

CHAPTER 1

INTRODUCTION TO THE RESEARCH STUDY

1.1	THE AIM OF THIS CHAPTER	1
1.2	INTRODUCTION	1
1.3	RATIONALE	2
1.4	STATEMENT OF THE RESEARCH PROBLEM	4
1.5	THE PURPOSE OF THE STUDY	5
1.6	DELIMITATIONS	6
1.7	EPISTEMOLOGICAL COMMITMENT AND PARADIGMATIC PERSPECTIVE	7
1.7.1	THE KNOWLEDGE CLAIM	7
1.7.2	THEORETICAL FRAMEWORK	9
1.8	METHODOLOGICAL APPROACH	12
1.8.1	QUALITATIVE RESEARCH APPROACH	12
1.9	RESEARCH METHODOLOGY AND DESIGN	13
1.9.1	INSTRUMENTAL CASE DESIGN	13
1.9.2	SELECTION OF PARTICIPANTS	14
1.9.3	DATA COLLECTION	15
1.9.3.1	Documentary analysis	15
1.9.3.2	Focus group discussions	15
1.9.3.3	Personal interviews	16
1.9.3.4	Participant observations	16
1.9.3.5	Reflective journal	17
1.9.4	DATA ANALYSIS	17

	Page
1.9.5	QUALITY CRITERIA 18
1.9.5.1	Credibility 18
1.9.5.2	Transferability 19
1.9.5.3	Dependability 19
1.9.5.4	Conformability 20
1.9.5.5	Authenticity 20
1.9.7	ETHICAL CONSIDERATIONS 20
1.9.6.1	Informed consent 21
1.9.6.2	Disclosing details of the study 21
1.9.6.3	Opportunity to withdraw 21
1.9.6.4	Risks and benefits 21
1.9.6.5	Ensuring confidentiality 22
1.10	SIGNIFICANCE OF THE STUDY 23
1.11	ANTICIPATED CHALLENGES 23
1.12	OUTLINE AND ORGANISATION OF THE INQUIRY 24

---oOo---

CHAPTER 2

REVIEW OF RELATED LITERATURE

2.1	INTRODUCTION	26
2.2	THE PREVALENCE AND INCIDENCE OF HIV AND AIDS IN UGANDA	27
2.2.1	NEW TRENDS IN THE FIGHT AGAINST HIV AND AIDS	27
2.2.2	EXTRA-MARITAL SEX	28
2.2.3	MOTHER TO CHILD TRANSMISSION OF HIV (MTCT)	28
2.2.4	HIV DISCORDANCE AND NON-DISCLOSURE	29
2.2.5	TRANS-GENERATIONAL SEX	29
2.2.6	VULNERABLE GROUPS	29
2.2.7	NATIONAL RESPONSES TO HIV AND AIDS IN UGANDA	30
2.2.8	TRENDS IN SCOPE AND INTENSITY OF INFORMATION, EDUCATION AND COMMUNICATION (IEC) FOR BEHAVIOUR CHANGE	30
2.3	UNDERSTANDING THE YOUTH IN THE CONTEXT OF HIV AND AIDS AND URBANISATION	32
2.3.1	THE PSYCHO-SOCIAL AND DEVELOPMENT ISSUES OF YOUNG PEOPLE	33
2.3.2	CONCURRENT MULTIPLE PARTNERS AND TRANSACTIONAL SEX	33
2.3.3	URBAN YOUTH AND ACCESSIBILITY TO HIV AND AIDS EDUCATION	34
2.3.4	THE HARD-TO-REACH URBAN YOUTH	35
2.4	URBAN YOUTH AND THE MEDIA	36
2.4.1	EROSION OF CULTURAL VALUES BY THE MEDIA	36
2.4.2	CONTRADICTING MESSAGES AND CONFLICTING ROLE MODELS	37
2.4.3	YOUNG PEOPLE, TELEVISION AND SEXUALITY	38
2.4.4	YOUTH, PARENTS AND TELEVISION VIEWING	39
2.4.5	PEER INFLUENCE ON TELEVISION VIEWING	39
2.5	URBAN YOUTH, SEXUAL SOCIALISATION AND HIV AND AIDS EDUCATION	40
2.5.1	THE PURPOSE OF HIV AND AIDS EDUCATION FOR URBAN YOUTH	41
2.5.2	THE STRUCTURE OF HIV AND AIDS EDUCATION	41
2.5.3	BEHAVIOURAL CHANGE THROUGH EDUTAINMENT	43

