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HIV AND AIDS IN THREE CAMEROON FICTION FILMS: A THEMATIC ANALYSIS.

BY

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A RESEARCH REPORT SUBMITTED TO THEWITS SCHOOL OF ARTS IN PARTIAL FULFILMENT OF THE REQUIREMENTS OF A MASTER OF ARTS IN DRAMATIC ART DEGREE BY COURSE WORK AND RESEARCH REPORT.

SUPERVISED

BY

DR. HASEENAH EBRAHIM

AUGUST 2011

DECLARATION

I declare that this research report is my own unaided work. It is being submitted in partial fulfilment of the degree of Masters of Arts in Dramatic Art to the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination to any other university.

Bernard Bongkisheri Wirsiy .....

25th day of February 2011

ABSTRACT

This research work has been done with the intention of exploring the manner in which the medium of fiction film is used in Cameroon to represent issues relating to HIV and AIDS by identifying and discussing some of the themes that are usually addressed in these films, the nature of the information that they provide and how the characters that are either infected or affected by HIV and AIDs are portrayed within the narratives of these films through the analysis of three case studies namely *A Giant Broom*, *Forsaken Rose* and *SIDA au Village*. This research identifies both the shortcomings as well as the successes of the fiction films in their effort to inform, educate and create awareness of HIV and AIDS issues, and also offers suggestions that could improve aspects of representation of HIV and AIDS in fiction films in order to improve upon the effectiveness of the messages that reach the audiences, with the intention of supplying them with good education. The research used the method of an interpretative textual analysis of the selected case studies, with emphasis on the themes and the characters presented within the narratives of these case studies that related to issues of HIV and AIDS. The research analysed the representation of three aspects in these films namely modes of HIV and AIDS transmission, stigmatisation, and counselling and living with HIV and AIDS. From the analysis, the research found out that the fiction films in Cameroon have been contributing to the campaign on HIV and AIDS prevention and education through the messages on HIV and AIDS that are incorporated within their narratives. Nevertheless, these efforts by the fiction films still leave much to be desired. It is for this reason that the research has offered some suggestions that could be vital in improving this campaign on HIV and AIDS prevention and education by fiction films in Cameroon.

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The errors and irregularities in this research work remain my own.

DEDICATION

To Wirsiy Hilda & Wirsiy William (RIP), to my parents - Wirsiy Justin and Elizabeth Nsaikila.

ACRONYMS

AIDS Acquired Immuno Deficiency Syndrome

ART Antiretroviral Treatment

ARV Antiretroviral (Drug)

CCAST Cameroon College of Art Science and Technology

CD4 Cluster of Differentiation 4 (count)

CERAC Circle of Cameroonian Friends

CNLS Commitee Nationale de Lutte contre le SIDA (National Commission for the fight against HIV and AIDS)

CRTV Cameroon Radio and Television

DED Deutscher Entwicklungsdienst

E.E Entertainment-Education

ENS Ecole Normale Superieur (Higher teacher`s training school)

FCG Family/Friend Care Giver

GDP Gross Domestic Product

GTZ Deutsche Gesellschaft für Technische Zusammenarbeit (German Society for Technical Corporation or German Technical Corporation)

HIV Human Immunodeficiency Virus

ICT Information and Communication Technology

LACC Local AIDS Control Commission

MTCT Mother-To-Child Transmission

NACC National AIDS Control Commission

NGO Non Governmental Organisation

PLHA People Living with HIV and AIDS

PTCT Parent-To-Child Transmission

SIDA Syndrome d'Immunodéficience Acquise (Acquired Immuno Deficiency Syndrome)

STV Spectrum Television

UN United Nations

UNAIDS Joint United Nations program on HIV/AIDS.

VCT Voluntary Counselling and Testing

WHO World Health Organisation

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CHAPTER ONE (1)

INTRODUCTION

HIV AND AIDS IN THREE CAMEROON FICTION FILMS: A THEMATIC ANALYSIS

This research explores themes relating to the representation of HIV and AIDS in Cameroon. It identifies and discusses the specific themes addressed, the nature of the HIV and AIDS information provided, and how the characters infected or affected by HIV and AIDS are portrayed within the narratives in three case studies: *A Giant Broom* (Directed by Awa Oliver and produced in 2005.), *SIDA Au Village* (Directed by Ghislain Fotso and produced in 2008) and *Forsaken Rose 1 &2* (Directed/Produced by Neba Lawrence in 2008).

This research aims to also identify the shortcomings and achievements of these Cameroon fiction films in their effort to educate, inform and create awareness of HIV and AIDS issues. It will also offer suggestions for remedying problematic aspects of the representations of HIV and AIDS in Cameroonian fiction films in order to increase the efficacy of the messages reaching the audiences with the aim of educating the people. This survey will also aim to show how Cameroon fiction films are contributing to the campaign on HIV and AIDS prevention and education.

For the past three decades, the Human Immunodeficiency Virus (HIV), which causes the Acquired Immuno Deficiency Syndrome (AIDS), has been a cause for concern all over the world, especially in poor areas of the world like the Sub-Saharan regions of Africa where the deadly disease is rampant. In 2004, 40 million people worldwide were living with HIV and the sub-Saharan region alone accounted for two-thirds (25.4 million) of this figure (Poku, 2005:59). HIV is a small group of viruses, known as retroviruses, which attack an infected individual`s immune system and renders the individual defenceless against a variety of opportunistic diseases. 'It is transmitted primarily through intimate sexual activity, exposure to contaminated blood, and [prenatally] from mother to child...' (Hart, 2000). The world at large, the African continent, and Cameroon in particular have been embarking on various strategies to create awareness of, and to inform their citizens about, this disease in a bid to reduce or eradicate its spread.

Cameroon is a country in central Africa on the gulf of Guinea with a land area of 475 650 km^2 with a population of about 19 406 100 inhabitants and has two official languages namely, French and English (GeoHive, 2011). Like most sub-Saharan countries, Cameroon has been affected by HIV and AIDS with the adult prevalence rate reaching 5.4% (PlusNews, 2011). 90% of new infections are through sexual intercourse, as a result of multiple sexual partners and the non-use of condoms (National AIDS Control Committee, 2010). The World Health Organisation indicates that the transmission of HIV and AIDS in Cameroon is through heterosexual transmission and that women have been found to be more vulnerable with an approximated number of 170 infected women for 100 infected men (World Health Organisation, 2005: 1).

HIV and AIDS infections in Cameroon are also at a steady increase due to the fact that women have no power to demand safe sex since they have a low social status as compared to that of men. In a highly patriarchal society, they have very few economic opportunities and in order to survive, most of them have to succumb to the dictates of the men both within and outside of marriage. There are also some socio-cultural practices in Cameroon that expose Cameroonians to HIV and AIDS. These include the practise of female genital mutilation especially in the South West region where procedures such as the indiscriminate use of sharp objects, and unsterilized objects increase the chances of HIV and AIDS infection. Polygamy has also been noticed to have contributed to the spread of HIV and AIDS. Some men are not able to sexually satisfy all their wives and this has often led some of the women to search for this satisfaction elsewhere where they sometimes end up engaging in risky sexual behaviour. When they happen to be infected with HIV, it would be easily shared with their husband and his other wives

Witch-doctors and traditional healers also account for the spread of HIV/AIDS in Cameroon. Many of them use unsterilized razor blades indiscriminately on their patients thereby transmitting HIV from an infected person to a healthy one (Cameroon Echoes, 2010). Some cultures in Cameroon have the tradition of shaving the scalp of family members in the event of the death of a family member. This is usually done on a given day and everyone comes together in one area. Unsterilized blades are usually used indiscriminately on everyone related to the deceased and in case one of the family members is HIV positive, there is a high possibility of infecting others with it due to the wounds that are usually incurred in the process of scalp shaving. Migration has also been another factor that has contributed to the spread of HIV and AIDS (Brummer, 2002:9). When people move from one part of Cameroon

to another, they sometimes change sexual partners. Staying for long away from your family might result in infidelity. This makes it possible for someone who is HIV positive to spread the virus to other areas to which he or she migrates.

The transmission of HIV is also through various other modes such as through unprotected sex with an infected person, mother-to-child transmissions, through intravenous contact with the blood of an infected person e.g. blood transfusion, sharing needles, blades, syringes and during accidents. These form part of the various modes of HIV and AIDS transmission in Cameroon.

Many deaths have been incurred as a result of poor management of HIV and AIDS, resulting in a good number of adverse effects to Cameroonian society. For businesses, productivity has been affected as sick employees take sick leave and there has always been the urgent need to train and recruit new staff to replace those who have either died of AIDS or are sick with HIV and are no longer productive. These deaths also render the health and social systems to suffer from the loss of workers, teachers and other skilled workers. It has also been estimated that children (under the ages of 18 years) who have been orphaned by AIDS have increased from 13000 in 1995 to 304000 in 2010 (National AIDS Control Committee, 2010: 13). Many orphans and vulnerable children left by these deaths become a burden to society, reducing the per capita income of the citizens and requiring assistance from the state.

The percentage of the Cameroon population between the ages of 15 to 49 who are HIV positive has witnessed a steady increase from 0.6% in 1990 to 5.1% in 2010 (National AIDS Control Committee, 2020. 2010: 9). The National Aids Control Committee (NACC) and its Central Technical Group (GTC) have also estimated that 141 HIV infections occur in Cameroon daily (National AIDS Control Committee, 2020. 2010:2). With the continuous rise in the prevalence rate of HIV and AIDS in Cameroon, the Cameroon government, civil society and some public partners (both local and international) have been trying to curb the spread of this disease.

The National Committee to fight against HIV and AIDS known as National AIDS Control Commission (NACC) known in the French language as Commitee Nationale de Lutte contre le SIDA (CNLS), has been created by the government of Cameroon under the Ministry of Public Health, and it is endowed with the responsibility of defining the overall policy for fighting against HIV and AIDS in Cameroon and also for drawing up the main guidelines and objectives. CNLS coordinates and manages all the stakeholders involved in the fight against

HIV and AIDS, monitors the implementation of the activities arising from all the programs in the fight against HIV and AIDS, coordinates the interventions of the ministerial departments and other institutions, and looks for funding and help for the fight against HIV and AIDS. This structure is represented in all the regions by LACC (Local AIDS Control Commission). In collaboration with the United Nations AIDS Program, the government of Cameroon has launched a campaign against HIV and AIDS which focuses on the dissemination of information about the prevention of mother-to-child transmissions and also supports research on HIV and AIDS. Other structures that have also engaged in the combat of HIV and AIDS in Cameroon include the World Health Organisation (WHO), the German Technical Corporation (GTZ), Goethe Institute, the British Council, the US embassy and the Circle of Cameroonian Friends (CERAC).

The media have not been left out of this fight against HIV and AIDS. TV and radio programs, e.g., by the Cameroon Radio and Television Corporation (CRTV), Canal 2 Internationale, Spectrum Television (STV) and Equinoxe Television, have been designed to inform, educate and create awareness on HIV and AIDS issues. Films like *A Giant Broom*, *SIDA au Village* and *Forsaken Rose* have also been produced to educate, inform and create awareness about HIV and AIDS issues. Various newspapers in Cameroon like the *Cameroon Tribune*, *Le Messager*, *The Herald*, *Frontier Telegraph*, *The Guardian Post*, *Eden newspaper* and *Quotidien Mutations* also take a frontline position in the fight against HIV and AIDS, including a good number of publications that individual Cameroonians have written in order to contribute to this fight against HIV and AIDS.

Despite all these structures put in place for the fight against HIV and AIDS, the prevalence rate still continues to increase.

> According to Tanjong et al. (2003) the first case of HIV/AIDs in Cameroon was reported in 1985. They contend that by 1992, over 526,000 cases had been registered. Similarly, UNAIDS (2003) statistics show that between 1987 and 2002, HIV/AIDs prevalence in Cameroon increased from 0.5% to 12% of the total population of 15 million people. Cameroon faces a daunting reality. (Muluh and Nukwa, 2007: 1)

It is due to the continuous increase in the HIV and AIDS prevalence rate in Cameroon that the stakeholders in the campaign against HIV and AIDS look to the media for alternative and

better strategies in creating awareness and education about this pandemic disease with the intention of changing people`s behavioural patterns.

The fiction film, as one of the media through which information on HIV and AIDS is disseminated, and through which HIV and AIDS awareness is created, highlights the situation and what this deadly disease is all about by integrating issues or themes relating to HIV and AIDS in their narratives. The fiction film medium avoids the traditional commonplace "preachy" (i.e. overly didactic) method that is usually employed in HIV and AIDS education. It combines daily life issues and events with interesting and humorous elements that would captivate the audiences into watching these films that are laced with information relating to HIV and AIDS issues. In this way, information about this disease is disseminated to those who engage in high-risk behaviours, those living with HIV and AIDS, as well as people who live with those affected by HIV and AIDS. Cameroonian filmmakers have been producing fiction films that try to capture Cameroonian views and perceptions about HIV and AIDS issues. This has always been done through the various themes and messages on HIV and AIDS that they highlight in their films, whether these use the English language or the French language as their medium of expression.

For this reason, I aim to investigate the ways in which HIV and AIDS issues are explored in the narratives of these films, and compare the nature of such information to the existing medical and sociological literature and debates around the subject matter. This investigation also aims to identify those elements that are depicted in misleading ways on what the HIV and AIDS is all about and attempt possible suggestions for their amelioration. With this, I believe accurate and helpful information on HIV and AIDS would be shared with Cameroonians in a manner that is culturally specific and effective. The fiction film would also have successfully played its role in contributing as one of the media through which education, information and awareness about HIV and AIDS are disseminated in the Cameroonian society.

For the investigation of how HIV and AIDS is portrayed in Cameroonian films, I have selected the following fiction films as the case studies for this work:

A Giant Broom is a Cameroonian fiction film that was released in 2005 by Zion Motion Pictures, directed by Oliver Awa. This film is in English language, but includes some dialogue in Ngemba, one of the local languages in Cameroon, in order to capture the socio-cultural milieu that the film represents. This film exemplifies issues about HIV and AIDS

ranging from HIV transmission, living with HIV and AIDS, Counselling and the stigma that is attached to HIV and AIDS.

Forsaken Rose was released in 2009, a Cameroon film produced and directed by Neba Lawrence that discusses HIV and AIDS in its narrative. This film is produced in the English language and spiced a bit with Pidgin English. It represents issues related with HIV and AIDS such as transmission, counselling, stigma and living with AIDS.

Sida Au Village is also a Cameroonian fiction film that was directed and produced by Ghislain and released in 2008. The film is entirely in the French language and depicts in its narrative, HIV and AIDS related issues. Some of the themes highlighted in this film include HIV and AIDS transmission, HIV and AIDS stigmatisation, HIV and AIDS counselling and living with HIV and AIDS.

It is because the three selected case studies represent HIV and AIDS and Cameroon fiction films that they have qualified to be used for this study which looks at HIV and AIDS in three Cameroon fiction films.

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

For the purposes of guiding the course of this research work, I have drawn on research and the theories of Representation and also on theorisation of what is called Entertainment-Education. Also, I review and draw on the literature on the concept of HIV and AIDS in fiction films, as well as the concept of creating awareness, educating and informing society about HIV and AIDS.

In defining Representation, Hall (1997) says that "Representation means using language to say something meaningful about, or to represent, the world meaningfully to other people" (Hall, 1997:60). By this definition, representation would mean the process whereby meaning is produced and circulated, using language, signs and images to represent things. Representation is to describe, portray, symbolise or to make a specimen of something (Hall, 1997:61). This would involve the making of images (e.g. in films) to illustrate, describe or portray something through the use of some material objects and effects. It also focuses on how reality is depicted, and the manner in which the audiences would receive such depictions. It therefore indicates that meaning is created out of the social environment which might not necessarily be the truth of what is actually the case. According to Hall, the meanings of these representations do not depend on the material objects, but on their symbolic functions or what they stand for and represent. Meaning has therefore is created out of the social environment using material objects (cameras, lights, microphones, etc) and circulated within audiences.

Hall (1997) and Hajemohammadi (2007) indicate that representation of meaning works through three approaches namely; the reflective, the intentional and the constructionist or constructivist approaches (Hall, 1997:65). According to the reflective approach, language only reflects or imitates the truth that already existed and is fixed. "Meaning is thought to lie in the object, person, idea or event in the real world, and language functions like a mirror, to reflect the true meaning as it already exists in the world" (Hall, 1997:65). Because of the fact that this approach reflects or mirrors what has already been fixed, it is at times called "mimetic".

The intentional approach argues that it is the author or the speaker who through language enforces his or her sole meaning on the world. According to this approach therefore, words have to mean what the speaker want them to mean. This means that the person who controls the means of representation is the one who establishes its meaning; meaning depends on how an event has been presented.

The constructionist approach, argues that things in themselves neither have meaning nor that individual users of the language can fix meaning in language. In this sense, meaning is constructed using representational systems such as signs and concepts. This approach indicates that it is the system and the people that we use to represent our concepts that convey meaning and not the material world. " It is social actors who use the conceptual systems of their culture and the linguistic and other representational systems to construct meaning, to make the world meaningful and to communicate about the world meaningfully to others" (Hall, 1997:65). In film studies therefore, meaning is communicated through techniques such camera angles/shots, sound, lighting, costume, make-up and the language that the film uses. In the three selected case studies, the issue of HIV and AIDS has been represented using the above mentioned techniques in order to communicate meaning to the audiences.

