

TEENAGERS' PERCEPTIONS OF HIV/AIDS MEDIA INTERVENTIONS

Name: Atiyya Mohamed

Student Number: 0201234N

Supervisor: Ms. Janice M Frank

**A research report submitted to the Faculty of Humanities, University of the
Witwatersrand, Johannesburg, in partial fulfilment
Degree of Master of Arts Educational Psychology**

Johannesburg 2008

DECLARATION

I declare that this thesis is my own unaided work. It is submitted for the degree of Master of Arts in Educational Psychology at the University of Witwatersrand, Johannesburg. It has not been submitted before for any other degree or examination at any other university.

Atiyya Mohamed

ACKNOWLEDGEMENTS

The following research report is dedicated to my parents, Shafie and Rashida Mohamed. I believe that their patience, love and consistent support have led me to where I am today.

I would also like to thank my supervisor, Janice Frank. Once again you have truly helped me to realise my potential and I could not have undergone this process without you.

Finally I would like to thank the participants for their role in the research process. This endeavour would have been impossible without your contribution.

ABSTRACT

The identified age group to be most at risk for HIV infection has been highlighted as the 12 to 20 year old range (Parker, 2007). It is hypothesised that a successful reduction in the rate of HIV infection among the teen age group will lead to a significant slowing of the epidemic. In order to achieve this reduction psychoeducational campaigns have been developed in South Africa as a means to educate the youth. However these campaigns have come under scrutiny for being ineffective. Literature around the effectiveness of these campaigns has largely been quantitative in nature. This study aimed to look at the qualitative perceptions of members of the target population aged between 12 to 17 years old. The study also aimed to understand the strengths and weaknesses of the campaigns. To attain this 35 participants were involved the study. Seven focus groups were conducted with 5 participants in each group. The participants were shown images of different psychoeducation media available in South Africa and thereafter a discussion was evoked. The focus groups were audio recorded and the data was transcribed. A thematic content analysis was conducted in order to identify themes. The themes were categorised and discussed under the broader heading of the four major campaigns – Lovelife, Khomanani, Entertainment Education, the Red Ribbon and arts initiatives such as murals. Finally recommendations were also considered for future interventions.

CONTENTS

Chapter One	6
Introduction	6
Rationale	6
Chapter Two: Literature Review	9
Paulo Freire’s Education Liberation	13
Albert Bandura’s Social Learning Theory	18
Constructing Effective Messages	21
Evaluating Current Interventions:	26
Lovelifa	26
Khomanani	31
Entertainment-Education	32
Red Ribbon	36
Arts Initiative (murals)	37
Chapter Three: Methods	40
Research Questions	40
Participant Selection	41
Participants	41
The Focus Group	43
Researcher Reflexivity	45
Procedure	45
Gaining access to participants	45
Data analysis	46
Ethical consideration	47
Chapter Four: Findings and Discussion	49
Lovelifa	
Television Advertisement	49
No Til We Know	57
Prove your love, Protect Me	64
His and Hers	72
Teenage pregnancy increases the risk of HIV	78
Khomanani	
Get tested for HIV - make healthy choices	81
Zithande	85
Entertainment-Education	
Soul Buddyz	86
Soul City	90
Arts initiatives	93
The Red Ribbon	95

Chapter Five: Conclusion	99
Summary of recommendations_____	103
Strengths and limitations_____	104
Areas for future research_____	104
References_____	107
<i>Tables</i> _____	41
<i>Appendices</i> _____	112

CHAPTER 1: INTRODUCTION

The research study aimed to investigate adolescents' perceptions of HIV/AIDS in the media with particular focus on intended psychoeducational mediums. The study aimed at obtaining an understanding of the views held by adolescents regarding HIV-related media messages. It was felt that by identifying strengths and weaknesses of the different mediums employed, the study could highlight whether these psychoeducational interventions are successful and generate recommendations for future media intervention.

RATIONALE

The highest rate of new HIV infections is said to occur between the ages of 15 and 20 years. Young people (under 25 years old) account for half of all new HIV infections worldwide. There are 14,000 new infections every day and HIV/AIDS is said to be a "disease of young people" with half of the 5 million new infections each year occurring among people ages 15 to 24 (Department of Health, 2008). At the current rate of infection it is hypothesised that half of all South Africans currently 15 years or younger could die of HIV/AIDS. It is noted that approximately 40% of the South African population are under the age of 15 years. A successful reduction in the rate of HIV infection among the teen age group will lead to a significant slowing of the epidemic over the next five to ten years (James, Hoff, Davis & Graham, 2005). It is hypothesised that a successful education in new infections within the "youth" age grouping will have long term effects in South Africa. Rimer and Lewis (2005) identify that by fostering and protecting this age group from mortality with regard to HIV, the country will in turn protect its future workforce and potential leaders. Thus intervention programs around HIV/AIDS education should be thorough and well devised for the adolescent age group in order to make an impact.

South Africa has a wide range of media and freedom of expression wherein media freedom is constitutionally guaranteed. The majority of South Africans have access to radio and TV, although TV access reduces substantially in rural areas. While print media has a limited reach, it has a longer life span particularly the monthly magazines. Those who read newspapers tend to be decision-makers and policy-makers, so while the print media audience may be small, it is influential. Given its spread and influence, the media is an important tool in the fight against HIV/AIDS.

Witte (1992) argues that although some AIDS prevention campaigns appear to be effective, most have been marked by a lack of clear theoretical bases and a lack of appropriate design given the specific population and cultural characteristics. Audience research has shown that carefully designed media interventions can bring about audience reflection of their own lives and behaviour, promote public discussion and dialogue on social issues and move audience members to consider new patterns of behaviour (Piotrow, Kinchaid, Rimon & Rinehart, 1997).

However, literature (Parker, 2006; Marschall, 2004; James et al, 2005) surrounding HIV/AIDS media communication suggests that HIV/AIDS media intervention is criticised for being non-didactic and sometimes extremely indirect. In the main print materials, the major elements of HIV transmission and sexual practice are seldom systematically presented, but are addressed in the context of lifestyle issues. Many of the Lovelife billboards and television advertisements do not mention HIV or sex. The programme's designers cite that the purpose of media is to spark a national conversation (Parker, 2007). Given this, the study aimed to explore whether or not current media interventions have been sufficient in addressing HIV/AIDS prevention for young people. Similarly research surrounding youth's perceptions in this regard is somewhat limited, thus indicating a need for the exploration of their perceptions in terms of the methods employed by these interventions.

The increased interest in the avenue of HIV/AIDS media interventions in South Africa negates that this arena be researched further. Thus this research aimed to observe these interventions and provide recommendations for future intervention.

STRUCTURE OF THE RESEARCH REPORT

The following is an outline of the structure of this research report. Chapter 2 presents a survey of the literature reviewed related to HIV/AIDS in South Africa and the effects that the media can convey in curbing the pandemic for the youth. It goes on to explore the theoretical understandings of HIV education and the media by using the theory of Paulo Freire and Albert Bandura. Thereafter an evaluation of the current media interventions in South Africa will follow.

Chapter 3 presents the methodology of the research report. It begins by identifying the research questions and the research design. This is followed by a presentation of the participants involved in the study. The focus group method is also explored in light of its relevance for this study. This is followed by a discussion of the researcher's reflexivity and the procedure involved in gaining access to participants. The data analysis methods are explained with reference to the thematic content analysis that was carried out.

Chapter 4 presents the findings of the research. This is presented under four broad themes which are the four major HIV/AIDS media interventions available in South Africa. Each theme explores areas such as strengths, weaknesses and recommendations for each intervention. Within this chapter a discussion of the findings is incorporated in order to understand and compare the theory set forth previously.

Chapter five is the concluding section of the report and examines the recommendations for future intervention and the strengths and limitations of this study. In addition areas for future research endeavours are also discussed. Finally some closing comments are presented.

CHAPTER TWO: LITERATURE REVIEW

The following literature review will discuss some of the ways in which the media has been involved in developing a sense of awareness regarding HIV/AIDS for young people in South Africa. The theoretical framework of Albert Bandura's social learning theory will be used to explain this. Similarly, a theoretical explanation of the structure of HIV/AIDS messages will also be considered. Paulo Freire's theory regarding education will be explored in light of designing effective educative campaigns. Some examples of HIV/AIDS media interventions such as 'loveLife', 'Soul City', 'Soul Buddyz', 'Khomanani', 'The AIDS Ribbon' and arts and craft initiatives will be discussed in terms of their effectiveness thus far.

INTRODUCTION

Over 42 million people are living with HIV/AIDS, and 74 percent of these infected people live in sub-Saharan Africa. Sub-Saharan Africa is home to about 64% of all people living with HIV and accounts for almost 71% of deaths globally. Southern Africa is the worst-affected region in the world (UNAIDS, 2008).

Southern Africa remains the region worst-affected by the HIV/AIDS epidemic. A combination of factors seem to be responsible for this including: poverty and social instability, high levels of sexually transmitted infections, the low status of women, sexual violence, high mobility (particularly migrant labour), and lack of good governance. New infections are still increasing with no signs of reaching a natural limit. The total number of South Africans living with the virus was estimated by UNAIDS to be in the region of 5.5 million. In the early days of the epidemic it was assumed that if the public had the necessary information about the transmission of HIV they would take the necessary steps to protect themselves from infection and the epidemic would be contained. While AIDS education and awareness strategies deployed in South Africa did alert people, they were viewed as insufficient to promote or sustain behaviour change (UNIDS, 2008).

One of the main goals of HIV prevention has been to promote behaviour change from high risk to low risk sexual activities - for example, having fewer sexual partners, or using condoms during every act of sexual intercourse. There has also been an increasing

emphasis on abstinence. However, this does not take account of the deep-rooted inequalities in South African society, which mean that girls and women are often unable to negotiate safe sex, are vulnerable to rape and are often in relationships with men with multiple partners. It is said that people will only change their behaviour or attitudes when they feel that they have a vested interest in change. People must believe that their lives will improve through the process and as a result of the process. However HIV/AIDS education campaigns available in South Africa rely on budgets to curb their spending and reach of their campaigns. With the increase in HIV infection for the South African population it is argued that these budgets need to be realigned so that mass campaigning and education interventions can take place (Tomaselli, 2003).

Successful interventions show that a peer educator approach is most appropriate to convey the AIDS message to the target group. Since more than 60% of new HIV infections occur among young people aged 15 to 25, with adolescent girls and young women of childbearing age most affected, interventions that will reduce the vulnerability of these groups are needed. It is reported that 71% of South African youths could name at least one HIV/AIDS campaign that runs on TV or radio. 48% mentioned Soul City, and 25% mentioned loveLife (Cullinan, 2007).

Parker (2006) outlines that HIV/AIDS communication involves wide ranging discourses that occur in many areas, ranging from those that are interpersonal to those that are mediated through mass media. He identifies that HIV/AIDS discourses occur in various contexts. Firstly, mass media which includes purposive HIV/AIDS campaigns on television, radio, print, outdoor and electronic. Furthermore news, documentaries, drama series, talk shows and newspaper columns are also characterised as mass media involved with HIV/AIDS communication. Small media such as leaflets and posters are also defined as means of HIV/AIDS communication. Events such as plays, music concerts, and story telling regarding HIV/AIDS information are effective mediums for communication. Finally, icons such as the red ribbon, art works, and AIDS quilts also play a role in HIV/AIDS awareness through symbolic communication (Parker, 2006).

Improving HIV/AIDS prevention efforts focussed towards young people has been highlighted as a key challenge in the fight against the pandemic (James et al, 2005). South African media appears to be far reaching. Television seems to reach 74% of the

population while radio reaches 93% of the population and newspapers reach 40% of the population (South African Advertising Research Foundation, 2000). The United Nations Children's Emergency Fund (UNICEF) reports South Africans have 316 radio sets and 118 TV sets per thousand people. Pragmatic media strategies are desired as part of a broad approach to address HIV/AIDS communication. Singhal and Rogers (2003) identify that media strategies should appeal to audience members, be commercially viable and be socially responsible. The hard to reach rural poor are also easily accessible through mass media and at a relatively low cost. In a 2001 national survey, it was found that 90 percent of youth in South Africa watch TV or listen to the radio even within the rural areas. (James et al, 2005). Audience research has shown that carefully designed media messages can bring about audience reflection of their own lives and behaviour, promote public discussion and dialogue on social issues and move audience members to consider new patterns of behaviour (Piotrow, Kinchaid, Rimon & Rinehart, 1997). Effective public health, health promotion and disease management programs help people maintain and improve health, reduce risks and manage their illnesses. They can improve their well being and self sufficiency of individuals and communities (Croyle, 2005, p.11). However not all health and education programs and initiatives are equally successful. Those most likely to achieve their desired outcomes are based on a clear understanding of targeted ideas and the environmental context in which they occur.

The media is seen to influence almost every aspect of human life: economic, political, social and most importantly behavioural. Media dissemination of ideas, images, themes and stories are termed "media effects". Research on media effects investigate how the media influence knowledge, opinions, attitudes and behaviours of audience members along with how audience members affect the media. Audience members have been viewed as active seekers and users of health information, the content transmitted through the media should reflect their needs, interests and preferences (Andreason, 1995).

Applying psychology to HIV/AIDS media interventions

Previous studies (Delate, 2001; Rawjee, 2002) regarding the evaluation of media interventions in South Africa have relied on theory related to meanings and the media. The theory of semiotics explores how meanings are generated through the use of signs.

This theory has been used in the past to evaluate perceptions around HIV/AIDS billboards as a way of critically exploring specific meanings. Parker (2006) has relied on communication theory to understand the way that HIV/AIDS-related media interventions are transmitted in the media. However, the theories relating to semiotics and communication have been seen to be too analytic of specific elements of a specified medium (Piotrow et al., 1997). The focus of this study aimed to move away from critical analysis of a single medium or campaign. Instead the researcher chose to select various media as a way of obtaining a clearer understanding of which mediums were effective and which were not. For the purposes of this study the researcher attempts to understand the aims of creating effective interventions and thereafter the effects that it may have on the target population, the adolescent age group. Thus the theory of Paulo Freire was selected as a way of exploring the aims of creating interventions that will hold the audience/viewer in mind. Similarly the researcher identified that within Freire's work he emphasised the need to move away from oppressive forces in education. Within the current South African context the majority of individuals affected by HIV/AIDS have experienced some form of oppression, be it through poverty, lack of education or poor governmental support. Thus the theory of Paulo Freire resonated with the South African situation wherein the need for liberation is needed to free individuals from the plight of ineffective HIV/AIDS education mediums. Secondly the theory of Albert Bandura was selected as a means to understand the cognitive processes involved in interacting with stimuli from the media and possible effects they may have on the audience. This theory was chosen as an alternative to the traditional communication theories of previous studies. This was done to provide a different understanding on the role of the individual and their interaction with different mediums. The individuals thought processes and environmental factors are often explored when theory chooses to focus on the communicative ability of the specific medium. Thus by understanding the individuals thinking and perceptions one is able to understand the way in which these media are experienced by the target population and the consequences they may have for their behaviour.

Paulo Freire's education liberation

The writings and experiences of the Brazilian educator, Paulo Freire, became very influential in the field of development communication since the 1970s. The Freirian approach to education emphasizes popular participation, as a form of cultural emancipation. This entails learning about the contexts present in an environment that people need to recognize in order to initiate the specific actions that are necessary to overcome the oppressive elements of their situation (Freire, 1993). In the context of South Africa, HIV/AIDS has been identified as a major dilemma for the country. It is reported that Sub-Saharan Africa's share of the global HIV infections remains high. In December 1997 the levels stood at over 20.8 million – some 68% of the international total of 30.6 million. The region's children are also the most affected with an estimated 7.8 million orphans, representing some 95% of the world total (Parker, 2007). Thus by understanding the profile of HIV and AIDS in South African communities, Freire's theory suggests that communities can move towards emancipation from the oppressive forces of HIV infection and lack of accurate governmental support (Freire, 1993).

This theory will also be used to understand the role and the needs of education interventions in the media to adopt a more participatory approach and involve the target audience with regard to HIV/AIDS. Freire's principals will be explored as an attempt to understand the planning and structuring of HIV/AIDS education campaigns and their effectiveness.

Freire's concept of pedagogy refers to the teaching approach whereby students are encouraged to question and challenge ideas that usually dominate their learning, here we find that students can then achieve critical consciousness. This implies that they are aware of constantly challenging oppressive factors in their education (Freire, 1970).

Paulo Freire (1970) argues that most political, educational and communication interventions fail because they are designed by technocrats' based on their personal views of reality. He views the target population for whom the interventions are directed as being unheard and not considered. He claims that this may be dehumanizing as the receptacles of these education interventions are seen as empty deposits to be filled with knowledge from the experts. Freire (1970) identifies that communicative education should be characterised as a subject-subject relationship. This implies that both parties

involved should be viewed as active participants or subjects in the process. As an alternative, Freire (1970) advocates problem-posing as a means of representing to people what they know and think, not as a lecture but as a more participatory process of involving the problem. Furthermore themes presented in this dialogue should resonate with people's experiences and issues that are significant to them (Freire, 1970).

Thus in light of HIV/AIDS media interventions Freire's theory can be understood in terms of the target population. He identifies the students as key factors in developing critical consciousness. If we look at the South African media and the interventions present currently we find that the students referred to by Freire can be likened to the target population identified as 12 to 17 year olds who seem to be at high risk for infection. Similarly the learning process can be likened to the way in media interventions such as billboards and television advertisements attempt to teach the audience about safe sex practices and create an awareness of HIV and AIDS. Freire proposes that like academic education, education around HIV and AIDS also needs to adopt a more participatory approach whereby students/audience members can be considered and heard from when designing such programmes. Furthermore, Freire argues that a problem-posing method should be adopted in order to help the students/audience members to develop meaning around the topics that can be related to themselves and their lives. For example it would be proposed that billboards pose a question to the audience to get them to reflect critically on their own experiences and lives. This is found in a few of LoveLife's billboards with phrases such as "The HIV-free generation, will you be part of it?" By adopting this approach, it is anticipated that the audience begins to question this statement with regard to themselves and question whether they do in fact want to be part of it. This kind of consciousness raising is created so that debate and discussion can be evoked from the audience. This fits with Freire's principles where he identifies that the old "banking style" of education is not effective. Freire argues that the audience/students have information deposited into them with no feeling of experience or consideration of context and meaning of their own lives (Freire, 1993).

In order to further comprehend Freire's argument one needs to look at his theories and perceptions regarding oppression, society and consciousness.

Freire (1970) held two views of mankind, one views human beings as mouldable and adaptable objects. The second view posits that human beings are subjects, independent beings that are able to transcend and recreate their world. In this view human beings are seen as subjects that can think and reflect for themselves. As the starting-point for his theory, Freire chooses the proposal "that humans are subjects in and with the world". According to him consciousness is determined by the socio-economic and political context, and also by cultural conditioning through one's upbringing, education and religion. In other words, it is an inter-change between economic and cultural structures.

A central theme in Freire's theory is the subject-subject relationship. The following quote encapsulates Freire's ideology of educators utilizing a "banking style" to deposit knowledge into subjects without providing meaning to them or considering their contexts. Freire (1990) identifies that many political and educational plans have failed because their authors designed them according to their own personal views of reality, never once taking into account the audience to whom it was directed.

In relation to the development of HIV/AIDS education and awareness campaigns Freirian pedagogy is described as a method that engages participants in problem solving and the development of feelings of competence and control over their behaviour (Dalrymple and Preston-Whyte, 1994). Researchers have indicated the use of Freirean pedagogy when applied to investigating issues related to HIV and AIDS (Okgibo, 1996; Rawjee, 2002). In his writing *The Pedagogy of the Oppressed* Paulo Freire (1990) suggests that within the classroom situation there appears to be a shift of power from teacher to student. Freire proposes that the teacher should invite students to "think critically about the subject matter, the learning process itself and their society" (Shor, 1993: 25). This method is termed "problem posing" and suggests that in this form of education, people develop their power to perceive critically the way they exist in the world. They come to see the world not as a static reality, but as a reality in process and in transformation. Thus just as a teacher in the classroom poses problems derived from student life, social issues and academic subjects in a mutually created dialogue it is proposed that HIV/AIDS awareness and education campaigns should involve the recipients in a mutually created dialogue. The aim of adopting this approach is to ensure

that the recipients or the target audience are a part of the constructing of the messages and their contexts would have been considered.

In direct contrast to the authoritarian method of education Freire suggests an alternative problem posing method as a form of education. The education system has been criticised for its banking style whereby individuals are viewed as empty receptacles in which information is deposited into. Freire suggests a more co operative approach to educating the individual. Freire (1970) suggests that this method starts from the life situation and the reality of the particular individual or groups of individuals. He suggests that by posing a problem, individuals are able to ask questions regarding different factors that influence their lives. He proposes that their life situation should be turned into a problem posing situation whereby dialogue is evoked.

In terms of the context of this research, dialogue can be understood in terms of a conversation between HIV/AIDS campaign designers and the target population; in this case adolescents aged 12 to 17 years. It is said that in Freirian terms “dialogue” refers to a horizontal interaction between campaign designers and the audience. This relationship is emphasized as it needs to be interchangeable with both parties learning from each other. They enter into dialogue with one another on an equal basis as a way of learning about each others realities and contexts. This interaction gives rise to an exchange of information where a general problem can come to the surface. Freire highlights this process by comparing it to a focus group situation. He argues that if the HIV/AIDS programme designers act as group facilitators and members of the target population as group members a dialogue can emerge with the aim of understanding the topic and coming up with solutions. Freire likens the problem posing method to a focus group as he finds that in a focus group member’s talk freely and information is obtained when problems are posed through questions. Freire identifies this as an essential method of understanding the needs of an audience and then developing a campaign based on their own reality. This in turn proves to the audience members that they have been thought about and considered in the designing of an intervention. The target population is then able to relate to the message more effectively as it would be more appropriate and appealing. Freire identifies the need to interact with the target population and obtain an

understanding into their world. He highlights that through horizontal communication one can achieve praxis.

Freire's principles appear to address the idea of liberating the audience and empowering them with information. The need for emancipation through education is most relevant in the context of South Africa and the current HIV/AIDS impasse. The population of South Africa is viewed as oppressed by social constraints such as HIV and AIDS, illiteracy, poverty, crime and little governmental intervention (Parker, 2006). Thus emancipation from this situation is said to lie in education about HIV/AIDS specifically around prevention. Freire also identifies the need for cooperation between programme designers and the audience so that dialogue is created and a needs analysis can be done. By doing this Freire identifies that the programme designers will be able to adapt their messages and style to fit with that of the audience. Freire also suggests that the programme designers use a problem posing approach to induce a discourse around the topic, in this case HIV/AIDS. Freire argues that by creating a discourse the audience is able to reflect on their own lives and develop their own meanings and understandings of the topic so that their learning can be most effective. Freire suggests that if these principles are operationalised, praxis can be achieved whereby the audience members are able to put into practice what they have learned. In the context of HIV/AIDS and the media, it refers to safer sexual practices and behaviour change so the rate of HIV infection amongst the age group of 12 to 17 year olds can be decreased.

Freire's ideology has been criticised for being oppositional towards the principles of curriculum (Taylor, 1993; Gadotti, 1994). Freire emphasises the importance of the participatory approach and the problem posing method, however Taylor (1993) argues that this becomes problematic when one looks at the need to have agenda when teaching and set ideas that need to be taught. He finds that Freire would find this to be a difficulty. Taylor suggests that Freire's theory needs to be more accepting of certain set goals and agendas that need to be taught. He finds that Freire would find this method to fit into the "banking style" of which he is opposed to. Gadotti (1994) also suggests that at times Freire's principles are quite extreme in their approach. He finds that Freire's work can come across as either/or thinking that does not allow for any compromises or adaptation's.