	Page
2.6 TELEVISION EDUTAINMENT FOR HIV AND AIDS PREVENTION	44
2.6.1 ASPECTS OF HIV AND AIDS TO BE ADDRESSED BY TELEVISION EDUTAINMENT	45
2.6.1.1 Myths and misconceptions about HIV and AIDS	45
2.6.1.2 Perception of risk	46
2.6.1.3 HIV and AIDS stigma	47
2.6.2 THE CULTURAL FACTORS IN TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES	48
2.6.3 PERSONALITY TRAITS AND TELEVISION VIEWING	50
2.6.4 CATEGORIES OF TELEVISION EDUTAINMENT PROGRAMMES	51
2.6.4.1 Advertisement spots or public service announcements (PSAs)	51
2.6.4.2 Television magazines and variety shows	51
2.6.4.3 Reality television	51
2.6.4.4 Educational drama	52
2.6.4.5 Television soaps	52
2.6.5 ROLE MODELING IN EDUTAINMENT	53
2.6.6 STUDIES RELATED TO TELEVISED HIV AND AIDS EDUCATION.....	55
2.7 CONCLUSION	56

---oOo---

CHAPTER 3

DESIGNING AND CONDUCTING THE EMPIRICAL RESEARCH

3.1	THE AIM OF THE CHAPTER	59
3.2	INTRODUCTION	59
3.3	PARADIGMATIC APPROACH	59
3.3.1	THE CONSTRUCTIVIST AND INTERPRETIVIST EPISTEMOLOGY	60
3.3.2	THE CONCEPTUAL AND THEORETICAL FRAMEWORK OF THE STUDY	62
3.3.3	THE QUALITATIVE APPROACH TO THE STUDY	64
3.4	RESEARCH DESIGN AND METHODOLOGY	66
3.4.1	INSTRUMENTAL CASE STUDY DESIGN	66
3.4.2	SELECTION OF PARTICIPANTS	67
3.4.2.1	Community youths	68
3.4.2.2	Participants from a high school	69
3.4.2.3	Participants from the teachers' college	69
3.4.2.4	University students	69
3.4.2.5	Key informants	70
3.4.3	DATA COLLECTION	71
3.4.3.1	Document analyses	71
3.4.3.2	Focus Group Discussions	71
3.4.3.3	Personal interviews	74
3.4.3.4	Participant observations	75
3.4.3.5	Direct observation	76
3.4.3.6	Reflective journal	77
3.5	DATA ANALYSIS AND INTERPRETATION	78
3.6	QUALITY CRITERIA	80
3.6.1	CREDIBILITY	80
3.6.2	TRANSFERABILITY	82
3.6.3	DEPENDABILITY	82
3.6.4	CONFIRMABILITY	82
3.6.5	AUTHENTICITY	83

	Page
3.7 ETHICAL CONSIDERATIONS	83
3.7.1 INFORMED CONSENT	84
3.7.2 DISCLOSING DETAILS OF THE STUDY	84
3.7.3 OPPORTUNITY TO WITHDRAW	84
3.7.4 RISKS AND BENEFITS	84
3.7.5 ENSURING CONFIDENTIALITY	85
3.8 CLOSING REMARKS	85

