrayal of farm workers in the image
- the portrayal of Nompilos in the image
- the fact that people in the image are known to farm workers and what this might mean for communication
- the way women are portrayed in the image
- the way men are portrayed in the image
- the text messages
- the slogan
- the values perceived to be implicit in the communication

Additional probes for B might include:

- Who are these billboards intended to reach?
- Hlokomela won the Impumelelo Silver Award in 2008. Why do you think you won this award?

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6. Describe how this billboard was created, from start to finish.
7. Who is in the picture and why?
8. What comments have you had about this billboard from people in the Oaks?
9. What challenges do you face in enabling farm workers to participate in the development of project media and communication tools (if indeed they do)?
10. What benefits/advantages, if any, have you found in enabling farm workers to participate in developing project communications?
11. People seek help for health problems from a variety of service providers, including traditional healers, faith healers, prophets and herbalists. What is it about Hlokomela that you think might encourage them also/rather to seek help for health problems from Hlokomela?

Probes for C

These billboards represent an application of the concepts of engagement, localness, identification, affirmation and projection. The facilitator should probe for degrees to which these concepts were consciously applied or not in the conceptualisation and development of the billboards.

Probes for C might include:

For the first set of questions (6-11) (Oaks billboard):

1. Did the development of this billboard involve collective identity-making? If so, how, to what extent, who was involved in the process?
2. At what stage of developing communication tools should farm workers become involved? Why?
3. What do you think is the value of farm workers participating in the development and production of media?
4. What was the reaction of the people in the billboard when you asked them to be in the photograph?
5. What action, if any, did you imagine would result from the displaying of the billboard (ie what did the project expect the effect of the billboard would be on the client community?)
6. Why are there no contact details for Hlokomela on the billboard?
7. Why did you choose this particular site to erect the billboard?
8. What do you think are the messages communicated by the billboard (including the messages in the pictures)?
9. How long should this billboard stay up? Why?
10. Who do you think should own and control Hlokomela? Why?

Visual trigger:

Oaks billboard

(Hi-res A3 playouts to be provided to respondents)



Questions cont.:

12. Who is in this picture (Hlokomela Billboard)? Why?
13. Why are there so many logos on the billboard?
14. This Hlokomela billboard replaces a previous one by the Limpopo Department of Health. What do you think about each of these billboards? What do you like about them? What don't you like?

Visual triggers:

Hlokomela Hoedspruit Town Billboard

(Hi-res A3 playouts to be provided to respondents)



Limpopo Department of Health Billboard

(Hi-res A3 playouts to be provided to respondents)



Probes around questions 12-14

For the second set of questions (12-14) (Hlokomela Hoedspruit town and Limpopo DoH billboards):

1. What do you think are the messages communicated by the Hlokomela billboard (including the messages in the pictures)?

2. What do you think are the messages communicated by the Limpopo billboard?
3. Which of the two billboards do you think will speak more effectively to farm workers. Why?
4. What do you think will be the effect of the billboard on other residents of Hoedspruit (not farm workers)? Why?
5. What do you think is Hlokomela's strongest (most effective) way of reaching out to farm workers and encouraging their participation in the project? Why?

Annexure N – Participant's information sheet and informed consent form

PARTICIPANT'S INFORMATION SHEET AND INFORMED CONSENT FORM

Study of the role of the collective making of identity in health promotion in the Hlokomela project, Hoedspruit, Limpopo, South Africa

---

Introduction

Hello and welcome. Thank you for giving me your time. My name is Patrick Cockayne. I am working with the Hoedspruit Training Trust and the International Organization for Migration on the Hlokomela project to promote health on the farms of Hoedspruit. I am registered at the University of the Witwatersrand to do research to get a better understanding of the challenges faced by farm workers and to improve the work of the project.

You are invited to volunteer to participate in this research study that is being conducted on the Hoedspruit farms; you should not agree to participate in this study unless you fully understand what is asked of you and are completely happy with all the procedures involved. If you do not understand the information or have any other questions, feel free to ask the researcher/interviewer.

Purpose of this interview/focus group discussion

The purpose of this study is to collect information so we can understand what farm workers think and feel about the Hlokomela project. We ask you to take part in a focus group discussion; in the focus group discussion we will ask some information about you. We will also ask you to tell us what experiences you have had with Hlokomela and what you think about Hlokomela. The focus group discussion will take approximately 1 to 2 hours.