Social Learning Theory

Albert Bandura was born in Alberta; Canada in 1925. Bandura developed a social learning theory to help explain problems he saw with B.F Skinner's behaviourism model of learning. He did studies in the 1960's and seventies that led him to believe that behaviour was not just a reaction to environmental stimuli, but could also be learned from watching a model perform the behaviour and then that behaviour could be copied (Bandura, 1986). Bandura found that learning can occur through observing media role models and that vicarious learning can be even more effective and efficient than direct experiential learning. Human beings are seen to be more than reactors to external influences; people will select, organize and transform stimuli presented to them from different mediums. The target population will then interpret the information and make their own deductions and inferences, which may ultimately influence their behaviour (Bandura, 1977). Bandura thought learning could take place in a cognitive manner by way of observational learning. He believed students could learn by watching a Model.

Bandura (1969) suggested that the environment causes behaviour, but behaviour causes environment as well. He labelled this concept reciprocal determinism. He stated that cognitive learning could be achieved by vicarious reinforcement or "by observing the behaviour of others we can learn the probable consequences of behaviour by watching what happens to others. Thus in relation to HIV/AIDS interventions on the media one can use Bandura's theory to understand the processes that may unfold in the viewers/audience members mind when exposed to the media. Bandura, like Freire used the metaphor of the student and the teacher. In this study this has been viewed as the audience member and the programme/intervention designer respectively. Bandura argued that when one learns a powerful tool that can assist learning is role modelling. Bandura found that as the environment and behaviour are inextricably linked one should understand the effects that they have on each other. Thus in relation to an HIV/AIDS media intervention, the use of role modelling should be considered so that the audience is able to draw on the experience of the figures so that they can alter risky behaviours. For example the Soul City and Soul Buddyz interventions have adopted this principle. This has been done by creating characters in their storylines that experience different issues regarding HIV and AIDS. By doing this the audience can use the characters as role models and reference

points of the risks involved with unsafe sexual practices. This is termed observational learning. Bandura (1969) explains that there are four major components of observational learning. These components will be explored in relation to the designing and implementing of HIV/AIDS media interventions. Firstly Bandura highlights the need for an attentional process. This implies that the model and the message that is being taught should hold the attention of the student/audience member. This can be done by using factors that are appealing to this age group for example cars, colours etc. Secondly Bandura suggests that once the attention is focussed on the model at hand a retention process needs to follow so that information can be retained in symbolic form. Thus an HIV/AIDS education intervention should ensure that this process follows by possibly creating a symbol that can be both educational and symbolic. Thirdly Bandura argues that a motor reproductive process must occur where the desired and modelled behaviour can be reproduced. In the case of this study if the media intervention aims at promoting condom usage for teenagers, the approach should follow the steps outlined by Bandura. For example it should first attract the attention of the viewer by using colours or an attractive style. Thereafter the message should be conveyed regarding condom usage, for example “practice safe sex, use a condom”. The picture of the condom should follow to create a symbolic association for the viewer to remember. Thereafter a motor reproductive response is anticipated where the audience member will actually practice this behaviour by using a condom. Bandura states that reinforcement and motivational processes should also follow as a way of showing the individual that the behaviour they choose is correct and valued. In light of the example above, this could be done by stating the consequences if one does not use a condom. The notion of self efficacy also comes to the fore at this point.

Social learning theory understands human behaviour in terms of a “continuous reciprocal interaction between cognitive, behavioural, and environmental determinants” (Bandura, 1977, p 9). It recognises that to achieve self-directed change, people need not only to be given reasons to alter risky behaviours, but also the means and resources to do so. In this way, it recognises that effective self-regulation of behaviour requires certain skills in self-motivation and self-guidance, as well as the ability to use these skills effectively and consistently under their different circumstances (Bandura, 1989). Central

to this theory is the notion of self-efficacy, which refers to the perception that one is, or is not, capable of performing behaviour (Valdiserri, 1989). Persons may be engaging in high-risk behaviour due to their doubt as to whether they can protect themselves from HIV infection. For example, they may have relatively low self-efficacy because the self-protective behaviours and the situations involved may be unfamiliar to them; or they may have attempted to change their behaviour in the past and failed which served to undermine their self-efficacy (Valdiserri, 1989). An implication of this is the recognition that providing people with the skills for behaviour change will improve their self-efficacy, which in turn, will increase their persistence in maintaining the behaviour change (Valdiserri, 1989).

An AIDS-prevention campaign designed in terms of this model would consist of four major components. The first would be informational so as to increase awareness and knowledge of risks associated with specific risk-producing activities. The second component would be concerned with the development of the social and self-regulative skills to allow effective action. The third component would target the provision and enhancement of skills and self-efficacy. This is usually accomplished through guided practice and corrective feedback in applying the skills in high-risk situations. The final component targets creating social supports and reinforcements for behaviour changes (Bandura, 1989). Furthermore, Azjen & Fishbein (1980) argue that the message goals and the focus of the message must be clearly defined, salient beliefs and susceptibility should be addressed, threats should be identified as they are motivators for people to process the message and adopt the behaviour or attitude change. Finally language, education, social class should be considered in tailoring a message.

Thus by exploring the social learning theory of Bandura one is able to understand the cognitive processes that occur in observational learning and the effect of the environment. This theory also gives rise to the consideration of the actual media interventions themselves. Bandura's theory assists the programme designers to develop their programmes along these guidelines to produce effective results regarding HIV/AIDS and risky behaviour changes.

However Bandura has been criticised for not considering biological or hormonal processes involved in ones state of being at the time of learning (Horn, Williams & Mark,

2002). The theory has also been criticized for not being unified. According to Horn et al. the concepts and processes such as observational learning and self-efficacy have been researched but there has been little explanation about the relationship among the concepts.

Constructing effective messages

In public health education, designers of educative mediums who want to make efficient use of resources must attend to the reach, adoption, implementation and maintenance of programs (Croyle, 2005). It is said that it is not enough to develop innovative programs to reduce the burden of disease; these programs must be disseminated widely. It is theorised that HIV/AIDS control measures will not realise their full potential for improving the population's health until effective programs are broadly diffused and disseminated. Diffusion is believed to expand to the number of people who are exposed to and reached by successful interventions, strengthening their public health impact (Croyle, 2005, p.35-36)

Diffusion of Innovations Theory addresses how ideas, products, and social practices that are perceived as "new" spread throughout society or from one society to another. Diffusion Theory has been said to study the adoption of health behaviours including preventive behaviour regarding HIV/AIDS. There are four key principles that are central to this theory. These include firstly innovation, whereby the idea or object is thought to be new by a community. In the case of this research study the object referred to would be the different HIV/AIDS education campaigns. Secondly is the notion of communication channels. This theory highlights the way in which the ideas of the innovative campaign or medium can be transmitted from one person to another or across to an overall audience. Thirdly, the social system is looked at in terms of a group of individuals who then together adopt the innovation. Finally the concept of time is analysed to understand how long it takes to adopt the innovation (Croyle, 2005).

The diffusion of innovations that prevent disease and promote health requires a multilevel change process. At an individual level, adopting a healthier behaviour innovation with regard to HIV/AIDS prevention, usually involves a lifestyle change. At an organisational level this entails starting a programme with the aim of reaching

behaviour change such as LoveLife or Khomanani. At a community level diffusion includes using the media, advancing policies or starting initiatives as is the case with the different mediums focused on in this study. These mediums have made use of different forms of media in order to maximise their communication potential. There are a number of factors that will determine how quickly and to what extent an innovation will be adapted and diffused. By looking at the benefits of innovation, a programme designer can position their communication message effectively so that they maximise its appeal. This implies that by looking at five principles of diffusion of innovation the designer of the education message can increase the likelihood of their programs principles being adopted by the viewer (Croyle, 2005).

If we look at South Africa's media interventions with regard to teenagers and HIV/AIDS education, we see that there are a number of interventions in place already. These include LoveLife, Soul Buddyz, Khomanani, the HIV/AIDS ribbon and educative wall murals. However when these interventions were being planned designers needed to look at their "relative advantage". This means that the innovation or new intervention needed to be considered in light of what it was replacing. By doing this one could understand whether or not the innovation would hold superiority over what it was replacing and ultimately be more successful. Secondly program designers need to consider the element of "compatibility" and ask themselves if the innovation will fit with the intended audience. In this case the age range of 12 to 17 year olds were identified as the target audience, thus the innovations need to make sure that they match the demands of their audience by being appealing and matching their needs. Thirdly program designers need to look at "complexity" in terms of the innovations implementation. This element looks at whether or not the innovation is easy to use or understand. The fourth area to be considered is that of "trial ability", this asks program designers to perform a trial on their innovation to determine its proposed effectiveness. Finally "observability" is considered to see whether the innovation will produce tangible results and produce what it has set out to i.e. behaviour change and awareness (Croyle, 2005). In order for diffusion to be effective Croyle (2005) highlights that designers of intervention programmes need to attempt to disseminate the innovation in a variety of ways to increase the likelihood that it will be adopted. The role of communication also comes into

play at this juncture as by using mass media as a medium the communication style still needs to be suitable and effective for the audience and for the entire program to be a success.

Witte (1992) argues that although some AIDS prevention campaigns appear to be effective, most have been marked by a lack of clear theoretical bases and lack of appropriate design given the specific population and cultural characteristics. She identifies three major persuasion theories that should provide a framework for effective health messages. These include the protection motivation theory, elaboration likelihood model and theory of reasoned action. The actual content and information of these messages is focussed on bearing in mind that the goal is to persuade individuals to change AIDS related risk behaviours by focussing the message content on attitudes and beliefs towards risk behaviours as well as attitudes and beliefs towards AIDS.

Protection Motivation Theory (PMT), developed by Rogers (1983) found that the presentation of a cognitive threat is what leads to attitude and behaviour change. For example: ones perceived susceptibility of threat leads to the cognitive mediation process whereby a person decides whether the threat is severe or not (“How severe is AIDS?”). Response efficacy leads to the cognitive appraisal where a person decides whether the recommended response will reduce the threat (Condoms prevent AIDS transmission”). Self efficacy leads to the cognitive processes where ones ability to perform the recommended response is appraised (“I can use condoms”). The intention of a person to adopt the message provided is seen to be a function of how much protection motivation is aroused in these messages.

Message processing and the elaboration likelihood model argues that given the same information two people may process the information in very different ways because of their different life experiences, personalities, cultural backgrounds, mood states etc and thus they will come up with different decisions regarding the same health message. Similarly the ELM theory states that when people are interested in an issue they are more likely to think about it and evaluate it for themselves. Attitudes formed through this central processing route prove to change a persons behaviour and overall attitude in the long run. On the other hand when people have little or no interest in processing a

message they rely on peripheral cues such as simple associations or inferences (Witte, 1992). This requires very little cognitive work and is not optimal for behaviour change.

In terms of message content, the Theory of Reasoned Action (TRA) aims at exploring the actual message content characteristics. In the theory of reasoned action it is proposed that two sets of beliefs must be altered to bring about behaviour change: beliefs about consequences of performing certain behaviours and the evaluation of those consequences and beliefs about what other people think about the behaviour and the motivation to comply with the beliefs of others.

Parker, Dalrymple & Durden (1998) highlight that when constructing HIV/AIDS messages or campaigns whether one works at a national, provincial, regional or community level it is necessary to have a clear understanding of the audience. In the case of HIV/AIDS communication the development of sound communication is dependant on certain considerations. Firstly in developing HIV/AIDS education interventions the population that one is aiming towards should be considered in terms of its size, geographical location and its age and sex distribution. Language is also an important factor to be considered. The language of the audience is should be reflected in the medium so as to ensure effective understanding of the message. Similarly literacy and education levels are also key factors to consider before development of a medium. This is due the fact that ones medium needs to match the levels of education of the audience so that the message can be communicated effectively and understood (Pettifor et.al., 2004).

Socio cultural factors should also be considered when developing media interventions. Issues such as levels of awareness around HIV and AIDS, myths, beliefs and needs, the role of gender and its influence in an individual's perception, the power relationships between people and the identification of community leaders form part of this area (Kreuter & Skinner, 2000). These issues are crucial to understand as they provide clues as to where the audience stands in terms of their current understanding around the issue and what the different factors may be that will affect their perceptions. Similarly economic indicators also provide essential clues around the audiences' activities, major workplaces and conditions that people living in for example housing water, sanitation (Reddy, Panday, Swart, Jinabhai & Amouson, 2003). Health indicators provide designers of interventions with insight into what are some of the health problems

that affect the community in conjunction with HIV/AIDS. Thus the infection trends are also useful to know as high risk groups can be identified and the intervention may be targeted directly to such groups. In the case of this research study, the group deemed to be at risk was identified as teenagers thus HIV/AIDS media interventions were designed with teenagers as the target audience. The infrastructure of health services of ones audience is also crucial to understand when developing such campaigns as the services available to the target audience need to be understood. For example the number of clinics available, availability of medication or testing and general availability of resources. In terms of organisational or social infrastructure for the target audience, it is essential that designers of such interventions have information pertaining to key institutions that could be involved. For example NGO's, schools, religious institutions, police etc. By having the relevant information on the infrastructure surrounding the target audience the designers of the campaigns maybe able to obtain a full picture of the status of the target audience and what may or may not be available to them. In terms of communication infrastructure it is important for designers to have an understanding of which mediums people have access to for example radio, community radio, television, newspapers, community newspapers, magazines, outdoor media. It is also useful to know which media are most popular as this could provide an indication of the most effective form of communication of the intervention as more people would access it. The barriers to effective implementation should also be considered so that designers can counter these and find alternative ways of getting the message across.

In order to develop effective communications regarding HIV/AIDS, Parker et.al. (1998) and Reddy et.al. (2003) describe that there are certain requirements in order to bring about behaviour change or provide a framework of support for existing situations. The requirements referred to include firstly awareness by the population that there is an alternative to the situation within which they find themselves. Secondly it is said that there needs to be motivation from the audience where people need to be inspired to change their lives and fell that there are benefits to their own involvement in the change process. Thirdly the audience needs to understand that they can set goals for their behaviour that are realistic.

(Pettifor et.al., 2004) argues that for HIV/AIDS communication activities to be effective, it is necessary to create a sense that the epidemic is real and that it is important to mobilise around the disease. The use of logo's and symbols offers a way to create unity between different communication messages and allows the audience to build up interpretations and meaning over time. Logo's can often be meaningless within themselves, but gain meaning when they are associated with other messages. Repetitive symbols can be used to develop meaning through jingles, songs or gestures. It is said that simplicity and repetition is the key to the success of logo's and symbols. Making logos too complex may result in adverse cultural interpretations and it may also be necessary to make logos or symbols different for different target audiences.

Evaluating current intervention

loveLife

loveLife came into being in 1999 as a project of the Kaiser Foundation. loveLife was established in September 1999 by the US-based Henry J. Kaiser Family Foundation, bringing together the collective efforts of a consortium of nongovernmental organizations concerned with adolescent reproductive health in South Africa. The consortium initially comprised Advocacy Initiatives, Health Systems Trust, Planned Parenthood Association of South Africa and the Reproductive Health Research Unit (RHRU) (loveLife, 2007).

loveLife has from its inception combined face-to-face communication and social programmes with its high profile, strongly branded mass media programme. At its launch it was said to be “the most comprehensive effort to positively influence adolescent lifestyle” (loveLife, 2000). All its efforts appear to be geared to marketing a lifestyle brand conducive to sexual health. With a budget averaging about R200 million a year since 2003, it is the largest HIV communication programme in South Africa.

A 2001 national survey of the effectiveness of loveLife's initiatives identifies the positive impact that loveLife has made on the youth of South Africa. The study found that 62% of young South Africans report having heard of loveLife and about three quarters of youth who were aware of loveLife reported that it had caused them to be more aware of the risks of unprotected sex. Among the sexually experienced teenagers who heard of loveLife, 78% reported that as a result of loveLife they used condoms when

having sex, 69% reported that loveLife caused them to limit or reduce their numbers of sexual partners and 63% said it caused them to be more assertive in insisting the use of condoms (loveLife, 2001). An analysis of HIV/AIDS population distributions by Dorrington, Bradshaw and Budlender (2002) indicates that the highest levels of HIV do indeed occur in rural areas of South Africa. Within in this study a projection towards 2010 was made and the prevalence of HIV doubled in these areas (Dorrington, Bradshaw & Budlender, 2002). LoveLife aimed at placing their billboards in high prevalence areas to ensure effective reach and intervention (Lovelife, 2007)

The planning behind loveLife's brochures and messages is said to go through a complex advisory board of over 30 individuals, a technical review panel of eight scientists, an independent external review by an expert panel and day-to-day management overseen by a professor at the University of the Witwatersrand (Parker, 2007: p 17). This method of extensive planning and review does not seem to consult the actual target population that the programmes are aimed at.

loveLife moves from the position that the trend in HIV prevalence can be decreased if prevention can be effectively internalised and practised by young people. The project seeks to achieve 'internalisation' of the desired behaviour by its target group (i.e. adolescents) and asserts that success of the project lies in changing the pervasive values and attitudes of young people to sex, sexuality and gender relations. This requires an impact on personal motivation, an influence in terms of peer pressure and intervention by family and society. The developers of loveLife view behaviour change as incremental and therefore requiring a very large, sustained and consistent effort over several years. The aim is to impact on three main areas i.e. age of sexual initiation, number of sex partners and condom usage (loveLife, 2000).

Due to the increasing trend of commercialism in the media today loveLife has attempted to present the lifestyle which it advocates as a 'brand' – as a commodity for young people. 'The loveLife brand is promoted with the same intensity and embedded with similar attributes as other popular youth brands (loveLife, 2006). The primary communications challenge for the project is to get young South Africans hooked on the idea of loveLifestyle as the new popular culture, and to shape that lifestyle according to the basic aims of the loveLife project (loveLife, 2000). However, the style and choices of

the different mediums used in the loveLife campaign have come under fire for the lack of directness and clear messaging. While loveLife uses an approach of 'inspirational optimism', claiming that individuals are more likely to be positively motivated to adapt their behaviour if they can imagine demonstrable benefits and a chance to fulfil their dreams with a hope of a better life.

Messaging in the loveLife television ads and billboards is criticised for being non-didactic and sometimes extremely indirect. In the main print materials, the major elements of HIV transmission and sexual practice are seldom systematically presented, but are addressed in the context of lifestyle issues. Many loveLife billboards don't mention HIV or sex. The programme's designers say the purpose of outdoor media is to spark a national conversation (Parker, 2007).

Tommaselli (2003) evaluates the effectiveness of the loveLife campaign by proposing that the messages in the loveLife billboards are poorly conceived. He identifies that the billboards in particular are problematic with regards to content and reach. He states that they do not seem appropriate for different ages that may come across it (Tommaselli, 2003). Furthermore he also argues that the loveLife campaign does not understand its target audience. In his 2003 paper "loveLife: a measure of success?" Tommaselli highlights that loveLife have identified the 12 to 17 year old age group as its target audience, however he finds this to be problematic. This is due to the fact that within this age range adolescents appear to be different socially and emotionally. He argues that what is appealing for 14 year old may not be the same for a 16 year old. loveLife has come under attack for not being able to address key factors related to HIV within their campaigns (Tommaselli, 2003 ; Martins, 2007). These studies have indicated that loveLife has failed to see to the different psychosocial needs of their target audience, address rape, sexual coercion or even trauma related to the death of a loved one to HIV/AIDS.

In terms of research and evaluation of the loveLife campaign Martins (2007) indicates that loveLife failed to carry out a baseline survey with which their data could be compared over a period of time. This becomes highly problematic when one compares changes and trends within the data as the information required to compare to is non-existent. LoveLife's objective was to "cut HIV infection rates among young South

Africans by 50% and establish a new model for effective HIV prevention” (loveLife, 2002a, p1). This would imply that a comprehensive baseline study be conducted in the year of its implementation so that changes and trends could be monitored through evaluations. However there seems to be no evidence of this and it was only three years after its development that a national baseline survey was implemented. This raises a question with regard to the actual accuracy of the loveLife evaluations thus far. A study looking at the meanings derived from the loveLife Face It campaign indicated that through the use of focus groups participants’ revealed feeling confused about understanding the meanings of the loveLife slogans. It was found that meaning was interpreted in very different ways with a significant change in rural participants versus urban dwelling participants. Participants also revealed feeling that the loveLife objective was not “straightforward” (Martins, 2007).

loveLife’s premise is that optimistic and informed youth will take precautions if the sales pitch is right. loveLife uses a marketing campaign and volunteers in government health clinics and schools to pitch its ideal on positive living. This is for a lifestyle in which condoms are cool, abstaining from sex is hip and hanging out in “chill rooms” is the in-thing. Research suggests that loveLife has helped South Africans talk more openly about sex, and provided tens of thousands of school children with knowledge of HIV/Aids (loveLife, 2007). However there are few signs so far that this new knowledge is prompting the youth to delay sex or reduce the number of sexual partners. A study of more than 11 000 youths, aged 15 to 24, released last year found that those who participated in loveLife programmes were less likely to be HIV-positive. They were also more likely to use condoms and be tested for HIV. However, the study did not make clear whether loveLife caused these differences or if youngsters who do not have HIV are more likely to participate in loveLife activities. Thus it is clear that more unbiased research is needed to understand the programmes impact.

Lovelife was chosen for evaluation due to the controversy that surrounds it and the fact that the literature has been accused of being inaccurate. The history and process of the Lovelife campaign and its sub-campaigns can be viewed in terms of the Diffusion of Innovations theory. This is due to the fact that when the campaign began it was innovative as it was a new idea. Literature (Croyle, 2005) has mentioned that at an

individual level, adopting a healthier behaviour innovation with regard to HIV/AIDS prevention, usually involves a lifestyle change. At an organisational level this entails starting a programme with the aim of reaching behaviour change such as LoveLife. At a community level diffusion includes using the media, advancing policies or starting initiatives (Croyle, 2005). If one reflects on the difficulties of LoveLife's effectiveness thus far (Martins, 2007; Tommaselli, 2003) the process that Lovelife has undergone can be compared to that of the Diffusions of Innovations theory. As Lovelife was the first programme of its kind to be developed in South Africa in the 1990's the principles and the ideas can be considered as "new". The theory suggests that when implementing a new intervention programme designers need to test out the programmes compatibility and ask themselves if the innovation will fit with the intended audience. Lovelife reports that this process was undertaken at the onset (Lovelife, 2000). Furthermore, the theory suggests that programme designers need to look at whether or not the innovation will be easily understood in terms of complexity. This issue has become an area that has come under much scrutiny for the Lovelife campaign where the messaging was evaluated and deemed too abstract and difficult to understand (Parker, 2006). The theory also emphasises the need for trialibility and asks programme designers to perform evaluation studies to test and observe whether or not the innovation produced the results it set out to produce, in this case behaviour change. This has also been identified as an area of contention for loveLife as Tommaselli (2003) argues that the baseline studies from Lovelife are inaccurate and therefore the data that followed was also inaccurate. The Diffusion of Innovations theory also goes on to highlight the need for a widespread dissemination of the innovation or campaign to increase the likelihood that it would be viewed. This appears to be an area of strength for Lovelife as recorded in a 2007 survey where 76% of adolescents reported having been exposed to some form of media from Lovelife (loveLife, 2007). However evaluations performed by loveLife appear to be lacking in data regarding perceptions of its audience members. Studies thus far focus on quantitative material to indicate behaviour changes, for example percentage of persons that now use a condom as compared to data from 2002. This method of data collection becomes problematic as the voice of target population tends to go unheard when it comes to thoughts or opinions. Freire (1970) emphasises a participatory approach and the creation

of dialogue between the programme designers and the audience. However these processes seem to be lacking in terms of qualitative material. This information is vital for programme designers as the audience members could provide insight into specific elements of the campaigns that need to be adapted or altered to ultimately make them more effective.