---oOo---

CHAPTER 4

FINDINGS FROM THE STUDY

4.1	AIM OF THE CHAPTER	87
4.2	INTRODUCTION	87
4.3	TELEVISED HIV AND AIDS EDUCATION DRAMA AND SUBMINIMAL CUTS	87
4.3.1	<i>LIFE CHOICES</i> AND OTHER TELEVISED EDUCATION DRAMA	90
4.3.1.1	Motivation for selecting <i>Life Choices</i>	91
4.3.1.2	The story set-up and the structure of <i>Life Choices</i>	92
4.3.1.3	Participants' perceptions of HIV and AIDS messages in <i>Life Choices</i>	100
4.3.1.3	Analysing participants' perceptions of HIV and AIDS messages in <i>Life Choices</i> and other televised drama	108
4.3.2	SUBMINIMAL CUTS	112
4.3.2.1	Missing the goal	112
4.3.2.2	The caring father and husband	113
4.3.3	CONCLUSION ON TELEVISED HIV AND AIDS EDUCATIONAL DRAMA AND SUBMINIMAL CUTS	114
4.4	HIV AND AIDS MESSAGES IN COMMERCIAL TELEVISION SOAPS	115
4.4.1	MOTIVATION FOR SELECTING <i>SECRETO D'MOUR</i>	116
4.4.2	THE STORY SET-UP AND STRUCTURE OF <i>SECRETO D'MOUR</i>	116
4.4.2.1	The main characters	116
4.4.2.2	The saga of HIV and AIDS in <i>Secreto D'mour</i>	117
4.4.3	PARTICIPANTS PERCEPTIONS OF HIV AND AIDS MESSAGES IN <i>SECRETO D'MOUR</i>	119
4.4.3.1	Irresponsible sex behaviour	120
4.4.3.2	Peer influence and role modelling	120
4.4.3.3	Testing and counselling	121
4.4.3.4	Social and moral support to people living with HIV and AIDS	121
4.4.3.5	Behavioural transformations	121
4.4.3.6	Openness about ones' HIV status	122
4.4.3.7	HIV discordance among couples	123
4.4.3.8	HIV and AIDS and death	123

	Page
4.4.4 ANALYSING PARTICIPANTS' PERCEPTIONS OF HIV AND AIDS MESSAGES IN <i>SECRETO D'MOUR</i> AND OTHER TELEVISION SOAPS	124
4.4.4.1 Representation of real-life situations in television soaps	124
4.4.4.2 Purposive viewing of television soaps	126
4.4.4.3 Sexual socialisation in television soaps	126
4.4.4.4 Attachment to television soap characters	127
4.4.5.5 Role model in television soaps	128
4.4.4.6 Influence of television soaps to non-television viewers	128
4.4.4.7 Fantasy and fiction in television soaps	129
4.4.4.8 Engendered sex-role stereotypes in television soaps viewing	131
4.4.5 CONCLUSION ON YOUTH'S PERCEPTIONS OF HIV AND AIDS MESSAGES IN TELEVISION SOAPS	132
4.5 KEY INFORMERS' ASSESSMENT OF TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES	132
4.5.1 USING MEDIA TO ADDRESS THE YOUTH'S EXPERIENCES ON HIV AND AIDS	135
4.5.1.1 Saturation of HIV and AIDS talks in the media landscape	135
4.5.1.2 Complacency to HIV and AIDS transmission	135
4.5.1.3 Contradicting messages on HIV and AIDS	136
4.5.1.4 Multiplicity of television channels and the cost of airtime	136
4.5.1.5 Existence of competing programmes on television	136
4.5.2 ASSESSMENT OF TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES	137
4.5.2.1 Fear-arousing presentations	137
4.5.2.2 Defiance and resistance to HIV and AIDS messages	138
4.5.2.3 Balancing stories	139
4.5.2.4 Bias towards adults materials	139
4.5.2.5 Preachy and didactic plots in educational dramas	139
4.5.2.6 Preference for television soaps	140
4.5.2.7 Youth's involvement in development of dramas	140
4.5.3 CONCLUSION ON KEY INFORMERS' ASSESSMENT OF TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES	141