According to Singhal and Rogers (1999), "Entertainment-education" describes a process whereby a media message is purposefully designed and implemented to both entertain and educate, in order to captivate and increase the audience numbers that would be available to gain knowledge about an educational issue with the intention of creating favourable attitudes towards recommended behavioural changes. The conscious use of entertainment-education in mass media, particularly in television, film and radio aims to disseminate information on educational issues through feature films, talk shows, music, theatre, cartoons and soap operas (Singhal and Rogers, 1999: xii). The aim of this entertainment-education is to bring about social change through changing the structures in the social system (Singhal and Rogers, 1999: 9). This approach constitutes an approach that is similar to the intentional approach. As such, it assumes that the meanings communicated are clearly established and will be received in the way intended by the producer(s) of the text.

Singhal and Rogers (1999) argue that education programs on their own are very expensive and are unpopular with commercial advertisers whereas entertainment programs are very popular as a result of their high ratings, thereby appealing to sponsors. This makes the commercial media (e.g. television and radio) preoccupied with gaining higher ratings and broadcasting of issues that serve little positive influence on the society. In order for the education programs to draw attention from both the sponsors and the audience, Singhal and Rogers (1999) argue that the Entertainment-Education strategy has to be used in order to counter both the 'entertainment-degradation' and 'boredom-education' programs (Singhal and Rogers, 1999: Xii). This strategy therefore seeks to blend the entertainment and educative aspects together for the sake of educating and entertaining the society. Through this strategy,

the audience would gain education on social aspects that would, in turn, foster a positive social change, while at the same time being entertained.

Entertainment-Education will always have a high potential to educate the public on issues such as HIV and AIDS prevention, family planning, child abuse and more improved social status for women (Singhal and Rogers, 1999: 8). "AIDS movies" like the three case studies selected for this study, are therefore supposed to be entertaining (in order to increase the audience numbers) as well as educational (awareness on HIV and AIDS). Singhal and Rogers (2003) comment that:

> Research evaluations of these programs suggests that the Entertainment-Education Strategy – through the use of formative research, audience segmentation, multimedia campaign approach, media celebrities, and other creative techniques such as humour, animation and claymation, among others – can effectively promote HIV and AIDS prevention behaviour (Singhal and Rogers, 2003:289).

This strategy on HIV and AIDS prevention usually promotes the use of "popular, long running television and radio soap operas to engage audiences emotionally, and to encourage public discussions" (Singhal and Rogers, 2003: 289). Even if some part of the audience conduct "preferred reading", it is useful in communicating information about HIV and AIDS. Some of these popular television soap operas would include *Twende na Wakati* (lets go with the times) in Tanzania, *Tinka Tinka sukh* (Happiness lies in small things) in India, *Nshilakamon*a (I have not seen it) in Zambia and *Soul City* in South Africa.

With regards to feature films, Hart (2000) defines what he calls an "AIDS movie" as:

> ...any fictional or fictionalized narrative movie which features at least one character who either (1) has been infected with HIV, (2) has developed full-blown AIDS, and/or (3) is grieving the recent death of a loved one from AIDS and which also explores the process of such characters confronting realities associated with transmitting, living with, and/or dying from HIV or AIDS as a significant component of its narrative (Hart, 2000: 9).

This definition by Hart applies to the three Cameroonian films that form my case studies. All of the three films, *A Giant Broom, Forsaken Rose* and *SIDA Au Village*, have at least one

character, who is portrayed in the narrative as being HIV positive, has AIDS or is affected by HIV/AIDS.

Hart (2000) also defines HIV as a small group of viruses known as retroviruses which attack an infected individual's immune system and renders the individual defenceless against a variety of opportunistic diseases, and that 'It is transmitted primarily through intimate sexual activity, exposure to contaminated blood, and [prenatally] from mother to child..." (Hart, 2000). By portraying the modes of transmission of HIV and AIDS in fiction films, the audience may be educated and awareness created on how to avoid being infected by this disease.

Hart (2000) also discusses various themes prevalent in American films that discuss AIDS. He argues against the portrayal of the HIV and AIDS as one primarily affecting homosexual people, because this results in non-homosexual people feeling less threatened by this disease. He notes that most of the people in the world infected with HIV are not gay. HIV and AIDS attack all human beings indiscriminately across all demographic factors and sexual orientation. This means that every person is vulnerable to infection if he/she does not protect himself/herself from this disease while engaging in high-risk behaviours. These are some of the problems that need to be rectified through the film medium by demonstrating in the narratives of these "AIDS movies" the inevitability of contracting HIV and AIDS by any human being irrespective of his/her sexual orientation if he/she engages in any risky behaviour.

Sidiropoulos (2006) emphasises the strength of the media in the fight against HIV and AIDS.

> The media are a powerful force in the fight against HIV/AIDS because they shape public opinion, generate discussions, channel information, influence attitudes and behaviour, and are able to whip up support or opposition to issues. (Sidiropoulos, 2006: 75)

Sidiropoulos (2006) also alludes to the successes of Botswana in the fight against HIV and AIDS as well as the strategies that could be put in place in other countries to have a positive outcome in such ventures. Like the case of using the medium of fiction film to combat HIV and AIDS, it is very important to develop an effective strategy that would convince members of the public to believe in the existence of HIV and AIDS and try to avoid being contaminated

with it, rather than giving vague information that could have a contrary effect on the population.

Sidiropoulous (2006) also comments on the fight against HIV and AIDS in Botswana, including the various attempts made by the government, the various church denominations and the role the media have played in curbing this pandemic. She cites the president:

> We have had one-and-a-half decades of information, communication and education on HIV and AIDS, emphasising change in sexual behaviour. Progress has been slow in the face of formidable barriers in the form of ignorance, denial and stigmatism. Even so, there are indications that we may finally have made a breakthrough. (Sidiropoulos, 2006: 7)

The government of Botswana responded very quickly to address the issue of HIV and AIDS and it is through their rapid response to HIV that they became the first African country to introduce antiretroviral therapy (ART) through the public health system as well as free drugs related to HIV and AIDS (Sidiropoulos, 2006: 9). There was the "prevention of HIV transmission through sexual and other means, the strengthening of diagnostic management and infection control, and the introduction of epidemiological surveillance and monitoring" (Sidiropoulos, 2006: 11). There was also free distribution of condoms to people especially in rural areas.

One of the most important factors that made HIV and AIDS prevention successful in Botswana was the fact that the government worked together with religious groups in the national AIDS control effort.

> A tacit agreement was reached: religious leaders might not endorse condom use outside marriage, but would not oppose it. Condom promotion would not use brash, sexy, 'in your face' Western-style marketing, but would promote responsible sexuality and mention abstinence and faithfulness. The religious leaders, for their part, would encourage abstinence before marriage, fidelity between spouses, and compassion and support for both those infected and those affected. (Sidiropoulos, 2006: 63)

Such an agreement reduces the challenges faced in the fight against HIV and AIDS, as these two groups would always have opposing views on this issue. Coming to a compromise creates a balance and thus the focus on the subject matter would not be seen from two opposing fronts. Projecting the successes of a country like Botswana in the fight against HIV and AIDS through fiction films would encourage other governments and religious leaders to improve efforts in getting the same results.

It has been realised that film is one of the major means through which information is communicated to the public. Television films cover a wide scope of topics and it is for this reason that information communicated through this medium would be very effective. Suber (2006) examines the patterns and principles that make films popular and memorable. He tries to capture the predominant role of the film as far as communication is concerned.

Ogenga (2006) discusses how communication and information on HIV and AIDS is disseminated through mass media in South Africa with the *Tsha Tsha* and *Soul City* television series as case-studies of such entertainment-education TV programs. These use the current social problems that would resonate with the audience members to pass across educational messages in a subtle and entertaining manner, designed to capture the fancy of the audiences. Underlying these entertaining scenes, there is always information on some social issue that needs to be explored (eg.HIV/AIDS). He points to the fact that the "Entertainment-Education (E-E) Communication strategy" may have an impact on society either in a positive or negative way (Ogenga, 2006: 74). It is because of this dual effect that it is imperative that writers and directors of such programs focus on the positive values of such issues. Messages that are passed within programs should be directed towards creating awareness, educating the audiences. They should also be able to inform them about HIV and AIDS issues in a manner that is also entertaining.

M^{c}Kee *et al* (2004) discuss the fight against HIV and AIDS through the use of strategic methods of communication. They argue that a well-executed and strategic communication campaign has been lacking in various communication programs designed for HIV and AIDS campaigns and this has been the reason why, despite the numerous efforts geared towards combating the HIV and AIDS pandemic, its complete eradication still remains a far-fetched goal (M^{c}Kee *et al*, 2004: 30). "Whereas TV spots, billboards, community rallies, school-based events, and countless other communication activities abound, rarely are they part of a well-coordinated, systematic effort that extends to all levels and sectors of society" (M^{c}Kee *et al*,

2004). All the stakeholders in the domain of combating HIV and AIDS need to come up with better strategies of communicating their message to the public in such a way that the message is well spread to the targeted people so as to meet the desired effect. There is some indication that Entertainment-Education (E.E) should be an effective means, providing captivating programs that would be able to capture the interest of the audiences while spreading the message about HIV and AIDS. Entertainment-education need not be limited to the mass media, but could include entertainment by street theatre troupes, puppeteers, etc. (M^{c}Kee *et al*, 2004: 36-37). M^{c}Kee *et al* (2004) equally advocate for high standards in these E.E programs;

> To be effective, a communication program must be carefully designed and implemented. In the case of mass media, this requires the use of skilled, creative staff and good production facilities. Moreover, communication materials need to be contested for attractiveness, comprehension, cultural acceptability, and related factors. With respect to community-based programs, personnel must be well-trained and have the appropriate interpersonal skills to interact effectively in group settings (M^{c}Kee *et al*, 2004: 37).

This calls for serious research on the designing of such a program to ensure messages that resonate with the aspirations, fears and needs of the society targeted (M^{c} Kee *et al*, 2004: 38). The issue of effective and appropriate communication in the dissemination of HIV and AIDS information cannot be overlooked. It is the manner in which the information is prepared and delivered to the public that change can be made. Fiction film producers who plan to represent HIV and AIDS in their narratives are therefore placed with the responsibility of shaping the information that they would present to the audience in a manner that would give appropriate information. This therefore mean that, more research needs to be done before producing an AIDS film in order not to give incorrect or inappropriate information that could be dangerous to the public.

Boler (2008) is concerned with the issue of life-saving education. Prejudices and stigma relating to HIV and AIDS have rendered the fight for the prevention and eradication rather difficult to attain completely.

> For both children and adults, prejudice can bring as much pain and suffering on a daily basis as the virus itself. Addressing the prejudice

> and stigma and silence around HIV must therefore be a major priority (Boler, 2008: 18).

This is an indication that serious education should be geared towards warding off the various prejudices that have been created around the HIV and AIDS pandemic. Education is seen here as the major component in overcoming these prejudices. It is therefore very necessary to address prejudice and stigma around HIV and AIDS, and the media and religious institutions should be utilised to produce these results. People should be schooled to discuss freely their concerns about HIV and their health status without fear of any form of prejudice or stigma that could be attached to it by projecting such information in fiction films, TV programs, etc. that treat HIV in their narratives.

Another issue that Boler (2008) brings to light is the religious and ideological influences that make the prevention on HIV and AIDS difficult to attain. Issues like the abstinence-only approach and abstinence-until-marriage that are promoted by the evangelical churches and the federal government of USA can become a major setback to this course, if they limit the information which is provided to young unmarried people about sex and HIV and AIDS.

"Over the past 25 years, the US federal government has massively increased its support for abstinence-only programmes that limit the information which is provided to young people about sex and HIV" (Boler, 2008: 91). With these controversies, Boler suggests that more information has to be made available in order to counter such approaches that work against the education campaigns on HIV and AIDS prevention and cure. These could possibly be disseminated through fiction films as well as through other media and channels. The fiction film should be produced in such a manner that the information promulgated in the narrative of these films should seriously inform and educate the audiences to have a good knowledge about HIV and AIDS and related issues. By so doing, the fiction films would be positively educating and creating awareness on HIV and AIDS issues by encouraging viewers to seek further information.

On a related matter, many evangelical churches announce regularly on TV that HIV could be cured in order to attract people to join their congregations. Some even go as far as persuading people not to take Anti-retroviral drugs (ARVs) with non-medical claims that they have a cure for HIV and AIDS (Boler, 2008: 102). These claims become dangerous to HIV and AIDS patients when these churches are unable to find a solution to the problems they claim to have. The patients could end up dying as a result of these unscrupulous and fake promises. The

dangers that these misleading claims pose on the society could be criticised in fiction films that discuss HIV and AIDS in their narrative.

Another major controversy that is hinted at is the fact that more money is spent on treatment than prevention. People and the governments need to be educated on the decisions to take in relation to the economic benefits of preventing the spread of the disease.

Kimaryo *et al* (2004) discuss an intervention formulated by the government of Lesotho to speed up and upgrade the national response to the HIV and AIDS pandemic. The response to the challenges of HIV and AIDS here focuses on the elaboration, analysis and the formulation of strategies geared towards taking effective action against the spread of HIV and AIDS utilising Information and Communication Technology (ICT).

Kimaryo *et al* (2004) assess the threat that HIV and AIDS have on the people of Lesotho, and outline the role that is supposed to be played by the various stakeholders such as the government, traditional leaders, civil society, the private sector, people living with HIV and AIDS and the international community, in order to bring about a common effort for the fight against this pandemic. It is for this reason that this book has been adopted by the cabinet as the official government working document to fight against the HIV and AIDS pandemic.

> A major challenge in the War against HIV/AIDS is the paucity and accuracy of information and data (both statistical and episodic) on all aspects of the infection, spread, impact and control. Although this is part of the general problem of statistical information-gathering in Lesotho and throughout much of the developing world, the urgency of the response to the disease compels the crafting of a better way to obtain accurate data and information, especially from rural and remote areas where the impact of the disease is no less devastating than it is in urban centres like the capital city, Maseru (Kimaryo *et al*, 2004: 131).

This also implies that adequate and accurate information and data should be collected by the screen writer in order to furnish the public with relevant information about HIV and AIDS in the narrative of such fiction films.

Susser (2009) offers an analysis of issues around sadness, deprivation and hope as far as HIV and AIDS is concerned. He discusses how some cultural factors have been paving the way for poverty and risky sexual behaviour which eventually lead to HIV and AIDS, and how gender

differences affect the AIDS pandemic in our contemporary society. Gender inequality forms the basis of the AIDS pandemic and this according to Susser, has been recognised by international spokespeople like Koffi Annan (the then Secretary General of the UN) and Peter Piot (the executive director of UNAIDS) who affirmed that the worldwide epidemic was driven by gender subordination.

Susser (2009) goes on to note that "...in 2007, while 11 billion male condoms were distributed worldwide, only 26 million female condoms were circulated" (Susser, 2009: 30). Unprotected sex could be drastically reduced if both condoms are made available and are used, rather than the case where only the male condom is given preference to circulate in large quantities. Some women prefer using women`s condoms over persuading their husbands to put on the male condom (Susser, 2009). This is problematic in a situation whereby only the male condoms are available. This might compel the sex partners to engage in an unprotected sex that might lead to HIV transmission, if one of the partners is HIV positive. Susser hints that the women have taken up the challenge by trying to make the female condoms accessible. Susser also instils hope, despite high rates of HIV and AIDS in South Africa and the numerous problems that poor women are facing, by mentioning that the women are overcoming this challenge through the help of international organisations that work towards the prevention and treatment of HIV and AIDS. Their material, financial and moral support to poor women is very vital, as most of these women are especially from poor rural areas that lack the basic necessities for livelihood as well as health infrastructure.

Campbell (2003) looks at why, in spite of the numerous programs that are geared towards educating and creating awareness on the issue of HIV and AIDS, its infections still continue to increase. She discusses some of the obstacles and challenges that still need to be overcome like poverty and gender inequality. Campbell (2003) advocates for the mobilisation of whole communities rather than individuals, as group participation could lead to improved collective action on sexual health, and the provision of information that could bring about awareness on HIV and AIDS, self empowerment and critical consciousness of the community.

Although prostitution is illegal in South Africa, the government have turned a blind eye to this business that if contained, would have greatly reduced the spread of HIV and AIDS. These sex workers may not have the skills for negotiating safe sex as all they are interested in is the money from their clients that would sustain their lives since they are faced with severe material poverty;

> The principle of selling sex was that 'the customer is always right'. If a man refuses to use a condom, the woman dropped the subject and the transaction continued without it. If a woman got too insistent about condom use, the man would take his business elsewhere. (Campbell, 2003: 71)

For such a case, it would be better to direct much of the prevention attention towards the 'clients' as they seem not to be aware of the repercussions of having unprotected sex. The empowerment of sex workers to negotiate safe sex could be improved through information from the media and other channels such as fiction films, televisions and news papers. Images could be used either in films or in news papers in order to illustrate, represent or symbolise the dangers associated with the lack of skills in negotiating safe sex. Stakeholders in the prevention of HIV and AIDS could also embark on campaigns to reduce the rate of poverty and unemployment by supporting long-term income generating activities (Campbell, 2003: 144), that would allow them to leave the sex business that engages them in risky sex behaviours.