Khomanani

Khomanani, activated in 2002, is the newest of the three interventions. It is directly managed by the Department of Health (DoH) although planned and implemented through private sector agencies and is closely linked to the unfolding of the public sector HIV and AIDS programme. It utilises mass media and coordinated face-to-face communication in support of both the prevention of HIV and the development of care, support and treatment. Khomanani is several campaigns rolled into one, with each sub-campaign designed to support a particular aspect of the five-year Strategic Plan on HIV/AIDS/STD. Khomanani was viewed as a big step forward in terms of resources allocated for Government AIDS communication. The campaign objectives relate to achieving change in specific areas of knowledge, attitudes, social norms and behaviours. The Khomanani Youth Campaign is a prevention campaign focused only on young people and its impact. Research on this initiatives success indicates a significantly more positive attitude among young people to delaying sex and a stronger perception that their friends think likewise. While condom use did not change, knowledge of safe sex practices did improve significantly, giving substance to the general notion that HIV infection can be prevented (DoH, 2007). Collinge (2005) reported that 15 months after its launch Khomanani was recognised by 61% of the respondents in the study. The Khomanani prevention campaign was identified as being effective in creating a positive attitude among young people and delaying sex (Pettifor, Rees, Steffenson, Hlogwa-Madikizela, MacPhail & Vermaak, 2004).

The approach of the Khomanani campaign has been identified as being somewhat different to Lovelife in terms of its style. A 2004 study by the Community Agency for Social Equity (CASE, 2004) revealed that the Khomanani campaign held a more informational and educational stance by providing its audience with clear and concise

messages regarding HIV/AIDS prevention. A similar study by the DoH (2005) investigated the planning of the Khomanani campaign and found that it was aimed providing individuals with resources and information about clinics and support for those living with HIV/AIDS. Thus the approach of the Khomanani campaign can be viewed in light of the notion of increasing the self-efficacy of the audience member (Bandura, 1989). This campaign, with its informative style can be viewed as attempting to increase the awareness and knowledge of risks associated with HIV/AIDS. Similarly this campaign appears to provide social and self-regulative skills to the population in order to allow for action. For example a Khomanani poster may provide specific details of the nearest clinics and services that are available there so that audience members are empowered with knowledge to protect their health. Azjen & Fishbein (1980) comment that messages or campaign that are designed to increase the audience's self-efficacy can be viewed as empowering tools just as Freire's notion of liberation through education had previously suggested.

Entertainment-Education Strategy

McKee (2000, p.155) notes that so much of popular culture supports unhealthy and at risk lifestyles, so the edutainment movement is one of the greatest communication revolutions of the 20th century. Entertainment-education or "edutainment" programs are described as a viable weapon in the worldwide war against HIV/AIDS (Piotrow, Meyer & Zulu: 1992). Entertainment education is the process of purposely designing and implementing a media message to both entertain and educate, in order to increase audience members' knowledge about an issue, create favourable attitudes, shift social norms, and change the overt behaviour of individuals and communities (Singhal & Rogers: 2003). The ability of entertainment education stimulates conversation and brings taboo topics like HIV/AIDS into public discourse. These programs also appeal to the emotions of audience members who begin to perceive characters as personal friends and welcome them to into their homes. The characters seem to infect the audience with their feelings. Thus entertainment-education has been viewed to hold the power of behaviour change through communication.

The larger purpose is to contribute to the process of directed social change, which can occur at the individual, community, or societal level. Entertainment education is seen to influence audience awareness, attitudes and behaviours towards a socially desirable end with the effect anticipated to be located in the audience members. It is also seen to influence the audience member's social environment to help create necessary conditions for social change at the system level (Piotrow et al., 1992).

The Soul City Institute for Health and Development Communication (SCIHDC) is a non governmental organization established in 1992. It was developed to harness the power of mass media for health and development in South Africa. The SCIHDC summarises *Soul City* as a “dynamic and innovative multi-media health promotion and social change project (SCIHDC, 2006). *Soul City* examines many health and development issues, imparting information and impacting on social norms, attitudes and practice. Its impact is aimed at the level of the individual, the community and the socio political environment” (Soul City, 2003). SCIHDC was established in 1992 under the direction of medical doctors Garth Japhet and Sheereen Usdin. They had been working in clinics both in the urban townships and rural areas of South Africa. Japhet and Usdin realised that adult education on basic issues such as childcare, contraception and AIDS could improve people's lives and, in time, empower people to make better choices; change their attitudes and behaviour and seek to influence their surrounding environment. In time they could also be empowered to affect social change in their communities (SCIHDC, 2006).

Japhet came to realise the importance of the media as tools in the process of offering adult education on health issues. Together with Usdin he set about getting medical information out to the people through the newspaper columns that he wrote for in *The Sowetan*. They saw the need to reach those illiterate people whose only source on information was television and radio. They also realised the benefit of a continued stream of information rather than once-off information interventions (SCIHDC, 2006).

Soul City utilizes mass media interventions such as the 13 part prime time television drama series. A 60 episode prime time radio drama series broadcast in nine languages and some 2.5 million health education booklets which are serialised by 11 major newspapers and distributed nationally. While issues around alcohol abuse, land

reform, tuberculosis, violence against women and youth sexuality were covered in the different seasons, the second and third Soul City series (1999) focussed on HIV prevention.

The origins of *Soul City* were based on practice and good ideas rather than theories and research. Over the years, the SCIHDC has compiled a substantial body of research and established a model for their ongoing interventions well within the concept that has become known as Entertainment Education (EE) (SCIHDC, 2006). One of the pioneers of EE was the Mexican television producer Miguel Sabido, who established a theoretical framework for his telenovelas (television soap operas) from 1975 onwards. Sabido sums up the merits of the soap opera format stating that “the melodrama in a soap opera represented a confrontation between good versus bad, offering a unique opportunity to promote good behaviours and discourage bad behaviours” (Sabido, 1989). Sabido (1989) provided positive, negative and transitional role models in his soap operas. These role models were practical applications of Albert Bandura’s social learning theory. Social learning theory postulates that people learn vicariously from watching the actions and experiences of role models. The theory suggests that social learning could be strengthened through verbally coded messages in the form of epilogues reinforcing the prosocial issues that have been integrated into the drama (Singhal and Rogers, 1999).

The Soul City model could be seen as an argument for “a cyclical communication strategy where a number of inputs are fed into the media vehicle, which then results in a number of outputs” (Tufté 2001: 35). Four steps can be identified in the initial input process. Firstly, strong partners must be found among funders, stakeholders with regards to the prosocial issue being raised and the media. Secondly, formative research into the issue is essential, and must be informed both by experts on the issue, stakeholders and members of the intended audience themselves. Production of the media products follows as the third step. Social marketing, the promotion and marketing of non-profit material employing techniques used by commercial marketers, drives the launch of the programme and is the fourth step in the process. The desired outputs of the intervention include direct impact on knowledge, attitudes and practice among the target audience in relation to the educational issue, as well as the creation of a supportive environment for social change.

It has been reported that Soul City reached an estimated 16.2 million people in South Africa through radio, television and print, achieving a 79% penetration among its target audience and a 62% penetration of rural audiences (Collinge, 2005). In terms of its effectiveness in achieving its goal research indicates that audiences were made increasingly aware of issues pertaining to abuse and domestic violence. However research surrounding the effectiveness of HIV/AIDS education messages in this project seems to be lacking. Evaluations of Soul City consistently show that it proves to be popular for children less than 11 years of age even though the materials were designed for youth and adults (Goldstein, Usdin, Scheepers, Anderson & Japhet, 2002). Goldstein and Scheepers (2000) identified that in terms of prevention participants in their study mentioned delaying having sex, reducing sexual partners and increased condom usage. Within the same study, exposure to Soul City was directly linked with positive changes in attitude related to gender and sex.

“Soul Buddyz” was designed and developed for children aged 8 to 12 years old to provide children with information regarding AIDS and sexuality. This was done through a life skills workbook, 26 part television drama and 26 part radio magazine programmes in three local languages. While research on the effectiveness of Soul Buddyz indicates that it reached its target audience of 8-12 years olds with exposure to Soul Buddyz was associated with increased knowledge about HIV/AIDS and condom use, the age group that seems to be unaffected by these efforts appears to be adolescents aged 13-24 (Goldstein et.al, 2002).

There have, to date, been two *SoulBuddyz* television series, both broadcast on SABC 1, which is the television channel in South Africa with the largest viewing audience. The parent Soul City-series are broadcast on the same station. The episodes of *SoulBuddyz* are each 26 minutes long, and the drama centres on a group of children who meet in a park after school and tackle the daily issues that South African children face. Each episode concludes with an epilogue, in line with the theories of Miguel Sabido. The epilogue sequence is approximately two minutes long (SCIHDC, 2006). Here ‘real’ children speak from their own perspective about the issues raised in that episode. A life skills booklet for use in schools also accompanies the series. The booklet is written in a module format and each educational lesson is illustrated by a photo comic story. A

number of activities internalise key issues, and the booklet provides explanatory information. The booklets are made accessible to all grade 7 learners in South Africa. A parenting booklet also accompanies each series. Distributed through partner newspapers and through non-governmental organisations, the primary focus in these booklets has so far been improving communication with children and the importance of trying to understand them on their own terms, and not to view them simply as ‘small adults’.

The Red Ribbon

The Red Ribbon was created in 1991 by the Visual AIDS Artists Caucus in New York. The Red Ribbon has been identified as the international symbol of HIV and AIDS awareness. It is being worn by increasing numbers of people around the world to demonstrate their care and concern about HIV and AIDS - for those who are living with HIV, for those who are ill, for those who have died and for those who care for and support those directly affected. The Red Ribbon is intended to be a symbol of hope - that the search for a vaccine and cure to halt the suffering is successful (Parker & Kelly, 2003). The Red Ribbon offers symbolic support for those living with HIV, for the continuing education of those not infected, for maximum efforts to find effective treatments, cures or vaccines, and for those who have lost friends, family members or loved ones to AIDS.

The mass popularizing of the red ribbon to audiences soon created an associative link between the ribbon and HIV/AIDS. The symbol has been identified as having the capacity to stand all on its own and successfully convey a message. Topics around HIV and AIDS may be taboo at times, thus the red ribbon has been noted to perform a communicative function (Marschall, 2004: p 172). However, while the red ribbon is a useful symbol, its effectiveness as a means of AIDS awareness is said to be questionable (Kwazulu Natal Health, 2007). Internationally the red ribbon has been central to promoting stigma education in relation to HIV/AIDS. Parker (2006) has noted that the use of logo's and symbols offers a way to create unity between different communication messages and allows the audience to build up interpretations and meaning over time. Logo's can often be meaningless within themselves, but gain meaning when they are associated with other messages. Similarly within Bandura's Social Learning Theory the

notion of symbolic communication comes into play. Bandura (1989) identified that the second step in creating an effective medium lies with the retention of the message through the use of symbolism. In the case of the Red Ribbon the message regarding an awareness around HIV/AIDS is not explicit yet the Ribbon is said to maintain its own authority in relaying the message (Delate, 2001).

The Red Ribbon is actively promoted as symbol of care and concern and a means of symbolic support for those living with HIV and AIDS. In South Africa the red ribbon replaced the government's yellow hand symbol in 1995. It has been integrated in all governmental HIV/AIDS communication material. In 1999-2000 specific mass media campaigns were conducted by the Beyond Awareness Campaign, associating the red ribbon with the concept of care and promoting the wearing of red ribbons (James et.al., 2005). Several hundred thousand red ribbon were distributed based on requests to the campaigns Action Office and millions of red ribbon stickers were distributed for use during HIV/AIDS events. In 2002 the marketing survey group Markinor included the red ribbon in their "Top Brands" survey and found that over 96% of urban and 87% of rural respondents recognised the ribbon. The Nelson Mandela /HSRC survey found that over 80% of urban respondents and over 70% of rural respondents had seen the red ribbon in their communities in the past year (Parker & Kelly, 2003).

Art and craft initiatives

Marschall (2004) investigates visual art/craft initiatives that have been employed in South Africa to create HIV/AIDS awareness. The study looks at community wall murals, billboards and a craft project involving beaded dolls, badges and wire baskets with an HIV/AIDS awareness message. The theoretical of the understanding of the study assumes that meaning is always constructed by both the artist and the viewer. While the artist aims at developing an educational message for his/her audience, the study states that the artists cannot control the way in which their messages may be decoded and interpreted by the audience. The intention of this study was to produce something that would attract attention, educationally by being different. The content of the images in the murals and billboards has been criticised for presenting the awareness message in a way that is too obscure and inaccessible. Marschall argues that the point of using art was to engage the

audience through ambiguity and encourage reflection and a personal interpretation about HIV/AIDS (Marschall, 2004). However one is left questioning whether this is actually enough? The use of ambiguity is particularly concerning as the actual message may be vague and create confusion for the target audience. Similarly no coherent research has thus far been conducted to determine how these images are understood by those who view them (Marschall, 2004: p 167). This aligns with literature (Croyle, 2005) which has identified the importance of observation and trialability within the Diffusion of Innovations. It is said that the innovation needs to be tested to see whether or not it has been effective so that amendments can be made. However if this process has not been conducted the validity of the intervention is questionable according to Croyle (2005).

The Nelson Mandela/HSRC (2002) survey has noted that the HIV/AIDS communication environment in South Africa seems to be very complex in the sense that altering behaviour, choices, attitudes or knowledge with the use of specific interventions is a complicated task. While the South African communication environment seems to be filled with messages, programmes and interventions around HIV/AIDS one is left questioning whether or not the message is actually getting across.

Collinge (2005) highlighted the findings of a comparative study on loveLife, Khomanani and Soul City from 1999 to 2004. Although the combined efforts of these (and other) initiatives have not secured a downturn in HIV prevalence, specific impact studies show that they are associated with positive shifts in knowledge, attitudes and safe sex behaviours which are conducive to curtailing HIV infection, knowledge, attitudes and supportive activities that serve to reduce the stigma that attaches to HIV and AIDS, to promote health seeking behaviour and to build a more caring environment. Within the same study the researcher identified that given the magnitude of audiences for Khomanani, Soul City/Soul Buddyz and Lovelife, it becomes difficult to tell which campaign has a decisive influence. Thus these campaigns should rely on baseline studies to compare the data with regard to their effectiveness. For example Soul City is reported to commission an evaluation of every television series, Khomanani is reported to have conducted a baseline survey before the campaign was launched and then followed up with an evaluation after 15 months. LoveLife is reported to have conducted an evaluation of specific media however an overall impact evaluation has not been done.

CONCLUSION

The interventions described above are found nationally in the South African context. They aim to reach young people with an educational message in the hope of affecting them in terms of their behavioural choices. Theoretically according to Bandura (1989), these interventions should consider the effectiveness of vicarious learning through the media and the creators should identify the different educational components mentioned above when creating an effective message. However these interventions have been criticised for being ineffective towards their target audiences. Thus we find that a shortcoming of these interventions lies in the fact that they do not seem to be meeting their requirements in terms of effective reach and communication. Similarly the claims that such interventions have had success are also scrutinised due to the lack of research in this field around the effectiveness of such interventions and how they are perceived in general. Hence there appears to be a need for such research to transpire in an attempt to understand these shortcomings and possibly highlight suggestions for the future.

CHAPTER 3: METHODOLOGY

The research study aimed to be explorative in nature and sought to explore adolescents' perceptions of HIV/AIDS in the media with particular focus on intended psychoeducational mediums. The study aimed to obtain an understanding of the views held by adolescents regarding HIV related media messages. It was felt that by identifying strengths and weaknesses of the different mediums employed, the study could highlight whether these psychoeducational interventions are successful and generate recommendations for future media intervention. These aims were sought through the investigation of adolescent's opinions and recommendations using focus groups and the exploration of the themes emerging from the discussions generated from these groups

RESEARCH QUESTIONS

On a broad level the study sought to explore the opinions of teenagers' regarding intended psychoeducational mediums around HIV and AIDS education and prevention. As the research unfolded, the emerging themes were organised around six questions and these are as follows: (a) what are the perceptions of youth regarding HIV/AIDS media intervention? (b) What are the strengths of current HIV/AIDS media interventions? (c) What are the weaknesses of current HIV/AIDS media interventions? (d) Which elements of media messages are effective in creating awareness? (e) Which elements of media messages are ineffective in creating awareness? (f) How can current interventions be improved?

RESEARCH DESIGN

This study employed the focus group method as a data collection strategy and thematic content analysis as its method of data analysis. The study can be classified as a qualitative exploratory design as the research area is new and the constructs are being investigated for the first time (Nagy, Biber & Leavy, 2008) The study also contained no manipulation of the variables and no deception towards the participants. This design was selected for the purpose of this study because it contains features which enabled the researcher to obtain thick descriptions and attain in depth information for a better understanding of the topic under investigation.

PARTICIPANT SELECTION

Participants for the study were recruited through the use of non-probability purposive sampling. Non-probability purposive sampling is characterised by the use of judgement and a deliberate effort to obtain a representative sample (Kerlinger, 1986). In qualitative research, the investigator selects cases that can shed light on the object of study. Sampling was therefore based on purpose rather than on statistical probability of selection. For example in this study participants within the age range of 12 to 17 years were selected as this was identified as the target age group of HIV/AIDS intervention. Similarly it is within this age group that the highest rate of new infections is said to occur (James, Hoff, Davis & Graham, 2005). Participant selection was done with the assistance of the principal and the Head of Department (HOD) for the Life Orientation (LO) subject at the school. The HOD randomly selected students based on their availability at that time. The participants were invited to participate in the study by the HOD.

Participants

Table 1.1 Demographic information of focus group 1

Participants	Gender	Age
P1	Male	15 yrs
P2	Male	17 yrs
P3	Male	17 yrs
P4	Male	13 yrs
P5	Male	16 yrs

Table 1.2 Demographic information of focus group 2

Participants	Gender	Age
P6	Female	13 yrs
P7	Female	14 yrs
P8	Female	17 yrs
P9	Female	14 yrs
P10	Female	16 yrs

Table 1.3 Demographic information of focus group 3

Participants	Gender	Age
P11	Female	14 yrs
P12	Female	18 yrs
P13	Male	13 yrs
P14	Male	15 yrs
P15	Male	15 yrs

Table 1.4 Demographic information of focus group 4

Participants	Gender	Age
P16	Female	14 yrs
P17	Female	16 yrs
P18	Male	16 yrs
P19	Male	15 yrs
P20	Male	17 yrs

Table 1.5 Demographic information of focus group 5

Participants	Gender	Age
P21	Male	14 yrs
P22	Female	16 yrs
P23	Male	17 yrs
P24	Female	15 yrs
P25	Female	15 yrs

Table 1.6 Demographic information of focus group 6

Participants	Gender	Age
P26	Male	16 yrs
P27	Male	16 yrs
P28	Male	16 yrs
P29	Male	15 yrs

P30	Male	15 yrs
-----	------	--------

Table 1.7 Demographic information of focus group 7

Participants	Gender	Age
P31	Female	14 yrs
P32	Female	14 yrs
P33	Female	15 yrs
P34	Female	15 yrs
P35	Female	15 yrs

THE FOCUS GROUP

The focus group is a qualitative research technique which is used to gain insights into the dynamic relationships of attitudes, opinions; motivation, concerns and problems related to current and projected human activity. Thus a focus group may be defined as “a group convened for the purpose of discussing a particular research topic” (Flick, 2006). Denzin and Lincoln (2003) argue that the creation of an unstructured informal permissive atmosphere enables participants to develop a dynamic group interaction representing an open conversation where each individual is encouraged to comment in a non threatening and non intimidating environment. Interaction among the participants is to be encouraged to stimulate the discussion of various areas in the research topic.

The project utilized a qualitative method that enabled the researcher to explore, as described by Mouton and Marais (1988) as well as Henning, van Rensburg and Smit (2004), deep and rich information, which would bring forth meanings that would show how people made sense of concepts that evolved from their perceptions. It allowed for the emerging of data that were socio-culturally specific. According to Mason (2000), qualitative research is grounded in a philosophical position that is concerned broadly with how the social world is interpreted, understood, experienced or produced. The use of quantitative methods was regarded as Creswell (2003) explains; it uses measuring instruments to produce supposedly wide objective statistical data that answers different questions, for example, close questions used in survey questionnaires, in response to the research focus. This allows for a wider scope of information to emerge. Hence, the

qualitative method is more suited to the research focus question of this project and affords the researcher the opportunity to facilitate the emerging of deep and rich descriptions regarding responses to HIV/AIDS interventions.

Focus group discussions were used for the data collection process. Patton (1987) and Bloor, Frankland, Thomas and Robson (2001) explain that focus groups involve conducting open-ended interviews with small groups of between eight to 12 participants and use, optionally, the general interview guide approach. This guide serves as a basic checklist during the interview process and ensures that the same information about the phenomena studied is obtained from all the focus group discussions. Focus groups present an environment in which participants influence each other, as happens in life, in relation to their perceptions, feelings, and thinking about particular issues (Krueger & Casey, 2000). People make meaning of situations, and meanings are typically forged in discussions or interactions with other persons (Creswell, 2003). This method was also used in similar studies (Abrahams, 2007; Delate, 2001) and proved to be an effective approach in deriving data pertaining to perceptions of psychoeducational mediums.

To ensure that all topics were covered the researcher directed the discussion of topics while encouraging participation. The discussion then formed the basis from which the information was obtained. Seven groups were used with five individuals in each group. By holding a discussion with a small group of individuals in this particular way the researcher is allowed to cover a number of topics without having to use precise fixed questions (Breakwell, Hammond & Fife-Schaw, 1995). The rationale behind using focus groups, is that a discussion is prompted around the topic at hand and respondents are able to verbalise their attitudes, experiences, perceptions, current knowledge, reactions in a way that would not be possible using other methods, for example observation or questionnaire surveys. These attitudes, experiences, reactions, perceptions etc were drawn from the participants by initially showing the group pictures of the different HIV/AIDS interventions such as Soul City or the LoveLife print advertisement, and then creating a discussion about what they had seen. The same material was shown to each group.

It is essential to note that ethically this method appears to be appropriate as the participants were not asked about any information regarding HIV/AIDS status

whatsoever. This information was not beneficial to the study and was not requested. The study aimed at looking at HIV/AIDS in the media thus the participants' reactions to the mediums was focussed on.

RESEACHER REFLEXIVITY

The researcher had developed an interest in work and literature surrounding HIV/AIDS and education in this field. In particular the researcher has been fascinated with the current psychoeducational mediums present in South African communities. The controversy surrounding the effectiveness of such campaigns such as LoveLife and Khomanani spurred my decision to investigate the perceptions of the target audiences, teenagers. As mentioned in the literature review, evaluations of such campaigns indicated that they were deemed to be successful in educating and creating awareness around HIV. However the researcher was left feeling puzzled and confused by this literature as her own experience of such interventions was contrary. Thus the researcher became interested in the actual target audiences perceptions in order to understand the effectiveness of such mediums in a cross cultural context such as South Africa.

The researchers experience as a Masters educational psychology student meant that she brought to the focus group the experience of basic counselling skills which lead to the exploration of the participants feelings regarding their experiences of HIV/AIDS media interventions. It was felt that the researcher's natural interaction with the participants was one of unconditional positive regard that facilitated rapport building thus allowing participants to openly share their experiences and perception with the researcher.

PROCEDURE

Gaining access to participants

The study was carried out at the Liberty Community College in the area of Kew, Johannesburg. This high school was chosen as it caters for a variety of different students from varying socioeconomic backgrounds. The principal of the school was telephoned and the procedures of the impending study were explained. A follow up meeting was then held where the structure of the study and its requirements were then presented in a site

consent letter (Appendix A). The principal was then required to sign the consent letter to provide permission to carry out the study on the premises (Appendix B).