You have been invited to participate because you are a Nompilo in the Hlokomela project and your views about Hlokomela will help us to understand the project better.

What procedures are involved?

You are being asked to take part in a focus group discussion. With your consent, I / the interviewer will be asking you some questions about your life and about Hlokomela. There are no right or wrong answers to the questions; we want to know about you, your opinions and experiences.

I will be using this digital voice recorder to record what you say. [With your permission I will use this video camera to video tape the focus group discussion. No-one will see the video tapes except for the research team.] The audio and video tapes will be destroyed at the end of the project, after two years. After the focus group discussion, the recordings will be written down word for word and then translated into English. I will be using these written documents to write my research report. Your name will not be written in the documents – only a unique identification number that you will be given, so no-one outside of the focus group discussion will be able to tell, from the written documents, what you have said.

I may want to ask you more questions at a later stage. If this is the case, I will again ask for your written consent to take part in additional interviews and/or discussions and again your continued participation will be entirely voluntary.

Are there any risks or discomforts from participating in this study?

We will conduct the focus group discussion in a private and safe place for both you and the researcher/interviewer. The only potential risks from participating in this study are:

- You may feel uncomfortable answering some of the questions that may deal with some sensitive issues.
- The other participants in the group will hear what you say.
- If the focus group discussion is video taped the research team will be able to see what you are saying.

Remember, though, that you are free to not answer any question that makes you feel uncomfortable.

Possible benefits of this study

There are no direct benefits that you may get from participating in this study. However the information collected from this study may be helpful in improving the lives of farm workers and other workers in South Africa and other places in Southern Africa where PHAMSA is running projects. Your answers will help us make sure that the views and experiences of farm workers like you are taken into account in improving the existing projects and in designing future community programmes.

What are your rights as a participant?

Your participation in this study is entirely voluntary. You can refuse to participate or stop at any time without giving any reason. Some of the questions might be very personal. Please remember that you are free to not answer a question if it makes you feel uncomfortable. Also, you are free to leave the interview at any stage and for any reason.

Confidentiality

Focus group discussions are not confidential – other participants in the group can hear what you are saying. Therefore I cannot guarantee confidentiality. However, I do guarantee that I and the research team will not give your personal information to anyone outside the research team. The consent forms that you will be asked to sign will be securely stored and access will be limited to the research team: Patrick Cockayne, Janine Simon-Meyer, transcriber, Nicola Christofides and Lenore Manderson at the University of the Witwatersrand. The consent forms cannot be linked to the answers you give to the questions. The results of the study will be presented in a respectful manner and no information which could enable anyone to identify you personally will be reported. We will work with the Hlokomela staff to make sure you are kept informed about the progress of our research project and to share with you any reports or publications we produce. [In the event that the focus group discussion is video-taped only the research team will see the video recordings. The audio and video recordings will be destroyed at the end of the project, after two years.]

Costs

There is no cost to you for participating in this study.

Reimbursement for time

You will be given R50 to reimburse you for the time you spend at the interview and for transport and child-minding costs.

Has this study received ethical approval?

Yes, the Ethics Committee of the University of the Witwatersrand has given written approval for this study. The Ethics Committee makes sure that all research undertaken by Wits students respects the rights and dignity of participants. If you have any concerns about your rights, you can contact the Wits Ethics Committee at the following:

Information and contact person
If you have any questions about the research you may contact:

The researcher, Patrick Cockayne
Sibambene Development Communications
Cell: 083 659 0952
fax: 011 614 2592
email: patrick@sibambenedev.co.za

PO Box 53701
Troyeville
Johannesburg
2139

If you want any information regarding your rights as a research participant, or you wish to make a complaint regarding this research study, you may contact Professor Cleaton-Jones, the Chairperson of the University of the Witwatersrand, Human Research Ethics Committee (HSEC), which is an independent committee, established to help protect the rights of research participants. Prof Cleaton-Jones' phone number is (011) 717-2301.
You may also contact the Secretary of the Human Research Ethics Committee (HSEC), Ms Anisa Keshav on the phone number (011) 717 1234.

INFORMED CONSENT FORM

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study. I am aware that my voice will be recorded and also that a video recording with my voice and my face on it may be made.

I have received the information leaflet for the study and have had enough time to read it on my own and ask questions. I feel that my questions regarding participation in the study have been answered to my satisfaction.