METHODOLOGY

This research survey uses the process of interpretive textual analysis. According to Gephart (1997), "interpretive research thus often uses qualitative, textual data as a source of information" (Gephart, 1997:584). This method attempts to provide insights into the possible meanings and interpretations of a text. In this research work, these interpretations and insights shall be obtained through close textual readings of the selected Cameroon films that discuss HIV and AIDS in their narratives. These case studies are then analysed through the various themes and characters that relate to HIV and AIDS in the narrative of these films. These case studies include *A Giant Broom* (Oliver, A, 2005), *Forsaken Rose* (Lawrence, N. 2009) and *SIDA Au Village* (Ghislain, F, 2008).

The study provides a plot summary of the above mentioned case studies with a brief character profile of some major characters.

This study begins by examining the various themes that are represented in the narratives of these films in relation to HIV and AIDS, including a discussion on the methods through which HIV and AIDS is transmitted. This includes issues like unprotected sex, blood contamination and mother-to-child transmission. The study also examines/investigates the representations of how HIV and AIDS are transmitted through each of these modes, as well as the factors that influence the transmission of HIV and AIDS through these modes. The three case studies chosen for this study are then analysed in relation to how they represent modes of HIV and AIDS transmission within their narratives. Findings and recommendations are discussed with the aim of suggesting how fiction films could be used to represent how to avoid infections through these modes of HIV and AIDS transmission. This is done by drawing upon the existing medical and sociological literature on the subject matter.

Another theme that is analysed in these films is the issue of stigmatisation and prejudice relating to HIV and AIDS. I begin by defining the concept of stigmatisation in relation to HIV and AIDS, and follow by an analysis of the representations of stigmatisation in the three selected case studies. Finally, I summarise my findings, and make recommendations on the depiction of HIV and AIDS stigmatisation, with close reference to some already existing literature on HIV and AIDS stigmatisation.

Chapter 4 discusses Counselling and living with HIV and AIDS, beginning with a discussion of counselling in relation to HIV and AIDS. The three case studies are analysed on how HIV

and AIDS counselling is represented in their narratives and a discussion of the findings on how counselling is represented in these case studies. Recommendations are made in order to improve and correct some of the aspects that have been found to be depicted in a derailing manner concerning HIV and AIDS counselling.

In chapter 5, I provide a summary of my findings and present a general analysis of how HIV and AIDS-related matters are represented in Cameroonian fiction films with specific reference to the three case studies, and in relation to the specific aspects of modes of transmission, stigmatisation, and counselling.

Plot summaries of case studies

A Giant Broom was released in 2005 by Zion Motion Pictures International. This film is produced in the English language, but includes some dialogue in *Ngemba*, one of the local languages in Cameroon. *A Giant Broom* is a Cameroonian film that focuses on the representation of promiscuity, stigma-related issues, and the desire for revenge after knowing that one is infected with HIV, rape, and the use of unsterilized objects as ways by which HIV is transmitted. It also represents issues such as voluntary counselling and testing as well as faithfulness and abstinence before marriage as ways of avoiding HIV and AIDS.

A Giant Broom narrates a love story about Lobteh and Faith. They are portrayed as characters who have fallen in love with each other against the desire of their families for they come from two separate regions that have been hostile to each other. Faith comes from the coast and Lobteh from the *Graffi land* (grassland region). They practice sexual abstinence for the six years that they have been dating, and they agree to wait until they get married to become sexually intimate. The family of Faith decides to allow Lobteh and Faith to get married on condition that they do an HIV test. Although they have been abstaining from sex, Lobteh is diagnosed HIV positive while Faith remains HIV negative. It turns out that Lobteh has been infected with the virus through the cuts he received from Dr. Shum, the traditional healer, who uses an unsterilized razor blade on him that had been contaminated with HIV from Lobteh`s friend, Bandolo.

The film also represents Bandolo as a character who, through his promiscuous lifestyle, gets infected with HIV. Unlike his friend, Lobteh, Bandolo is depicted in the film as irresponsible and sexually promiscuous. He loses hope in life when he tests HIV positive, and he searches for ways to infect other people with the virus as a way of revenge. He keeps a list of two hundred and one young ladies that he has infected with HIV by having unprotected sex with them in return for money and material things since they are financially and materially poor. This he succeeds in doing because his HIV status is not known in the community. Bandolo also contaminates with HIV, the “ancestral” razor blade that the traditional healer, Dr. Shum, uses indiscriminately without sterilising, thus infecting other people with the virus, including Lobteh, who is infected with HIV through this razor blade. Towards the end of the film, Lobteh and Bandolo publicly declare themselves as being HIV positive without the fear of being stigmatised and discriminated against. Bandolo also confesses his evil behaviour of consciously infecting a number of female students with HIV as well as the “ancestral” razor

blade of Dr. Shum. He surrenders himself to the community to give him whatever punishment he deserves for his evil deeds, but he is forgiven. Lobteh, Faith and Bandolo then form a non-governmental organisation to sensitise and educate the community on HIV and AIDS related issues. It is for this reason that the Fon (the chief) honours them with titles, especially Lobteh and Faith for setting a good example in the community. This is because they have been in a relationship for six years and were able to protect themselves from being infected with HIV by abstaining from sex.

Although this film predominantly deals with exploring HIV and AIDS in a bid to foster education, create awareness and inform its audiences, its representation is laced with entertainment aspects in order to draw the viewers' attention to watching the film, as well as making the film interesting to watch. In this light, some of the scenes in the film are made up of humorous representations that give the audiences comic relief and increase their anxiety in watching the film to the end. This technique that is used by the producer helps to ensure that the messages that are presented in this film are effectively passed to the audiences who will watch the film to the end without being bored.

Forsaken Rose was released in 2008 by Dreamstar Images and produced in the English language in two parts. This Cameroonian fiction film tells a story about the love lives of Frank, Trace, Mick and Peggy. As a goodhearted person, Trace invites her friend, Peggy, to live with her in her house. Peggy being a schemer and a traitor ends up destroying the intimate love relationship that has been existing between Frank and Trace. She makes the gullible Frank believe that Trace has been having an affair with another man. For this reason, Frank ends up separating from Trace. He ends up falling in love with Peggy, who in turn tries to seduce Frank`s close friend Mick into having an affair with her. When this fails, Peggy brands Mick as a rapist, and as a result, Frank throws him out of the house. Trace later meets Mick and they end up falling in love with each other. Peggy is later caught by Frank in a sexual act with Honourable in their bedroom. Peggy, out of shame, leaves Frank`s house but later on discovers that she is HIV positive. Now alone, Frank realises his folly of sending away Trace. Upon discovery that Trace is deeply in love with Mick, his friend that he had chased away from his house because of the schemes of Peggy, he poisons himself. When he is taken to the hospital, the doctor realises through an HIV test that Frank has been infected with HIV probably by Peggy. Discovering that she is HIV positive, Peggy goes to shoot and kill Honourable whom she believes is the one who infected her with the virus and also poisons herself to death because of the shame and fear of HIV stigma and discrimination. Mick and

Trace become very remorseful upon learning that Frank is sick and needs blood. They decide to donate blood to Frank, and after testing their blood to make sure that contaminated blood is not transfused to Frank, they happily find out that they have not been infected with HIV, as is the case with Frank and Peggy. The care that Mick and Trace give to Frank helps him remain psychologically healthy and not consider revenge or suicide as Peggy had done.

Sida Au Village was released in November 2008 by Ghislain Fotso, the director and producer of this film. It is entirely in the French language and it narrates the life of Fany, an orphaned girl who is living with one of her aunts in town and attending school. Due to poverty that renders her aunt not viable enough to continue paying for her school fees, she drops out of school and ends up with irresponsible friends who introduce her to smoking, drinking and to prostitution as a means of making money. Fany is later chased away from her aunt`s house as result of misconduct i.e. drinking and coming back home very late at night. This high-risk 'job' of prostitution exposes her to be infected with HIV. Upon discovering this status through an HIV and AIDS test, she is ashamed to face the world especially her friends who have been misdirecting her. Due to the fear of the stigma and discrimination attached to HIV and AIDS, Fany decides to go back to the village of Lebangwa where no one would know about her HIV status. There in the village, she lives with her other aunt, seducing irresponsible and unfaithful men into having unprotected sexual deals with her. With the multiplier effect, the HIV she is carrying is spread throughout the village at an alarming rate. This is discovered by the team of health officials who are sent by the government to carry out educational campaigns on HIV and AIDS. In the course of counselling and testing for HIV, many people are discovered to be contaminated with the HIV, even Chief Gabana.

The film also incorporates interesting and entertaining scenes in its narrative and this draws the attention of the viewers to watching this film, which is laced with didactic information about HIV and AIDS.

CHAPTER II

MODES OF HIV AND AIDS TRANSMISSION

In this chapter, I discuss the various modes of HIV and AIDS transmissions and analyse the representation of these modes of transmissions that have been integrated into the filmic narratives of the selected case studies. Representations of how HIV and AIDS transmission could be avoided are also made.

HIV and AIDS transmission refers to the mode by which HIV and AIDS moves from one person into another. The HI virus gets into the human bloodstream from the body fluids of infected persons to those of uninfected persons. There are a number of ways by which HIV and AIDS are transmitted from one person to another. These would be through the semen and vaginal fluids during sexual intercourse; by means of contaminated blood through blood transfusions, accidents and the use of unsterilized sharp objects like needles, razor blades and knives; and from mother-to-child either during pregnancy, during birth or in the course of breastfeeding (Rupiya, 2006:13).

1. UNPROTECTED SEXUAL INTERCOURSE

HIV and AIDS are known to be transmitted through unprotected sexual intercourse with an infected person. Having unprotected sexual intercourse with someone who is infected with HIV is one of the major ways by which HIV and AIDS is transmitted to someone who is not yet infected with HIV. This could be in the form of vaginal or anal sex. It is possible, but rare, for someone to get infected through oral sex (Magezi, 2007:17). Sexual intercourse accounts for the highest mode of HIV and AIDS transmission in Africa. About 86% of the cases arise from contamination through sexual intercourse with 79% of this figure arising from heterosexual transmission and 7% from homosexual transmissions (Magezi, 2007:17). While HIV and AIDS is highly transmitted through sexual intercourse, it would also be correct to conclude that the highest percentage of HIV and AIDS infections through sexual intercourse is through heterosexual sex.

A number of factors contribute to the transmission of HIV and AIDS through sexual intercourse. These fuelling factors would include lack of education and information on HIV and AIDS transmission, poverty, migration, male circumcision, traditional and cultural practices, HIV and AIDS stigma as well as poor use of condoms.

a) Poverty: Poverty plays a major role in fostering the spread of HIV and AIDS through sexual intercourse. According to Magezi (2007), poverty is the inability of the individuals, households, or entire communities, to command sufficient resources to satisfy a socially acceptable minimum standard of living (Magezi, 2007:42). Magezi (2007) goes on to quote the World Bank as describing poverty to be hunger, lack of shelter, being sick and unable to see the doctor (Magezi, 2007:43). Gillies et al (2000:201) also argues that:

> The sub-Saharan region has by far the lowest levels of GDP per capita in 1991, with this being as low as $120 in Ethiopia and below $1000 per capita in the majority of the sub-Saharan countries. The negative correlation between AIDS case rate per 100000 population and GDP per capita in the region is suggestive of AIDS being associated with very low levels of national wealth (Gillies et al, 2000:201)

The inability to sustain one`s life has always pushed individuals, especially women, into engaging themselves in prostitution. Extreme poverty leaves them with no option but to engage in the exchange of their bodies (through sex) for money and material favours. Poverty increases the chances of women and sometimes men (especially gay men) to engage in risky sexual relationships in order to get income which they could use to take care of their siblings, have something to eat and also for shelter. Some poor women, who desire material goods that their friends possess, end up having risky sexual relationships in order to get money for these items. Being unable to practise and/or negotiate safe sex, most of them end up exposing themselves to risky sexual behaviours that usually get them infected with HIV and AIDS. It is also argued that many of the poor HIV and AIDS patients usually die of malnutrition and not primarily as a result of AIDS-related illnesses (Magezi, 2007:56).

b) Migrations and constant travels**:** Migration and constant travels are additional factors that promote the spread of HIV and AIDS. This is particular the case with migrant workers who move from place to place away from their permanent homes in search for sustainable work opportunities. They usually have temporary residences at their job sites and only return to their permanent residences once in a while. In these temporary residences, the need for sexual satisfaction usually drives the men to resort to prostitutes and the ready cash would pull the prostitutes into this sex market. In the course of these relationships, some of the men end up engaging in very risky sexual interactions with the end results being that they get infected

with HIV and AIDS since the prostitutes that they have sex with usually have numerous sexual partners who might be HIV positive and do not care to use condoms during sexual encounters. Already infected, these itinerant workers would often take the virus back to their permanent residences where they infect their wives with the virus (Magezi, 2007:52). The same is also true for the lorry and truck drivers who go for very long distances. They usually have a network of sexual partners dotted along their routes. These sexual partners would sometimes include wives, girlfriends and sex workers (Rupiya, 2006:29). This network of sexual partners usually increases the chances of them being infected with HIV and AIDS especially since they sometimes have unprotected sex with these mistresses who may also have numerous sexual partners. This places these drivers at the risk of being infected with the HIV and AIDS, and if they are infected, they go back to their homes and infect their wives with the virus.

c) Traditional and cultural practices**:** Moreover, some other traditional and cultural practices place people at the risk of being infected with HIV and AIDS through sexual intercourse. In Muslim communities and communities where polygamy is allowed, especially in the northern part of Cameroon, there is the practice of multiple sex partners. This practice has been criticised for its potential in engendering families by exposing them to the risk of contracting HIV and AIDS. In a situation where a polygamous husband tends to sexually satisfy only one of his wives, or where the wives are not provided adequate sexual pleasure, some of these wives have the tendency of getting this pleasure that they cannot get in their marital home from somewhere else. In the course of seeking this pleasure, they are exposed to the risk of being infected with HIV and AIDS. In effect, polygamy, polygyny and multiple sexual partners always places at risk the lives of those who are in such a relationship (Poku, 2005:74).

Male circumcision has also been found to be one of the factors that influence the spread of HIV and AIDS through sexual intercourse. It is noted that in areas like east and southern Africa, the link between the high HIV and AIDS prevalence rate and low rate of male circumcision is relevant. Poku (2005) argues that "a comparison of African men with similar socio-demographic, behavioural and other factors found that circumcised men were nearly 60 percent less likely than uncircumcised men to be infected with HIV" (Poku, 2005:71). This therefore means that uncircumcised men have a higher ratio of being infected with HIV and AIDS as opposed to those men who are circumcised.

Moreover, attitudes towards the use of condoms also fuel the sexual transmission of HIV and AIDS. The use of condoms during sexual relationships would prevent the semen and/or vaginal fluids from moving from one person to another thereby infecting someone with HIV and AIDS in cases where either the semen or the vaginal fluid might be contaminated with HIV and AIDS. Poor use of condoms has been identified as a factor that increases the spread of HIV and AIDS among many communities.

The denial and poor use of condoms by both men and women has been influenced by a number of issues and this has rendered the fight against the spread of HIV and AIDS very slow and difficult to attain. One factor has been the anti-condom campaigns that have been promulgated by the Catholic Church and by some Muslim societies. The Catholic Church is the largest Christian organisation with many programs to fight HIV and AIDS, but it is highly controversial on its stance on the use of condoms to prevent the transmission of HIV and AIDS. The Catholic Church has always adopted an ineffective position on HIV and AIDS by declining the use of condoms. This is due to the fact that the Catholic Church is opposed to all forms of sexual acts outside of marriage (Wikipedia, 2011). The pope`s pronouncement to the Catholic Christians on his visit to Africa is one of such stance of the Catholic Church against the use of condoms.

> On the eve of his trip to Africa on 17 March 2009, Pope Benedict XVI once again expressed the Roman Catholic Church's rather narrow-minded view that abstinence, and not condoms, is the answer to preventing the spread of HIV. In fact, the Pope stated quite unequivocally that the promotion of condoms actually "increases the problem" (2). While this is the first time that the current Pope has publicly discussed his position on the issue of HIV prevention, his standing echoes that of his predecessor, Pope John Paul II, who often preached sexual abstinence as the key to stopping the spread of HIV in Africa... For many years, people working in the field of HIV and AIDS have been battling the stigma and discrimination associated with HIV-infection, the resistance that so many men hold towards condom use, and the management of the epidemic in general. Statements by the head of the Church, in direct contrast to a myriad of work and progress that has been done in Africa, may have severe after-effects, for women in particular. Infidelity is common, and

> thousands of women around Africa are in relationships with men who are unfaithful. This fact cannot be argued... Preaching faithfulness and abstinence will not help the partners of these men, or their children (Mundell, 2010).

Still on the issue of cultural barriers on the use of condoms, some communities misunderstand, demonise and look upon the use of condoms with some disapproval. This has most often been the case with many less developed countries that have a high rate of less-educated people who usually misunderstand how condoms work as a result of them having little or no knowledge about condom use.