The sample consisted of 35 teenagers of non specific races with an age range of 15 to 18 years. Participant selection was done with the assistance of the principal and the Head of Department (HOD) for the Life Orientation (LO) subject at the school. The HOD randomly selected students based on their availability at that time. The participants were invited to participate in the study by the HOD. If they had agreed, they were then introduced to the researcher and explained the terms of the study through a subject information sheet (Appendix C). Participants were provided with a letter for their parents to provide permission as they were younger than 18 years of age (Appendix D). They were also provided with assent forms to provide their permission to participate in the study and be audio recorded (Appendix E). Once they had returned the signed consent forms, the school contacted the researcher and a date to conduct the research was negotiated. The data was collected by means of seven focus groups which were approximately 50 to 60 minutes long. The participants were all shown the same footage and pictures and a discussion was developed by the researcher asking them what they thought in response to what they saw. The participants were then encouraged to express themselves further. These focus groups were audio recorded by the researcher.

Data Analysis

The interview tapes were transcribed by the researcher. These tapes were transcribed verbatim with no additions or omissions made to the text. English was not the first language of some participants and even though their narratives comprised of poor grammar, this was still captured verbatim.

The method of analysis used in this study was a thematic content analysis. Content analysis has been identified for analysing data once it has been reduced to textual form. Devlin (2006) highlights that content analysis involves reducing written responses so that some thematic categorization can be formed. Thematic content analysis, which falls under the umbrella of interpretive methods, was used to analyze the research material. Terre Blanche, Durrheim and Painter (2006) postulate that interpretive methods assume people's subjective experiences are real and should be regarded seriously. This

facilitates our understanding of others' experiences when we interact with them and listen to what they tell us. Furthermore, using qualitative research techniques are best suited to this task (Terre Blanche et al., 2006). The researcher endeavoured to regard participants' subjective experiences and perceptions hence this method was deemed most appropriate.

The first step involved in this process was to read through the transcribed responses. After which the raw data was organised into a data set. The set was then coded. By coding in this way the data is viewed as being broken down into meaningful pieces. The analysed data could then be interpreted into the findings component and interpreted bearing in mind the findings of the literature review. Throughout this process the researcher in conjunction with the supervisor of the study, came up with potential themes that emerged from the data and then once clarity was provided the researcher was able to further highlight sub themes that emerged.. Within the framework of this research, content analysis was chosen as the study looks at exploring the adolescents' perceptions, views, observations, awareness and feelings. Hence emphasis is on meaning rather than quantification. By using content analysis the common themes from each individual's outlook could be identified and interpreted (Berelson, 1952).

Ethical Consideration

The research study only proceeded once ethical clearance was provided by the university. Thereafter permission to commence with the research was also obtained from the school and from the potential participants. The principal of the school was provided with an information sheet outlining the nature of the study and the role of the learners (Appendix A). The nature of this study involves human beings as participants, hence to ensure ethical research practice the participants were informed that their participation is entirely voluntary and that their decision to participate would not affect them in any way. The aim and the nature of the study were also explained within the subject information sheet and the consent form for the parent and child (Appendix C, D and E). They were informed that their responses within the focus group would be confidential. Anonymity could not be assured as the focus group discussion was face-to-face, however identifying information was not requested. The use of direct quotes in the final report was requested; however should this lead to the identification of any individual it was discussed that the

quote would not be used. Permission to audio record the interviews was requested and the participants were informed of their right to stop the interview at any time. It was also conveyed that all interview material would be destroyed after the research has been completed. The transcripts were further sanitised by removing all identifying information that may have emerged such as names. The researcher coded the excerpts in terms of participant number and gender for example “P23F”. In this case “P” indicates the participant, the number 23 indicates that they are the 23rd participant in the study and “F” or “M” indicates female or male. Alternative names were substituted into the transcripts to protect the identity of the participants. The researcher is also equipped with counselling skills to contain difficult topics that could have emerged. However if any traumatic experience were to be recalled, counselling would have been referred to an institution that is both convenient and financially accessible to the participants of the study. The contact details were provided. In addition the researchers contact details were given to every participant and they were encouraged to contact the researcher should they have any queries regarding the research.

CHAPTER FOUR: PRESENTATION OF FINDINGS

This chapter presents the analyses of the teenagers' perceptions of HIV/AIDS media interventions. The findings have been divided into five main sections according to the different media interventions explored in this study. These include LoveLife, Khomanani, Entertainment Education, The Red Ribbon and Arts Initiatives. Within these main themes the findings will explore the perceptions of each campaign, thereafter the positive and negative elements of each campaign and finally recommendations to the current campaign from the teenager's perceptions.

Loveline

The Loveline campaign utilises many different forms of media in its approach. Participants in this study were exposed to these types of interventions in order to understand their perceptions of each element of the different campaign strategies. Within the broader nationwide campaign, Loveline has divided its campaign into different themes. The participants were shown different types of interventions from selected themes within LoveLife. These include, television advertisement named "Thembi", the Loveline black and white Face It campaign, the Loveline purple campaign, and the Loveline "Will U be part of it" campaign. An exploration of the perceptions of these campaigns will follow in order to develop an understanding of the strengths and weaknesses across the spectrum of loveLife's media interventions.

Television Advertisement

Different Perceptions

Auditory cues

The LoveLife campaign comprises of various mediums and styles to get their message across. One such medium is the use of television advertisements. After viewing the advertisement it was found that participants held a variety of views regarding what they saw in the advert. Initially it appears that participants encountered difficulty with identifying what they were watching and seemed to rely on auditory clues in the clip to assist them to reach a conclusion. On viewing a LoveLife television advertisement participants discussed that they found themselves feeling uncertain about what they were

watching. They seemed to believe the advertisement to be a music video due to its style and approach used.

P33F: I never seen it before so I thought like it was a video or something, maybe an R&B video when I heard that song I thought that. Then I seen that girl and I listened carefully to the music and I heard love your life so I figured oh like LoveLife.

P22M: I think it was a LoveLife thing but it's the first time like I see an ad like that. When it started I thought it was like a clip of I don't know maybe a rapper was going to come out and start rapping on the ghetto or something.

Two participants expressed that the music and the song used in the television advertisement provided them with clues that it was in fact an advert from LoveLife.

P23M: ja I saw that beginning part and I though it was gona be a short movie but then they started singing and stuff so then it looked like a music video.

P3M: ja like a music video or something and then you just hear that LoveLife song and you like oh its not, its LoveLife.

P27M: oh I was saying that about the song it's a bit catchy its sort of saying it all in the song. Its saying love your life so they mean that as people we must love our lives and ourselves and then they say take care of your life which means be safe and careful like maybe safe sex.

This account indicates that had it not been for the song the participants would have been left believing that the clip was a music video. Participants seemed to develop their own meanings in relation to what they had seen. This is aligned with the literature which suggests that effective media interventions need to contain an attentional element to them in order to attract the viewers attention and retain it (Bandura, 1969). These participants placed more emphasis on some aspects of the video clip and found other parts to be irrelevant.

P30M: that Audi was whack. I loved that. I like that part the best and that after that I got bored until I saw some bright colours coming in to the scene. I liked that part with the Audi and that guy showing that girl the necklace and then she doesn't go with him. but then its like they saying guys with nice cars just wana trick girls and I'm thinking to myself what if I have a nice car one day and girls will think I'm just using them. So it's weird.

P27M: I liked it until the Audi then I was bored.

P21M: okay wait not no one, like when I seen that Audi I was like interested and I saw that guy like I could see myself

behind the wheel with some jams going. But then that guy showed her that necklace or whatever and I felt sorry for that girl like you can see she didn't know what to do.

The way in which participants chose to focus on certain elements of the advertisements indicates that they selected what they wanted to observe further. This process was also identified in the literature by Bandura where it is stated that individuals will select, organise and transform stimuli presented to them from different mediums (Bandura, 1977).

Raised Interest

These accounts indicate that the placement of the Audi in the television advertisements seemed to create a lasting impression for these participants. The three participants recalled that seeing the Audi raised their interest in the video clip however thereafter their attention declined. Once again, it appears that this response fits within Bandura's components for an effective intervention, whereby he stated that the attention of the audience member needs to be attracted so that further learning can occur (Bandura, 1977). In terms of meaning, it appeared that the participants took different meanings from what they had seen. The following accounts provide an indication of the array of different views held by the participants while watching the same advertisement.

P30M: I think it's about enjoying your life like the song said so love your life it said. Ja and like they look like healthy people in it and that first part of the girl and that Audi made me think like oh if she goes there with that guy then I just thought about HIV don't know why.

P27M: we saw that guy and then that young girl and she looked interested in him and he was bribing her so like I thought he wants to sleep with her. Then in my head I thought about the two of them wanting to have sex and then a question came into my head what about HIV and then I was hearing love your life and I knew that this has something to do with HIV and AIDS because loveLife is all about that.

P17F: like that other girl, she was doing the washing in the river and then she started running off with those LoveLife people. So it just shows follow them because they are making the right decision.

It appears that Participant 30 used the LoveLife song and matched it to the way the people looked; he then concluded that the advertisement conjured thoughts of health and healthy living and then led to thoughts of HIV and AIDS when he saw the man in the Audi along with the LoveLife branding. It seems that when he saw the LoveLife branding

he drew on existing knowledge of what the campaign is about and came to deduce that it may be about HIV and AIDS. This is aligned with the literature which states that Lovelife attempts to use branding to create a sense of a lifestyle. The designers tried to develop a “loveLifestyle” that can be associated with an HIV free generation (loveLife, 2000). Participant 27’s perception of the advertisement was quite similar. He too used the song and his existing knowledge about LoveLife to conclude that it was about HIV and AIDS. Participant 17 seemed to have a different experience where she expressed that the dominant theme in the advertisement for her was decision making. She found that the portrayal of the lady doing washing and then leaving with people representing LoveLife led her to believe that the scenario was re-enacting decision making. This is aligned with the literature which recalls that carefully designed media messages can bring about audience reflection of their own lives and behaviour, promote public discussion and dialogue on social issues and move audience members to consider new patterns of behaviour (Piotrow, Kinchaid, Rimon & Rinehart, 1997).

Two participants highlighted that they picked up on the role of different age groups within the television advertisement. Participant 33 found that the advert tried to incorporate all ages of people by representing them through the characters. Participant 32 also indicated that through the advertisement she found the a message regarding the affect HIV/AIDS can have across all age groups

P33F: but there were also old people in it too so it’s not only for youth. I saw older people also running with that LoveLife crowd I think a rural gogo doing washing went with them also.

P32F: no I think they trying to show young people that old people also care and maybe also more than that the old people can also be affected by it (HIV/AIDS) themselves like they can still get it or the old people can be supportive to young people that have it too.

These sentiments are aligned with the literature which states that programme designers need to look at the characteristics of the target population and gear their campaigns in such a way that they are effective for that age grouping. The notion of compatibility highlighted by Croyle (2005) explores the way in which programs need to be age specific to ensure effectiveness.

Participant 25 recalled feeling very strongly while watching the television advert. She found herself wanting to respond to what she was seeing by shouting at the screen. She found that as she watched from the beginning her perception of the man changed as he presented the jewellery and she was left feeling as though she needed to warn the girl.

P25F: I was saying that she looks like an average girl, like a township girl that we all know and so you get interested by that because she looks like she could be your friend so you want to know what she's going to do. Then you see that smart Audi coming in and that cute guy and like if you like love and falling in love like you want them to be together and you hope like she sees him and he sees her and they can fall in love. But then like he shows her that bling by the window and you like aai, this guy is a skelem. He wants to use this girl, he's bribing her with necklaces and jewellery and stuff so then in your head you like want to shout at her don't go with him! Don't do it! And then like I realised how much I was getting involved in this advert when I started feeling for her like that.

Positive Elements

Messaging

The different participants held a variety of different perceptions and understandings regarding what they were seeing. However a particular strength of the advertisement was highlighted according to Participants 18 and 24. Here they both highlight the fact that the advertisement does not mention the word HIV or AIDS or any other terminology in this area. They found that this was a positive element of the advertisement.

P18M: but there was that part when that girl reached the car I think that part showed inequality. That man was driving a car and that girl was walking it just shows that you must love your life no matter how low you think you are. That it's important. Even though it's not really saying anything about HIV like loudly, I think there's that little message there. Like you can think maybe they want to protect you from this and this.

P24F: I just noticed, well I don't know if this is right but it's like what I see around, that you usually see boards of this Lovelife with some purple on it and they give the phone number but here they sort of put that whole idea into like a motion thing. Here you can watch the actions of people and like you see that girl going to that car and you get interested about it. You want to know what will happen. Like they don't tell you nowhere about HIV or condoms but you got an idea in your head that hey she's with that guy doesn't she know she might get infected.

Participant 18 and participant 34's accounts present an opposing view when compared to the literature surrounding this issue. Literature has suggested that by not

mentioning HIV or sex, print materials have been criticised for being non didactic and indirect (Parker, 2006; Marschall, 2004). However this approach has been outlined by Lovelife as a way of getting audience members to engage in debates around HIV and AIDS (Lovelife, 2000). Programme designers defend this criticism by stating that in fact they have achieved what they set out to do, to create a national discourse (Lovelife 2000). This can also be viewed in terms of Freire's notion of problem posing. The sentiments of the participants align with the programme designer's aim of creating a discussion around a topic or a problem. Freire (1970) also suggested that if one poses a problem to the student/audience they will develop on their power to perceive critically the way they exist in the world. This implies that the audience is given the opportunity to engage with the topic in terms of their own experiences and contexts. It also appears that the lack of the words HIV or AIDS have allowed this discussion to develop.

Participant 34's account of her experience while watching the television advert gives an indication of her growing interest and intrigue at what she was watching. She expressed that the scenes made her feel curious as they carried on.

P34F: I think was cool. I liked it a lot. It was clever I think, that they that they started out with that girls and that guy in the car like it made me want to find out about what's happening next. I was asking myself if she is young or is she in love with that guy or is he a sugar daddy. Questions were poking in my head and I wanted to keep watching to make me know what's going to happen.

This response provides an indication of the feeling of "inspirational optimism" as mentioned by the literature (loveLife, 2000). Similarly this participant expressed a growing interest for the character in the advertisement. She expressed that she was concerned about what was going to unfold for the young girl. This is aligned with the literature which states that learning can occur through observational role modelling (Bandura, 1986). The literature suggested that HIV/AIDS media interventions should present role models for the audience so that the desired behaviour changes can be modelled. In this way the audience is able to emulate these healthy choices in conjunction with the theory which favours observational learning.

Another positive element to the advertisement was emphasised by Participant 27 who explained that he felt that the message and the way in which it was portrayed was

targeted for the youth market. He found the use of the song, bright colours and dance as tools used to draw young people's attention to the advertisement.

P27M: Ja They tried to like target like us young people because they used a cool song and a nice car and they ken we will be sitting up and watching if we see that kind of thing because that's what we like. They wanted to grab us. I think they also used some colour like orange and dancing also to show us that it's for us.

This may be viewed as an area of strength for the campaign as literature has reported that LoveLife's main goal is to reduce HIV infection through strategic youth intervention targeting young South Africans aged 12-17 years old (LoveLife, 2000). Participant 27 has identified that as a young person fitting in to this target age group, he was drawn to the advert due to its style and approach. James, Hoff, Davis and Graham (2005) highlighted that these intervention programs need to be well devised for the adolescent age group in order to make an impact. Participant 27's account indicates an experience of this. This can be viewed to be aligned with the literature which outlines Freire's notion of the participatory process of education and the development of dialogue between programme designer and audience member (Freire, 1970). The participants sentiments echo Freire's idea on creating communication and understanding the appeal needed to draw in an audience.

Negative Elements

Confusion

There also appeared to be elements to the advertisement that were negative regarding their effectiveness. As discussed above some participants were able to draw meaning and their own interpretations from what they were viewing, however it appeared that others could not.

P31F: I feel like a bit confused about it, like I know what they trying to say and stuff but I wish that it would be easier to get the first time. I think that they don't need such a long advert on TV to say what they trying to say. I think they must just say it a few words they don't need like this huge production of things like actors and cars, I seen a car there and they don't need it. They can just have the song there and someone talking or words on the screen about HIV and how you get it and how you must prevent it, I think that's good enough.

This participant found that the advertisement was too complicated. She expressed that she would have liked to have seen something simpler. This is aligned with Witte (1992) who argues that elements of the campaigns can often be seen to lack a theoretical basis and the result of this may be an ineffective intervention. Similarly Tommaselli (2003) argued that the messages in the LoveLife billboards are poorly conceived. Martins (2007) holds that it is difficult to extract meaning and understanding from them due to their abstract style. The participant also indicated that from her point of view she would make certain changes to make it more understandable. These include keeping the LoveLife song and incorporating a clearer message relating to contracting HIV/AIDS and/or prevention. Similarly literature has suggested that the LoveLife campaign has been criticised for its lack of directness and clear messaging (Parker, 2007).

Recommendations

Participant 11 commented that she would have liked to see certain changes to make the advertisement more effective and provide a “stronger impact”:

P11F: But I think they should have showed a sick person suffering from AIDS maybe that will give us like a stronger impact. Like this one we know okay it's the LoveLife song and these party people but the impact its like something missing. Maybe they could show the sick person and then show the dancing and show like the two choices you can make, the good one versus being sick.

It seems that she found the advertisement did not convey its message effectively as she found that the style of advertisement left her with doubt as to whether the message surrounding HIV/AIDS education was actually there. She commented that she would have liked to have seen a clearer representation of individuals coping with the disease and suggests perhaps portraying a sick person and a healthy person to develop thought in the viewers mind around the kind of life they would like to live. This is aligned with literature which highlights that an AIDS prevention campaign should incorporate different components to be effective. One such component includes an informational approach to increase knowledge around the issue (Bandura, 1989). Bandura's notion of self efficacy is also highlighted this response. The participant feels that by showing the audience a sick person suffering from the disease can evoke questions relating to self

efficacy of an individual. Bandura (1989) argued that by modelling and individual in this way one may then question ones own ability to stay healthy and avoid getting infected. Participant 11 identifies the need for this as she questioned whether a message was present in the medium. This is also aligned with literature pertaining to the evaluation of Lovelife (Martins, 2007). Here the participants mentioned that the slogans and messages within the Lovelife campaign were too difficult to understand.

“No till we know”

Different Perceptions

Creation of meaning

This billboard forms part of the Face It campaign from Lovelife. The theme of these billboards is black and white with large white phrases such as “No till we know”. Certain participants were able to extract their own meanings from these billboards as indicated below.

P31F: umm this is the way all the boards for loveLife are. I see them in the same style I think. They not exactly the same but something like this I think. Umm I seen them having big words like this across them in big letters and then some kind of picture so I think this is their trend, I mean their theme. Anyways I was saying that this board is like showing this young guy on it and he looks so depressed. His head is sort of on the side and he’s thinking hard about something. I think he’s maybe thinking about those words on the there, the ones in white. He’s saying that to someone and its hard to think about it I mean No till we know I mean its like saying that no sex until we know each other and know our status. Maybe he has a girlfriend and he’s got to tell her this so it’s upsetting him because he can’t have sex.

The participant seems to explain his experience of the billboard and the message he perceives. His explanation about a message does indicate an understanding that it is about knowing your partners status and abstinence. He does not use the word abstinence and the billboard too does not use the word. This is aligned with the literature which finds that many loveLife billboards are not explicit in their use of terminology (Parker, 2007). However this factor has been criticised saying that the mediums are then too indirect and thus ineffective (Tommaselli, 2003). This contrasts to this participant’s response as she was able to draw out the intended message.

The following excerpt indicates the different extractions that participants choose to focus on with regards to what the billboard was about. This is aligned with the literature which states that two people may process information in very different ways because of different life experiences, cultural backgrounds or mood states and as a result of which they may each come up with different understandings and decisions related to the same health message (Witte, 1992). These three accounts reveal that the participants were able to pick up on the theme of knowing ones status before having sex. The use of the word “know” appears in all three accounts and in the billboard. The word “know” seems to have sparked off a train of thought around knowing ones status and knowing ones partner.

P26M: I think this one is looking at like a persons HIV status and they trying hard to say to people go to test and know your status. That line we hear so often – “know your status” and I think this one is picking up on that idea.

P24F: um like no sex till I know you and we in a relationship I think? It’s like I think trying to teach about safe sex. Like we must be in love before we get into bed with each other.

P22M: I agree with that you have to know that two pieces of information before you sleep with someone. Know them a bit and know your status. Especially for girls like they should know about the guy first like know if he’s a player or what, know about the reputation of that guy also.

P21M: I think it’s about knowing your partner and knowing your status so I would say it’s both. It’s just about knowing.

These sentiments align with the literature which states that in order to bring about behaviour change regarding sexual practices, the target audience needs to find that there is an alternative to the situation which they find themselves in. thereafter motivation should be encouraged by inspiring the audience to change their behaviour and notice benefits to their involvement in the process (Parker, 2006). In the above excerpts it is clear that this process has started to develop. The participants mention the alternative situation of waiting to have sex and knowing ones partner. Participant 24 also mentions being in love before having sex or understanding your partner’s background fully before engaging n sex as a way of protecting yourself. This indicates an understanding that they will benefit from safe sex practices.

Positive Elements

Interpretations

The following excerpt encapsulates the way in which participant 21 was able to extract meaning and develop an understanding of the billboard. He identifies that a particular strength of this billboard lies in the fact that it challenges gender stereotypes around HIV and AIDS. This in accordance to the literature which states that loveLife aims to change pervasive values and attitudes of young people towards sex, sexuality and gender relations (loveLife, 2000).

P21M: But I can see what they were trying to do now. And it's actually quite clever. Okay let me break it down for you guys, you see that we were talking first about girls knowing their status and stuff right, but we always do that haven't you noticed? We always talk about the girls not knowing stuff but here they showed a guy holding back. And this is right because I think they know that guys have more trouble keeping it in the pants. (Laughing). Its sounds funny but its true. They trying to educate the guys here to say like hold up bra, you gotta know who you sleeping with and then if you also know your status you won't infect someone else too, check?

Participant 21 explains that the usual discourse around HIV and AIDS education involves females portrayed as being ignorant about their status and being warned to be aware about who they are sleeping with. He highlights that in the past HIV/AIDS education has centred on showing girls refraining from sex to show that. He identifies that this billboard provides a different approach by showing an individual that is a male and stating that in the slogan he will refrain from sex until knowing both his own HIV status and that of his partners. Participant 21 highlights the way in which gender stereotypes have developed around sexual behaviour. He appreciates this form of billboard as it tends to challenge these stereotypes in his opinion. This idea is discussed further by the following account in which the participant felt that both genders were being targeted by the billboard. She found that this approach is different to what she usually sees.

P24F: Like usually girls always get told to be aware of guys and not get tricked and stuff. But here they at least showing that it's everybody's problem.

These two accounts indicated the sentiments provided in the studies by Parker, Dalrymple & Durden (1998) who argue that the development of sound and effective communicative mediums relies on certain principles. Socio-cultural factors are highlighted as important considerations to understand when developing and relaying an effective message regarding HIV/AIDS. Parker et al. (1998) identified that issues such as gender need to be considered when designing interventions as they may influence an individuals perceptions. The sentiments of Participants 21 and 24 indicate an appreciation that this particular billboard thought about and challenged certain gender stereotypes that they have come across in their experiences.

Participant 26 identified that this billboard challenged gender stereotypes against men. He felt that by showing a young man on the board with the indication that he would be refraining from sex, shows the audience that men can refrain from having sex in his opinion. He seems to be satisfied that men are being portrayed in this light.

P26M: He does look unhappy hey like its difficult choices for him to make but he's doing it. Never mind I think it's cool what they did here then to make the guy say no and show girls that we can change.

This is aligned with the literature in which Parker, Dalrymple and Durden (1998). It appears that the participants found that this medium did consider factors pertaining to gender.