I have been told that the information I give to the study will together with other information gathered from other people, be anonymously processed into a research report and scientific publications. I am aware that this report, and any publications from it, will be shared with Hlokomela and other farm workers, and that Hlokomela will keep me informed about the progress of the research.

I am aware that it is my right to withdraw my consent in this study without it affecting my work or my taking part in future events. I hereby, freely and voluntarily give my consent to participate in the study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name…….(Please print)

Witness's signature……Date……

INFORMED CONSENT FORM – Audio-tape

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study.

I am aware that my voice will be recorded. I have been told that only the research team will hear the audio recordings. I have been told that the audio recordings will be destroyed at the end of the project, after two years.

I am aware that it is my right to withdraw my consent in this study without it affecting my work or my taking part in future events. I hereby freely and voluntarily give my consent to be audio-taped in the study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name…….(Please print)

Witness's signature……Date……

INFORMED CONSENT FORM – Video-tape

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study.

I am aware that the interview I have agreed to participate in will be video-taped. I understand that only the research team will see the video recordings. I have been told that the video-recordings will be destroyed at the end of the project, after two years.

I am aware that it is my right to withdraw my consent to participate in this study without it affecting my work or my taking part in future events. I hereby freely and voluntarily give my consent to be video-taped in this study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name…….(Please print)

Witness's signature……Date……

Annexure O – Interview guide 2 – Nompilos

Interview guide 2 - Nompilos

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1. What do you think/feel (and/or What comes to mind….):

   when you hear/see the name Hlokomela?

   when you see the Hlokomela logo?

   when you hear/read the Hlokomela slogan “farm workers care for each other”?

2. What does the picture in this billboard make you think/feel? (and/or What comes to mind….):

3. How do you identify, if at all, with this message?

4. What do you think/feel about being a part of Hlokomela? Why?

Visual trigger:

4th generation Hlokomela billboard

(Hi-res A3 playouts to be provided to respondents)



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5. What are the different ways that farm workers hear about Hlokomela?
6. What comments have you heard other farm workers make about this billboard or other Hlokomela billboards, posters and murals?
7. What do you farm workers think/feel about Hlokomela? Why do you think they feel this?
8. Who do you think farm workers would approach for help if they feel sick or have a problem? Why?
9. What do you think farm owners/management think/feel about Hlokomela? Why do you think this?
10. What role do Nompilos play in developing a billboard, poster, T-shirt, mural?
11. What role do farm workers play in developing a billboard, poster, T-shirt, mural?

Probes: The aim of this FGD is to ascertain/explore how Nompilos perceive Hlokomela and how they think other farm workers perceive Hlokomela, and why they think this. Additionally, for those participants who have some direct experience of working on Hlokomela media, what did this process of participation mean to them?

Probes might include:

1. Why did you decide to become involved with Hlokomela?
2. How were you chosen/appointed to be the Nompilo on your farm?
3. What values does Hlokomela represent? (give example of "values" / check first for participants' understanding of term "values))
4. What do you feel about appearing in Hlokomela media (for those who have appeared in media)?
5. What do you feel when you see XXXXXXXX (name the Nompilo in the media, show the example where he/she appears) on this billboard/poster/newspaper article/DVD
6. What do you think other farm workers think when they see you in this media?
7. If Hlokomela shuts down, what would this mean to you? How would your life be different?
8. When you speak to the staff at Hlokomela, do they listen to what you say?
9. How do you involve other farm workers in the activities of Hlokomela? (Or do you?)
10. Who owns Hlokomela? Who controls Hlokomela? What do you think about this?

Annexure P – Participant's information sheet and informed consent form

PARTICIPANT'S INFORMATION SHEET AND INFORMED CONSENT FORM

Study of the role of the collective making of identity in health promotion in the Hlokomela project, Hoedspruit, Limpopo, South Africa

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Introduction

Hello and welcome. Thank you for giving me your time. My name is Patrick Cockayne. I am working with the Hoedspruit Training Trust and the International Organization for Migration on the Hlokomela project to promote health on the farms of Hoedspruit. I am registered at the University of the Witwatersrand to do research to get a better understanding of the challenges faced by farm workers and to improve the work of the project.

You are invited to volunteer to participate in this research study that is being conducted on the Hoedspruit farms; you should not agree to participate in this study unless you fully understand what is asked of you and are completely happy with all the procedures involved. If you do not understand the information or have any other questions, feel free to ask the researcher/interviewer.