It has also been realised that due to poverty or low income, as some women especially sex workers find it difficult to bring up the subject of using a condom to their clients. They often feel that if they insist on the use of condoms and the client is against it, they might end up losing their client (Campbell, 2003:71). With the fear of losing a client, these sex workers find it difficult negotiating for safe sex since they would not want to insist on the use of condoms and maybe lose a client that would have paid them some money to sustain their life with. They would therefore engage in sex without protecting themselves with a condom, which always exposes them to be easily infected with HIV and AIDS. Some cultures like the Maasai in Tanzania have always viewed the use of condoms as a waste of sperms which according to them, could be used after conception to assist in the child's development. Some of them even go as far as believing that the use of condoms would cause impotence in man, while others believe that any woman who carries a condom is not respectable. This is because they consider the use of condoms to be an affair of prostitutes. Another misconception that is also promoted is the idea that some of the condoms are laced with HI Virus (Wikipedia, 2011). All of these misconceptions have tended to scare and discourage people from carrying, and using condoms. With these misconceptions in place, the end result is always that many people find themselves engaging in risky sexual interactions which get them infected with the virus because they could not protect themselves by using condoms.

On the other hand, some people complain that the material that the condom is made of is heavy and for this reason, the sensation that they expect to have during a sexual encounter on both the penis and the walls of the vagina is reduced when they use a condom (Wikipedia, 2011). Meanwhile, some men complain of not being able to maintain an erection whenever they are wearing a condom. Although suggestions have been put forward that people with this

disability should train themselves to maintain erection by masturbating while putting on a condom (Wikipedia, 2011), most people still do not see any reason to be using these condoms since their goal is primarily to get sexual satisfaction.

Cultures that maintain traditional gender roles have also been found to fuel this barrier against the use of condoms. They make it difficult for women, who are usually treated as being subordinate to the men, to feel comfortable in demanding the use of condoms from their male partners during any sexual encounter (Wikipedia, 2011). Susser (2009) draws attention to the 2007 condom distribution and indicates that while 11 billion male condoms were dispersed throughout the world, it was only 26 million female condoms that were circulated that year (Susser, 2009: 30). This problem is enhanced in the Economic Commission for Africa (2004) report that "However, the female condom is still too expensive and in too short supply to be widely available (Economic Commission for Africa, 2004: 13). This manifestation of gender difference makes it difficult for especially some women who would have preferred using a female condom to protect themselves against HIV and AIDS when having a risky sexual relationship especially with men who do not want to use male condoms. The difficulty in getting access to these female condoms as a result of gender differences has always been the cause of some women being infected with HIV because they end up engaging in unprotected sex.

Also, in places where gender inequality is practised, it is a common knowledge that infidelity by men is accepted and practiced. "The men that are being unfaithful do so because the majority have been raised to believe that infidelity is acceptable and in fact often rewarded" (Mundell, 2010). In being unfaithful to their partners, these men would be exposing themselves to the risk of getting infected with HIV and AIDS from one of their numerous sexual partners.

d) HIV and AIDS stigma**:** HIV and AIDS stigma also enhances the sexual transmission of HIV and AIDS. HIV and AIDS stigma usually make people who are involved in risky behaviours to be afraid and stay away from prevention services and information about living with HIV and AIDS that would have helped them to avoid either being infected or transmitting the virus to other people. This is as a result of the fear of being marginalised and discriminated upon by the society. This fear of being marginalised and discriminated accounts for low levels of people going for testing and counselling. If they are HIV positive, they may end up infecting other people with the virus without knowing that they are HIV positive.

Stigma in this sense also accounts for healthy people getting infected with the virus as a result of lack of information about prevention methods (Poku, 2005:75). The fear to be branded HIV positive and then be stigmatised, discourages them from meeting with other infected people to learn and seek information about the basic prevention methods that could help them avoid being infected or re-infected with this disease, or infecting other people with the virus if they are HIV positive. As a result of these people not seeking information on the prevention methods of HIV due to the fear of being stigmatised, many people get infected with the virus because they do not know the information about the basic prevention methods. All of this is caused by the stigma that is attached with HIV and AIDS.

2. CONTACT WITH THE BLOOD OF HIV AND AIDS INFECTED PERSONS

Another mode of HIV and AIDS transmission is through having contact with the blood of someone who is infected with HIV and AIDS. Some people are infected with HIV and AIDS through having intravenous contacts with the blood of people who are infected with HIV and AIDS. This type of HIV and AIDS transmission happens through the use of objects that are contaminated with HIV and AIDS. The objects that transmit HIV could be syringes, needles, razors and other sharp objects that are contaminated with HIV and AIDS. The sharing of needles by drug users who take in drugs through injections has accounted for an increase in HIV and AIDS transmission (Poku, 2005:53). The transmission of HIV and AIDS by drug users is through the use of a needle that has been contaminated with HIV by another drug user. Such transmission of HIV and AIDS through intravenous contact with the blood of infected people through the sharing of sharp objects like needles, syringes and razor blades, can be prevented by ensuring that these objects are sterilised before using them. If this was taken into account, Lobteh in *A Giant Broom* would not have been infected with HIV as a result of sharing an unsterilized razor blade with Bandolo who is infected with HIV.

Blood transfusion also accounts for the transmission of HIV and AIDS (Health 24, 2010). When the blood of an infected person is used on someone who has not been infected with HIV and AIDS, the virus would be transmitted to the person receiving the infected blood.

3. MOTHER-TO-CHILD TRANSMISSION

HIV and AIDS can also be transmitted from an infected mother to her unborn baby or even after the baby is already born via breastfeeding. This mode of transmission is referred to as mother-to-child transmission (MTCT), but in recent years, people have decided to call it parent-to-child transmission (PTCT) for the reason that although the virus is moving from the mother to the baby, no one can tell with precision if it were coming from the father, or the mother (Magezi, 2007:18). Parent-to-child transmissions can take place during pregnancy, labour, delivery and even during breastfeeding. Quite a good number of pregnancies in which the child is infected with HIV, end up as miscarriages. Infections of the child after birth can be through breast feeding. Although this can be averted, the poor medical facilities in most of the poor African countries like Cameroon make it difficult for this transmission to be avoided since most of the vulnerable poor people form a majority of the infected people (Magezi, 2007:18-19). Magezi (2007) goes on to quote Ray et al as underlining that:

> Although avoiding breast feeding completely is the most effective way to avoid transmission, it carries other risks to infants and complications for mothers. Replacement feeding can be unsafe and expensive, and it increases the risk of infectious diseases. In areas where breastfeeding is the norm, mothers may be under pressure to conform to avoid suspicion and the stigma attached to HIV-positive status. This can result in mixed feeding (switching between breastfeeding and replacement feeding), which increases the risk of transmission because the infant gut can become damaged and provide entry for HIV infection (Magezi, 2007:19).

Even though it is recommended that HIV infected mothers should stop breastfeeding their children, it is usually not easy for these mothers to stop breastfeeding their children. This makes most of these women prefer to put their children at the risk of being infected with the virus rather than engage in safe practices. All this accounts for the transmission of HIV and AIDS from mothers to their babies either during pregnancy, childbirth or in the course of breastfeeding.

ANALYSIS OF CASE STUDIES ON HIV AND AIDS TRANSMISSION

A Giant Broom

A Giant Broom sets out to represent some of the ways by which HIV and AIDS is transmitted from infected people to those people who are uninfected. Although not all the modes of HIV and AIDS transmissions are represented in this film, the film nonetheless captures some of the ways by which Cameroonians get infected with the disease. This film depicts cases where by HIV and AIDS is transmitted through multiple unprotected sexual relationships. A case in point is that of the character of Bandolo, who after having been declared HIV positive, decides to infect young girls with the virus out of anger. He is presented in this film as having unprotected sexual dealings with them and even keeps a record of all the young girls he has infected with HIV through having unprotected sex with them. He also moves around and rapes young ladies with the intention of infecting them with the virus. From the number of people found in this list, there is an indication that Bandolo has had unprotected sex with two hundred and one girls, meaning that he has potentially infected two hundred and one girls with HIV, not mentioning the number of girls he has raped and consequently infected them with HIV.

By representing the issue of having an unprotected sex with an HIV infected person as a means by which HIV is transmitted, the film wants to discourage an engagement in risky sex without the use of condoms that can prevent the transmission of HIV. Through this representation, the film attempts to educate and create awareness to the audience on the dangers of not using condoms as this would in most cases lead to HIV and AIDS infections as has been the case with the girls with whom Bandolo had had unprotected sex. The film also attempts to indicate that it would be safe for ladies to always carry condoms with them should in case they are confronted with a rape encounter. If such a situation could arise, they could persuade the rapist to use the condom and not risk their lives by having unprotected sex with them. Also, the film could be depicting the adverse effects of proclaiming someone to be HIV positive without giving him proper counselling. The psychological trauma that Bandolo is going through, which has triggered his desire for revenge by infecting other people with the virus, could have been alleviated if he had had proper counselling before his HIV status was made known to him. The counselling that he received was not enough to convince and inform him about the possibilities of being able to live with HIV. This is therefore a suggestion that proper counselling should be done on those who have been tested for HIV before their test

results are given to them in order for them not to be traumatised and take rash decisions that could either be dangerous for themselves, or to the society.

Prostitution is one of the ways by which some people get infected with HIV and AIDS especially in cases where they engage in unprotected sex. As the film depicts through the character of Bandolo, it is easier for the female students of CCAST (Cameroon College of Arts, Science and Technology) Bambui and those of ENS (Ecole Normale Superieur) Bambili to easily fall prey to prostitution due to poverty (Magezi, 2007: 52). Bandolo takes advantage of their poor condition to exchange money and material things for sex. With the aim of infecting these female students with HIV, he engages in unprotected sex with the students and the end result is that these students get infected with HIV. Bandolo`s brother, whom Bandolo sends out of the car in order to make space to carry a prostitute, sounds a note of warning about HIV and AIDS transmission through sex with prostitutes when he says "brother, if AIDS does not kill you, you won't learn a lesson...mere prostitute!". He is very conscious of the fact that having sex with a prostitute is a very risky venture, which is the reason why he tries to warn his brother against having sex with prostitutes. Even Bandolo`s gateman knows that HIV and AIDS are transmitted through sex. He warns the girls who stream to Bandolo`s house, telling them to be on the lookout because they might end up being infected with the HIV and AIDS. The film is thus trying to portray how poverty is one of the factors responsible for the transmission of HIV in Cameroon. In the case where materialism leads to HIV and AIDS infections, the film is trying to discourage the materialistic cravings of female students who exchange their bodies for money and material things. This is seen from the film`s representation whereby, the craving for money and material things exposes the girls to HIV infections from Bandolo. It depicts the dangers of being promiscuous and especially not using condoms in sexual relationships especially with new partners whose HIV status is not yet known. Since these girls have not been using condoms in their sexual relationships with Bandolo who is HIV positive, they easily get infected with the virus.

Nchumuluh, one of the rural characters in the film who calls himself the village journalist by moving around the community and commenting on the things that are happening, finds Adamu, a gentle man in the village, begging a lady for sexual favours. Nchumuluh reminds him, about the existence of HIV and AIDS. He is quite aware of the fact that HIV and AIDS are transmitted through sexual relationships. Even when Adamu is escaping from Nchumuluh`s reprimands, he meets a friend who advises him to always use a condom every time when he is having sex with a woman. The film uses the reprimands from Nchumuluh to

Adamu in order to caution the audience on the importance of abstaining from sex. concerning the advice from Adamu`s friend, the film is educating its audience that in order to stay safe and clear of HIV and AIDS, one needs to avoid having unprotected sex especially in risky sexual encounters. The film indicates that the use of condoms when engaging in any risky sexual behaviour would be very helpful in protecting someone from being infected with HIV and AIDS.

Another situation in the film that represents how HIV and AIDS are often transmitted in Cameroon is through rape. Rape is forced, unwanted sex by the rapist against the wish and consent of the person who is raped. The films make depictions of how PLHA get angered when they are diagnosed HIV positive because of the discrimination and stigmatisation that awaits them. They then seek to take revenge on others by purposefully carrying out acts that would infect other people with the virus. This is often aggravated in situations whereby they end up not receiving proper counselling on HIV and AIDS. In *A Giant Broom*, Bandolo who has been diagnosed HIV positive pretends to look for the Skyline Hotel. On this pretext, he gets close to a young girl whom he rapes. Because Bandolo is presented in the film as being HIV positive, it is likely that this young girl gets infected with HIV from Bandolo who the audience knows to be living with HIV. With his decision to infect girls with HIV, Bandolo is likely not to have used any form of protection against infecting this young girl with the virus. Additionally, since rape entails having a forceful sexual encounter with another person, there is bound to have been no use of either a condom or any form of protection against infecting her with HIV and AIDS since such a move would either take more time in wearing the condom or allow for the struggling person who is being raped to have the chance to escape. By portraying rape as one of the ways by which HIV and AIDS gets transmitted, the film tries to depict how HIV and AIDS stigma can compel PLHA to be traumatised and behave in a rash manner. From the film`s representation, Bandolo does not rape the lady because he needs sexual satisfaction, but because he is psychologically traumatised and is craving to infect as many people as possible with the HIV.

A Giant Broom also presents the use of contaminated sharp objects by a traditional healer as one of the modes of HIV and AIDS transmission. The contaminated “ancestral” razor blade that Dr. Shum uses indiscriminately on his patients is one of the means by which HIV and AIDS is circulated in the community (Magezi, 2007: 18). Bandolo takes advantage of the indiscriminate use of this razor blade by Dr. Shum to infect it with HIV when he goes for consultation with Dr. Shum. He allows this razor blade to be used on him knowing he is HIV

positive. All those on whom this razor blade is subsequently used, get infected with HIV. It is through the use of this razor blade on the character of the sexually-abstinent Lobteh that he gets infected with HIV. The female medical doctor warns Faith and Lobteh about the dangers of sharing blades and needles, because if one of the people using it happens to be HIV positive, there is the risk of the other person getting infected with HIV through sharing these objects. This is the same error that Lobteh commits when he goes to consult Dr. Shum, the traditional healer, and allows this same blade to be used on him that has been contaminated with HIV. He ends up being infected with HIV through the "ancestral" razor blade that is used indiscriminately on every client who visits Dr. Shum`s shrine. The film is therefore castigating the indiscriminate usage and sharing of sharp objects as these might contaminate healthy people with HIV and AIDS. Through the advice that the female medical doctor gives to Faith and Lobteh about the dangers associated with the sharing of blades and needles, the film is thus advising its audience not to be sharing these items for they can transmit HIV and AIDS. It also hints on the importance of always sterilising sharp objects every time one is using them if he is sharing them with other people. Audiences are also warned to be careful when they visit traditional healers as some would forcefully use unsterilized razor blades or other sharp objects on their clients.

One other mode of HIV and AIDS transmission that has been hinted on is the issue of mother-to-child transmission. Although not much has been depicted about this mode in the film, nevertheless, the film makes allusion to this mode of HIV and AIDS transmission. This hint is made when Bandolo`s girlfriend complains to Bandolo that she is pregnant. With the already established notion to the audience that Bandolo is HIV positive, and that he has been consciously having unprotected sex with girls in order to infect them with HIV, it becomes obvious that this girlfriend of his also has been infected with the virus which if care is not taken, might be transmitted to the baby in her womb.

FORSAKEN ROSE

Forsaken Rose has also been used to demonstrate some of the modes by which HIV and AIDS are transmitted from one person to the other. In this film, unprotected sex is depicted as one of the ways through which HIV and AIDS are transmitted. The promiscuous sexual behaviour of Peggy puts her at the risk of being infected with HIV and AIDS. Although this character has succeeded in wooing Frank away from Tracy, she is still not satisfied with having Frank alone. She becomes unfaithful to him. Peggy is still interested in having secret

sexual affairs with other men around her. Her promiscuous attitude is made clear when she tries to seduce Mick into having an affair with her, in spite of their living together with her supposed fiancé, Frank. Being a discreet person, Mick turns down these advances from Peggy. As a result of Peggy being promiscuous, she gets infected with HIV because she has not been practising protected sex by using condoms in risky sexual relationships. This is portrayed to be the price of being unfaithful and promiscuous, and an indication by the film that promiscuous behaviour would put one at the risk of being exposed to HIV infection. This is a suggestion to the audience to desist from promiscuous acts and also to protect oneself by using condoms during risky sexual acts.

Peggy`s materialistic tendencies also could be seen as one of the reasons why she also involves herself in prostitution which leads her to be infected with HIV. Peggy is not independent financially to get all the things that she wants in life. Frank recognises that Peggy becomes very excited when she has the chance of getting material things. It is because of her materialism that she secretly collects a complimentary card from a stranger without the consent of Frank. She uses this card to trace where the man works. They eventually end up having a sexual relationship in Frank`s bedroom. She has been having sexual relationships with so many people that when she is about to separate from Frank, she informs Frank that the unborn baby she is carrying in her womb does not belong to him, but to someone else. The film through the character of Peggy, presents materialism and poverty as one of the driving forces that enhances the transmission of HIV and AIDS. Through the character of Peggy, the film is cautioning the audience to desist from materialism which has been the force behind Peggy`s infection with HIV.