	Page
4.6 APPLYING INSIGHTS GENERATED BY THE STUDY OF TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES	142
4.6.1 ADDRESSING THE CHANGING FACE OF HIV AND AIDS	142
4.6.2 COMPLEMENTARY FUNCTIONS OF EDUCATIONAL DRAMAS AND TELEVISION SOAPS	143
4.6.3 ENHANCING SEXUALITY EDUCATION AND SEXUAL SOCIALISATION	143
4.6.4 IMPROVING ADULTS' PERCEPTIONS TOWARDS YOUTH'S CULTURES	144
4.6.5 THE EVOLVING ROLES OF TELEVISION	145
4.6.6 TURNING LIABILITIES INTO ASSETS: USING TELEVISION SOAPS FOR HIV AND AIDS EDUCATION	145
4.6.7 ENHANCING CULTURAL ASPECTS IN TELEVISION VIEWING	146
4.6.8 SEX-ROLE STEREOTYPES	147
4.7 CONCLUSIONS	148

---oOo---

CHAPTER 5 SYNTHESIS, FINDINGS AND RECOMMENDATIONS

5.1	THE AIM OF THE CHAPTER	149
5.2	SYNTHESIS	149
5.3	PRESENTATIONS OF FINDINGS ACCORDING TO RESEARCH QUESTIONS	151
5.3.1	RESEARCH QUESTION 1	152
5.3.1.1	Message construction and presentation in televised educational drama	152
5.3.1.2	Generation gaps, clash of interests and defiance	153
5.3.1.3	Characteristics of the youth as an audience	153
5.3.1.4	Television soaps and sexual socialisation	154
5.3.2	RESEARCH QUESTION 1.2	155
5.3.2.1	Saturation of HIV and AIDS talks in the media landscape	155
5.3.2.2	Didactic and fear-arousing programmes	155
5.3.2.3	Quality of the HIV and AIDS programmes	155
5.3.2.4	Balancing stories	156
5.3.2.5	Bias towards adult materials	156
5.3.2.6	Youth's involvement in the development of drama	156
5.3.3	RESEARCH QUESTION 1.3	157
5.3.3.1	Addressing the changing face of HIV and AIDS	157
5.3.3.2	Complementary functions of educational drama and television soaps	157
5.3.3.3	Improving adults' perceptions towards youth's cultures	157
5.3.3.4	The evolving roles of television	157
5.3.3.5	Using television soaps for sexual socialisation	158
5.3.3.6	Cultural dimensions in televised education HIV and AIDS Programmes	158
5.3.3.7	Sex-role stereotypes	159
5.3.4	Conclusion	159
5.4	DISCUSSION OF FINDINGS	159
5.4.1	ADDRESSING THE CHANGING TRENDS OF HIV AND AIDS IN UGANDA	159
5.4.2	INTEGRATING YOUTH SUB-CULTURES INTO TELEVISED HIV AND AIDS EDUCATION	161



5.4.3 ISSUES AND CHALLENGES IN DEVELOPING TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES 162

5.4.4 THE KNOWLEDGE CLAIM 163

5.4.5 CONCLUSION..... 171

5.5 RECOMMENDATIONS 174

5.5.1 FOCUSING ON PURPOSE OF TARGET AUDIENCE..... 174

5.5.2 MEDIA LITERACY..... 174

5.5.4...UTILIZATION OF EXISTING RESOURCES..... 174

5.5.4 AREAS FOR FURTHER STUDY 174

5.6 POSSIBLE CONTRIBUTIONS OF THE STUDY 175

5.7 POSSIBLE LIMITATIONS OF THE STUDY 176

5.8 FINAL REMARKS 176

---oOo---

REFERENCES 177

APPENDICES 202

---ooOoo---



LIST OF TABLES

	Page
Table 1.1: Outline of the study	25
Table 4.1: Composition of the participants in the seven focus groups	89
Table 4.2: Comparison between the consequences of good and bad choices in The drama	100
Table 4.3: Composition of the key informants for personal interviews	134
Table 5.2 Epistemological perspectives on televised HIV and AIDS Educational programmes	173