Purpose of this interview/focus group discussion

The purpose of this study is to collect information so we can understand what farm workers think and feel about the Hlokomela project. We ask you to take part in a focus group discussion; in this focus group discussion we will ask some information about you. We will also ask you to tell us what experiences you have had with Hlokomela and what you think about Hlokomela. The focus group discussion will take approximately one to two hours.

You have been invited to participate because you are a farm worker on a PHAMSA partner farm and your views about Hlokomela will help us to understand the project better.

What procedures are involved?

You are being asked to take part in a focus group discussion. With your consent, I / the interviewer will be asking you some questions about your life and about Hlokomela. There are no right or wrong answers to the questions; we want to know about you, your opinions and experiences.

I will be using this digital voice recorder to record what you say. [With your permission I will use this video camera to video tape the focus group discussion. No-one will see the video tapes except for the research team.] The audio and video tapes will be destroyed at the end of the project, after two years. After the focus group discussion, the recordings will be written down word for word and then translated into English. I will be using these written documents to write my research report. Your name will not be written in the documents – only a unique identification number that you will be given, so no-one outside of the focus group discussion will be able to tell, from the written documents, what you have said.

I may want to ask you more questions at a later stage. If this is the case, I will again ask for your written consent to take part in additional interviews and/or discussions and again your continued participation will be entirely voluntary.

Are there any risks or discomforts from participating in this study?

We will conduct the focus group discussion in a private and safe place for both you and the researcher/interviewer. The only potential risks from participating in this study are:

- You may feel uncomfortable answering some of the questions that may deal with some sensitive issues.
- If you agree to participate in a focus group discussion, the other participants in the group will hear what you say.
- If the focus group discussion is video taped the research team will be able to see what you are saying.

Remember, though, that you are free to not answer any question that makes you feel uncomfortable.

Possible benefits of this study

There are no direct benefits that you may get from participating in this study. However the information collected from this study may be helpful in improving the lives of farm workers and other workers in South Africa and other places in Southern Africa where PHAMSA is running projects. Your answers will help us make sure that the views and experiences of farm workers like you are taken into account in improving the existing projects and in designing future community programmes.

What are your rights as a participant?

Your participation in this study is entirely voluntary. You can refuse to participate or stop at any time without giving any reason. Some of the questions might be very personal. Please remember that you are free to not answer a question if it makes you feel uncomfortable. Also, you are free to leave the interview at any stage and for any reason. If you choose not to take part or leave the interview, it will not affect your work in any way or your taking part in future activities on the farm.

Confidentiality

Focus group discussions are not confidential – other participants in the group can hear what you are saying. Therefore I cannot guarantee confidentiality. However, I do guarantee that I and the research team will not give your personal information to anyone outside the research team. The consent forms that you will be asked to sign will be securely stored and access will be limited to the research team: Patrick Cockayne, Janine Simon-Meyer, transcriber, Nicola Christofides and Lenore Manderson at the University of the Witwatersrand. The consent forms cannot be linked to the answers you give to the questions. The results of the study will be presented in a respectful manner and no information which could enable anyone to identify you personally will be reported. We will work with the Hlokomela staff to make sure you are kept informed about the progress of our research project and to share with you any reports or publications we produce. [In the event that the focus group discussion is video-taped only the research team will see the video

recordings. The audio and video recordings will be destroyed at the end of the project, after two years.]

Costs

You may experience some discomfort answering the questions. They are mainly about your opinions and we are not asking personal information.

Reimbursement for time

You will be given R50 to reimburse you for the time you spend at the interview and for transport and child-minding costs.

Has this study received ethical approval?

Yes, the Ethics Committee of the University of the Witwatersrand has given written approval for this study. The Ethics Committee makes sure that all research undertaken by Wits students respects the rights and dignity of participants. If you have any concerns about your rights, you can contact the Wits Ethics Committee at the following:

Information and contact person
If you have any questions about the research you may contact:

The researcher, Patrick Cockayne
Sibambene Development Communications
Cell: 083 659 0952
fax: 011 614 2592
email: patrick@sibambenedev.co.za

PO Box 53701
Troyeville
Johannesburg
2139

If you want any information regarding your rights as a research participant, or you wish to make a complaint regarding this research study, you may contact Professor Cleaton-Jones, the Chairperson of the University of the Witwatersrand, Human Research Ethics Committee (HSEC), which is an independent committee, established to help protect the rights of research participants. Prof Cleaton-Jones' phone number is (011) 717-2301.
You may also contact the Secretary of the Human Research Ethics Committee (HSEC), Ms Anisa Keshav on the phone number (011) 717 1234.