Negative Elements

Aesthetics

There also appeared to be elements of the billboard that were perceived as negative regarding its effectiveness and its style. As mentioned above certain participants believed that the billboards approach of representing a young man was effective. They felt that it was comforting to see a different take on gender stereotypes. However on the contrary participant 17 identifies that the slogan clearly states “we” which she has interpreted as referring to both genders. She finds that by not portraying a young girl or a woman on the billboard it then insinuates that it is young girls who are HIV positive and the boys need to aware of them.

P17F: And here they mustn't only put a guy picture. It's Till We, its says We so it means between two people not only one. They didn't put the girl maybe they saying only its girls we are the only infected ones. They can't discriminate someone like that.

In terms of the billboards clarity and effectiveness, Participant 3 commented that he found the slogan difficult to understand. He believes that you need to be bright and knowledgeable in order to clearly understand what the phrase “no till we know” is actually saying.

P3M: I think it takes a clever person to understand this thing that says “no till we know”. I mean the average guy on the street won't understand it I think. Is hard to figure out so I don't know why they bother putting something up that no body is going to understand.

Furthermore he recalls that he found the billboard to be wasted as the audience would struggle to understand it. This is aligned with the literature which highlights that message goals and the focus of the message must be clearly defined in order for individuals to process the message and adopt the behaviour or attitude change (Ajzen & Fishbein, 1980). Similarly Participant 25 found that when reading the slogan initially he struggled to make sense of it. He goes on to explain that only after engaging in a discussion and exploring the possible meanings, was he able to get an understanding of what it might mean.

P25F: I think for me when I read it first it was like I couldn't get it what were they talking about it wasn't clear hey. Then when you were talking to him I was like thinking about what it could be. I felt a bit stupid because I couldn't get it.

This is in accordance with the literature which states that the messaging in the LoveLife campaign has been criticised for being non-didactic and sometimes extremely indirect. The programme designers argue that the purpose of outdoor media is to spark a national conversation (Parker, 2007). Participant 35 elaborates that in her opinion the phrase “no till we know” would not be effective to an audience as she finds it unfinished. She describes that not many people will have the time to attempt to understand the phrase by completing it for themselves. Thus she recommends that it should be made clearer and more direct.

P35F: I think these words mean nothing to people if you don't spell it out to them that no sex until we know our status or our

status'. Its like a fill in the blanks here and we have to fill in the blanks to understand. If you have the time then you can do that. But if you see it quick quick you will miss out because you won't remember what you saw.

This account contrasts with the available literature on the approach and designing of these LoveLife billboards. Parker (2007) asserts that in its approach, loveLife's print materials have purposefully eliminated the use of the words "HIV" or "sex". He explains that programme designers did this to spark a national conversation on the topic instead of representing it systematically. This participant appears to have picked up on the ideas presented in the literature. Valdiserri (1989) and Bandura (1989) explore the need to create media interventions that have an informational component that teaches the audience about the risks involved in unsafe sexual practices or teaching them about the social support that is available to them for example where to go to get an HIV test. However this also contrasts Freire's (1990) notion of education as he opposed a "banking style" where information was merely deposited into the individual.

In terms of aesthetic appearances participants found the black and white effect of the advertisement to be dull and boring. These three participants felt that their mood declined when looking at the black and white billboard. They identified that the previous campaign with the television advertisements that used colour, held their interest and attention. Furthermore Participant 29 explained that he felt that the billboard would not be noticed by many people as it was not eye catching enough.

P27M: Ja that's true just now that TV ad was so loud and colourful and now its sort of gone down. like the quality of the ad and our mood I think, what do you think guys?

P30M: ja I think he's right definitely our mood went down especially after seeing this poor guy and he's so sad! Shame.

P29M: it's a bit disappointing this one they used no colours here I don't know why. I think they won't get a lot of responses to this advert because people will look at things that catch their eye not boring things that are dull.

This notion is also represented in the literature wherein the Elaboration Likelihood Model identifies that when an individual becomes interested in what they are exposed to they are more likely to think about it and evaluate it for themselves. The attitudes developed in this process could change a person's behaviour and overall attitude

in the long run (Witte, 1992). The above accounts indicate that interest was not developed and this may have affected the effectiveness of the medium for these particular individuals. These sentiments are also echoed in a 2007 study by Martins where participants found that within this very campaign, the messages left individuals feeling confused. The loveLife objective was also highlighted as being not straightforward enough.

Recommendations

In order to combat the shortcomings of the billboard, as mentioned above, the participants provided recommendations for future interventions as a way to develop the audience's interest and effectively transmit the desired message. For example, as mentioned above a criticism of the billboard was that participants found it to be dull due to the use of colour, thus Participant 35 recommends the use of colour to create a better atmosphere. She found that by doing this more individuals may be interested in the billboard as it would incite interest and curiosity.

P35F: I think they must use some colour next time. This is so dull no one on will be interested in it. If it was bright and it had some better atmosphere I would look at it and wonder what they talking about. Ja that atmosphere is sad there and depressing.

Another shortcoming of the billboard that was identified by the participants was that of a lack of directness and clarity in terms of the message that is being communicated. It was identified that it felt like a part of the message was missing as Participant 35 identified above. Thus as a way of improving on this, Participant 9 suggests that the words "HIV Face It" which appear on the billboards corner, should be enlarged. She proposes that by doing this it might grab an individual's attention. She also explains that this approach would then lead to most people understanding the billboards as she believes that most people are familiar with the term HIV.

P9F: But I think they must enlarge the "HIV Face It" because it's so unattractive and make it stand out more, for somebody who doesn't really understand the English language wouldn't figure out what are they talking about. But like HIV everyone knows it so if you just say "HIV Face It", I would stop and say let me just read what this is about

Participant 9's ideas pick up on the need to have a component that grabs one's attention. Bandura (1977) highlighted this concept by stating that within the principles of observational learning one needs to have a component that will draw the attention of the viewer and then hold that attention. Due to the age of the target population, the participants have mentioned that perhaps colours could perform this function. Hence the black and white style is found to be inappropriate in their opinion.

Developing on this idea, Participant 11 highlights that if she could make changes to the billboard she would add to the picture. She explained that she would like to see two people on the board going for the HIV test. Participant 25 also seems to be responding to the criticism that one gender was represented in the picture.

P11F: Maybe two partners? People in a relationship going to test and then add in the slogan "No till we know our status" just so that you can match the picture and the slogan.

P25F: but like for me then if you saying that why did they put a guy there then? If you telling me that they telling girls to know if the guy is a player then why didn't they put a girl on there saying no to a guy. Maybe that's something that they can do next time.

Participant 12 elaborates on this idea and adds homosexual relationships seem to be excluded from being represented in this context. This aspect was not covered in the literature and it appears that the consideration of adding homosexual relationships has yet to be explored by Lovelife.

P12F: But they could show a boy and a girl or two friends going together. Even maybe a gay couple.

"Prove your love, protect me"

This billboard also forms part of the Face It campaign from LoveLife. The theme of these billboards is black and white with large white phrases such as "Prove your love, protect me". The billboard depicts a picture of two faces a young man and a young woman, facing to the right with the words across the board. The picture used in the study was a photograph of the billboard placed in a rural area.

Different Perceptions

Creation of meaning

After viewing the billboard participants discussed their perceptions of what they had seen. It soon became clear that participants had extracted their own meanings based on what they had seen. For example

P10F: I think this one is true it encourages couples or people in relationships to be faithful to each other. "Like you prove your love you protect me". Like you be faithful to me and you're protecting me.

Participant 28 expressed a different perception of the billboard. He identifies that the message is important for him. He highlights the fact that it may be about safe sex practices however the words do not appear on the billboard. He also touches on the issue of gender by saying that by having the phrase written across the woman's face he perceives this as if she does not hold a lot of importance in the billboard. Participant 28's account of his experience of this billboard indicates the variety of different elements that can be explored from a single medium.

P28M: I think that they shouldn't have written on that woman's face. It looks like she doesn't matter in the situation. And for me it seems like what they trying to say here is so important because I think it's about safe sex. I know they never said that words but they say protect so I think of that. But also something else that is important is that they talking about responsibility and taking responsibility like for your partner and it's also about love. Haai, this one is deep. It looks like its only two lines and two faces but it's got a lot happening in it I think.

Participant 28 indicated that he was able to pick up on the issue of gender when he saw the writing across the woman's face. This appears to be his own deduction and not a purposeful element on the part of loveLife (Lovelife, 2004). The participant found that when he saw the words displayed over the woman's face he perceived this as gender inequality as he felt that the woman was portrayed as if she did not matter. Parker et.al (2007) identifies the need to ensure that HIV/AIDS media interventions are representative in terms of the target groups and specifically in terms of gender. This participant also highlighted the fact that the words "safe sex" were not written on the board, yet he was able to extract this particular message from the billboard. This is

contrasting to the literature (Parker, 2007) which criticises loveLife for not being direct with its messaging. Parker (2007) argued that the lack of such words on the loveLife billboard could lead to the message s being lost by the audience. While Lovelife responded by saying that this was their style and intended approach. The programme designers argued that by not explicitly mentioning these words a discussion and a debate could ensue around the topic. This is evident from the participant’s response whereby the phrase “safe sex” was not present yet he was able to pick up on it and discuss it s importance.

Participant 26 elaborates on the fact that Participant 28 perceived the billboard to be about responsibility. He states that he did not observe this. He states that the role of the audience comes into play as in his experience he found that he created his own meaning from the billboard. He explains that perhaps each individual may respond in this way and pick up on different segments to create a meaning and an understanding from the medium. This is aligned with the literature which recalls that media messages can bring about audience reflection of their own lives and behaviour, promote public discussion and dialogue on social issues and move audience members to consider new patterns of behaviour (Piotrow, Kinchaid, Rimon & Rinehart, 1997).

P26M: You see now I never got all that stuff about responsibility and whatever. I think its up to the person that looks at it to understand what they see maybe in their own way. I mean like the person will have their own meaning for it I think that us our group will all understand it differently to each other like its not the same for any of us.

Positive Elements

Messaging

It appears that the participants encountered difficulty in picking up specific positive elements from this billboard. Their input appeared to be minimal. However one participant responded to the fact she found the phrase “prove your love” to be positive. She explained that she appreciated these words as she perceived this phrase to be said by a boy and yet she felt that in this case it could be interpreted differently. She expressed that the phrase is usually used in the context of proving ones love by having sex and she felt that in this case it could be about protection.

P6F: this one is very captivating. For the first time I see that “prove your love” means something else. Usually a boy tells a girl that and he means prove it to me by having sex. So now its saying protect me and prove your love also so its quite something.

Participant 32 highlights that she felt that the billboard touched on an important issue for her. She explained that in her opinion, the issue of individuals engaging in sexual behaviour and with different partners is very important. She states that this billboard speaks to young woman and girls about taking a stand against promiscuous behaviour.

P32F: These words here across are so strong because its such a huge issue of people cheating and sleeping around so I think that the face shows that girls and woman are standing up to these players now and saying that we wont stand for this anymore we want to protect ourselves from HIV too.

This is an important statement as indicated in the literature, one of the primary aims of loveLife is to increase awareness around protection from HIV and increased condom usage (loveLife, 2000).

Negative Elements

Placement and context

In terms of the negative aspects of this billboard, participants found that the placement of this billboard was “typical”. Participant 23 commented that when he sees a LoveLife billboard that is placed in a rural area he perceives this as a communication that HIV is only present in poor areas. He also explains that he found the billboard to target a black audience only.

P23M: How typical hey, a loveLife board in a rural area. That’s what you see in rural areas and townships these loveLife boards everywhere telling the “black” people about HIV and AIDS. This board is tired. Ja overdone and also like every time you see a township on the news or on TV there’s always a LoveLife board in the background. Maybe like on every corner there’s a poster or boards. Because they saying that HIV is only in the poor areas where the blacks are.

Participant 23 identifies that he is tired of seeing these kinds of loveLife boards represented in this way in the rural areas and the townships. Literature suggests that in

terms of loveLife's reach, the hard to reach rural poor individuals have been identified as an area wherein loveLife has seen great success and effectiveness (James et al, 2005). However this is not viewed in such a positive regard by the participants. Participant 21 highlights that these kinds of boards are usually seen in the townships. He explains that he would like to see these billboards in suburbs as well and in his opinion he interprets this as a communication that the programme designers are saying that HIV is not present in other communities except the township communities.

P21M: But why always at townships? Why don't they put it in the suburbs? As though people there aren't having HIV. Its everywhere I think but it's not spoken about everywhere. When it comes to rural and poor areas they think people are ignoring this disease so they make it more known there.

Parker, Dalrymple and Durden (1998) argue that before one places or even develops a media intervention regarding HIV/AIDS education the population one is aiming for should be considered thoroughly. It is suggested that in order to have effective communication of the medium the profile of the intended community needs to be assessed. Parker et.al. (1998) highlight the importance of obtaining health indicators for the different target groups. This is to provide designers of interventions with information regarding the infection trends of the community and the highest at risk groups so that the intervention may be targeted directly to such groups or communities. An analysis of HIV/AIDS population distributions by Dorrington, Bradshaw and Budlender (2002) indicates that the highest levels of HIV do in deed occur in rural areas of South Africa. Within in this study a projection towards 2010 was made and the prevalence of HIV doubled in these areas (Dorrington, Bradshaw & Budlender, 2002). Thus LoveLife's placement of these billboards is aligned with studies that indicate the highest prevalence rates. Thus loveLife has attempted to reach a target population that is most affected by the virus.

Participant 2 states that by placing these billboards in the townships the issue of socioeconomic status also comes into play. She states that it communicates to her that perhaps individuals from higher socio economic standings do not get affected by HIV and AIDS. She would like to see more races represented in these billboards and identifies white people in particular.

P2M: this thing disturbs me because I see like an old house in the background like a township but also rich people get affected. So they should show a huge mansion and people in it and the same kinds of messages. Maybe throw n some white people too so that its not just black people all the time.

This is echoed in the literature which addresses issues relating to the target audiences (Parker et. al, 1998). In this study the researchers concluded that it is crucial to firstly understand ones target audience specifically the economic indicators of the community as they will give an indication of the audience's activities. This is to be done so that the media messages can be appropriate for the audience. Similarly from a theoretical viewpoint, Freire (1990) emphasises the role of dialogicity and the need to communicate with the target audience so that a representative medium is developed so that ultimately it will be effective. Freire argues that by opening up the communication channels between designers and the audience it is anticipated that issues such as racial representation needs can be addressed.

In terms of effectiveness Participant 22 highlights that she finds the billboard to be ineffective in teaching the audience about safe sex practices. She would like this medium to be clearer by addressing the prevalence of HIV and the need to practice safe sex.

22F: There are boards and stuff right but they not teaching these people anything. They like show these ads and these people but they don't teach them. They need to be showing them or being clear that there's this disease and you need to practice safes sex.

This is aligned with the literature (Martins, 2007; Tommaselli, 2003) which found that messaging in the loveLife campaign was poorly conceived and thus difficult to understand by the audience. The participant's sentiments are also aligned with the literature which suggests that in light of the Protection Motivation Theory (PMT) the presentation of a cognitive threat is what lead to attitude and behaviour change (Witte: 1992). For example this participant found that the board was not teaching her anything when it stated "Prove your love, protect me". She identified that it would no lead to individuals changing their behaviour in relation to safe sex. Thus in terms of the PMT approach the board could present a threat such as "unsafe sex could lead to HIV

infection”. By doing his the theory posits that the individual will then perceive the threat cognitively and seek a means to protect themselves, in this instance with condom usage (Rogers, 1983; Witte, 1992).

Participant 2 explains that if the level of education of the viewer is low and they are unable to read they need to be able to rely on the pictures to teach them about what the billboard is about. However he finds that the pictures do not assist to do this

P2M: ja like what about people that cant even read they need to look at pictures and if you just see two faces then what does that teach you.

This notion was also conveyed in the literature (Parker et.al., 1998) wherein the researchers believed that often an analysis of the target audience is missing. They found that by looking at various factors such language, level of education of the audience, myths, beliefs, needs etc the campaign designers could then develop a more well rounded campaign so that the audience is targeted appropriately. This notion is also strongly emphasised by Freire (1970, 1990). Freire postulated that educative mediums fail because the target audiences often go unheard. He believed that full understanding of the target population is needed along with communication between the two parties to identify the needs of the population. This idea was also explored by Parker et.al. (1998) and Reddy et al. (2003) whereby the need to profile the target community emerges again. It was found that to avoid the situation presented by Participant 2 whereby illiterate individuals are left with no understanding of the medium, programme designers need to understand the elements of the target population. After considering the amount of individuals in the community who have had access to schooling, or who are literate the medium can be designed to match the levels of education of the audience so that the message can be communicated effectively (Parker et.al., 1998; Reddy et.al., 2003; Pettifor et.al., 2004).

Recommendations

Participants responded to changes that they would make to the billboard to increase its effectiveness. One of the dominant themes that emerged was the use of celebrities on the billboards. Participant 35 and 32 discussed that using celebrities would lead to young people being able to identify with these billboards. She expressed that in her opinion if

there is a celebrity or a public figure conveying this message the young audience would be positively influenced by this.

P35: I think I would show the girls whole body and some funky clothes. You know what they could also do for all these boards? They could show some famous person saying these sayings. I think people will listen to them. Look you see if they put like DJ Fresh there saying something like no till we know people will look there because they want to see what Fresh is doing and then people will read that in the words and think oh Fresh is right. You know people love to listen to celebrities especially young people like us. I know my friend will copy anything a celebrity does so I think it will work.

P32F: that's a very good idea. You talking about Tumi neh, she does everything that Paris Hilton does and she will buy all the clothes and talk like that too so it will work I think.

P35F: Ja she does. And then it gives our South African celebrities a chance to get involved in a cause and say look we support this thing and we don't want this virus o affect our fans so its such a great idea, you must tell them

This notion is explained by Freire (1970) where he identifies that a major shortcoming of communicative education lies with the fact that the target population for which these interventions are aimed are largely unheard and not considered. He outlines that the themes used within these interventions need to resonate with the audiences experiences and issues that are significant to them. Here the participant's accounts highlight that for them in particular the use of a celebrity would appeal to and resonate with them effectively. The recommendation of using celebrities as role models is also echoed in the Bandura's theory (1977, 1989) whereby observational learning is considered as an effective tool in education of a specific topic. Bandura (1989) explores that by observing the behaviour of others we can learn the probable consequences of behaviour by watching what happens to others. Thus the three participants suggest using celebrities to model the correct behaviours. This idea has been found to be an effective tool in altering risky behaviours. Bandura said that individuals copy what they see from a role model, thus if the celebrities/role models mentioned here were portrayed in terms of healthy choices or behaviours the target population could emulate this behaviour and thus the desired attitude and behaviour shift would be achieved from unhealthy practice to healthy practice.

“His and Hers”

The third loveLife campaign is characterised by its bright purple aesthetic and minimalist phrases such as “his and hers”. This particular billboard depicts a picture of two puzzle pieces in the background with a picture of a cartoon style drawing of two naked figures, one male and one female. The figures’ genital areas have been drawn in white to draw attention to these areas. On the right hand side of the billboard are the words “His and Hers” in a bold purple font.

Different Perceptions

Reactions

After viewing this billboard it became clear that participants began to feel very strongly in response to the nudity depicted on the board. These two accounts from female participants explain that they felt the use of nudity was inappropriate.

P31F: you don’t just put nudity on the poster like that. I hope its not a billboard because young kids can see it and they will get traumatised. They will start to think about sex and then look at their private parts and look at other children’s private parts and then its just wrong and dangerous when that can start to happen.

P34F: all people everywhere, no one wants to see naked pictures of people’s private parts on a board.

The style and the approach of this billboard along with the two responses of the participants provide an indication that the nudity presented on the billboard was not deemed to be suitable. These sentiments can be understood in terms of the literature which suggests that in terms of persuasion theories, one method of persuading individuals to change risky sexual behaviours is through the use of something provocative or threatening. It is theorised that when this threatening or offensive scenario is presented the audience member may perceive the underlying threat related to the messages. For example in this depiction of the cartoon characters and the nudity the audience member may view this as a heightened sense of awareness of their own body when they view the nudity. This may lead to cognitive mediation process according to the protection motivation theory whereby the individual assesses their own susceptibility. This may then lead the individual to become more conscious of their own body and the need to protect it (Witte, 1992; Littlejohn, 2006).

Participant 34 goes on to question the actual effectiveness of this billboard by stating that this approach is not educative and informative. She expresses that in her opinion the designers of this medium attempted to shock the audience in order to elicit a response

P34F: And it would be different if they knew what they were saying. But here they got like his and hers so what? We know what hers looks like and what he is supposed to have so now what they not teaching anyone anything here. They just trying to get people to be shocked and then they will be happy.

Similarly participant 22 identifies that the use of a shock tactic was used. She demonstrated this in the group by observing her male group members. She believes that the designers approach was to try something different by using the kind of picture that would create a discussion. This is in accordance with the literature surveyed which states that one of the aims of outdoor media is to spark a national conversation by not mentioning HIV and AIDS or abstinence etc. (Parker, 2007).

P22F: I mean Tshepo almost fell down when he saw it! So like anyone will just be shocked I think. I think they wanted to try something new here to see if it works maybe. Like the ones were different so maybe they said haai those are boring and they not working so let's just go big here and show something that will get people to talk. Even if they don't know its loveLife they will talk and be like dam did you see tat I wonder whats that about. Like this one I think they thought about it carefully and then decided to put it on there.

Participant 35 explains further that the use of this style of billboard was purposeful. She believes that even though some may find the billboard to be disturbing they would still be talking about it and creating a discussion. She highlights that curiosity may develop in relation to it as people would be seeking more from the phrases or the pictures. This is identified as a starting point for the development of discussion in her opinion.

P35F: I think that they mean to get people to talk about this board more. They did it on purpose they want people to go away home and say oh my god did you see that terrible board on M1 and then the other one will say Ja I seen it, it was so bad, what was it for and then they will say its that LoveLife thing and then they will say I wonder what s that about and then others will say maybe its about sex and maybe its about bodies and then you see people start to talk they discuss these things. Before they would have never done it so they like give them a

starting point even if its shocking like that I think its better to their campaign because then more people will talk.

These two responses pick up on the literature which states that a major aim of Lovelife is develop a discourse around HIV by not highlighting these terms explicitly and developing a sense of curiosity for the viewer to develop a discussion (Lovelife, 2006). It is evident from these responses that this process has been successful with these tow individuals.

Participants also began to question the appropriateness of this billboard due to the graphic drawing. The participants expressed that young children and older adults may be offended by the billboard. These feelings are mentioned by Tommaselli (2003) whereby it was found that the content of the loveLife billboards was problematic as they seemed to be inappropriate for all ages. Tommaselli goes on to explain that younger adolescents and older adolescents are very different and thus will process information in different ways. He found that Lovelife billboards of this nature were found to be offensive to the participants of his study as is the case with these sentiments. However participant 35 explains that as a young person she feels that she can deal with the billboard and the picture and is not that perturbed by it due to her age. This is concurrent with the literature surrounding loveLife's planning and designing of these billboards. It states that these media are targeted specifically for the 12 – 17 year old age group. However Participant 35 later expresses concern that by viewing such an explicit picture, young children may try to emulate the picture and the behaviour.

P22F: you never see like private's penis and boobs and stuff so it's like strange. I think here they wanted to shock the old people.

P35F: you know how old people can be just like they find things very scandalous now days even on TV they see some kissing and they get shy but like us young people we can handle it better than them I think we more curious they like worried about what we will do if we see that will we try to copy that and get naked. (Laughs).

P22F: mostly the older people will stare at it and be like look at that! And they will be shocked.

These reactions are aligned with the literature wherein Tommaselli (2003) questions the appropriateness of the pictures in the Lovelife campaigns. It was found that

the portrayal of nudity on these boards was inappropriate for younger audience members that cannot help coming across the pictures as they in public view.