Blood transfusion has been presented in the film as another means by which HIV and AIDS can be transmitted from one person to another. In *Forsaken Rose*, it is explicit that HIV and AIDS can be transmitted through blood transmission. Towards the end of the film, Frank poisons himself and he is taken to a hospital. The medical doctor recommends that additional blood is needed in his system. The medical doctor makes sure that the blood he collects from Mick is free from HIV and other diseases before using it on Frank. By presenting this scene, the film is trying to educate the audience that HIV and AIDS can be transmitted through blood transfusion and for this reason, care has to be taken when transferring blood from one person to another in order to avoid infecting someone with contaminated blood.

SIDA AU VILLAGE

Sida Au Village also presents unprotected sexual intercourse as one of the major ways by which HIV and AIDS are transmitted through prostitution. Fany, an orphaned child living with her aunt in town, is pushed to fend for herself at a very young age by her uncaring aunt. This gets her introduced into prostitution by her friends. In the course of prostituting, Fany gets infected with HIV by one of her clients as a result of her having unprotected sex with him. She confesses that it was through her friends that she learned to dress in a sexy manner in order to seduce men and have sex with them in hotels in exchange for money and material things. In like manner, Fany tries to advice Yaya, the local girl from the village, to engage into prostitution by dressing sexily in order to seduce the young boys and rich men in the village. This she says would fetch her good money and get her out of poverty. The film is using the character of Fany to demonstrate how bad advice from some friends about dealing with poverty is sometimes the reason why some women become prostitutes. Fany becomes a prostitute by adhering to the advice of her friends in town, which eventually leads her to be infected with HIV. On the contrary, Yaya is faced with the same situation, does not get infected with HIV because she does not practise what Fany tells her to do i.e. dress sexily in order to attract men who would give her money in exchange for sex. The film tries to portray prostitution as not being the best solution to poverty for it exposes people to the risk of being infected with HIV and AIDS as depicted with the character of Fany. Through the depiction of the characters of Fany and Yaya, the film is therefore castigating prostitution that is represented through Fany as being one of the means through which HIV and AIDS are transmitted.

Again, *Sida Au Village* presents the issue of promiscuity and multiple sexual partners as one of the fuelling factors for unprotected sex that enhances HIV and AIDS transmission. After being introduced to prostitution, Fany lives a promiscuous life with many sexual partners. She is not able to maintain a steady relationship, but is constantly moving from one man to another. She creates relationships with many men when she is in town, including the man she calls her boyfriend. In the village, she is preoccupied seducing young men, and even those that are old enough to be her parents, without discrimination. She ends up having relationships with people like Chief Gabana, Joseph and village notables like Souley and Tatchumso. All of these people are guilty of promiscuity especially Chief Gabana who already has eighteen wives, yet still has a sexual relationship with Fany. Through the issue of multiple sexual partners and promiscuity, the HIV that Fany has been infected with in town, is

able to circulate rapidly through the promiscuous men who have sexual dealings with Fany and who eventually infect their wives with the virus. This is coupled with the fact that these men in the village engage in sex with Fany without using condoms that could have protected them against being infected with HIV and AIDS. By depicting promiscuity as dangerous because it facilitates the transmission of HIV and AIDS, the film is educating the audiences to practice fidelity as a means of avoiding being infected with HIV and AIDS. The film makes it clear that it is because of the anxiety to have sex with Fany that the village men end up being infected with the virus as a result of engaging in an unprotected sexual encounter with her. Had it been that they remained faithful to their wives by not having any sexual dealings with Fany, they would have been safe from contracting HIV like the few people who have been tested HIV negative.

The three case studies therefore have depicted how HIV and AIDS are transmitted in an effort to inform, create awareness and educate the audiences on how to avoid being infected with HIV and AIDS. From the depictions in the case studies, a warning is sounded on the dangers of sharing sharp objects, having unprotected sex, unfaithfulness to ones sex partner, prostitution and also the importance of testing the blood for the HIV virus before blood transfusion is carried out. Although none of the three case studies talk about mother-to-child transmission, it still remains one of the ways through which HIV is transmitted (Magezi, 2007: 18-19).

CHAPTER III

HIV AND AIDS STIGMATISATION

Introduction

> AIDS-related stigma and discrimination refers to prejudice, negative attitudes, abuse and maltreatment directed at people living with HIV and AIDS. They can result in being shunned by family, peers and the wider community; poor treatment in healthcare and education settings; an erosion of rights; psychological damage; and can negatively affect the success of testing and treatment. (AVERT, 2011)

Deacon (2005) define stigmatised people as "people who possess a characteristic defined as socially undesirable; acquire a spoiled identity which then leads to social devaluation and discrimination" (Deacon et al, 2005: 15). They further quote Link and Phelan (2001) as defining HIV and AIDS stigma to exist when people distinguish and label human differences, and when cultural beliefs link labelled people to undesirable characteristics (negative stereotypes), where labelled persons are placed in some categories in order to achieve a certain degree of separation of "us" from "them," and in cases where they lose their status and are discriminated against, leading to unequal outcomes (Deacon et al, 2005: 21-22). HIV and AIDS patients face prejudice, and are blamed, treated as not equal to other people and then distanced by the communities in which they live. They are viewed as being different from "normal" people. They are sometimes refused access to places and facilities to which they have a right. Such discrimination is usually accompanied with the blaming model for being promiscuous or immoral.

Mishra, (2000), tells of a story of how a fellow migrant worker in India was stigmatised after he was infected with HIV:

> In 1996, Govind Singh, a 25-year-old migrant worker, left the village of Churcher in the Indian state of Uttar Pradesh to find employment in Mumbai. Like many of his fellow migrant workers, he slept with commercial sex workers. In 1999, when he began to feel tired and to lose weight, he went to Mumbai`s Laksh Deep

> Hospital for a check-up. He was HIV positive. Govind Singh`s fellow migrant workers, many of whom belonged to Churcher, wrote home to their kin that Singh had AIDS and that "nobody should touch, talk with, or see him. Too weak to work, when Singh returned to his village in April 2000, seeking shelter and care, he was shunned by his neighbours and family members, including his wife. Villagers dragged Singh into a *gote*, an enclosure for cattle and goats. His captivity became a centre of attraction for Churcher`s villagers, who peeped into the *gote,* teasing him about his promiscuity (Mishra, 2000: 40-41).

Many people who are HIV positive are considered as being punished for their supposed misdeeds. In some religious circles, they are viewed as people who are guilty of infidelity or promiscuity since most people believe that, HIV and AIDS is only transmitted through sexual intercourse. Because of such misinformation, HIV and AIDS patients are regarded with scorn, and inhuman treatment is meted out to them. According to Chirambo (2008), some of the HIV and AIDS patients are prevented from participating in public events in spite of their desire, potential and their capacity to perform better in such events i.e., contesting as a candidate in an election (Chirambo, 2008:316). Some of them even lose the right to medical aid, pension, life insurance and education. This is a blatant violation of human rights. In some cases, they are branded as promiscuous or immoral leading sometimes to the expulsion of the PLHA from church organisations and other social gatherings (Deacon et al, 2005: 16-17). All these are practices and attitudes that have been designed by the society to discriminate against HIV and AIDS people, which are not stipulated by the constitution (Chirambo, 2008:316).

One of the major consequences of stigma is that people tend to avoid going for HIV testing since they fear being stigmatised if their results show that they are HIV positive, and also because of the fact that HIV infection and AIDS do not yet have a cure. Ratele (2006) also indicates that:

> This stigma makes many people unwilling to disclose their status even to close family members, let alone to stand on public platforms and raise awareness of the ways in which social inequalities have increased their groups` vulnerability to

> HIV/AIDS and undermined their ability to cope with its ravages (Ratele, 2006: 174).

This renders the prevention of this disease difficult because people do not want to disclose their status. Being pronounced HIV positive would be looked upon as synonymous to being told to get prepared for death, in which case, the patient loses hope in life and most often stops investing in the future. Rupiya (2006) points out that HIV and AIDS stigma and denials usually create a situation that enhances the potential for an increase in HIV and AIDS infection as well as reducing the possibility of people to live responsibly and positively with the disease (Rupiya, 2006:27). This is because HIV and AIDS stigma and discrimination have proven to be barriers in accessing HIV and AIDS-related health care facilities. This discrimination encourages those who are infected with the virus to hide their status. By so doing, patients forgo opportunities like counselling, medical care, and even support from stake holders who could have a positive impact in remedying their condition. Prejudices and HIV and AIDS stigma have rendered the fight for the prevention and eradication rather difficult to attain completely.

The type of stigmatisation and discrimination that was prevalent in the mid 1980s is gradually giving way as people are being gradually educated. Chirambo (2008) observed that during that period, PLHA were "chased out of their homes – that relatives abandoned them with no one to support them" (Chirambo, 2008:316).

ANALYSIS OF CASE STUDIES:

A GIANT BROOM

In *A Giant Broom*, HIV and AIDS stigma plays a major role in shaping the course of the narrative. The film uses the character of Bandolo to portray how HIV and AIDS stigma is experienced in Cameroon. Bandolo is a dark skinned gentleman of average height and size, (and a friend of Lobteh), who through an irresponsible lifestyle of having many sexual partners, gets infected with HIV. Because of the fear of the stigma attached to HIV and AIDS, Bandolo does not want to believe the pronouncement of the medical doctor who tells him that he is HIV positive. He only thinks about death, and the fear that he will be rejected by the community. It is as a result of the stigma that Bandolo, in his vengeful nature, makes a decision not to die alone. He decides to infect other people with the virus, since he believes that HIV and AIDS are tantamount to death. It is as a result of the stigma attached to HIV and AIDS that Bandolo loses hope in life, and begins to live a reckless life of drinking and living a promiscuous lifestyle. He does not see anything worthy in life. Bandolo finds it difficult to disclose his status to people who are likely to have helped him go through the disease. Instead, he keeps knowledge of the disease to himself and this is why he has the opportunity to infect other people with the virus, i.e., because no one knows that he is HIV positive. By portraying HIV and AIDS stigma in the narrative of this film through Bandolo, the film depicts how dangerous stigmatisation could be in the fight against HIV and AIDS. Without the stigma attached to HIV and AIDS, Bandolo may have felt comfortable in telling people about his HIV status, and that could have alerted the girls he had infected with HIV not to have unprotected sex with him. The film also appears to indicate that because of the stigma attached to HIV and AIDS, it is difficult for an HIV infected person to get advice on how to protect himself and others when he is concealing his status from people for fear of being stigmatised and discriminated against. By depicting all of these issues, the film highlights how HIV and AIDS stigmatisation is dangerous, because of its adverse effects on both the HIV infected person whose fear of being stigmatised makes it difficult to access information about living with HIV and to support that is available for PLHA, as well as on the community that would be exposed to HIV and AIDS infection without being aware to take necessary precautions to protect themselves as has been the case with the girls that Bandolo infected with the virus.

The film also uses the character of Lobteh to depict issues of HIV and AIDS stigmatisation. Lobteh`s brother cannot bear the fact that Lobteh has been declared HIV positive. He bursts out crying, because according to him, Lobteh is now a different kind of person. He believes that Lobteh is fated to die soon. He is quite aware of the negative attitudes, i.e. stigmatisation, that would be expressed towards Lobteh and the psychological trauma that Lobteh would have to undergo as a result of being infected with the virus. That is why he keeps the yam he has been offered to eat with the notion that it would serve to feed the people who would come for Lobteh`s funeral. . Although educated, Lobteh is not free from being a victim of HIV and AIDS stigmatisation. He also believes death is imminent after someone is infected with HIV. Angry, he swears to kill the traditional healer for infecting him with HIV, and according to him, this has to be done before he dies of HIV. The representation by the film of Lobteh`s brother crying when Lobteh is proclaimed HIV positive, is a means of indicating the misconceptions about HIV that people have. This is because according to him, Lobteh is already doomed to die. The film also is trying to show how naive people are still when it comes to issues about HIV and AIDS. The film presents Lobteh as an educated person, yet he still believes that being infected with HIV, the end result would be death. This is depicted in his desire to kill the traditional healer for being responsible for infecting him with the virus. Through this behaviour of Lobteh, the film is depicting the unreasonable behaviour of people who have been diagnosed HIV positive without being given any proper counselling.

Stigmatisation is also represented again in *A Giant Broom* through the character of Nchumuluh. Because of a steady rise in the prevalence of HIV and AIDS in the community, he tells the "Fon" (traditional ruler) that soon there would be no sons to fire guns during funerals (a tradition during funeral ceremonies). According to him, all the sons would be infected with HIV and AIDS and all of them would die before their parents. This means that to him, being HIV positive means that one is inevitably going to die. This is one of the reasons why HIV patients are viewed as "living corpses" and are treated as such.

A Giant Broom also sets out to offer hope that the stigma attached to HIV and AIDS could be challenged in spite of the various deep-rooted misconceptions about HIV and AIDS. Towards the end of the film, Lobteh and Bandolo "come out" without fear of being demeaned or discriminated by the community as has been the case before, and publicly declare their status of being HIV positive to a huge gathering at the "Fon`s" palace. With the acclamation and decoration that they receive because of this gesture, the film educates its viewers on the possibility of people challenging the stigma attached to HIV and AIDS, and working together

as a community in order to combat HIV and AIDS. It is for this reason that the film presents Lobteh and Bandolo defying the stigma that is usually attached to HIV and AIDS, proclaim their status without the fear of being discriminated against, and form an NGO to sensitize, educate and create awareness about HIV and AIDS related issues.

FORSAKEN ROSE

In *FORSAKEN ROSE,* Honourable, the character who is caught in a sexual act with Peggy and who supposedly infected Peggy with HIV, finds himself infected with HIV and he knows that if he makes it known to the general public, he is going to be despised and lose some of his basic rights as a human being. It is because of his fears of being stigmatised that he conceals his HIV status from Peggy. Coupled with the loss of hope in life and the desire for revenge for having been infected with the supposed 'deadly' disease, he infects Peggy with HIV by having unprotected sex with her. On her part, Peggy is represented in the film as being aware of the behaviour of the community towards her if they should know that she is HIV positive. She understands the stigma and discrimination that comes as a result of being infected with this disease. With the misconception that HIV is equivalent to death, Peggy does not feel like continuing to live. She decides to take her life. In order to punish Honourable for infecting her with the virus, she shoots him to dead before poisoning herself. All of this is happening because she is not ready to withstand HIV stigma. Through depicting the various manifestations of stigma in this film, the film is trying to how expose how HIV and AIDS stigma makes people to lose hope in life. This they begin by concealing their HIV status from other people and in the course of doing this, they infect people with HIV. The film presents Honourable as concealing his HIV status from Peggy and having unprotected sex with her that results in Peggy being infected with the virus. The film also depicts the desire for revenge once someone realises that he/she has been infected with HIV. This is made clear in the scene where Peggy goes and kills Honourable for infecting her HIV. The film further emphasises the loss of hope by people infected with HIV when it depicts Peggy poisoning herself to death because she has found out that she is HIV positive. All of this portrays how traumatised the PLHA are, especially when they do not receive any proper counselling on HIV and AIDS.

The film presents Frank as being infected with HIV by Peggy, his supposed fiancée. In the hospital bed, he is traumatised when he becomes aware that he has been infected with HIV. He wonders how his future is going to look, living with HIV. This is aggravated by the fact that his bank account gets frozen, making it difficult for him to meet his health expenses. In

an attempt to restore Frank`s psychological health, Mick and Tracy, Frank`s friend and former fiancée respectively, opt to assist him with health issues. They also decide to support him in all the life challenges that he is about to encounter due to his HIV status. This humanitarian gesture that they show to Frank is the result of the advice that the medical doctor gives them. He says that if they have to assist Frank, then what Frank would need at the moment would be a good diet, a lot of care and concern, which would then keep him out of trouble and clear or reduce the psychological trauma that he is undergoing as a result of being HIV positive. Through this gesture of Mick and Tracy, the film challenges the myth that once infected with HIV, one does not have the right to enjoy one's inalienable rights as a human being. The film also depicts that by restoring the psychological health of someone living with HIV it becomes possible for that person to realise that there is reason to live and this makes him/her ready to face his/her life challenges in with some courage. The stigma that is attached to HIV and AIDS with all its negative impacts would be alleviated if HIV and AIDS is considered as any other illness, one that can be managed.