INFORMED CONSENT FORM

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study. I am aware that my voice will be recorded and also that a video recording with my voice and my face on it may be made.

I have received the information leaflet for the study and have had enough time to read it on my own and ask questions. I feel that my questions regarding participation in the study have been answered to my satisfaction.

I have been told that the information I give to the study will together with other information gathered from other people, be anonymously processed into a research report and scientific publications. I am aware that this report, and any publications from it, will be shared with Hlokomela and other farm workers, and that Hlokomela will keep me informed about the progress of the research.

I am aware that it is my right to withdraw my consent in this study without it affecting my work or my taking part in future events. I hereby, freely and voluntarily give my consent to participate in the study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name……(Please print)

Witness's signature……Date……

INFORMED CONSENT FORM – Audio-tape

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study.

I am aware that my voice will be recorded. I have been told that only the research team will hear the audio recordings. I have been told that the audio recordings will be destroyed at the end of the project, after two years.

I am aware that it is my right to withdraw my consent in this study without it affecting my work or my taking part in future events. I hereby freely and voluntarily give my consent to be audio-taped in the study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name…….(Please print)

Witness's signature……Date……

INFORMED CONSENT FORM – Video-tape

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study.

I am aware that the interview I have agreed to participate in will be video-taped. I understand that only the research team will see the video recordings. I have been told that the video-recordings will be destroyed at the end of the project, after two years.

I am aware that it is my right to withdraw my consent to participate in this study without any prejudice. I hereby freely and voluntarily give my consent to be video-taped in this study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name…….(Please print)

Witness's signature……Date……

Annexure Q – Interview guide 3 – Farm workers / Gingirikani

Interview guide 3 – Farm workers/Gingirikani

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1. How did you first hear about Hlokomela?
2. What do you think/feel (and/or What comes to mind….):
   when you hear/see the name Hlokomela?
   when you see the Hlokomela logo?
   when you hear/read the Hlokomela slogan "farm workers care for each other"?
3. What does the picture in this billboard make you think/feel? (and/or What comes to mind when you see….?):
4. How do you identify with this message if at all?
5. What does Hlokomela do for farm workers, if anything?
6. What would you like Hlokomela to do for farm workers?
7. Do you take part in any of the activities organised by Hlokomela? If so, which ones? Why do you participate in these activities? What, if anything, has changed in your life because of your participation?
8. Have you or someone in your family recently had a health problem? What did you do and Why? (Or, When was the last time you went to a clinic for something? Why did you go?)

Visual prompt:

First Hlokomela Billboard (outside Bavaria Estates)

(Hi-res A3 playouts to be provided to respondents)



Probes: The aim of this set of questions is to elicit from farm workers their perceptions of Hlokomela and whether these incline or disincline them towards engagement with the project. In addition, the interview seeks to ascertain relative congruence or lack of it between participants' perceptions of Hlokomela and their actual experience of its services (ie the match between the "brand" promise and delivery). Further, the interview seeks to ascertain whether participants associate any or all of the activities that Hlokomela conducts with the Hlokomela "brand".

Probes might include:

1. Have you noticed any of the project's public media (explain what these are)? What did it/they say/mean to you?
2. Do you know who the Nompilo is on your farm? What does the Nompilo do for you?
3. If you feel sick at work, who would you first turn to for help? Why?
4. Have you sought / would you seek help from Hlokomela? For what reasons?
5. What do you know about the Hlokomela Wellness Centre?
6. Hlokomela says that "Farm workers care for each other" – Do you believe this is true? Why? Give your reasons.
7. What positive experiences have you had of Hlokomela?
8. What negative experiences?
9. What can you tell us about the Hoedspruit Training Trust?
10. If Hlokomela shuts down, how would it change your life?