LIST OF FIGURES

	Page
Figure 2.1: Diagrammatic summary of the literature review	57
Figure 3:1 A schematic presentation of the research approach and design.....	86

---oOo---

CHAPTER 1 INTRODUCTION TO THE RESEARCH STUDY

1.1 THE AIM OF THIS CHAPTER

The aim of this chapter is to give a general overview of the study and to describe the problem, purpose, methodology and the findings of the study. The introduction begins with a historical background of HIV and AIDS in Uganda. The attempts to combat its spread, as well as the challenges encountered, are also discussed. The chapter also highlights the various sections and aspects of the study. Within this chapter, I attempt to give the rationale for the study and to put it in the context that the reader can easily understand.

1.2 INTRODUCTION

The study is aimed at investigating how youth in Uganda experience televised HIV and AIDS educational programmes. It follows concerns that the past declining prevalence of HIV and AIDS may not continue without a renewed focus on prevention (Ministry of Health 2005 thereafter referred to as MoH). Tentative signs of a possible resurgence among youths (aged 15-24 years) underline the need for revitalized HIV prevention strategies (Wawer 2005). The prevalence of HIV and AIDS which peaked at over 15% in the early 1990s, showed a 70% decline towards the close of the millennium, and this was linked to awareness drives done mainly through social networks (Stoneburner 2004) and peer counseling (Albright & Kawooya 2005).

HIV and AIDS information has been provided to the youth mainly in school settings. However, as the epidemic impoverishes families, the youth especially young girls, are withdrawn from school and begin sexual activity very early, with little information on sexuality (Uganda AIDS Commission 2001; hereafter referred to as UAC). Youths who do not attend school or who drop out prematurely miss basic information on reproductive health and HIV and AIDS. Consequently, they end up being vulnerable to misinformation from unreliable sources. In the light of this, it is increasingly being acknowledged that the media can play an important role in HIV and AIDS education (Kitzinger 1999; Batchelor 2003).

By influencing discussion around sexuality, the media is expected to shape the knowledge and attitudes of the youth and initiate new ways of talking about the issues (Kitzinger 2001, Millwood & Hargrave 1999). In particular, the medium of television has potential to enhance effective communication with the youth. Igartua, Cheng & Lopes (2003) describe young people as a low involvement audience. Keeping them attentive for a long time in a learning environment calls for attractive and interesting presentations. Television, with its audio visual component, ought to play a more important role than it does currently (Okuti 2006; Albright & Kawooya 2005). This calls for an investigation on how youth experience televised HIV and AIDS education in Uganda. Previous studies have concentrated more on establishing evidence of negative effects of popular television programmes (Van Evra 2004) and few have focused on how youth receive and interpret those programmes (Buckingham 2005).

This study investigates how youth experience televised HIV and AIDS education in Uganda. It is guided by Social Constructivism and Interpretivism which suggest that people construct their understanding of the world by reflecting on their social experiences (Vygotsky 1978). In particular, the study will be based on *Uses and Gratification Model* which explains that psycho-social needs influence the way individuals select and use media (Katz 1987).

1.3 RATIONALE

In the absence of curative drugs and vaccines, there is a danger of more people becoming infected. One way of providing a dynamic response to the resurging HIV and AIDS prevalence could be developing innovative educational HIV and AIDS programmes. After more than 20 years of intensive sensitization and communications about HIV and AIDS, there is growing prevention fatigue (Gray, Serwadda, Kigozi, & Nalugoda 2006). This challenge is aggravated by complacency due to availability of antiretroviral drugs (UAC 2007). The campaigns in the past were built on fear of imminent death caused by HIV and AIDS. With the knowledge that death is no longer immediate, the perception of risk has changed. These trends call for revitalized preventive strategies and innovative approaches to HIV and AIDS education. Research is needed to improve existing educational approaches. Given that existing HIV and AIDS and sex education in schools is generally authoritarian and conformist, the youth consider it irrelevant to their lives (Mirembe 2002). They consider their sexuality as lacking social acceptability and their relationships with adults are dominated by dynamics of control and resistance (Reddy 2005). It is necessary to establish

whether televised HIV and AIDS education uses the same approach. The Social Constructivist and Interpretivist approach that I took for this study is based on the position that all knowledge is "socially situated" (Haraway 2003). This approach considers paying attention to the voices, experiences, and discourses of the youths as a marginalized group. There is a possibility that youth could have access to perspectives that can unearth truths.