SIDA AU VILLAGE

In *Sida Au Village*, a number of issues that have been portrayed in the narrative of this film speak to the issue of HIV and AIDS stigma in Cameroon. The film presents Fany, the orphaned girl who drops out of school because of poverty and is later infected with HIV because she lives a promiscuous life, as feeling terribly depressed to the point of crying out when the doctor informs her that she is infected with HIV. This is because of the belief that the inevitable consequence of being infected with HIV is death, coupled with the stigma attached to HIV and AIDS that Fany begins to contemplate on how her life is going to look like with her having to live for the rest of her life with HIV. By portraying Fany`s friend screaming when she finds the doctor`s report which states that Fany is living with HIV, is another indication of how HIV is perceived with scorn by some people in Cameroon. Fany`s friend is worried about Fany having to face the pangs of stigma and discrimination as a result of being infected with HIV. When Fany makes this statement to her friend "tu vienne aussi te moquer de moi?" (Have you also come to laugh at me?), it is a clear indication that she is quite aware that everyone would despise her and discriminate against her for being infected with HIV. It is as a result of the fear of discrimination that Fany conceals her seropositive status from the community when she goes to her aunt`s (Makrita) village. By concealing her status, Fany succeeds in avoiding being stigmatised by the villagers, and as a prostitute, she

ends up infecting many villagers with the disease since no one is aware of the fact that she is infected with HIV. At this point, the film demonstrates to the audience how the fear of stigma and discrimination forces infected irresponsible people to conceal their status, thereby paving the way for them to infect people with HIV by having unprotected sex with them. The case of Fany is a direct contrast to that of Lobteh in *A Giant Broom* who because of his responsible nature, defies the issue of stigmatisation and publicly declares himself HIV positive and lives a positive life by trying not to infect some other person with the virus.

The fear of being discriminated against and stigmatised by the community also accounts for the absence of many people from the arena where the results of the HIV and AIDS test are to be proclaimed. Many people would not want their status to be publicly disclosed and this makes them stay away for fear of being shamed if they should be proclaimed HIV positive. The issue of stigma in *Sida Au Village* is aggravated when all the villagers who have been tested HIV positive have their test results disclosed publicly. While some people cry for the fate that awaits their relatives and friends who have been discovered to be HIV positive, others boo and jeer at them for being promiscuous. This booing and jeering is already the beginning of stigma and discrimination being meted out to them. The manner in which they would be viewed by society would obviously have to change and this is the reason why their relatives and friends sympathise with them. Even back at home, Fany, her brother Nono, Makrita and her husband all begin moaning after discovering that they have been infected with the HIV virus (except Nono). According to them, there is no future for someone who is infected with HIV and AIDS and they also become aware that the society would obviously consider them as outcasts because of their new status. By presenting the scene where the HIV and AIDS test results are released publicly, the film demonstrates the negative consequence of such an act as it promotes stigmatisation. Those who are found to be living with HIV are booed and jeered, and this shows the segregation that is beginning to be made against them. Through its representation, the film illustrates the negative consequences of public proclamation of HIV and AIDS results. In its representation, some people boycott attending the meeting where these results are to be made known. They therefore miss the post-test counselling in which information and education about avoiding and living with HIV and AIDS is given to those who have been tested. This could be the reason why the spread of the virus remains difficult to combat because such people continuously spread the virus as a result of lack of information and education about HIV and AIDS.

FINDINGS AND RECOMMENDATIONS

HIV-related stigma has remained a major hindrance in the fight against HIV and AIDS. The fear of being discriminated against has often prevented people from going for voluntary testing, seeking treatment and admitting their HIV status publicly. Because the laws and policies alone cannot wipe out the stigma that surrounds HIV and AIDS infection, HIV and AIDS education in Africa, especially in the sub-Saharan region where the prevalence rate is highest in the world – two third of all the infected people accounting for 68% (World HIV & AIDS Statistic Commentary), is needed to be improved in order to challenge the ignorance that causes people to discriminate.

Because of the stigma and discrimination that comes with being pronounced HIV positive, the people of Lebangwa, where the government sends health workers to create awareness about HIV and AIDS, are depicted as being very reluctant to do the HIV and AIDS test that the medical team wants to carry out. It is through the Chief`s decree that everyone present is made to do the test. The fear of being a victim of HIV and AIDS stigma and the desire to infect other people with the virus pushes Bandolo, in *A Giant Broom,* to conceal his seropositive status. This accounts for the ease with which he infects people with the virus since they do not know that he is HIV positive. The film also presents the same reason as accounting for Honourable in *Forsaken Rose* infecting Peggy with HIV as well as with Fany in *SIDA Au Village* who infects nearly the whole community with HIV since her HIV status has been concealed from everyone. Through the depictions in the selected case studies, there is no clear-cut reason why those who are HIV positive are depicted as bent on infecting others with the disease. Bandolo in *A Giant Broom,* Fany in *SIDA au Village* and Honourable in *Forsaken Rose,* fall under this category of PLHA, although not all PLHA are depicted as having this desire to spread HIV and AIDS (Lobteh in *A Giant Broom*). The inability of the community to understand why some of the PLHA would want to infect them with the disease makes them very sceptical about associating with them. It is for this reason that the community sometimes stigmatises and discriminates against people living with HIV and AIDS in order to place them at a distance that would keep them away from associating and eventually infecting other people with the virus. The depiction of this issue in all the selected case studies is a concern, because the repeated representation of PLHA as a threat to others, depicted as resulting from their desire to infect others as a form of revenge for their own

infection, provides a dangerous message that could increase discrimination and stigmatisation of PLHA.

It is because of the devastating effects of prejudice and stigma attached to HIV and AIDS that Boler (2008) suggests that prejudice and stigma should become a major priority in the fight against HIV and AIDS (Boler, 2008:18). The fear and prejudice that arises because of HIV and AIDS discrimination needs to be tackled at both community and national levels. People should be schooled to discuss freely their concerns about HIV and AIDS, and their health status without fear of any form of prejudice or stigma that could be attached to it by projecting such information in fiction films that treat HIV in their narrative. *A Giant Broom* presents a glaring example where HIV and AIDS stigma has been defied by characters such as Lobteh and Bandolo. Although they are HIV positive, the fear of stigma, discrimination and prejudice does not stop them from publicly declaring their status. The fact that they are decorated by the *fon* after this gesture indicates the importance of making one`s status known and the need for change of mentality as far as HIV and related stigma is concerned.

Forsaken Rose also present Mick and Trace as shunning the cruel and discriminatory attitude that people usually have for PLHA by supporting and assuring Frank of their unflinching support and care for him in this condition where he is infected with HIV. The material, financial and psychological support that they give Frank keeps him away from thinking evil. This restores in him some hope in life. The representation of this scene moralises on the importance of people to support and care for the PLHA since this care bring hope and optimism and encourage the desire to live. On the other hand, Singhal and Rogers try to advise the media not to portray HIV and AIDS as a disease restricted to gays, intravenous drug users and commercial sex workers because this sort of branding instils shame, fear, prejudice and eventually stigma and discrimination on people who happen to be tested to either have HIV or AIDS. (Singhal and Rogers, 2003: 285).

The press and the media can play a leading role in wiping away the stigma that has always been attached to HIV and AIDS. According to M^{c}Kee et al, (2004) this would call for serious research on the designing of such a program to come out with messages that resonate with the aspirations, fears and needs of the society targeted (M^{c}Kee et al, 2004: 38). The issue of communication in the dissemination of HIV and AIDS information cannot be overlooked. It is the manner in which the information is prepared and delivered to the public that change can be effected. Issues around HIV and AIDS should in this sense not be portrayed in a manner

that would be fear inducing, but carefully designed in a way that would reduce HIV and AIDS stigmatisation. Communication should dwell mostly on issues related to care, compassion, support and hope. Ogenga (2006) discusses how such communication and information on HIV and AIDS could be disseminated through mass media with the example of the *Tsha Tsha* and *Soul City* television series as case-studies of such entertainment TV programs in South Africa. These use the current social problems that resonate with the audience members to pass across messages in a subtle and entertaining manner, designed to capture the fancy of the audiences. Underneath these entertaining scenes, there is always a hint of some social issue that needs to be explored (eg.HIV/AIDS). He points to the fact that the "Entertainment-Education (E-E) Communication strategy" could affect the society either in a positive or negative way (Ogenga, 2006: 74). It would be derailing if the message focuses on those aspects that would promote the stigmatisation of people living with HIV and AIDS.

Films would also need to furnish the audiences with appropriate education as to what HIV is all about. This could include issues such as the fact that HIV is just a disease like any other one and that HIV and AIDS patients ought to be treated with love and care like other sick patients. Also, that being HIV positive is not synonymous to being told to get prepared to die, that people living with HIV and AIDS could still live a normal life as they would have done if they were not infected with the disease provided they are given the chance to interact freely and not made to think that they are outcasts or that they are going to die soon. Most often, it is the psychological trauma that they receive because of their condition that they die soon. People should therefore be encouraged to voluntarily test for HIV without fear of being stigmatised, because knowing one`s status, would be a step towards getting treatment in cases where the person is found HIV positive. It also opens up the PLHA to medical care and support from stakeholders which would have a remedying impact on the PLHA`s health conditions. This is glaringly represented in *A Giant broom* through characters such as Lobteh and Bandolo. They declare their HIV status publicly and with the formation of an NGO to combat HIV, it is apparent that through this NGO, stake holders in the fight against on HIV and AIDS would find it easier to get to them with the support package that is usually destined for PLHA.

CHAPTER FOUR (4)

COUNSELLING AND LIVING WITH HIV AND AIDS

INTRODUCTION

Counselling refers to the help that is given by someone to those who are either infected with or affected by HIV and AIDS, in order to help them cope with the awareness that they are infected or affected by HIV. This is usually a process of helping those infected with or affected by HIV and AIDS to develop a sense of both responsibility and hope when confronting the difficulties that they may encounter as a result of being infected with HIV and AIDS. Since there is no cure for HIV and AIDS yet, there has been the shift from curing HIV and AIDS to caring for HIV and AIDS patients. This has been taking the form of physical, practical, as well as psychological care that is usually given to people living with HIV and AIDS. This support is also given to those who are not HIV positive including those who have been affected by HIV and AIDS in order to provide them with the information to prevent being infected with HIV. This means that from the time that one gets infected with the virus, there is the need for the patient to be given some psycho-social support, as well as supporting his or her loved ones even after his or her death (Uys and Cameron, 2003:51). In other words, counselling includes the psycho-social preparation of an individual before and after an HIV test which is supposed to take place in a favourable environment and with guaranteed confidentiality. This has to be voluntarily accepted by the person who is being counselled and not imposed on him or her (Rupiya, 2006:82).

Counselling for HIV and AIDS aims at promoting the acceptance of HIV and AIDS diagnosis of the client and helping patients develop a positive attitude in dealing with the diagnosis. It supports the person diagnosed with the virus to develop the confidence to disclose his/her status to sexual partners and Family/Friend Caregivers (FCG). Through counselling, the patient is also educated on how to avoid cross-infection, how to prevent infecting other people with the virus, understanding of the illness, and living a healthy lifestyle i.e. through sexual abstinence and the correct use of condoms (Uys and Cameron, 2003:7; and Rupiya, 2006:82).

It is widely recognized that individuals living with HIV and AIDS, who are aware of their status, and have basic knowledge about living with HIV and AIDS, are less likely to transmit HIV infection to others, and also, are more likely to access treatment, care and support that can help them to stay healthy for long.

In this chapter, I explore how the three case studies integrate issues of counselling, care and support for people living with HIV and AIDS into their narratives.

ANALYSIS OF CASE STUDIES:

A GIANT BROOM

A Giant Broom is one of the Cameroonian films that try to capture the manner in which HIV and AIDS counselling is usually carried out in a Cameroonian society. However, in the representation of counselling sessions, the counselling scenes are presented as happening only after the HIV and AIDS tests have been done, i.e., Post-test counselling. The counselling before an HIV and AIDS test (Pre-test counselling) is not represented in this film. A case in point of where the post HIV and AIDS test counselling is represented in *A Giant Broom* is when Bandolo goes back to the hospital to get his HIV and AIDS test results. There he consults a medical doctor who before declaring his HIV status, tries to counsel him about HIV and AIDS. She advises Bandolo to follow his drugs (ARVs) prescriptions scrupulously. She also encourages him to practice abstinence but to always use condoms if he finds it necessary to have any sexual relationships, and to maintain a balanced diet that would provide him with nutrients in their right proportions. After advising him on how to live his life, she declares to Bandolo that he is HIV positive. She further advises him to consider this illness (HIV) like any other disease. She assures Bandolo that he could still live for the next fifteen to twenty years if he takes his medications as prescribed and lives a healthy lifestyle by either abstaining from sex, sticking to one sexual partner or by always using condoms when having any sexual relations. This is meant to help Bandolo cope with the stigma that is usually associated with HIV and AIDS. Through the advice that the medical doctor gives to Bandolo when he is diagnosed HIV positive, the film is trying to also advise the audience to follow the prescriptions that the medical doctor gives to Bandolo in case one finds oneself in a situation of being infected with HIV.

HIV and AIDS post-test counselling in *A Giant Broom* is also represented through the characters of Lobteh and Faith. In the depiction of their joint counselling session, both Lobteh and Faith are commended by the medical doctor for practising abstinence for the six years that

they have been dating. Sexual abstinence, as indicated by the medical doctor, is one of the best ways by which HIV and AIDS could be avoided. Nevertheless, the doctor declares Lobteh as being HIV positive. This, the medical doctor does without giving him any psychological preparation that has to precede the declaration of one`s status after an HIV test has been conducted. Additionally, HIV counselling sessions are supposed to be a matter between the counsellor (here the medical doctor) and the person who is being counselled. The doctor in this case gives a joint counselling session to Lobteh and Faith, thus violating the norms of the medical field that stipulates confidentiality in the declaration of one`s status (Rupiya, 2006:82). The absence of proper counselling before Lobteh`s status is declared ends up traumatising him and this accounts for his stormy walkout from the medical doctor`s office without any formal greetings to the doctor and also leaving behind his fiancée with whom he had come to meet the doctor for the HIV and AIDS test. Lobteh`s emotions could have been soothed if he had been psychologically prepared and advised on how to live with HIV. By presenting the doctor to be commending both Faith and Lobteh for abstaining from sex for six years of dating, the film is encouraging the audience to practise abstinence before marriage in order to avoid being infected with HIV and AIDS. For the fact that the film presents the character of Lobteh as abstaining from sex, yet being infected with HIV, it is depicting the fact that abstinence alone is not the only way by which HIV can be avoided. This is the case with the depiction of Lobteh who because of carelessness, gets infected with the virus through the contaminated "ancestral" razor blade of the traditional healer.

From the depiction of the aftermath of some of the counselling sessions, the film seems controversial as far as the outcomes of these counselling are concerned. In the first case, the film presents the outcome of Bandolo`s counselling to be without any positive effect. Bandolo is not convinced, even after he has been counselled, that he could live a normal life even though he is HIV positive. This accounts for the fact that he still conceals his HIV status and consciously infects people with the virus. The manner in which the film presents this scene is contradictory with the way Lobteh behaves after he is counselled for HIV. In the case of Lobteh, the film depicts him as adhering to the issue of living positively with the virus and it is for this reason that he ends up being the one advising Bandolo to live positively with HIV unlike Bandolo who after being counselled, develops the desire to revenge by infecting other people with the virus.

FORSAKEN ROSE

Forsaken Rose is another fiction film produced in Cameroon in which the issue of HIV and AIDS counselling have been represented. In one of its scenes, Honourable is presented as a care-free and reckless person. Although he is HIV positive, he does not care about protecting other people from being infected with HIV by consistently using condoms in sexual encounters. This is because he has not been depicted as someone who has been given any counselling that could have informed him of the advantages of living positively with the virus, in which case he would live longer, and also the dangers of re-infection. The presentation of Honourable by the film as someone who has not been given any counselling makes him lose hope in life. This accounts for his decision to infect other people with the virus so that he does not end up dying alone, which is the misconception that some people have about people who have been infected with HIV and AIDS. He also could have been afraid to come out as a carrier of the virus for fear that he was going to be stigmatised. Because he has not been given any counselling, he easily develops a vengeful attitude which accounts for the reason why he infects Peggy with the virus by having unprotected sex with her. This may have been averted if he had been educated on how to live a positive life which could have been a guarantee to him for a longer life while living with HIV. By portraying this behaviour of Honourable as rash because he has not been given proper counselling after being diagnosed HIV positive, the film is attempting to indicate to viewers that proper counselling for people who are diagnosed HIV positive is important in order for the fight against HIV and AIDS to be effective. This means that proper counselling would put such individuals into a proper psychological situation where they would accept they can live positively by not infecting others with the virus, and by taking good care of themselves not to get any re-infections.

On her part, Peggy, the character who infects Frank with HIV, is also portrayed by the film as an HIV patient who does not receive any counselling after she is pronounced HIV positive. With little or no knowledge on how to live with HIV and AIDS, she finds it very difficult to cope with the virus in her, for fear that she would be stigmatised and discriminated. She is overtaken by the urge for revenge for having been infected with the virus. This compels her to shoot and kill Honourable, whom she believes to be the one responsible for infecting her with the virus. She finally commits suicide since, according to her, death is the inevitable end of someone infected with HIV and AIDS. The film, by presenting this situation, is trying to portray how dangerous it is for someone to be living with HIV without having received any counselling. According to the film, such a person would be liable to become psychologically traumatised and end up taking irrational decisions like the one that the character of Peggy

takes by killing Honourable and poisoning herself. In this light, the film is creating awareness on the importance of proper counselling to be given to anyone who is found to be HIV positive in order that he or she does not get psychologically traumatised and take unwise decisions like either infecting others with the virus or killing himself or some other person like Peggy has been depicted to have reacted in her case.