Positive Elements

Effects of messaging

Although this particular billboard sparked off negative comments at the onset, after discussion it appeared that there were positive elements to it. Participant 35 explained that this type of approach forces individuals to grapple with difficult topics such as HIV and AIDS. She believes that individuals may try to avoid dealing with such topics yet they might have uncertainties and the billboard provides a space to talk about these issues without having to deal with them that directly. In her opinion the billboard creates and forces the audience to face the issues at hand.

P35F: it's actually pretty clever I think now, because then it's a way to force people to face some of the issues of sex and sex it's so hard to talk about like with anyone. Maybe its easier to talk about with friends but as a family or at school with teachers no one wants to talk about it and here if they have this picture they can just talk about that and then they don't need to talk about there own issues or their questions they can talk about the board and still get some information without feeling uncomfortable themselves.

Another participant found the billboard to be educative in the sense that he found that it might make the viewer aware of their own body and create a sense of responsibility to keep ones body healthy and protect oneself from infection.

P29M: maybe like in some way you will look at the bodies and become aware of your body and think maybe this is my body to look after it and make sure to keep it healthy and then it mean that if I must keep it healthy I must stay away from HIV. So ja like that I think you can learn something like that.

In terms of appearance, participants found that a strength of the billboard lies in the fact that it utilises bright colours. The participants seemed to identify and associate the colour purple with the loveLife campaign. They explain that the use of the purple assisted them to identify that the billboard was from loveLife. This fall within the findings provided in the literature which states that one of the major aims of loveLife was to create a “brand” or a commodity for young people (loveLife, 2000). This account

indicates that the use of the purple continuous theme in previous campaigns has allowed a theme and the brand of LoveLife to be developed and internalised as these participants were able to identify it immediately.

P33F: I think I like the colours they used here. Like its bright and stuff. And usually this LoveLife thing we know its purple. We always see purple and already you know its LoveLife.

P35F: we got used to it by now, in the LoveLife magazine they kept that colours and then also on like TV sometimes and then some posters around they all have that colour that's why its hard to look at the black and white one because it's so boring compared to this one I think.

Negative Elements

Messaging

There also appeared to be elements of the billboard that were perceived as negative regarding its effectiveness and its style. Participants 28 and 21 expressed that the phrase and the picture on the billboard were not effective enough to convey their message immediately. They found that if an individual were to view this billboard quickly they would not have gained anything from it in terms of education.

P28M: but not everyone on the street has time to stop to appreciate these boards. They can't stop every time and say wait I cant understand something and the meaning of a words so you have to stop the taxi! It doesn't work like that. It needs to be made nice and properly so that when you read I first time you can think about it and learn from it then not afterwards when days have gone by and you need someone to ask questions.

P21M: when you look at this in a taxi or on the street when you going by its just quick and then you see his and hers and then you carry on and they never taught you anything! It makes me angry. It's useless, rather doesn't use a picture and write something worthwhile.

Participant 21 alludes to the fact that the billboard has been wasted as its message is not clear and effective in his opinion. These views can be viewed as problem areas of the campaign. Literature has explained that effective campaigns need to incorporate an informational element in terms of the social leaning theory (Bandura, 1977). This method allows individuals to be empowered with knowledge and skills to cope with their individual situations. This method was also highlighted by Freire (1990) who believed

strongly in liberating the individual from such oppressive forces such as poverty or HIV and AIDS by providing them with education in a participatory fashion whereby needs are understood.

Participant 27 identifies that in some way he is able to make a connection between the words and the picture however that is where the billboard concludes. He too finds that the billboard if placed on the street for many people to access it has been ineffective. He finds that the billboard needed to say more with regards to HIV.

P27M: I think that these words are like saying to people that his body and then her body but we know it's supposed to be about HIV or something and then it doesn't say anything else like it just stops there. They want to teach us about it but then they use such a big board in the street or like I see them by the highway and it's a waste of time.

Recommendations

In order to combat the shortcomings of the billboard the participants identified certain amendments they would like to see in order to make the billboard more effective in their opinion. It appeared that the overall theme for this billboard centred on the phrase "his and hers". Participants desired more clarity on this saying and more information. Participants found the message to be vague and reported that they needed the message to be made clearer and more specific.

P11F: That headline needs something more than just "his and hers" I mean what does that mean. There's no action to it or context it's just like words there. They can try to put across more of a whole idea.

P12F: Exactly its like you look at it and it's like His and Her what?

P2M: maybe they could be more specific about the message. Like they could say talk about it or its happening that would be better. The "talk about it" is like the real message.

Within this campaign from loveLife, another billboard was chosen for viewing to develop a fuller understanding of the perceptions of the different elements available within a single campaign. The item that was viewed was a billboard in the similar style of purple and blue. However this billboard contained the word "HIV". The billboard illustrates a black background with large bold writing stating "Face it teen pregnancy

increases risk of HIV”. Below this phrase stands a picture in luminous green of a pregnant abdomen and a breast in the form of two swellings. The head and other bodily parts have been omitted.

“Teenage pregnancy increases the risk of HIV”

Different Perceptions

Creation of meaning

After viewing this billboard it became clear that the different participants were able to extract different meanings from what they had seen. For example Participant 29 explains that the use of the pregnant body for the picture matched the phrase at the top. He found that this particular billboard was effective in terms of educating young girls about teenage pregnancy. Participant 22 explained that drawing from what she had seen on the billboard she found it to contain a definite message and a topic that aimed to teach the audience.

P29M: It’s like a pregnant body in green at the bottom. I think that’s cool the way they did that you can see a girls breast there and a big stomach and then on top they say stuff about teen pregnancy and so then its like it makes sense. I like this one I think it’s better because it teaches the girls that teen pregnancy increases their risks.

P22F: this is like what I was trying to say you see. It’s like a whole message they have there and it’s got a topic they talking about - teen pregnancy and they trying to educate about that so I love this one.

These two participants felt that this particular billboard and specifically its messaging were clear and educative. They held that the topic that is being discussed on the board is clear as it states “teen pregnancy increases the risk of HIV”. Within this sub campaign, these sentiments contrast the literature which states that not mentioning topics or words directly is the aim of loveLife and attempts to create a national discussion (Parker, 2007). The participants seem to allude to the fact the presence of the words contributes to the effectiveness of the overall medium. This is a different approach from loveLife and it does indicate that it can be more flexible in its designs to incorporate different styles and the actual use of the word HIV.

Participants 24 and 22 go on to explain that the billboard fits into addressing a current trend that is prevalent in South Africa. They felt that it addressed the increase in

teenage pregnancy and HIV infection. They found that it addressed the female audience in particular

P24F: Just to add to that I think that as a young girl we always seeing our friends or cousins or sisters getting pregnant at young ages around us and it like its becoming normal for me. I think that's sad because like on the weekend my girls will hang out together and if we meet some new girl we ask so do you have a child and before it wasn't like that. Like now we have to ask to know because we know is so common.

P22F: Yes and its not supposed to be like that. And what they doing here is like saying wake up and face that. Face how normal it's becoming and realise the risks that it has I think. So they like want us girls to think about stuff, a lot of stuff.

These participants are able to pick up on a current crisis of teenage pregnancy in South Africa. This aligns with the literature which states that effective interventions need to profile the current issues and trends that prevail within the target population group (Pettifor et.al. 2004; Reddy et.al. 2003). It is proposed that by picking up on such trends and designing interventions with this useful information mind the designers are able to create relevant and effective education campaigns. These participants' sentiments allude to the fact that loveLife has picked up on an increasing trend of HIV infection among teenage girls and they have chosen to target this group in particular. These participants identify that they feel positively that this topic is being addressed. This contrasts with the literature which has stated that loveLife has no understanding of its target audience (Tommaselli, 2003).

Positive elements

Content

Participants were able to identify particular elements that they felt were strengths of this billboard. They seemed to appreciate the topic itself, i.e. teenage pregnancy and HIV infection. Participant 31 identifies that she felt very strongly towards this particular billboard as she felt that topic being addressed was crucial. She explains that overall in her opinion she found the use of the phrase and the picture was effective.

P31F: I think that I love this one. I think because its also an important topic for us. I mean teenage pregnancy is like going out of control nowadays and I think here they telling you about the risks loud and clear. This one I think gets it right for

the first time. It's like clear to understand. The words are okay to read and easy to understand and then the picture gives a great impact with the body and then its also colourful as well. I like it so I don't know about you guys hey.

Similarly Participant 25 highlighted that in terms of the style and techniques used in the billboard, she felt that the message was direct and easy to understand. This was identified as strength of this particular billboard. She goes on to explain that as a young girl a feeling was evoked in her when she saw the picture of the pregnant body. She described that she envisioned herself in that position and then thought that she did not want to be in that situation. This account highlights the way in which Bandura (1989) outlines that mediums need to aim towards producing self directed change for individuals. He explains that the audience needs to be provided with reasons to alter risky behaviours in an attempt to reach effective self regulation. This particular billboard achieves this by stating to the viewer that teenage pregnancy increases the risks of contracting HIV. Participant 25 expands on this idea by stating that she experienced the message in the billboard as a way in which she could think about her self and the risks of getting pregnant.

P25F: like we said the words are direct and the message is clear like we can understand it so clearly. And the picture makes you think like you see the pregnant body and you think I don't want my body looking like that.

Negative Elements

Target audiences

Although certain participants found this billboard to be both effective in its aim and appealing to the audience, there were differing opinions in this regard. Participant 24 felt that in terms of the audience, some individuals would be able to extract an understanding of what they were viewing. She elaborates that the level of education of the viewer is essential in determining whether or not they will be able to understand the billboard. She found that if the individual cannot read they should be able to rely on the picture for a clue as to what the medium is about. However she finds that in this particular billboard the picture fails to do this.

P24F: well obviously it's not for people that can't read because they would have to look at the picture and this picture

wont help them I think. So not for them but for people that can read definitely. Ja that becomes a problem. Its cos I haven't seen any pics so far that will help these that can't read hey. So there's nothing really for them. Oh wait maybe something they can listen to on the radio?

This idea problem was forewarned by the literature wherein it is stated that when communication is developed by audience member and programme designer this kind of situation can be avoided as mediums can be designed appropriately (Freire, 1990). Furthermore Reddy et.al (2003) argue that there needs to be a comprehensive understanding of the target group or community in order to identify education levels so that in this case the slogans and the pictures can be appropriate for the target audience.

Recommendations

Although the clarity of the billboard was questioned above, when asked about recommendations and changes that they would make participants seemed to address aesthetic elements instead. The picture was discussed by three participants in terms of its style. The style used in the billboard depicts a pregnant body in a cartoon style. Participants felt that perhaps the use of a real person would have appealed to the audience a bit more.

P18M: Maybe they should try using a real picture of a person, again it's like cartoonish and we not cartoons are we?

P6F: and then at the bottom it looks like some pregnant person is sleeping there. But we can't see how old the person is and if the message is saying "teen pregnancy" they should have revealed a face to show that this person is a teenager, from that part only you can't see.

P1M: you can see the stomach and the breast but maybe they could show an actual person to get peoples attention. That person should have a sad face to get effect.

Khomanani

The Khomanani campaign is directly managed by the South African government. The campaign has been identified as utilising mass media to support the prevention of HIV, the development of care, support and treatment. It must be noted that research

surrounding the different Khomanani campaigns and their effectiveness appears to be limited.

“Get tested for HIV – make healthy choices”

The poster depicts a group of individuals of different races with the words “Get tested for HIV – make healthy choices” displayed across the top of the poster. Following the picture are three bullet points stating a) get tested for HIV, b) live healthily and c) use a condom protect yourself and your partner. At the bottom stands the Khomanani logo with the words “caring together” along with the logo of the government emblem.

Different Perceptions

Participant 11 commented that she was able to identify that the poster was from the Khomanani campaign as she linked it to what she heard on the radio. Her understanding of this poster was that the government is trying to appeal to the youth. However she does not mention that it is in relation to HIV/AIDS or education on this topic.

P11F: oh I know this Khomanani caring together! Like I recognise it immediately here. Like you here that whole sentence over and over on the radio. And you like oh the government is trying to reach out to the youth now.

This participant notes that she was able to identify that the medium belonged to the Khomanani campaign. This is aligned with the literature which suggests that within the Elaboration Likelihood Model, that when individuals have little or no interest in processing a message they tend to rely on peripheral cues. In this case the participant relied on the song that she heard on the radio. Witte (1992) warns that this process requires very little cognitive work and is not optimal for behaviour change.

Positive Elements

Race

In terms of strengths of this campaign, participants found the use of the different races of individuals to be effective. Participant 25 explained that she is not used to seeing all races represented on one medium.

P25F: like its better this one because there's so many different people on it. There's all races here I think which is different you don't see that a lot.

The notion of racial representation emerges in the literature. The participants experience was that of many different races represented on the poster and she viewed this as a positive element. This indicates that perhaps the socio cultural factors of the target age group were considered and thus the campaign chose to highlight the array of racial groups that are affected by HIV. This process of profiling of the target group is seen as a critical factor in creating effective HIV/AIDS interventions (Pettifor et.al. 2004).

Participant 3 explained that the message was effective in his opinion. He found that it was direct and he was able to understand it when he read it immediately. He commented that he found the loveLife campaigns to be very different to the Khomanani campaign. Participant 3 goes on to explain that he finds the Khomanani campaign to be straightforward as it does not have a heavy influence on aesthetic appearance. In his opinion he finds that this is strength of the campaign as it communicates the urgency of the need for education on this issue.

P3M: the message is like bang! And it's straightforward so you get it the first time you read it. I think LoveLife had another idea to make it funky and appealing but here the department is like saying we don't have time for all that, here is the issue and it's simple and straightforward so start doing something about it. And I appreciate that from them.

These sentiments are aligned with the literature wherein a 2004 study by the Community Agency for Social Equity (CASE, 2004) revealed that the Khomanani campaign held a more informational and educational stance by providing its audience with clear and concise messages regarding HIV/AIDS prevention. A similar study by the DoH (2005) investigated the planning of the Khomanani campaign and found that it was aimed providing individuals with resources and information about clinics and support for those living with HIV/AIDS. Thus the approach of the Khomanani campaign can be viewed in light of the notion of increasing the self-efficacy of the audience member (Bandura, 1989). This campaign, with its informative style can be viewed as attempting to increase the awareness and knowledge of risks associated with HIV/AIDS.

Negative Elements

The negative aspects of this poster were centred on the fact that it was perceived as not being “cool”. Participant 1 expressed that in his experience when he saw the coat of arms representing the government his interest in the poster declined. He mentioned that he believes teenagers would not like this poster because of the presence of the government logo.

P1M: but then this coat of arms, haai, for teenagers they wont like it. Like its not something cool that's attractive for us. It's like we see it and then think oh it must just be something political again so we switch off because its like oh it doesn't concern us. Maybe they could spice it up a little.

Participant 31 commented on the style of the poster by stating that she too did not find it to be “cool”. She mentions that the models used on the poster did not seem effective. Her perception of the group was that they may be a group of friends, however she struggled to find this believable.

P31F: this is not so great hey. I think its this blue background and the way these people look. umm I think these people are uncool because they so funny looking. Okay they tried to out in all kinds of races and that's good right but they maybe tried to make them look like a group of friends together and im sorry but a group of friends like this looks very weird. They look so. . Awkward.

Participant 30 expands on this idea by expressing that he perceived the group of people to be too old. He recalls that they look like professional people instead of teenagers and that they do not appeal to him. The different races portrayed on the poster appears to be identified as an overt attempt to represent the different races, which he finds to be ineffective.

P30M: these people look like really old. They look like some doctors or clinic workers calling people to come for the test. I think they tried to make them look like normal people but they don't. They very weird. And I think they put all colours of people together to try to show that its for everyone but its so obvious they did that and now it looks stupid.

The age of the models appears to have left a negative feeling for participant 30. He finds that they are too old to represent the youth. This factor is essential if one compares it to the notion of observational learning as set forth by Bandura (1977). This

theory posits that the individual can learn about the correct and healthy behaviours through the process of role modelling. If the individual is able to identify with the role models and observe the appropriate behaviours he/she is more likely to adopt them for themselves. However this participant found that he struggled to believe these models and thus struggled to identify with them. Thus the need to observe and later behaviour becomes questionable.

Recommendations

In order to make the poster more effective participants were asked to comment on changes that they would make. It appears that participants suggested that the government uses the loveLife campaign to get the message across. Participants believe that by combing the loveLife approach into the Khomanani campaign it may create the perception that it is “cool”. Participant 34 highlights that the combination of the trendy loveLife style along with the direct and straightforward approach of the Khomanani campaign could create a truly effective campaign.

P34F: they can work together and put ideas together I think they can come up with something so great because loveLife got the idea I think about how to make it look cool for us and the government ones sound like they are very like to the point with the message so if you put those together I think all of them can improve.

P33F: I think first this thing is a government thing. I seen this Khomanani thing and when people see something from government they think it's not cool because government reminds you of old people and long stories. So I think the government must rather use LoveLife to get this message across to people. You see this message about going to test is so important but LoveLife never used it nicely like this. It's so clear here I think everyone can understand it.

“The only thing that spreads faster than HIV is a positive attitude zithande”

The second item that was viewed in terms of the Khomanani campaign was an orange and black poster. The poster did not have a picture, it simply had the statement “The only thing that spreads faster than HIV is a positive attitude zithande” across it. The word “Zithande” was highlighted in larger font and in a different colour. The poster also contained a picture of a red ribbon next to the phrase.

Different Perceptions

Positivity

Participant 6 highlights the fact that the poster relates to living a positive lifestyle. He found that he appreciated the fact that the programme designers thought about individuals that have already contracted the virus.

P6M: It's like they also promoting a positive lifestyle even after you have AIDS so like its not the end and you need to keep living well. So it's cool that they also thought about after contracting the virus. It makes me feel like they still care like after you get it they still concerned about your lifestyle and your attitude.

Participant 6 explains that the poster has an emphasis on lifestyle after one has contracted HIV. He seems to appreciate this message indicating that this has possibly been a shortcoming of the other interventions that have focussed on prevention.

Participant 29 commented that he liked the colours that were chosen of the poster. He found that the use of bright colours would assist to draw attention to the poster. He found that looking at the colours may make individuals evoke positive feelings in the viewer.

P29M: I like the orange here. It's nice and bright so you will look at it. I wish we had more stuff like this around places or handing out to people because I think people are becoming like so stressed about HIV and here they so positive so I wish more people could see this one, I wish.

The notion of using bright colours is aligned with findings in the literature which suggest that theoretically to develop an effective HIV/AIDS media intervention one needs to use an element that will attract the viewer's attention (Bandura, 1977). This idea was explored within the social learning theory and goes on to suggest that once the attention is held the next step would be to educate the viewer on their skills and how to use what they have learned. However the participants did not seem to pick up this element from this intervention.

Entertainment Education strategy

The Soul City and Soul Buddyz initiatives form part of the "edutainment" approach in purposely designing and implementing media messages to both entertain and educate, in

order to increase audience members' knowledge about an issue, create favourable attitudes, shift social norms, and change the overt behaviour of individuals and communities (Singhal & Rogers: 2003). Participants were shown two images from both campaigns. Firstly they were shown the "Soul Buddyz" logo and secondly an example of a Soul City poster.

Soul Buddyz

Different Perceptions

Easy identification

By viewing the Soul Buddyz logo, participants were able to explore their perceptions on what they believed Soul Buddyz to be about. It appeared that participants held different views on what it may be about. These views are expressed in the following accounts

P3M: This we know because it's a TV show. It's about good friends and choosing the right path and stuff. It teaches people about peer pressure and making good choices.

P1M: I think it shows another side of friends. Like a "buddy" with "soul" really cares about you and your choices so it teaches others to have friends like that maybe at school and stuff.

Participant 3 identifies that indeed the logo represents the television programme. While Participant 1 highlights that it may be about friends and does not make mention of the television programme.

Participant 10 expressed that it is also about teaching children to develop communication with parents and provide guidance for different situations. Participant 6 expressed that it is aimed for a target audience of 12 to 14 year olds. This is contrary to the literature which states that the target age group for this television programme is the 8 to 12 year old age range (Goldstein et.al, 2002).

P6F: it also helps them and teaches them about talking to their parents and there teachers about these things so they can guide them and tell them okay this is good or this is wrong.

P18M: for me this is a good start for those young kids, teaching them don't be influenced by other people about sex. It's like really educating. Ja like those 12, 13 and 14 years kids.

Positive elements

Educative quality

Participants identified that the Soul Buddyz programme contained certain specific areas of strength that make it effective as a medium. Participant 33 identifies that she felt like she always learned something from the programme. She found that in her family both her grandmother and younger sister would be able to watch it and learn from it. Thus she found it to be an effective medium due to its ability to appeal to a variety of different age groupings.

P33F: I always learned something like a lesson and it was interesting. I remember my granny used to watch it with me and my younger cousin and she used to say that she learns so much from these stories. She used to tell me that she loved the children and they were cute. You see both of us could learn she is old and I was young and we could still learn something.

Participant 33 identifies that in her opinion the Soul Buddyz television programme extended its appeal beyond its target age group as she was able to watch it with her grandmother. This contrasts to the literature which suggests that the older age group seems to be uninterested in the Soul Buddyz programme (Goldstein et.al. 2002). Similarly Participant 33's experience of the television programme indicates that she found it to be informative and educational. This is aligned with the literature which outlines that this is the main aim of this medium. It is said that this medium focuses on using characters to act out scenarios regarding HIV and AIDS education. Participant 33 recalls that her younger cousin particularly enjoyed the characters of the children. This indicates that the methodology behind the planning of this intervention has been appropriate. This is aligned with the literature which suggests that Sabido (1989) developed transitional role models for the soap opera format as practical applications of Bandura's social learning theory so that observational learning could occur. Similarly Participant 33 identifies that she learned a lot from this medium. This is also aligned with the literature which states that this medium obtained a 79% reach in 2005 (Collinge, 2005).

Participant 5 provides an account of a different experience of the television programme. He identifies that he appreciated the use of many different races in the show. He found that overall the show was educational and suitable for his younger sibling that falls within the target age group.

P5M: I like it in the TV show that there all races of people and its very educational for like my younger brother in grade 3 it works because he learns a lot from those kids.

Negative Elements

Repetition of themes

The main criticism that stemmed from the discussion surrounding the negative elements of Soul Buddyz was the fact that it tends to be repetitive. Participants identified that they found the show to repeat certain topics and this would lead them to avoid watching it.

P19M: I don't see it anymore it became boring after a while like there's no drama like soapies you see some action but that thing its like just every week teenage pregnancy, teenage pregnancy every time.

P30F: I think its okay I used to watch it but it becomes the same thing over and over again. The same children in the same troubles every time. They needed more stories.

Participant 35 highlights that she believes the teenage age group will not watch the show as they would not be able to identify with the young cast of actors. She suggests that teenagers watch soap operas and perhaps the topics could be incorporated there.

P35F: I think lots of teenagers won't watch it because the actors are younger. Teenagers will rather watch soapies and see fashion and stuff like that so maybe they must put these topics inside those soapies.

These sentiments are echoed in the literature wherein a 2002 study on the effects of Soul Buddyz found that within its target audience of 8 to 12 year olds exposure to soul Buddyz was associated with increased knowledge about HIV/AIDS and condom use. However the age group that was unaffected by these efforts was the adolescent aged group of 13 to 24 year olds (Goldstein et.al., 2002). The accounts from these three participants seem to attribute this finding to the fact that the programme in not appealing for their age grouping and thus suggest ways in which this could be combated. Their specific recommendations will be discussed below.

Recommendations

In order to create a more effective medium the participants commented that perhaps the Soul Buddyz campaign should join the loveLife campaign. Participant 27 suggested that the designers should try to change the style of the show by making the characters and story lines more appealing for adolescents. He believes that this will draw in the teenage audience.