A significant number of the youth drop out of school before getting basic education on HIV and AIDS (UAC 2001). Even at home, social and cultural factors prevent parents from discussing sexuality with their children (Bennett 2000). Television is one of the media that could be used to provide the needed information, knowledge, skills, values, and attitudes. It is important to determine whether the youth find the televised programmes relevant and useful for HIV and AIDS education. By using television, interesting and relevant television programmes on HIV and AIDS are likely to reach those who are out of school.

At a personal level, as an educator, I have noted that the structure and delivery of HIV and AIDS education in institutions appears to be based on the same pedagogical philosophies used in formal academic settings. Using a paternalistic approach, educators attempt to provide didactic exhortations to the young. The approach conceptualizes the audience as a homogeneous entity, disregarding the diversity of needs, experiences and ways of living. It is imperative to determine whether the same approach is used for televised HIV and AIDS education.

Although increasing attention has been put on the youth friendly reproductive health services, there has not been a corresponding focus of research on adolescents to assess the nature of reproductive health information most appropriate for them (Erulkar, Onoka & Phiri 2005). It is important to investigate approaches for HIV and AIDS education that are based on critique and transformation.

Despite the potential of popular television programmes to play a meaningful role in sexual socialization (Gunter 2002), they are rarely discussed and evaluated as sources of learning (Buckingham 2005). Some of the television soaps are known to contain health messages (Obregón 2005) which could be useful for HIV and AIDS education. However, studies have focused on investigating negative effects of such programmes (Van Evra 2004). This suggests that relatively little is known about the ways in which the youth experience

televised HIV and AIDS educational programmes. Mitchell, Nakamanya, Kamali & Whitworth (2002) suggest that there is a discrepancy between what the youth's regard as valuable information and the priorities of the educators. It is for this reason that I will involve key informants, like HIV educators, theatricals and television staff in the study. Their insights on how they perceive televised HIV and AIDS education programmes will be useful for the investigation.

1.4 STATEMENT OF THE RESEARCH PROBLEM

There is growing prevention fatigue and media saturation caused by intensive HIV and AIDS communications for more than 20 years (Gray, Serwadda, Kigozi & Nalugoda 2006). Besides, the youths have become complacent to HIV and AIDS due to availability of Antiretroviral drugs (UAC 2007). With the knowledge that death is no longer immediate, the perception of risk has changed. These trends call for revitalized preventive strategies and innovative approaches to HIV and AIDS education. Research is needed to improve existing educational approaches. Messages and modes of presentation have to be modified to address these new challenges. As suggested by Kitzinger (1999) and Batchelor (2003), the media can play an important role in HIV and AIDS education by way of influencing discussion around sexuality (Kitzinger 2001; Millwood & Hargrave 1999). However, one of the factors that are believed to have led to resurgence of HIV and AIDS is the reliance on the use of electronic media (UAC 2007; Low-Beer & Stoneburner 2003). This raises the question of whether the media has limited educational value or, whether it is the way it is being used that is not compatible with the youths as the target audience. By focusing on television, this study investigates how the youth experience the use of media for HIV and AIDS education. Television has capacity to convey HIV and AIDS messages using an edutainment approach which is popular to the youth (Igartua, Cheng, & Lopes 2003). In the light of this stated problem, the primary research question that will guide this study is formulated as follows:

How do youth in Uganda experience televised HIV and AIDS educational programmes? In order to answer this primary research question, a number of secondary research questions will be addressed. These questions are listed as follows;

- How do the urban youth in Uganda value and experience televised HIV and AIDS educational programmes?
- How do health educators, television staff, and theatricals value and assess televised HIV and AIDS education programmes?
- What are the guidelines from the findings of the study that can render televised HIV and AIDS programmes more relevant to the needs of the youth?