In another instance, HIV and AIDS counselling is represented in *Forsaken Rose* in the scene where Mick and Tracy, the friend and former girlfriend of Frank respectively, opt to donate blood for Frank. In order for their blood to be used, the medical doctor has to make sure that the blood is void of HIV by conducting HIV and AIDS test on both of them which in the end shows that they are HIV negative. Engaging them in a post test counselling, the medical doctor implores them to soften their hearts towards Frank. He advises and educates Mick and Trace that being HIV positive does not mean that one is going to die soon. He implores them to show Frank love and care. The doctor in his counselling of Mick and Trace also ask of them to assist Frank in taking his medications as indicated, to eat a balanced diet and to help him live a positive life. With the implementation of the education, awareness and advice that the medical doctor gives them, Mick and Trace show love, care and support to Frank which keeps him psychologically healthy. It is for this reason that the film depicts Frank not showing any signs of trauma that some of the HIV and AIDS patients would normally have because they are stigmatised by having HIV and AIDS. In the film, the depiction of characters like Mick and Trace coming close and assisting Frank who is HIV positive, is trying to educate the audience that the discrimination that is usually apparent against the PLHA could be reversed with love and care, which would facilitate the PLHA to cope with living with HIV and AIDs. The film also is educating its audience through the advice that the medical doctor gives to Mick and Trace which shows that being HIV positive is not tantamount to dying. This seems to be the misconception that many people have about HIV.

SIDA AU VILLAGE

Sida Au Village is also endowed with scenes that depict the issue of HIV and AIDS counselling. The film presents Fany, the orphan child who drops out from school because of financial constraints and engages in prostitution, as having gone for an HIV test with the test results stating that she is HIV positive. In her case, she meets with a doctor who tells her that she is HIV positive without giving her any counselling or education about what HIV and AIDS are, and also about living with HIV and AIDS. According to the depiction of the film,

Fany begins to doubt the veracity of the results and she even tells the doctor that the result given her is not hers. She eventually gets psychologically traumatised after the proclamation of this result, and leaves the doctor`s office devastated, since the doctor did not give her any education or advice about HIV which could have calmed down her emotions and restored her hope in life. This is because she thinks and believes that having been proclaimed HIV positive, she is gradually going to die. From the film`s representation, it is evident that this lack of counselling is what later causes Fany take the decision to propagate the virus to the whole village through seducing and having unprotected sex with both the young men and old men of Lebangwa village. By presenting this scene in *SIDA au Village*, the film creates awareness to the audience by letting them understand that the lack of proper counselling makes it easy for the PLHA with little or no information about living with HIV and AIDS to contemplate doing evil to themselves or to other people, since the notion that people usually have when they are declared HIV positive is that they would die soon.

The film seems to suggest that people with HIV and AIDS are likely to fear dying alone, especially in situations where they did not receive any proper counselling on how to live with the virus, and that because of this, they would seek ways of infecting others with the virus as a way of getting revenge for being infected with HIV. It is Fany`s friend who tries to educate Fany about what HIV and AIDS is all about. She gives Fany psychological relief through her advice, as well as financial support. In her counselling of Fany, she tells Fany to consider HIV and AIDS like any other illness and that the most important thing she has to do is to take good care of herself. Although Fany complains about being abandoned by her friends, this friend shows some concern and warm attitude towards her. Although her closeness to Fany and the advice she gives her reduces the psychological trauma that Fany has been going through, Fany still goes on to propagate the virus in the village as a result of her not having proper counselling on HIV and AIDS. The counselling that Fany`s friend give her is not enough. Through the depiction of this situation with Fany, the film is advocating for proper counselling to be given to people who are found to be living with HIV and AIDS. Maybe if Fany had received proper counselling from a well trained counsellor and not from her friend, she would be convinced about what the counsellor was going to tell her. By not giving Fany proper counselling, the film is trying to depict the lukewarm attitude of the health services in Cameroon towards rendering proper services to the citizens.

Towards the end of the film, there is the presentation of a medical team that that is sent by the government to the village of Lebangwa to educate and sensitise the people of this area about malaria as well as HIV and AIDS. During the sensitisation session, the team realises the need for HIV and AIDS testing to be carried out, and for this reason, the team decides to give general counselling on the issue of HIV and AIDS. As the film presents it, the team of the medical personnel educates the people of Lebangwa that AIDS is a disease like any other disease. They also mention that it is transmitted through sexual relationships as well as through blood contamination with the use of unsterilized sharp objects that are contaminated with HIV. They advise the whole community to desist from sharing sharp objects like blades and needles, to practise abstinence, to be faithful to one`s sexual partner, and to use a condom in a new relationship or in risky sexual encounters. This is enhanced by a demonstration of how a condom should be used, with emphasis on always checking the expiry date. This is to ensure that the condom is still strong enough and is not liable to break in the process of the sexual activity. The whole community is also advised to go for HIV and AIDS testing regularly in order to be aware of their status.

After the testing has been done, the results are proclaimed the next day. Through the decree of Chef Gabana, the results are proclaimed publicly. The public proclamation of people`s HIV and AIDS test results is against the ethics of the medical profession. The film presents the counselling session as being done after the results of the HIV test are released and in the absence of those who are found positive as they are taken out of the counselling arena immediately they are proclaimed HIV positive. This could be seen as the beginning of stigmatisation that (a) has been caused by the public declaration of people`s test results, and (b) excluding from post-test counselling those who have tested positive.

In carrying out post-test counselling, the health team tells the people who are HIV negative that HIV and AIDS are just like any ordinary disease and reiterate the importance of the HIV and AIDS patients to be treated like any other sick persons. During the counselling session, the health team implores the whole community to help those who are infected with HIV and AIDS financially and psychologically. They are told that if the people who are infected with HIV and AIDS take their medications properly, they are going to live for a longer time. The whole community is asked to work in solidarity in fighting against HIV and AIDS infection in a bid to save the village and the country from the HIV and AIDS epidemic. By depicting the coming of the health team to the village of Lebangwa and their subsequent counselling and

testing services, the film is trying to portray how the government of Cameroon, through its health services, is actively involved in the fight against HIV and AIDS by creating awareness about HIV and AIDS, and rendering counselling services to its people. The film is also portraying the issue that although the fight against HIV and AIDS is encouraged in Cameroon through the organisation of regular campaigns by the government, counselling and testing for HIV and AIDS still do not attain its desired objectives. Instead, this situation is presented as sometimes enhancing stigmatisation as some authorities, as depicted through the character of Chief Gabana, misuse their powers by compelling the health personnel to go against their professional ethics and do what is not medically right. This situation is represented in the film by the fact that Chief Gabana compels the health team to publicly proclaim the test results and also the fact that the post test counselling is carried out when the HIV victims have been moved out of the counselling arena. The film also projects the inability of the health personnel to remain faithful to the norms of their profession by allowing to be manipulated by Chief Gabana, in which case, they distort the normal course to be taken during counselling and testing for HIV and AIDS. This instead renders it difficult for the fight against HIV and AIDS to be successful since the potential people living with HIV and AIDS do not get the information and education about living with HIV which could help them protect themselves from infecting others or being re-infected with the virus.

FINDINGS AND RECOMMENDATIONS

Up to the present moment, no cure for HIV and AIDS has been found, despite ongoing research. The absence of a cure for HIV and AIDS makes the need for prevention against HIV and AIDS infection as well as the care for people living with the virus very important in the fight against HIV and AIDS. This prevention and care has been found to be made easy through HIV and AIDS counselling and testing. This counselling for HIV and AIDS has been found to be necessary for both those who are infected with HIV and AIDS and to those affected by HIV and AIDS, as well as traditional leaders and healers. Proper counselling of people who are infected with HIV and AIDS helps them feel free in discussing their status with Family/Friend Care Giver (FCG) without fear of stigmatisation. It also gives them education and information on how to avoid cross infection as well as infecting other people with the virus. Counselling also would help to inform them on how to live a healthy life style. This could be by practising abstinence, through the correct use of condoms (Uys and Cameron, 2003:7; and Rupiya, 2006:82), by having a balanced diet, and by regularly taking ARVs as prescribed.

It is problematic that in most of the selected case studies, HIV and AIDS counselling have only been represented as taking place after the HIV and AIDS tests have been carried out. This has been the case in *A Giant Broom* where HIV and AIDS counselling is represented through characters such as Bandolo and then on Lobteh and Faith. In *Forsaken Rose*, there is only the representation of post-test counselling carried out on Mick and Tracy as well as that on Fany in *SIDA au Village*. Proper HIV and AIDS counselling is supposed to begin with a pre-test counselling and then post-test counselling. It is insufficient and misleading to represent only the post-test counselling in HIV and AIDS films that are geared towards educating the viewers, as this provides incomplete information as to how the procedure of HIV and AIDS counselling is supposed to be carried out. It would be more effective from an

educational point of view if proper HIV and AIDS counselling was represented in these films in such a way that the audiences understand that there is supposed to be pre-test counselling which is supposed to be followed by post-test counselling. The depiction of pre-test counselling in these films could be an opportunity to educate viewers both with regard to disseminating information about ways of lowering the risk of HIV and AIDS infection, as well as reducing fear of the testing process. Vital information and education that could encourage viewers through the representation of pre-test counselling sessions in some of these films is lacking. This type of proper counselling is represented in *SIDA au Village* by the medical team that comes to the village of Lebangwa for the purpose of creating awareness and education about HIV and AIDS but is undermined by the fact that the test results are proclaimed publicly. Before carrying out the HIV and AIDS tests on the villagers, they provide some elementary information as to why it would be necessary to test for HIV and AIDS and what HIV and AIDS is all about. In like manner, they carry out post-test counselling on the whole village before proclaiming the test results to the people concerned.

Rupiya (2006) confirms that counselling has to be carried out in an environment with a favourable and guaranteed confidentiality and not forced on someone like it has been the case with the representation of counselling in some of the HIV and AIDS fiction films in Cameroon (Rupiya, 2006: 82). In *SIDA au Village*, the film depicts HIV and AIDS testing and counselling as being forced on the people of Lebangwa by Chef Gabana. The medical team that comes for this exercise goes against the ethics of their profession which stipulates that counselling and testing should be voluntary. They do this by accepting the dictates of Chef Gabana to administer forced counselling and testing on the people of Lebangwa. They also go against their professional ethics by proclaiming the HIV and AIDS test results in public. This is a contradiction of the argument put forward by Rupiya (2006) that HIV and AIDS test results should not be released in the presence of parties who are not directly involved in the test (Rupiya, 2006: 82). This public proclamation of test results would usually stigmatise those who are proclaimed HIV positive with all the negative effects of HIV and AIDS stigma (Deacon et al, 2005: 15). For this reason, HIV and AIDS counsellors should always adhere to the dictates of their profession. They have to ask for the approval of the person concerned before carrying out counselling on that person. Counselling should not be forced on someone as is the case with what happens in the village of Lebangwa, as represented in *SIDA au Village.* The counsellors should also remember that it is not proper to release HIV and AIDS

test results in public places for this would only enhance the stigmatisation of those who would be proclaimed HIV positive.

These films draw our attention to the fact that proper training needs to be provided to those health-care personnel involved in HIV and AIDS testing. The media, and in this case, the fiction films can play a role in informing audiences about their right to demand both the pre-test and post-test counselling, and the right to have their test results given to them privately. This would encourage people to feel secure and thus be encouraged to go for counselling, which is a prerequisite for HIV and AIDS testing.

CHAPTER FIVE (5)

CONCLUSIONS AND RECOMMENDATIONS ON THE RESEARCH WORK

From the various depictions in the selected case studies, these films do not only preach about HIV and AIDS, but they also present situations that are entertaining through the various digressions that they present in their narratives. In *A Giant Broom*, it is humorous when Ma Shurubi, one of the village ladies, is caught in a promiscuous act and accused by Nchmuluh of "harvesting" people`s husbands. The whole scene is full of humour through their exchange of words. Through the use of this humour, the film attempts to indicate the level of promiscuity in the community which also indicates how HIV and AIDS are transmitted in this community. Another scene that is entertaining is that in which Nchumuluh uses his wits to get palm wine from the *Fon.* He does this by engaging the *Fon* in praises and quibbles, and by constantly asking the *Fon* to give him more palm wine in order for him to continue with his information. Even the people around him could not control their laughter whenever he used his intelligence to get more palm wine from the *Fon*. In the representation of this scene, the film presents, through the character of Nchumuluh, the devastating consequences of the spread of HIV in the community. This is when he sounds a note of warning that in the future, there would be no sons to bury their parents. This is a hint that if something is not done, young men would all die of HIV and AIDS. The depiction of traditional dancing in *A Giant \Broom* is also very entertaining as well as a means to digress from the preachy representations about HIV and AIDS.

In *Forsaken Rose*, entertainment elements are presented in the various intrigues by Peggy. In the scene at the restaurant with Frank, it is interesting to watch Peggy and Honourable playing games on Frank. On their way out, Peggy complains about her foot, and when Frank bends down to see what is happening with it, she hurriedly picks up the complimentary card that Honourable had secretly placed on the table for her. The most part of this film is about love

relationships between Frank and Trace, Frank and Peggy, and Mick and Trace. It is interesting how Peggy is influencing these relationships with her intrigues. The scene where Peggy is caught in bed with Honourable is also comical as the film presents Honourable struggling to gather his clothes and run out of the house. This film uses these scenes to digress from the overtly serious issues, as well as present the promiscuous life that some people engage with, and are eventually infected with HIV. These scenes are also presented in order to indicate the adverse effects of having numerous sexual partners who engage in unprotected sexual interactions. This is the case with Peggy, who is seen to be promiscuous and who practices unprotected sex, thereby becoming infected with HIV. The film presents her as being in love with Frank, and later, presents her as being unfaithful to Frank when Frank red-handedly catches her in bed with Honourable. Another instance of entertainment in *Forsaken Rose* is the pranks played by Neburuh, Trace's gate man, on Frank when Frank comes back looking for Trace. Neburuh laughs and jeers at Frank for losing his fiancée, Trace, to Mick. Another instance of humour is in Neburuh's confused state when relating the collapse of Frank by Trace's gate. On the phone, he tells Trace that Frank is dead and then immediately he changes the statement to say that Frank wants to die. His confusion in giving the information about Frank's sudden collapse and becoming unconscious is accompanied with a lot of fun. All of these scenes provide *Forsaken Rose* with digressions that make the film humorous and interesting to watch.

SIDA au Village also presents entertaining moments in order to capture the fancy of the viewers to watch this film. The scene in which Fany is in a night club, dancing, drinking and getting drunk, is interesting and full of humour. It is entertaining to watch people dancing haphazardly, smoking and drinking in a night club. Nevertheless, the film uses this instance of humour in order to present how living an irresponsible life can lead someone astray. It is through the presentation of Fany in the company of bad friends who encourage her to drink, smoke and go back home late at night that her aunt sends her away from the house, and she goes to live with her friends. These friends are the ones responsible for Fany's infection with HIV as they introduce her to prostitution, which she engages without protecting herself from HIV. Another scene that the film presents which is entertaining is when Fany gives Yaya, the local girl from the village of Lebangwa, make-up articles which she is unable to administer properly. It is entertaining watch Yaya and her friend trying with difficulty to use a lipstick for the first time in their lives. The fight between Makrita, Fany`s aunt, and the two jealous women is another scene of entertainment, when two boastful women are beaten by Makrita

when they attack her on grounds that she has not shared with them what her niece, Fany, brought from town. Although a sad scene because of the issue of death, it is humorous that Nono does not know the reason why Makrita and Fany are crying. He joins them and cries more than them only to be asked the reason for the moaning and he is unable to answer. The film uses this scene to portray how stigmatised HIV and AIDS are in the community. The fact that this family begin to cry when they become aware that some family members are HIV positive indicates their belief that being infected with HIV is tantamount to death.

All of these entertaining scenes provide a balance and counter point to the preaching about HIV and AIDS issues. These scenes offer opportunity for the viewers to laugh and find interest in continuing to watch these films that are also endowed with educational information about HIV and AIDS. That is, these scenes that harbour entertainment aspects help to draw attention to these films, and as such increase the number of people watching these films.

From what has emerged from the preceding chapters, it is evident that HIV and AIDS still remain a disease without a vaccine or cure. The epidemic still remain one of the big health challenges in Cameroon and throughout the world. The government of Cameroon, the non-governmental organisations and the stakeholders (GTZ, CERAC, DED and WHO) have been trying to combat and wipe out this pandemic. With the absence of a vaccine for the cure of HIV and AIDS, communication strategies would be representing a "social vaccine" that would be needed to be used against HIV and AIDS (Population Reports, 1989: 1). There is the need for information, awareness and education on relevant issues about HIV and AIDS in order for people to know how HIV and AIDS is transmitted, how to live with the virus, and the various ways by which one could avoid being infected with the virus. Being part of the fight against HIV and AIDS, the fiction films in Cameroon as well as other communication media like newspapers, radio, television and documentaries have always played a leading role in disseminating information that would create awareness and educate Cameroonians about what HIV and AIDS is all about, in a manner that would help to reduce, and hopefully put an end to the spread of the epidemic.