Annexure R – Participant's information sheet and informed consent forms

PARTICIPANT'S INFORMATION SHEET AND INFORMED CONSENT FORM

Study of the role of the collective making of identity in health promotion in the Hlokomela project, Hoedspruit, Limpopo, South Africa

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Introduction

Hello and welcome. Thank you for giving me your time. My name is Patrick Cockayne. I am working with the Hoedspruit Training Trust and the International Organization for Migration on the Hlokomela project to promote health on the farms of Hoedspruit. I am registered at the University of the Witwatersrand to do research to get a better understanding of the challenges faced by farm workers and to improve the work of the project.

You are invited to volunteer to participate in this research study that is being conducted on the Hoedspruit farms; you should not agree to participate in this study unless you fully understand what is asked of you and are completely happy with all the procedures involved. If you do not understand the information or have any other questions, feel free to ask the researcher/interviewer.

Purpose of this interview

The purpose of this study is to collect information so we can understand what farm workers think and feel about the Hlokomela project. We ask you to take part in an individual interview; in this interview we will ask some information about you. We will also ask you to tell us what experiences you have had with Hlokomela and what you think about Hlokomela. The interview will take approximately one to two hours.

You have been invited to participate because you are a valued stakeholder in the Hlokomela project and your views about Hlokomela will help us to understand the project better.

What procedures are involved?

You are being asked to take part in an interview. With your consent, I / the interviewer will be asking you some questions about your life and about Hlokomela. There are no right or wrong answers to the questions; we want to know about you, your opinions and experiences.

I will be using this digital voice recorder to record what you say. [With your permission I will use this video camera to video tape the focus group discussion. No-one will see the video tapes except for the research team.] The audio and video tapes will be destroyed at the end of the project, after two years. After the interview/focus group discussion, the recordings will be written down word for word and then translated into English. I will be using these written documents to write my research report. Your name will not be written in the documents – only a unique identification number that you will be given, so no-one outside of the interview/focus group discussion will be able to tell, from the written documents, what you have said.

I may want to ask you more questions at a later stage. If this is the case, I will again ask for your written consent to take part in additional interviews and/or discussions and again your continued participation will be entirely voluntary.

Are there any risks or discomforts from participating in this study?

We will conduct the interview in a private and safe place for both you and the researcher/interviewer. The only potential risks from participating in this study are:

- You may feel uncomfortable answering some of the questions that may deal with some sensitive issues.
- If the interview is video taped the research team will be able to see what you are saying.

Remember, though, that you are free to not answer any question that makes you feel uncomfortable.

Possible benefits of this study

There are no direct benefits that you may get from participating in this study. However the information collected from this study may be helpful in improving the lives of farm workers and other workers in South Africa and other places in Southern Africa where PHAMSA is running projects. Your answers will help us make sure that the views and experiences of stakeholders like you are taken into account in improving the existing projects and in designing future community programmes.

What are your rights as a participant?

Your participation in this study is entirely voluntary. You can refuse to participate or stop at any time without giving any reason. Some of the questions might be very personal. Please remember that you are free to not answer a question if it makes you feel uncomfortable. Also, you are free to leave the interview at any stage and for any reason.

Confidentiality

All the information that you give in this study will be kept strictly confidential. The consent forms that you will be asked to sign will be securely stored and access will be limited to the research team: Patrick Cockayne, Janine Simon-Meyer, transcriber, Nicola Christofides and Lenore Manderson at the University of the Witwatersrand. The consent forms cannot be linked to the answers you give to the questions. The results of the study will be presented in a respectful manner and no information which could enable anyone to identify you personally will be reported. We will work with the Hlokomela staff to make sure you are kept informed about the progress of our research project and to share with you any reports or publications we produce. [In the event that the focus group discussion is video-taped only the research team will see the video recordings.] The audio and video recordings will be destroyed at the end of the project, after two years.

Costs

There is no cost to you for participating in this study.

Reimbursement for time

You will be given R50 to reimburse you for the time you spend at the interview and for transport and child-minding costs.

Has this study received ethical approval?

Yes, the Ethics Committee of the University of the Witwatersrand has given written approval for this study. The Ethics Committee makes sure that all research undertaken by Wits students respects the rights and dignity of participants. If you have any concerns about your rights, you can contact the Wits Ethics Committee at the following:

Information and contact person
If you have any questions about the research you may contact:

The researcher, Patrick Cockayne
Sibambene Development Communications
Cell: 083 659 0952
fax: 011 614 2592
email: patrick@sibambenedev.co.za

PO Box 53701
Troyeville
Johannesburg
2139

If you want any information regarding your rights as a research participant, or you wish to make a complaint regarding this research study, you may contact Professor Cleaton-Jones, the Chairperson of the University of the Witwatersrand, Human Research Ethics Committee (HSEC), which is an independent committee, established to help protect the rights of research participants. Prof Cleaton-Jones' phone number is (011) 717-2301.
You may also contact the Secretary of the Human Research Ethics Committee (HSEC), Ms Anisa Keshav on the phone number (011) 717 1234.