P9F: and I love this “tomorrow is ours” part. It tell them it belongs to them and its their time to make a difference in life. Like for me I would just take soul Buddyz and the LoveLife thing and put it together. Like soul Buddyz would act as a foundation and teach them.

P27M: haai it’s very boring I think. I will make it more fun like funky characters and get teenagers to watch. And maybe like some love triangle and people fighting and then like the way they show on Isidingo I will make it like that or generations it will be more for everyone then.

Soul City posters

Two Soul City posters were chosen for viewing. These posters represent a part of the health education booklets distributed under the umbrella campaign of Soul City. The poster depicts the Soul City logo in the top left hand corner with a picture of a busy taxi rank underneath it. the picture is drawn in a cartoon format with many differ people drawn in and around the taxis. The words at the top read “which people in this picture are HIV positive?” Under the picture are the words “you cannot tell someone is HIV positive just by looking at them. About 2 out of 10 South Africans is HIV positive. Most people who have the HIV germ do not know that it is in their body”. The second Soul City poster that was shown follows a similar style and theme. The drawings are illustrated in the same style however it is drawn in the form of a cartoon strip with individual blocks. Each block provides a tip on living in a healthy way if you have HIV. For example it suggests eating healthy food, doing light exercise and abstaining from alcohol and smoking. The phrase on the top of the poster reads “People that are HIV positive can live for a long time if they live in a healthy way”.

Different Perceptions

Developing an understanding

It is clear from the following accounts that the participants were able to read the phrases on the posters and develop a clear understanding of what the poster was for. They seemed to be able to extract the general understanding of the aim of each poster based on what they saw and what they read.

P32F: ja this one they tried to be more direct it think they know some people have questions about HIV and AIDS and especially that one of the healthy living they tried to show as much as possible in it to try to help people that maybe cant understand some of the other ones.

Participant 32 identifies that the poster adapts a much more of a direct educational approach. This sentiment is aligned with the aim of the Soul City model wherein the desired outcome of the intervention is noted to be to have a “direct impact on knowledge, attitudes and practice in relation to an educational issue” (Usdin et al., 2002).

Participant 30 highlights that he is familiar with this kind of medium as he has been exposed to it at the local clinic. He believes that this is an appropriate place to display such a medium as in his experience he has observed people looking at them while waiting in the queue at the clinic.

P30M: its like something so familiar to me I think. Like something that I see on TV and when I go the clinic with my mum they put them on the walls there. And then I see the women waiting there they look at these things and they are curious.

Positive Elements

Clarity

In terms of specific positive aspects obtained from the two posters participants found that the posters were simple and easy to understand. Participant 28 commented on the style of the poster stating that the drawings were appealing and thus made the poster accessible to younger audience as well.

P1M: at least here it's like a simpler way to show the fact that you cant tell people are HIV positive. So it teaches about discrimination and not all of these boards deal with that so it's nice.

P28M: you see they used drawings that's good and these drawings are drawn well. They look like real people. And this can be also used for young children too because they love drawings and they will be interested by these things and pictures.

Similarly Participant 21 commented on the fact that the use of language made the accessible to the audience. He seemed to appreciate the use of the examples of living a healthy lifestyle as he felt that they were illustrated effectively.

P21M: The language is simple here and the pictures are not too hectic. Especially the second bit there they show you how to live healthy. I think like the people in townships must see that and understand d that they have to do those things

The mention of the role of language aligns with the literature wherein Parker, Dalrymple and Durden (1998) comment that the language of the audience is an important factor that needs to be considered when designing and implementing HIV/AIDS awareness campaigns. This ensures that the language of the audience can be represented in the medium to make the overall intervention successful as more people would be able to access it.

Negative Elements

Race

The use of only one race was criticised by Participant 8 who felt that Soul City usually depicts black people in disadvantaged areas. She found this to be an act of discrimination and suggested the use of white people in the poster as well

P8F: but there something that I don't like that I'm seeing her. It's like only blacks and disadvantaged areas. Like all these Soul City magazines they show the people like that. Like poor with no services. Like it's weird to see whites there, I think it's very discriminating. Yes we know that in most of our rural areas HIV is there but they must be fair also and mix it up a bit.

However Dorrington and Bradshaw (2002) highlight the trends that are present in South African provinces with regard to HIV infection and racial groupings. It was found that the racial group with the highest infection of HIV/AIDS was the black population of South Africa. Thus the Soul City interventions can be viewed as targeting a specific racial group in South Africa due to the fact that studies have shown that this is the grouping that is most affected.

Participant 7 found that the topics within Soul City were monotonous. She described that she did not want to watch something that she knew already.

P7F: And I don't like watching obvious things. Like we know about discrimination and stuff, like maybe in the rural areas they don't because of education so it's okay for them but its obvious for us its like repeated all the time and we don't want to watch something we already know.

Arts initiatives

Visual arts and crafts initiatives are identified as a medium for creating HIV and AIDS awareness. A theoretical understanding of their use indicates that meaning is developed from both the artist and the viewer. The intention of this study was to produce something that would attract attention, educationally by being different. It became clear that participants extracted their own meanings from this form of intervention. The participants were shown two paintings that depicted the AIDS ribbon along with pictures of hands. The mediums are purely artistic and contain very little writing about HIV or AIDS.

Participants seemed to find that these mediums require a lot of interpretation. They tended to criticise this fact stating that with a medium such as art, it often requires time to interpret and thus the educational value may be lost if an individual does not have the time to do this.

P1M: ja like its open to interpretation I think. You need time to think about the meanings with art and if you aiming to teach something and you put it up on a wall somewhere people will just see colourful wall they wont see the aim of it.

P12F: I agree I think that it needs time to be interpreted like art and if you pass it I don't think you can get a full message because you will be thinking about the beautiful colours and trying to figure out what is painted there so you'll miss it.

This is aligned with the literature which identifies that these art forms have been criticised for presenting their awareness message in a way that is too obscure and inaccessible. It is argued that the point of using art was to engage the audience through ambiguity and encourage reflection and a personal interpretation about HIV/AIDS (Marschall, 2004).

Negative elements

Not educative

Participants developed a discussion around the negative aspects of this intervention. They argued that the art forms struggled to educate the audience about HIV and AIDS. They perceived them to be lacking in a clear and defined message.

P5M: I think these struggle to educate because they just like pictures and art they don't have a message that can educate. Maybe they can leave some awareness but like to prevent Aids and help people to think about their choices I think there needs to be some message like "condomise" or "abstain" written somewhere.

P9F: its not really educational though because it takes time to analyse it. Like If we weren't talking about it here I would not stop in the street and analyse it. It takes to long. Like people are not interested they get bored.

Participant 9 elaborates that interest needs to be developed in order for an individual to take the time to understand the medium if it is represented in this form. This is aligned with the literature which suggests that this particular medium requires the audience member to decode what they have viewed and create their own meaning. While Bandura (1977) has alerted that audience members create their own individual meanings, these arts initiatives have been criticised for being too abstract and often ambiguous (Marschall, 2004)

Positive elements

Aesthetics

Although participants seemed to focus on the negative elements of the art works it appeared that they were able to extract certain positive elements albeit very little. Participant 27's commentary alluded to the fact that while he did not find the paintings to be effective in terms of their educational value he did experience the use of colour to be impressive. He highlights that it has its negative elements but it is still pleasing to look at.

P27M: I think it tells people that there's something called HIV and AIDS but like it doesn't warn or teach like the others. It's nice to look at because of the colours but then it will be a waste because you have to sit with it like we did now and

interpret it and think about the meanings of the colours and the drawings and we really hate that.

Recommendations

In terms of recommendations participants seemed to feel very strongly about the criticisms they had in relation to the interpretation element of the art work, yet their recommendations did not reflect this. One participant identified that perhaps the use of more direct words or phrases could provide more clarity, while another participant suggested that the artist needed to be present to explain what the picture means.

P35F: not really its more like awareness of things I think.
They trying to get people to come together, if they wanted to teach they would use more words I think.

P32F: not much really it's just pictures and in like an art form.
Maybe you need to have the artist here to explain it.

Participant 22 contributes that perhaps the murals could be incorporated into the loveLife campaign with more use of wording. She highlights that the lack of words makes the picture difficult to understand

P22F: more of that like LoveLife style stuff but with better lines on it. This has no lines which is worse than one confusing line!

The Red Ribbon

The Red Ribbon has been identified as the international symbol of HIV and AIDS awareness. It is being worn by increasing numbers of people around the world to demonstrate their care and concern about HIV and AIDS - for those who are living with HIV, for those who are ill, for those who have died and for those who care for and support those directly affected. The Red Ribbon is intended to be a symbol of hope - that the search for a vaccine and cure to halt the suffering is successful. A picture of the free standing red ribbon was shown to the groups. It became clear that different perceptions emerged in relation this medium.

Different Perceptions

Popularity

It appeared that the popularity of the AIDS ribbon was identified frequently. Participants commented that it is indeed popular and present ubiquitously. This is aligned with the

literature which highlights that the mass popularizing of the red ribbon audiences soon created an associative link between the ribbon and HIV/AIDS. The symbol has been identified as having the capacity to stand all on its own and successfully convey a message (Tommaselli, 1996).

P3M: it's a popular thing that's why we know it. It's alike all over in your face and the red reminds you that its about AIDS.
P16F: I think this is the most popular thing for HIV and AIDS because its like plain and simple and everyone knows its for AIDS and you see it every where and on everyone.

P25F: I think its boring because you always seeing it everywhere. It's like now a days you see it and you don't even notice it anymore because it's everywhere

When asked to develop on these ideas, participants highlighted their different perceptions of what the ribbon may mean. It seemed that participants were able to identify that the ribbon is associated with HIV in some way.

P17F: I think they just trying to remind us about HIV and AIDS and like if you have it you will always think about your choices and think about if it will lead you to HIV. So it's like a reminder that you can wear

P31F: I see people wearing on their shirts and their jackets and they trying to show their support for people living with the disease. Sometimes they wear it when thy trying to raise money for AIDS and they going to be on TV then they show the world that this is their cause.

These sentiments are aligned with the literature where the aim of the Red Ribbon has been identified to be a symbol that develops an awareness of HIV/AIDS, people living with HIV, people that have died from HIV/AIDS and research that is being developed regarding the virus (Marschall, 2004).

Participant 3 highlighted that the ribbon represented more of symbolic function regarding AIDS. This aligned with the literature which suggests that HIV/AIDS awareness can be mediated through symbolic communication (Piotrow et al., 1997).

P3M: it's more of a symbolic thing I think. I think it still counts though because it reminds you of AIDS and at least that's something. It's better than nothing I think.

Positive Elements

Symbolism

The idea of symbolic function is developed further by Participant 30 who describes that a positive element of the ribbon is that it is used globally and represents an awareness of consideration and care pertaining to HIV and AIDS. This fits with the literature which explains that the AIDS ribbon represents symbolic support for those living with HIV, for the continuing education of those not infected, for maximum efforts to find effective treatments, cures or vaccines, and for those who have lost friends, family members or loved ones to AIDS.

P30M: this is the HIV Aids symbol I think. I think they even use it around the world. I seen Jay-Z wearing it and then I knew he knows about HIV and AIDS he's aware of it in the world and he cares about those people that are dying. So like when I see it on someone I know they care about this cause.

P31F: it teaches people that other people can care about those ones with HIV maybe people in other countries can care. Sometimes you see some rappers or singers wearing it and you can tell that they care that some people are dying in the world

Participant 30 highlights the roles of celebrities and the Red Ribbon as way of understanding its meaning. This idea can be found within the literature with regard to observational learning through role modelling. The participant has identified that when he sees a celebrity wearing the ribbon he associates it to that persons awareness of the virus. Thus in light of Bandura's (1977) principles the individual would then also become aware of the plight of HIV/AIDS in the world as they would try to emulate the behaviour of their role model. This would then lead to the intervention becoming more and more popular and ultimately increasing the awareness of the topic at hand.

Negative Elements

The mass popularizing of the Red Ribbon has been identified as an area of strength however it seems that this can also have an adverse effect. Participants 26 finds that the ribbon is handed out readily and this may lead to people wearing it even though they do not understand its symbolic function. Similarly Participants 12 and 2 identify a similar problem.

P26M: we also see many people around her wearing it like I think they always hand them out at places for free and so

that's why lots of people just people put it on maybe they don't even know what is it for. That's really dumb.

P1M: but I think its stupid when rich people or white people are wearing it because what tare they doing about it? Just wearing a ribbon? They should give money or research or something. It's like they wear the ribbon and they feel like they doing some good but they not really.

P2M: sometimes I think people don't even know what it means or what it is they just wear it because they got it for free. It became like it's everywhere and you get tired of looking at peoples collars and you see it there.

It appears that the Red Ribbon may also be perceived as something that is tiresome due to its mass presence. These individuals found that by repeatedly being exposed to it they have questioned its value. This is also noted in the literature whereby Witte (1992) warns that individuals can grow to become bored with certain messages and slogans especially if they are repetitive in society. She identifies that the individual's interest in processing the message wears off and they begin to rely on cues or simple associations to deduce what the intervention may be about. It is at this point that the messages lose value as this process now requires little cognitive work and the individual does not extract the full meaning or understanding from the medium. This is identified in the sentiments of Participant 2 who explains feeling tired of seeing the symbol on people's clothes.

CONCLUSION

Five major South African campaigns were surveyed in this chapter. It appears that within each campaign the sub-campaigns evoked a variety of different feelings and perceptions from the participants. The campaign that was focussed on most intensively was the LoveLife national campaign. This was done thoroughly in terms of different campaigns within the umbrella of LoveLife as the materials were most available. The campaigns were discussed individually, where possible, as it was felt that richer and more in depth understanding could be developed.

CHAPTER FIVE: CONCLUSION

The following chapter discusses and concludes the findings of the research with regard to the theoretical understanding set out from the literature. The theory of Paulo Freire and Albert Bandura were considered in light of HIV/AIDS education campaigns. The findings of this study demonstrated an array of different opinions from the participants. Their perceptions of the different campaigns were both linked and contrasting at times.

If we look at the findings of this study it is clear that an array of different perceptions emerged with regard to the different mediums. However certain core elements remained common to all campaigns. The loveLife campaign evoked a mixture of feelings from the participants. All of the sub campaigns surveyed in this study seem to induce both positive and negative responses. However the meanings derived from these mediums were interpreted very differently. Social learning theory identifies that human beings select different parts of information and interpret it in their own way (Bandura, 1977). Thereafter they will make deductions and inferences in response to what they have seen. This was noted within the focus groups in response to the Lovelife footage. Different individuals chose different elements of the media to highlight. Some participants remained focussed on aesthetic appearances of the billboards where they might have found them to be dull or uninteresting while others focussed on the meanings from the messages. It appeared that after creating a discourse around what they had seen and prompting the participants derived different understandings from what they had seen. In light of Freire's participatory approach certain participants in this study viewed the Lovelife campaign to be considerate of its target audience at times. It was found that elements such as music or the use of colour were appealing to them as youth. However when surveying the literature surrounding LoveLife and evaluations, literature pertaining to specific perceptions is limited. Numerous studies and evaluations of the LoveLife campaign centre on quantitative data to prove its effectiveness (loveLife, 2000; loveLife 2001). The use of figures seems to prove whether or not behaviour change was achieved but perceptions of the mediums effectiveness is hardly explored. Freire identifies this as a key challenge in developing effective media strategies. He notes that that audience needs to be incorporated and heard in order to develop an effective campaign. Similarly Social Learning theory highlights that an effective campaign needs to demonstrate thought

around key areas such as providing information, developing self-regulative skills and social support. It was found that the Lovelife campaign does consider these elements to some extent. However at times participants believed that the messages were unclear and difficult to understand. It was found that messages and slogans were at times lacking information. This is outlined by Bandura (1977) wherein he identifies that the informational component of a campaign is essential. At times participants found this to be lacking and mentioned that the statements were not educative due to their minimalist style. The participants also mentioned issues pertaining to gender and it was felt that within certain campaigns gender stereotypes were challenged. This as contrasting to the literature which suggested that the LoveLife campaigns did not really affect perceptions of gender.

The style and approach of the LoveLife campaign resonates with Freire's theory in terms of discourse. The planning and structuring of the campaigns can be viewed in light of Freire's problem posing method. The loveLife billboards seem to present this approach. Participants identified that they felt the boards were missing some information and developed a discussion around what the possibilities could be. Freire would understand this as a way that campaign designers posed problems to the audience. He argues that when a problem is posed a dialogue can develop. The LoveLife billboards that left participants feeling confused have created just that. It appears that they have given rise to curiosity and growing interest into what they are actually about. However the problem of reach and education comes into play as mentioned by Bandura. The billboards seem to stop at this juncture of creating a dialogue. Bandura emphasises the need to provide an informational component within the medium so as to provide the audience with awareness and knowledge. Participants highlighted this as a criticism of the LoveLife slogans where they felt that they lacked in providing more information.

The Khomanani campaign also evoked a mixture of feelings of perceptions both positive and negative. It was found that that the particular style of the Khomanani campaign was not favoured. Certain participants found it to be "uncool". The campaign was appreciated for trying to represent all races and this was understood as a representation of equality. The presence of the governmental logo seemed to be unsettling to the participants. They found that they became uninterested when they saw it.

Social Learning theory posits that people will select, organize and transform stimuli presented to them from different mediums (Bandura, 1977). This was highlighted in this campaign as participants expressed shutting themselves off from it after viewing the logo. The Khomanani motivational poster was met with more favour. Participants appreciated the sense of positivity that it evoked. Research into the effectiveness of Khomanani seems to also focus on quantitative material and looks at statistics regarding behaviour change. However perceptions relating to specific elements are limited.

The entertainment education approach was also met with mixed perceptions. Literature (Piotrow et al., 1992) surrounding this approach explains that it stimulates conversation and brings taboo topics like HIV/AIDS into public discourse. The style and approach of this kind of intervention is largely educative and direct in its themes. Freire's suggestion of the problem posing approach can be viewed in this series. Participants identified the way in which reality and problems are discussed in the drama series. The series provides positive, negative and transitional role models. These role models can be seen as practical applications of Albert Bandura's social learning theory. Social learning theory postulates that people learn vicariously from watching the actions and experiences of role models. The theory suggests that social learning could be strengthened through verbally coded messages in the form of epilogues reinforcing the prosocial issues that have been integrated into the drama (Singhal and Rogers, 1999). Participants found that the series was educative but could become monotonous.

The arts initiatives seemed to evoke more negative perceptions than positive ones. Bandura (1977) argues that meaning can be derived from mediums based on one's own reality, However this was viewed as a negative factor by the participants who sought more of a clear and direct message. Participants felt that the message could be lost if it was too abstract. This was found in the literature (Marschall, 2004) which stated that the ambiguity found in this medium goes largely unexplored in research.

The Red Ribbon was identified as a symbol within popular culture. Participants were able to instantly recognise what it stood for. However literature has suggested that the symbol holds the power to stand on its own and successfully convey a message. Certain participant's perceptions contradict this finding as they believed that it lacked a clear educative message. Similarly, the ribbon has been praised in the media for its mass

popularising and this has been seen to be a measure of its success, however participants felt that this was not true. They believed that by mass popularising the ribbon it lost its meaning and its message and some even mentioned being tired of seeing it.

The role of the Social Learning Theory and the work of Paulo Freire have been touched on as a way to understand the role of praxis. The focus groups within this study evoked a variety of different perceptions and feelings regarding the different mediums however specific behaviour changes and attitude shifts were not explored as is the case with other evaluation studies. This study aimed to explore the role of praxis on a theoretical level by attempting to understand the target audience's views and opinions in a way described by both Freire and Bandura. Freire postulated that to achieve praxis the campaign designers need to enter into dialogue with the audience which is what this study attempted to do. The dialogue surrounding current campaigns provided insight into the audience's reality and gave an indication of specific changes and alterations that they view as important in developing effective campaigns. Previous evaluations of campaigns such as LoveLife focused squarely on trends in quantitative data to understand the effectiveness of a campaign. However this becomes problematic when the baseline information is inaccurate (Martins, 2007). Thus by understanding the array of different understandings and perceptions in relation to the mediums one is able to obtain a richer understanding of the target audience.

The research has explored teenagers' perceptions of HIV/AIDS media interventions with specific focus on educative mediums. The following chapter will look at a summary of the recommendations generated from the focus groups, followed by an exploration of the strengths and limitations of the study. Thereafter a presentation of areas requiring further research will be discussed. Since one of the aims of the research was to generate recommendations for future interventions it was felt that it was necessary to present a summary of the recommendations generated from the focus groups.

SUMMARY OF RECOMMENDATIONS

Based on the findings from the focus groups certain recommendations were made by the participants to improve on future interventions. Participants expressed that within the LoveLife campaigns the aesthetic appearances of the billboards could be altered so that the pictures match the slogans. The cartoon depiction of the purple loveLife campaign was not favoured and participants mentioned that they would have liked to have seen real people instead of cartoon drawings. The black and white Face It campaign came under fire for being too dull and thus participants expressed that the use of bright colours would be more effective. The actual actions of the models on the billboards were also mentioned. It was felt that the placement of a single figure or a face was not effective. They suggested perhaps depicting the models engaged in some form of activity. One participant suggested that perhaps they could show two individuals going for an HIV test. Similarly the models used in the billboards were also mentioned. Participants felt that at times the models were age inappropriate as they were too old. Participants felt that the race of the models was important as it conveys a message as to who is affected by the virus. Participants felt that it is important for all races to be depicted on the billboards. Similarly participants felt that it is important to demonstrate gender equality on the billboards by showing both genders. Participants also suggested that homosexual relationships should also be depicted on the billboards to create equality. In terms of approach, two participants suggested that campaign designers should try to incorporate celebrities in their billboards. The participant justified this by saying that adolescents will look up to the celebrity and if they are conveying a positive message it would resonate more strongly with the youth.

Within the Khomanani campaign, it was found that perhaps the campaign should incorporate more of the style presented in the LoveLife campaign but with the direct approach of the Khomanani slogans. The participants picked up on the brand of loveLife and incorporated the educative quality of the Khomanani campaign to deduce that they should be combined to be effective.

In terms of the entertainment education strategy set out by Soul City and Soul Buddyz the participants expressed that the characters' style and the themes need to be reworked to include dramatic sequences that one would find in local soap operas. It was

also suggested that the loveLife could be incorporated into the series as it would make it more appealing yet the messages should remain the same. The arts initiatives were found to be too abstract and thus participants suggested that they needed to be explained in some way. One suggestion was that they should use direct phrases or words relating to HIV/AIDS education and prevention.

STRENGTHS AND LIMITATIONS

A strength of the research lies in the fact that it was extensive in covering five of the main HIV/AIDS interventions available in South Africa. A further strength of the study is the research methodology employed. Given the fact that research around specific perceptions regarding these interventions is somewhat limited the research area can be seen as a new sphere. Thus the research methodology employed allowed the researcher to hold an exploratory view of this area. The decision not to stipulate a hypothesis at the outset of the study allowed the researcher to focus on the themes that emanated from the focus group discussions. In addition the use of thematic content analysis allowed the researcher to explore these themes further.

A potential weakness of the study is the fact that it explores the loveLife campaign in great detail and does not give the other interventions equal weighting. Another weakness of the study lies with the participants responses. The teenagers who participated in the study were not very vocal at times. It is felt that the participants' hesitancy may stem from anxiety related to discussing topics around HIV and AIDS.

AREAS FOR FUTURE RESEARCH

In terms of future research endeavours, this topic highlighted that further qualitative research is needed into the specific campaigns and their effectiveness. This implies that particular details and perceptions of different areas that make a campaign successful need to be conducted. Similarly research pertaining to loveLife has been largely associated with behaviour change and quantitative data, however investigations into target audiences perceptions is limited. Thus this area can be further explored. The LoveLife campaign was focussed on most extensively in this study as it had the most available data and resources. Thus in terms of future research the less explored campaigns such the arts

initiatives or Khomanani could be given particular attention so as to create a basis for research on these areas.