While some countries have been able to control HIV and AIDS, others are still lagging behind in controlling this pandemic. It has been realised that certain factors account for the ability of some nations being able to do so. Such factors have also been found to influence the HIV and AIDS situation in Cameroon. Cultural beliefs, the availability of resources, and the determination of national governments to combat this disease have been the driving force to

the control of the HIV and AIDS pandemic. Western Europe and the United States of America have witnessed a steady decline in HIV and AIDS prevalence rate as a result of implementing effective preventive programs on the knowledge about HIV and AIDS transmission with the practice of safer sex. This has been the contrary with poor, less developed countries like Cameroon that sometimes lack resources to fund programs on the preventive measures of HIV and AIDS (Singhal and Rogers. 2003:43-44). As a result of rising rates of HIV and AIDS infection, it would be beneficial to all the stakeholders to intensify all the preventive measures that have proven to be effective, so that at some time, the global AIDS epidemic would gradually come to an end. Films could also integrate such preventive measures in their narratives for the purposes of educating and informing the audiences.

Considering the fact that the highest HIV and AIDS infections are through unprotected sex (Mangesi, 2007), measures have to be taken to reduce behaviours that involve high-risk sexual interactions.

Through the depictions in the selected case studies, it has been emphasized that prostitution is one of the key factors that enhance the transmission of HIV and AIDS. In order to avoid the spread of HIV and AIDS through this mode, education and sensitisation campaign needs to be carried out with prostitutes that could encourage them to practise safe sex in order to protect themselves as well as their customers from being exposed to HIV and AIDS infections. Since prostitution has been found to result mostly from poverty, the government and stakeholders in the fight against HIV and AIDS should invest in long-term income generating activities for prostitutes so (Campbell, 2003:144). Also, in order to come out of poverty, the people should be encouraged to limit the size of their households.

Migration especially by mobile labourers, truck and lorry drivers is another factor that enhances the transmission of HIV and AIDS, as migrants usually engage in unprotected sex while they are away from their permanent homes. It would be advisable for them to practise the constant use of condoms in any risky sexual deal in order to protect themselves from being infected with HIV and AIDS (Poku, 2005: 83). The films could integrate such temptations and their consequences into their narratives as a way of highlighting this issue. Although not a migrant worker, Fany's movement from town to village has been the cause for the spread of HIV in the village of Lebangwa as she engages in unprotected sex with the men of that village. Again, abstaining from having sexual intercourse would be the best way of

protecting oneself when one is away from a permanent home, or away from a partner. Also, if possible, these migrants could travel with their spouses or partners to wherever they are travelling to. By always being together, they would avoid the temptations of engaging in risky sexual behaviours whenever they have an urge for sexual pleasure. In the case where the migrants have been having unprotected sexual behaviours in their outstations, it is recommended that they should go for an HIV and AIDS test before having any sexual interactions with their spouses or partners whenever they come back from their journeys. Films showing migrants and travellers testing themselves would be a helpful step towards communicating to people the importance of knowing their HIV status in order to protect themselves and their partners from getting infected with HIV. If they are found HIV positive, the recommendation here would be to always use condoms properly anytime having sex with their spouses or any other person in order to avoid infecting that partner with HIV. Research also shows that uncircumcised men have a higher percentage of being infected with HIV and AIDS (Poku, 2005:71), so films could be used to encourage the practice of circumcision..

Through this research, the selected films also depicted that some traditional and cultural practices have been responsible for the transmission of HIV and AIDS. An example of how traditional practices are responsible for the transmission of HIV and AIDS is in Dr. Shum's indiscriminate use of his "ancestral" razor blade that has been infected with HIV on his clients. This has always called for the need to influence the behavioural pattern of the people embedded in such traditional and cultural practices. In order to influence behavioural change, it is necessary to begin by looking at the people`s cultural background (Singhal and Rogers, 2003:204). Some of the behaviour of people is influenced by their culture. Knowing these cultures and being able to influence them to suit the HIV and AIDS education context would obviously have an impact on the people`s behaviour as concerns HIV and AIDS. Some of these practices that have been realised to fuel the spread of HIV and AIDS are the practice of multiple sexual partnerships and the practice of polygamy. Polygamy has been one of the issues found to encourage the transmission of HIV (Poku, 2005:74). This has been represented in *SIDA au Village* with the characters such as Fany, Chief Gabana and other men in the village of Lebangwa who have sexual dealings with Fany when they already have wives in their homes. In *Forsaken Rose*, this practise of multiple sexual partners id depicted through characters such as Peggy, Honourable and Frank, while in *A Giant Broom*, the issue of having multiple sexual partners is portrayed through character of Bandolo. All of these characters are portrayed by the various films to have been infected with HIV as a result of them having

multiple sexual partners with whom they practice unprotected sex. It has been found that people who engage in either multiple sexual partnerships or in polygamy are very much exposed to HIV and AIDS infections since they might not be able to control the sexual behaviours of the many partners that they have as opposed to cases where monogamy and the practice of adhering to a single sexual partner. The practice of multiple sexual partnership and polygamy should therefore be discouraged and ways should be sought for to extinguish traditions and cultures that promotes these practices. The press, radio, television, fiction films and the stakeholders in the fight against HIV and AIDS should gear their efforts towards discouraging these practices and encouraging the concept of one man, one wife, or the concept of having a single sexual partner. By identifying and discouraging traditions and cultures that encourage multiple sexual partnership and polygamy through representations in films, the rate at which HIV and AIDS is transmitted especially in the Muslim areas of Northern Cameroon would be reduced, as well as in other areas that adhere to such practices.

Another aspect that has been found to enhance the transmission of HIV and AIDS has been the denial and the rejection by some people of condoms. While some cultures encourage gender differences that make it uncomfortable for women to carry and demand for the use of condoms to their sex partners, some churches discourage the use of condoms and preach the doctrine of abstinence-only to their congregations. It is for this reason that stakeholders in the fight against HIV and AIDS, including filmmakers, should find ways that would effectively discourage the preaching on abstinence-only that is usually done by some churches (Mundell, 2010). Since it is difficult to predict human behaviour, it would be advised to prevent the spread of HIV and AIDS by encouraging the use of condoms rather than take the risk of insisting on abstinence which some people would find it very difficult to practice. In situations where gender differences account for the transmission of HIV and AIDS because of discrimination, laws should be enforced to enhance gender equality in every society. Gender equality would empower women, especially commercial sex workers, to have the ability to negotiate for safe sex by insisting on the regular use of condoms especially in risky sexual behaviours. Another cause for concern on the use of condoms has been the misconceptions that people have been made to believe about condoms. It has been claimed by some people that condoms are laced with HIV. This misconception has been deterring people from using condoms for fear that they would instead be infecting themselves with the virus. This fear of using the condoms has always pushed some people to engage in risky and unprotected sexual encounters that usually get them infected with HIV and AIDS because they could not protect

themselves against being infected with HIV. It is for this reason that the press, radio, TV and films should be used by stakeholders to educate and give pro condom information that could encourage Cameroonians to use condoms regularly without the fear of being infected with the virus from the condoms themselves. Films could be produced that encourage the use of condoms in their narratives. With the scaling up of the use of condoms through pro condom educational programs, HIV and AIDS infections would greatly be reduced, considering that HIV and AIDS infections are highly transmitted through unprotected sex.

Apart from having unprotected sex with an HIV infected person, another mode of HIV and AIDS transmission that this research work has come across has been through having intravenous contact with the blood of HIV infected people. People have been found to get infected with HIV and AIDS through sharing sharp objects like razor blades, needles and syringes (Poku, 2005:53). The issue of intravenous blood transfusion has also been highlighted in some films. This therefore imply that films that treat issues of HIV and AIDS could depict and castigate the indiscriminate sharing of sharp objects as well as encourage the testing of blood that has to be transfused to other people. Films need to inculcate in their narratives the recommendation of testing and screening of blood in cases where blood transfusion is supposed to be carried out like the situation in *Forsaken Rose* where the doctor has to test the blood of Mick and Tracy to make sure that their blood is void of HIV before using it on Frank.

Another mode of HIV and AIDS transmission that has been found in the course of this research is the mother-to-child transmission (MTCT) now popularly known as parent-to-child transmission (PTCT). The transmission of HIV from mother to child either at pregnancy, during child birth or during breastfeeding has also been realised to be a cause for concern for stakeholders in the fight against HIV and AIDS transmission. Since HIV and AIDS have been discovered to be transmitted from a mother to her unborn baby during conception, at child birth, and also in the course of breastfeeding the child, it is safe for pregnant women and nursing mothers who are HIV positive to constantly be on ART (antiretroviral therapy). Fiction films could encourage infected pregnant and nursing mothers to take Nevirapine which limits mother-to-child transmission (Singhal and Rogers, 2003:98). This could be achieved by depicting how ARV`s can help children of HIV infected mothers to stay safe of being infected with HIV during breastfeeding. By depicting the counselling of these pregnant women in fiction films would give them the necessary education and information about how to protect their babies from being infected with the virus either during pregnancy, at child

birth and during breastfeeding. Films could also encourage all women who are HIV positive to enrol in the ARV program in order for them to be regularly updated about ARVs and also have access to the ARVs. With these depictions, the films would have informed and educated its audiences on the proper taking of ARVs that would help keep them from eventual death as a result of being infected with HIV.

The second aspect that the research looked into was the issue of HIV and AIDS stigma. The fear of being stigmatised and discriminated if they are tested HIV positive, has always made people not to go for VCT. As a result of the stigma on HIV and AIDS, the people who fear to be counselled and tested for HIV and AIDS could be living with the virus and for the fact that they are not aware of their status, they may be going around infecting other people with the virus. Moreover, since they have not been given any education on how to live with HIV and AIDS that they could have had in the course of counselling, they would most often engage in risky situations that would accelerate the deterioration of their health conditions leading to the death of the PLHA. In order to fight against the stigma on HIV and AIDS, there should be public interventions to limit the stigma and discrimination against PLHA. Laws should be promulgated that would ensure that the rights of the PLHA are respected and also to ensure that the PLHA are incorporated in all aspects of the social life. Most importantly, the manner in which the messages about people living with HIV and AIDS are presented in films would greatly influence the stigma that has always been placed on them. The messages that are presented by the press, radio, television, fiction films, documentary films and health institutions about the PLHA should avoid presenting HIV/AIDs issues in a manner that could increase stigma and discrimination. Instead, such messages should strive to accommodate and make the public understand that the PLHA have the same inalienable rights as any other human being. With proper messaging about HIV and AIDS in fiction films, people`s perception about HIV and AIDS would be changed so that HIV and AIDS could be viewed like any other disease.

In another perspective, fiction films should encourage PLHA to defy the stigma by feeling free to discuss about their HIV status as has been the case in *A Giant Broom* with Lobteh and Bandolo . By coming out of the closet and openly discussing about their status, the PLHA would be able to have access to information about living with HIV and AIDS as well as be open to the support that some health institutions and NGO's usually give to people living with HIV and AIDS. Those people who because of the stigma attached to HIV and AIDS could not be tested for fear of being proclaimed HIV positive would also have the courage to test for

HIV and AIDS as a result of being guaranteed that they would not be discriminated against. This would also help those people who would be ready to be tested for HIV and found out that they are HIV positive to feel comfortable in accessing information and education about living with HIV and AIDS, and how to protect themselves from any re-infection or infecting other people with the disease. Having cleared away the stigma attached to HIV and AIDS, the spread of HIV and AIDS through ignorance or by not being aware of one`s HIV status would be reduced since people would feel comfortable to test for HIV, know their status, and then prevent infecting other people with the virus or getting re-infections. In like manner, the absence of stigma would assure those who are already infected with the disease of not going to be barred or discriminated from acquiring the treatment and care that is always available for them through health institutions (Deacon et al, 2005:83).

Another issue that the research looked at was the issue of HIV and AIDS counselling. Counselling has been found to be very important in the fight against HIV and AIDS because there has not yet been discovered a cure for HIV and AIDS. The lack of a cure for HIV and AIDS has made it necessary for people living with HIV and AIDS to be taken care of either physically or psychologically. The care that is available through HIV and AIDS counselling has been realised to;

- Create awareness and educate on how to prevent someone from being infected (for those who are HIV negative).
- Educate on how to live with the virus (for those who are HIV positive).
- Educate on how to protect someone from infecting other people with the virus.
- Give information to people living with HIV and AIDS about programs that assist and care for people living with HIV and AIDS.

It has been found that although the issue of counselling has always been represented in Cameroonian fiction films, most of the representation fall short of the standards in which counselling is supposed to be carried out. In some, the manner in which HIV and AIDS counselling is represented can be tempting in that it could make the viewer have the misconception that that counselling is only done when an individual has been tested already. This is the case with the representations of the counselling that is done for Bandolo and then for Lobteh in *A Giant Broom*, Mick and Tracy in *Forsaken Rose* and for Fany in *SIDA au Village*. In spite of these controversial representations of counselling sessions, there have also been some cases whereby both the pre and post test counselling have been represented. This is evident in *SIDA au Village*. It is therefore recommendation that since a proper counselling on HIV and AIDS should comprise both the pre and post test counselling, this should be

represented in fiction films in order for the viewers to have an idea of how and what HIV and AIDS counselling is all about.

Another issue which the research has come across concerning HIV and AIDS counselling is the importance for the counselling sessions as well as the status of the counselled person to be kept confidential from other people. This means that HIV and AIDS counselling sessions must always be carried out in an environment which is favourable and guarantees confidentiality (Rupiya, 2006: 82). In some case studies, the issue of confidentiality is not respected. This example of counselling is represented in *SIDA au Village* with the coming of the medical team to the village of Lebangwa in which the PLHA are made known. It is because of the lack of confidentiality in the counselling session that takes place in this village that the stigma and discrimination on HIV and AIDS is heightened. The people who are found to be living with HIV and AIDS are booed and jeered by the crowd of people gathered in the counselling ground. This is a clear indication of what could happen in a real life situation if the statuses of people are disclosed publicly by the counsellors. It is therefore recommended that counselling sessions and test results should not be made known to third partners without the consent of the person concerned with the counselling or testing (Rupiya, 2006: 82). This therefore means that counsellors should remain faithful to their professional ethics by not going against these ethics and publicly proclaiming the test results of the people they counsel. This public proclamation of test results would usually stigmatise those who are proclaimed HIV positive with all the negative effects of HIV and AIDS stigma (Deacon et al, 2005: 15). The counsellors have to ask for the approval of the person concerned before carrying out counselling on that person. Counselling should not be forced on someone as is the case with what happens in the village of Lebangwa, as represented in *SIDA au Village.* The press and the media including fiction films should disseminate information that would empower people to know that they have a right to grant permission before counselling could be administered on them and also the right to have their HIV and AIDS test results kept confidential. The counsellors on their part should be reminded to respect the rights of those who need counselling and give adequate information and education to those who are being counselled that is devoid of inciting any form of stigma.

For HIV and AIDS to be completely eradicated, the fight against this epidemic must begin with individual behavioural change, then to the community level, national level and then finally, the global eradication of HIV and AIDS. All stake holders and policy makers should collectively gear efforts towards prevention, treatment and research on HIV and AIDS. There

should be the scaling up of information, education and awareness about HIV and AIDS concerning abstinence, fidelity, proper use of condoms and ARVs for infected people, sterilisation or non-sharing of sharp objects, proper screening of blood before transfusion, male circumcision and wiping away the stigma that is attached to HIV and AIDS. Voluntary counselling and testing (VCT) should be encouraged by all stakeholders in the fight against HIV and AIDS. This could be realised through promulgating laws that would protect people living with HIV and AIDS. All the myths and misconceptions about HIV and AIDS would also have to be cleared through educating the public either by informing them through the press and the media or through formal and informal education. People should also be encouraged to have a change in their behavioural pattern that would keep them away from being infected with the virus. In other words, people should be educated to avoid risky behaviours that would expose them to being infected with HIV and AIDS. Since no cure for HIV and AIDS have been found, and a lot of research is still going on to find a cure for this HIV and AIDS epidemic, counselling and testing still remain the only ways by which this disease could be contained. In effect, if HIV and AIDS testing and counselling are properly done, this is going to have a positive impact on the fight against HIV and AIDS. It is proper that those involved in counselling should be given proper training on how counselling ought to be done. The media, and in this case, the fiction films in Cameroon should always portray scenes that deal with counselling in a manner that would encourage people to feel free and be encouraged to go for counselling, which is a prerequisite for HIV and AIDS testing. The use of the entertainment-education by incorporating entertaining scenes in the narrative of HIV and AIDS films would always captivate larger audiences to watch these films. With the carefully designed themes to educate, inform and create HIV and AIDS awareness, many people would come to know additional information about HIV and AIDS which would foster the prevention and treatment of the HIV and AIDS epidemic. Future fiction films should be produced in a way that could remedy some of the problematic aspects of representation that has been realised in past productions so as to increase the efficacy of the messages reaching the Cameroonian audiences in order for these messages inform, educate and create awareness. This would not only show how Cameroonian fiction films are contributing to the fight against HIV and AIDS, but also the leading role that fiction films have in the dissemination of such information , education and in creating HIV and AIDS awareness.

It would be considered worthwhile if this research work could help to prevent even just one person from being infected with HIV and AIDS or from infecting others with HIV and AIDS.

In that case, it would be an indication that my labour in researching and documenting how HIV/AIDS issues are depicted in Cameroonian films, has had a positive impact on Cameroonian society, as well as in other places where this work would be of importance For which I would be thankful.

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