INFORMED CONSENT FORM

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study. I am aware that my voice will be recorded and also that a video recording with my voice and my face on it may be made.

I have received the information leaflet for the study and have had enough time to read it on my own and ask questions. I feel that my questions regarding participation in the study have been answered to my satisfaction.

I have been told that the information I give to the study will together with other information gathered from other people, be anonymously processed into a research report and scientific publications. I am aware that this report, and any publications from it, will be shared with Hlokomela and other farm workers, and that Hlokomela will keep me informed about the progress of the research.

I am aware that it is my right to withdraw my consent in this study without it affecting my work or my taking part in future events. I hereby, freely and voluntarily give my consent to participate in the study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name……(Please print)

Witness's signature……Date……

INFORMED CONSENT FORM – Audio-tape

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study.

I am aware that my voice will be recorded. I have been told that only the research team will hear the audio recordings. I have been told that the audio recordings will be destroyed at the end of the project, after two years.

I am aware that it is my right to withdraw my consent in this study without it affecting my work or my taking part in future events. I hereby freely and voluntarily give my consent to be audio-taped in the study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name…….(Please print)

Witness's signature……Date……

INFORMED CONSENT FORM – Video-tape

I hereby confirm that the person seeking my informed consent to participate in this study has given me information to my satisfaction. He explained to me the purpose, procedures involved, risks and benefits and my rights as a participant in the study.

I am aware that the interview I have agreed to participate in will be video-taped. I understand that only the research team will see the video recordings. I have been told that the video-recordings will be destroyed at the end of the project, after two years.

I am aware that it is my right to withdraw my consent to participate in this study without it affecting my work or my taking part in future events. I hereby freely and voluntarily give my consent to be video-taped in this study.

Participant's name……..(Please print)

Participant's signature……Date……

Researcher's name……..(Please print)

Researcher's signature……..Date……

Witness's name…….(Please print)

Witness's signature……Date……

Annexure S – Interview guide 4 – Key stakeholders

Interview guide 4 – Key stakeholders

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1. How did you first hear about Hlokomela?
2. Describe your relationship with Hlokomela.
3. What do you think/feel when you hear/see the name Hlokomela? (And or, What comes to mind when ….?)
4. Why are you / do you want to be involved with Hlokomela?
5. What do you think/feel when you see this billboard (and/or What comes to mind when…)?
6. The Hlokomela slogan says: "Farm workers care for each other". What do you think this means? Is it true? How?
7. What, if any, differences have you noticed among farm workers on farms participating in the project?

Visual trigger:

Hlokomela Hoedspruit Town Billboard

(Hi-res A3 playouts to be provided to respondents)



Probes: The aim of this line of questioning is to elicit how key stakeholders first heard about Hlokomela, how they perceive Hlokomela and what if any influence this has on their engagement with/support for, the project (ie. does Hlokomela project its identity in such a way as to enhance partnership building, support and the attraction of additional resources).

Probes might include:

1. What difference has Hlokomela made in the local area?
2. Is Hlokomela/ how is Hlokomela different from other organisations working in the area?
3. Hlokomela has grown from 18 partner farms to nearly 50 in just four years. Why do you think it has grown so quickly?
4. How does Hlokomela help you/ your organisation/your company?
5. How do you help or support Hlokomela?

Annexure T – Plagiarism declaration

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG | FACULTY OF HEALTH SCIENCES

PLAGIARISM DECLARATION TO BE SIGNED BY ALL HIGHER DEGREE STUDENTS

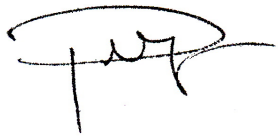
SENATE PLAGIARISM POLICY: APPENDIX ONE

I Patrick William COCKAYNE (Student number:7309973) am a student registered for the degree of MSc (Med) in the academic year 2016.

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.

Signature:



Date: 24th March 2016

26/04/2015
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