In conclusion five major South African campaigns were explored in this study. It appears that within each campaign the sub-campaigns evoked a variety of different feelings and perceptions from the participants. The campaign that was focussed on most intensively was the LoveLife national campaign. This was done thoroughly in terms of different campaigns within the umbrella of LoveLife as the materials were most available. The campaigns were discussed individually, where possible, as it was felt that in order to develop an understanding of perceptions a richer and more in depth understanding was anticipated. It was found that the inclusion of the target audience and the creation of dialogue are crucial in developing effective interventions.

REFERENCES

- Andreason, A. (1995). *Marketing Social Change: Changing Behaviour to Promote Health, Social Development and the Environment*. San Francisco : Jossey Bass
- Azjen, I. & Fishbein, M. (1980). *Understanding attitudes and predicting social behaviour*. Engelwood Cliffs, NJ: Prentice Hall
- Bandura, A (1969). *Handbook of Socialization Theory and Research, Social- Learning Theory Of Identificatory Processes*. Chicago: Rand-McNally
- Bandura, A. (1977). *Principles of Behaviour Modification*. London: Holt, Rinehart and Winston
- Bandura A. (1986). *Social Foundations of Thought and Action: A Social Cognitive Theory*. Englewood Cliffs, N.J.: Prentice-Hall,
- Bandura, A. (1989). Perceived self-efficacy in the exercise of control over AIDS infection. In V. Mays,G. W. Albee & S. F. Schneider (Eds.), *Primary prevention of AIDS: Psychological approaches* (pp.128-141). London: Sage.
- Berelson, B. (1952). *Content Analysis in Communication Research*. New York: Afner Press
- Bloor, M., Frankland, J., Thomas, M. & Robson, K. (2001). *Focus groups in social research*. London: Sage Publications.
- Bradshaw, D., Dorrington, R., Budlender, D. (2002). HIV Profile In the Provinces of South Africa: Indicators and projections for 2002. *South African Health Review*. Retrieved from http://www.hst.org.za/generic2419_1. Retrieved on November 22, 2008.
- Breakwell, G.M., Hammond, S, & Fife Schaw, C (Eds) 1995. *Research Methods in Psychology*. New York: Macmillan Publishing
- Crain, W. (2004). *Theories Of Development: Concepts and Applications, Fifth Edition*, Upper Saddle River: Pearson Education.
- Collinge, J (2005). *Confronting HIV and AIDS Through Mass Media and Community Action*. Retrieved from http://www.hst.orgza/uploads/files/sahr05_section. Retrieved on September, 2008
- Creswell, J.W. (2003). *Research design. qualitative, quantitative, and mixed methods approach*. (2nd ed.). London: Sage Publications

- Croyle, R. (2005). Theory at a Glance A Guide for Health Promotion Practice. *Health Education Quarterly* 15:351-377
- Cullinan, K (2007). Behaving Better: the media, HIV/AIDS and stigma. Retrieved from <http://www.doh.gov.za/docs/norms/part1.html> Retrieved on April 18, 2007.
- Dalrymple, L and Preston-Whyte, E. (1995). Participation and Action: Reflections on Community Based Interventions in South Africa. In L. Dalrymple (Ed). *The Evaluation of a Drama Approach to AIDS Education*. Durban. University of Natal. 111-128
- De Chernatony, L. & MacDonald, P. (1992). *Creating Powerful Brands*. Oxford : Butterworth-Heinemann
- Delate, R (2007). Us and them: Lovelife Commercial Brands and Everyday Life. Masters dissertation. Retrieved from www.ukzn.ac.za/uploads_rcdel09
- Denzin, N. & Lincoln, Y. (2003). *Collecting and Interpreting Qualitative Psychology: A Practical Guide to Research Methods*. London: SAGE Publications
- Department of Health (2004). Dialogue for Action..dialogue for life. Khomanani campaign on HIV/AIDS and TB. Pretoria: Department of Health.
- Department of Health Kwazulu Natal (2007). Symbolism of the AIDS Ribbon. Retrieved from <http://www.kznhealth.gov.za/redribbon.htm> on April 18, 2007
- Department of Health. 2007. *HIV and AIDS and STI Strategic Plan for South Africa 2007-2011*. Retrieved from <http://www.doh.gov.za/docs/hivaids-progressrep.html> on November 17, 2008
- Devlin, A.S. (2006). *Research Methods: Planning, Conducting and Presenting Research*. USA: Thomson Wadsworth
- Freire, P. (1970). *Pedagogy of the oppressed*. New York: Continuum.
- Fiske, J. (1990). *Introduction to Communication Studies*. London : Routledge
- Flick, U. (2006). *An Introduction to Qualitative Research*. London, Thousand Oaks, California: SAGE Publications
- Gadotti, M. (1994) *Reading Paulo Freire. His life and work*, New York: SUNY Press.
- Glanz, K, Rimer, B.K. & Lewis, F.M. (2002). *Health Behaviour and Health Education: Theory, Research and Practice* (3rd Edition). San Francisco : Jossey-Bass
- Goldstein, S.Usdin, U., Scheepers, E., Anderson, A. & Japhet, G. (2002). *The Treatment*

- of AIDS in Soul Buddyz: A Multimedia Campaign for Children's Health in South Africa. Retrieved from www.soulcity.org/aidstreatment/html.doc retrieved on March 6, 2007.
- Goldstein, S., and Scheepers, E. (2000). Soul City IV Impact Evaluation: AIDS Johannesburg: SCIRD Communication. Retrieved from <http://www.soulcity.org.za/eval>
- Hawkes, T. (1977). Structuralism and Semiotics. Los Angeles: University of California Press
- Henning, E., van Rensburg, W. & Smit, B. (2004). *Finding your way in qualitative research* Pretoria: Van Schaik Publishers.
- Horn, R.; Williams, A.; Mark, A. (2002) Learning from demonstrations: the role of visual search during observational learning from video and point-light models. Retrieved on April, 29 2008. Retrieved <http://www.emory.edu/EDUCATION/mfp/bandurabio.html>
- James, M., Hoff, T., Davis, J. & Graham, R. (2005). Grant Watch Report: Leveraging the Power of the Media to Combat HIV/AIDS. In *Health Affairs*, vol 24, number 3, pp844- 857.
- Kerlinger, F.N. (1986). *Foundations of Behavioural Research, third edition*. Oregon: Harcourt Brace Javonovich College Publishers
- Krippendorff, K. (1980). *Content Analysis: An Introduction to its Methodology*. Beverly Hills: SAGE
- Krueger, R.A. & Casey, M.A. (2000). *Focus groups. A practical guide for applied research*. (3rd ed.). London: Sage Publications Ltd.
- Kreuter MW, Skinner CS (2000). Tailoring: what's in a name? *Health Education Research* 15(1):1
- Littlejohn, S.W. (2006). *Theories of Human Communication*. United States of America: Wadsworth
- loveLife (2000) HIV/AIDS Communications Experiences. Retrieved from www.lovelife.co.za on March 1, 2008
- loveLife (2001) National survey of South African Youth. Retrieved on February 19, 2008 from www.lovelife.co.za
- loveLife (2004). *The impending catastrophe: A resource book on the emerging HIV/AIDS epidemic in South Africa*, loveLife, Johannesburg.

- loveLife (2006) Impending catastrophe revisited: An update on the HIV/AIDS epidemic in South Africa. Retrieved from [http// www.lovelife.co.za/download28_pdf](http://www.lovelife.co.za/download28_pdf). Retrieved on August, 3, 2008.
- loveLife (2007) South Africa's national HIV prevention programme for young people, loveLife, Johannesburg.
- loveLife. (2008). loveLife Franchise – a manual for franchise-holders. Parklands: House of Print
- Marschall, S. (2004) Getting the Message Across: Art and Craft in the Service of HIV/AIDS Awareness in South Africa. *Visual Anthropology*, 17: 163-182. Routledge
- Martins, R. (2007). Lost in Interpretation? Creating Meaning From LoveLife's HIV: Face It Billboards. Retrieved from [http// www.ccms.ukzn.ac.za](http://www.ccms.ukzn.ac.za) on August 13, 2008.
- Mason, J. (2000). *Qualitative research*. London: Sage Publications.
- Mckee, N. (2000). Motivation to Act: Effective Communication. In *Involving People, Evolving Behaviour* (p 87-117). Penang: Southbend Publishers
- Mouton, J. & Marais, H.C. (1988). *Basic concepts in the methodology of the social sciences*. Pretoria: HSRC Publishers.
- Nagy, S., Biber, H., and Leavy, P. (2008). Handbook of Emergent Methods. London: Guilford Press.
- Parker, W. (1994). The Development of Community Based Media for AIDS Education and Prevention In South Africa: Towards an Action Based Participatory Research Model. Retrieved from [http//www.cadre.org.za/pdf/ideologycommunication](http://www.cadre.org.za/pdf/ideologycommunication) on March 1, 2007
- Parker W & Kelly K (2003) A comparative analysis of youth responses to HIV/AIDS in South Africa, Presentation at the South African AIDS Conference, August 2003.
- Parker, W. (2006). Ideology and HIV/AIDS Communication: Experiences from South Africa. Centre for AIDS Development, Research and Evaluation. Retrieved from [http//www.cadre.org.za/pdf/ideologycommunication](http://www.cadre.org.za/pdf/ideologycommunication) on March 1, 2007
- Parker, W. (2007) *Reappraising youth prevention in South Africa: The case of loveLife* Retrieved from <http://www.cadre.org.za/pdf/youthpreventionsa.pdf>. Retrieved on 25 February, 2007.

- Patton, M.Q. (1987). *How to use qualitative methods in evaluation*. London: Sage Publications.
- Pettifor, A., Rees, H., Steffenson, A., Hlongwa-Madikizela, L., Vermaak, K. (2004). HIV and sexual behaviour among young South Africans: A national survey of 15-24 year olds. Johannesburg: Reproductive Health Research Unit. University of the Witwatersrand.
- Piotrow, P.T., Kincaid, D.L., Rimon, II, J. & Rinehart, W. (1997). *Health Communication: Lessons from Family Planning and Reproductive Health*. Westport, CT: Praeger
- Piotrow, P.T., Meyer, R.C. & Zulu, B.A. (1992). Aids and Mass Persuasion. In Mann, J., Tarantola, D.J.M., and Netter, T.W. (Eds), *AIDS in the World* (p733-59) Cambridge: Harvard University Press
- Rawjee, V.J. (2002). Effective HIV/AIDS Communication Campaigns: *A case study of an HIV/AIDS awareness campaign targeted at young adults at a tertiary institution*. Masters Dissertation. Retrieved from <http://www.cadre.org.za/pdf/.pdf>. Retrieved on July 26, 2008.
- Reddy, S., Panday, S., Swart, D., Jinabhai,C., and Amouson, S. (2003). The South African Youth Risk Behaviour Survey. Cape Town: South African Medical Research Council. Retrieved from <http://www.mrc.ac.za/helathpromotion>. Retrieved on November, 14, 2008.
- Rogers, R.W. (1983). *Cognitive and physiological processes in fear appeals and attitude change: A revised theory of protection motivation*. In Cacioppo, J.T. & Petty, R.E. (Eds), *Social Psychophysiology* (p 153-176). New York: Guilford.
- Rogers, E.M. (1995). *Diffusion of Innovations*. (4th Ed). New York: Free Press
- Shor, I (1993). Education is Politics. In P. Mclauren & P Leonard (Eds.). Paulo Freire: A Critical Encounter. London. Routledge
- Singhal, A., & Rogers, E.M. (2003) *Combating AIDS: Communication Strategies in Action*. New Delhi: Sage.
- Soul City Institute for Health Development (SCIHD) (2006). Soul City Series 5. Retrieved from <http://www.soulcity.or.za>. Retrieved on June, 12, 2007.
- South African Advertising Research Foundation (2000). Living Standards Measures. S.A.

- Advertising Research Foundation. Johannesburg: South Africa
- Taylor, P. (1993) *The Texts of Paulo Freire*, Buckingham: Open University Press.
- Terre Blanche, M., Durrheim, K. & Painter, D. (Eds). (2006). *Research in practice. Applied methods for the social sciences*. (2nd Ed.). Cape Town: University of Cape Town Press.
- Tomaselli, K.G. (1996). *Appropriating Images: The Semiotics of Visual Representation*. Denmark: Intervention Press
- Tomaselli, K.G. (2003). *Loveline: A measure of success?* Compiled by the Centre for AIDS Development, Research and Evaluation (CADRE), South Africa.
- UNICEF, (2000). *The State of the World's Children*. Oxford University Press: New York
- Usdin, S., Singahl, A., Shlongwe, T., Goldstein, S., Shabalala, A (2002). *No short cuts in entertainment education*. Entertainment Education Worldwide. Mahwah: NJ: Lawrence Erlbaum Associates
- Valdiserri, R. (1989). *Preventing AIDS: The design of effective programs*. New Brunswick and London: Rutgers University Press.
- Witte, K. (1992) *Preventing AIDS Through Persuasive Communications: A Framework For Constructing Effective Culturally-Specific Health Messages*. In Korzenny, F. & Tingtoomey, S. (Eds). *Mass Media Effects Across Cultures* (p67-83). London: Sage

APPENDIX A: INFORMATION LETTER TO THE SCHOOL



Good day,

My name is Atiyya Mohamed, and I am doing a study as part of my training for a Masters Degree in Educational Psychology at the University of the Witwatersrand. My research aims to explore teenagers' perceptions of HIV/AIDS media interventions. I would like to invite 20 learners from your high school to take part in this study.

The study aims to explore adolescents' views on the current mediums of HIV/AIDS education in the media. The study also hopes to identify different areas of strengths and weaknesses of the mediums in an attempt to better understand their message. In order to do this I will need to hold 4 focus groups at the school. The focus group will need to consist of five learners. The group will meet at a time and place that is convenient for both the school and the learners, to talk about the topic. They will be shown pictures of HIV/AIDS education that is found on television or in newspapers, for example Soul City or LoveLife advert. They will then take part in a discussion about the pictures that they saw. The discussion of the groups will also be audio recorded.

A letter of information about the study and the procedures involved, along with a letter of consent will be provided for parents of the learners who wish to participate. For ethical reasons, parents will need to sign the consent form before the child is allowed to participate in the study.

Participation in the study is voluntary, and no person will be advantaged or disadvantaged in any way for choosing to participate or not to participate in the study. All of the learners responses will be kept confidential and no information that could identify any individual will be required. The material will only be seen by myself and my supervisor, and will be processed by myself. All audio recordings will be destroyed on completion of the final report. During the research process the tapes will be stored in a locked cupboard in order to maintain their safety. Learners may refuse to answer any questions they would prefer not to, and they may choose to withdraw from the study at any point. The use of direct quotes will also be requested for the final report; however should any identifying information emerge they will not be used. There are no risks or benefits involved for the learners. Should any sensitive issue arise free counselling will be made available and the contact details will be provided.

If you agree to allow your school to participate in the study and give your permission, please sign the attached consent form. On completion of the study the findings will be written up in a final report. I will provide the school with a summary of the results and findings. If you have any questions or would like to discuss this research, I can be contacted telephonically at 084 569 7564. Your participation in this study would be greatly appreciated.

Kind Regards,
Atiyya Mohamed

APPENDIX B: PRINICIPAL CONSENT FORM

CONSENT FORM

I _____ am the principal of
_____ High School

I give consent 20 learners to participate in 4 focus groups for the study conducted by Atiyya Mohamed, on teenagers' perceptions of HIV/AIDS media intervention. In addition the focus groups will be audio recorded.

I understand that:

- Participation in this research is voluntary.
- Learners will not be advantaged or disadvantaged in any way if they choose to participate or not, in this study.
- Learners may withdraw from the study at any time.
- No identifying information will be included in the research report, and all responses will remain confidential.
- There are no risks or benefits involved in the study.
- Direct quotes may be used for the final report
- Learners identity will be protected
- The tapes will be heard only be the researcher and supervisor of the study
- The tapes will be locked in a cupboard and kept safe throughout the research process
- The tapes will be destroyed on completion of the study

I also confirm that the research procedure, as well as all of the factors indicated above, have been explained and understood to me.

Signed: _____

Name: _____

Date: _____

APPENDIX C: SUBJECT INFORMATION SHEET



Hi,

My name is Atiyya Mohamed, and I am doing a study as part of my training for a Masters Degree in Educational Psychology at the University of the Witwatersrand. My research is looking at teenagers' perceptions of HIV/AIDS media interventions. I'm trying to see how teenagers like yourself understand HIV/AIDS education in the media.

I would like to invite you to take part in this study. The topic is looking at education about HIV/AIDS in the media. A focus group will be held at the school. A focus group is a group discussion about a topic where you are asked about your opinions and feelings. There will be 4 people in the group with you if you decide to take part. The group will meet to talk about the topic. You will be shown pictures of HIV/AIDS education that is found on television or in newspapers, for example Soul City or LoveLife advert. You will be asked to talk about what you saw. I will also audio tape the group conversation.

Please note that you are not forced to take part in the study in any way, it is completely up to you to decide. You will not be advantaged or disadvantaged in any way for choosing to participate or not to participate in the study. Everything that is said in the group will be kept confidential, which means that only myself and my supervisor will hear what was said. You will not be asked to give your name. The audio recordings will be destroyed after final report is finished and marked. The tapes will be locked in a cupboard and kept safe throughout the research process. You can choose not to answer any questions that you don't want to and you are free to pull out at any time.

I would also like your permission to use your words in my report but if any information that could identify you comes up it will not be used. Whether you decide to participate or not please note that there will be no risks or benefits of any kind for you. If anything that is sensitive to you comes up in the discussion, free counselling will be made available at the Johannesburg Institute of Social Services (JISS). The contact details are (011) 837-4151.

If you agree and you want to take part in the study please sign the form below.

When the study is completed the results will be written up in a report. A summary of the results and findings of will be made available to your school. You can also contact me directly if you would like a copy. If you have any questions or would like to discuss this research, you can phone me at 084569 7564. Your participation in this study would be greatly appreciated.

Thank you
Atiyya Mohamed

APPENDIX D: PARENTS CONSENT FORM

CONSENT FORM

I _____ am the parent/guardian of _____.

I give consent for my child to participate in a focus group for the study conducted by Atiyya Mohamed, on teenagers' perceptions of HIV/AIDS media intervention. In addition, I consent to my child's responses being audio recorded.

I understand that:

- Allowing my child to participate in this research is voluntary.
- My child will not be advantaged or disadvantaged in any way if they choose to participate or not, in this study.
- He/she may withdraw from the study at any time.
- He/she has the right to not answer any questions that they don't want to.
- No identifying information will be included in the research report, and all responses will remain confidential.
- His/her identity will be protected
- The tapes will be heard only by the researcher and supervisor of the study
- The tapes will be locked in a cupboard and kept safe throughout the research process
- The tapes will be destroyed on completion of the study
- Direct quotes of the discussion may be used in the final report.
- There are no risks or benefits involved in the study.

I also confirm that the research procedure, as well as all of the factors indicated above, have been explained to my child.

Signed: _____

Name: _____

Date: _____

APPENDIX E: ASSENT FORM

ASSENT FORM

I _____ understand that this is an assent form that will allow my responses in the focus group to be used in a study conducted by Atiyya Mohamed. This is a study on teenagers' perceptions of HIV/AIDS media intervention.

All the information gathered in this study will be treated with the strictest confidentiality.

I understand that:

- Participation in this research is voluntary.
- I may withdraw from the study at any time.
- I have the right to not answer questions that I don't want to.
- No information that may identify me will be included in the research report, and my responses will remain confidential.
- Direct quotes from the focus group discussion may be used in the final report.
- My identity will be protected
- There are no risks or benefits involved in the study.
- The tapes will be locked in a cupboard and kept safe throughout the research process
- The tapes will be heard only by the researcher and supervisor of the study
- The tapes will be destroyed after the report is written and marked.

Signed: _____

Name: _____

Date: _____

APPENDIX F: CONSENT FOR AUDIO RECORDING

I _____ the parent/guardian of _____ understand that my child will participate in a focus group held by Atiyya Mohamed for the study on teenagers' perceptions of HIV/AIDS media intervention. I give consent for my child's responses in the focus group to be audio recorded.

I understand that:

- No identifying information will be included in the research report, and all responses will remain confidential.
- The identity of my child will be protected.
- The tapes will be locked in a cupboard and kept safe throughout the research process.
- The tapes will be heard only by the researcher and supervisor of the study
- The tapes will be destroyed on completion of the study
- Direct quotes of the discussion may be used in the final report.

I also confirm that the factors indicated above, have been explained to my child.

Signed: _____

Name: _____

Date: _____

APPENDIX G: ASSENT FORM FOR AUDIO RECORDING

ASSENT FORM FOR AUDIO RECORDING

I _____ understand that this is an assent form that will allow my responses in the focus group to be audio recorded in a study conducted by Atiyya Mohamed. This is a study on teenagers' perceptions of HIV/AIDS media intervention.

All the information gathered in this study will be treated with the strictest confidentiality.

I understand that:

- No identifying information will be included in the research report, and all my responses will remain confidential.
- My identity will be protected.
- The tapes will be locked in a cupboard and kept safe throughout the research process.
- The tapes will be heard only by the researcher and supervisor of the study
- The tapes will be destroyed on completion of the study
- Direct quotes of the discussion may be used in the final report.

I also confirm that the factors indicated above, have been explained to my child.

Signed: _____

Name: _____

Date: _____

APPENDIX H: INFORMATION SHEET TO PARENTS



Dear Parent/Guardian

My name is Atiyya Mohamed, and I am doing a study as part of my training for a Masters Degree in Educational Psychology at the University of the Witwatersrand. My research aims to explore teenagers' perceptions of HIV/AIDS media interventions.

I would like to invite your child to take part in this study. A focus group will be held at the school. The focus group will consist of five learners including your child. The group will meet to talk about the topic. They will be shown pictures of HIV/AIDS education that is found on television or in newspapers, for example Soul City or LoveLife advert. Your child will take part in a discussion about the pictures that they saw. The discussion of the group will be audio recorded.

Participation in the study is voluntary, and no person will be advantaged or disadvantaged in any way for choosing to participate or not to participate in the study. All of your child's responses will be kept confidential, and no information that could identify your child will be required. The material will only be seen by myself and my supervisor, and will be processed by myself. The tapes will be locked in a cupboard and kept safe throughout the research process. All audio recordings will be destroyed on completion of the final report. Your child may refuse to answer any questions they would prefer not to, and they may choose to withdraw from the study at any point. The use of direct quotes of parts of the discussion may also be needed however should any identifying information emerge they will not be used.

Whether you decide to allow your child to participate or not please note that there will be no risks or benefits of any kind. If anything that is sensitive to you comes up in the discussion, free counselling will be made available at the Johannesburg Institute of Social Services (JISS). The contact details are (011) 837-4151.

If you agree to your child taking part in the study and give your permission, please sign the attached consent form.

On completion of the study the results will be written up in a final report. Should wish to know the results of the study, a summary of the findings will be made available to the school, alternatively please feel free to contact me for a copy. If you have any questions or would like to discuss this research, I can be contacted telephonically at 084 569 7564. Your participation in this study would be greatly appreciated.

Kind Regards
Atiyya Mohamed

APPENDIX I: INTERVIEW SCHEDULE FOR FOCUS GROUPS DISCUSSION

Please look at the computer and then we can discuss what you have seen.

Tell me what are some your thoughts on what you have seen?

What feelings do you have about what you saw?

Which parts of the footage stood out to you the most and why?

Which parts of the footage did you enjoy and why?

Which parts of the footage did you not enjoy and why?

How do you think they could improve on this intervention?

What changes would you make to it if you could and why?