1.5 THE PURPOSE OF THE STUDY

The purpose of this study is derived from the primary and secondary questions outlined above. The primary purpose is to investigate and discuss how the youth in Uganda experience televised HIV and AIDS education.

The primary purpose above will be answered by means of addressing the following secondary purposes.

- i) To investigate, analyze and discuss the way youths value and experience televised HIV and AIDS educational programmes.
- ii) To find out how Health educators, television staff, and theatricals value and assess televised HIV and AIDS education programmes
- iii) To provide innovative guidelines from the findings of the study that could render televised HIV and AIDS programmes more relevant to the needs of the youth

1.6 DELIMITATIONS

The participants in the study will be limited to those living in urban areas. They will be males and females and aged 15-24. The findings may not be generalized to young people in rural settings or those below and above the specified age bracket. This study will also be limited to investigating HIV and AIDS educational programmes on television and the findings may not apply to programmes on other media.

1.7 EPISTEMOLOGICAL COMMITMENT AND PARADIGMATIC PERSPECTIVE

1.7.1 THE KNOWLEDGE CLAIM

In approaching this study, I am guided by the Social Constructivist and interpretivist paradigms pioneered by the work of Lev Vygotsky (1978). However, as noted by Wood (1998), Social Constructivism brings together aspects of the work of Piaget, Bruner and Vygotsky. These paradigms provide framework for investigating how youth experience televised HIV and AIDS programmes. It is suggested that knowledge and truth are constructed through the interactions of individuals with their social environment (Vygotsky 1978). In the section below, I attempt to explain the principles and assumption of Social Constructivism and Interpretivism and show how they relate to televised HIV and AIDS education.

The source of truth and knowledge: Mertens (2005) indicates that knowledge comes from a variety of sources within the environment of the learners. The sources include among others, electronic and print sources, educators and peers (Ding 2008). As they get exposed to new information, individuals use their past experiences and knowledge to negotiate meaning and to construct their own reality (Wink & Putney 2002). In this regard, HIV educators need to be sensitive and attentive to the learners' previous experiences, conceptions and knowledge. According to (Dewey 1966) knowledge ought to have meaning and importance to the learners. This study is based on the premise that the youth could learn about HIV and AIDS from two types of television programmes: the programmes developed for educational purposes and television soaps that are developed for commercial purposes. In line with the Social Constructivism, Buckingham (2005) suggests that the programmes that young people enjoy watching should be explored as sources of learning. Although some commercial television soaps contain health-related messages, they have not enjoyed the same degree of attention by communication researchers (Obregón 2005). These programmes are likely to play a meaningful role in sexual socialization of the youth (Gunter 2002). Social Constructivism maintains that truth cannot be fully revealed because there are multiple realities which differ across time and place (Vygotsky 1978). This means that the role of educators is to help learners to search for meaning so in order to create their own reality (Cohen, Manion, & Morrison 2003).

The role of the educators: In the context of Social Constructivism and Interpretivism, educators are expected to facilitate but not to teach (Von Feilitzen (1999; Bauersfeld 1995). The skills that are required for facilitators are meant to help learners to arrive at their own reality (Brownstein 2001). With reference to HIV and AIDS educators are not expected to give didactic instructions on modes of behavior, but to create an environment where the youth develop their own conclusions. They are expected to promote reasoning, creativity, debate and contemplation among the learners (Di Vesta 1987). Social Constructivism aims at creating an awareness of the learners' viewpoints and perspectives other than projecting beliefs, standards and values of educators (Meter & Stevens 2000). In addition, the paradigms emphasize dialogue (Rhodes & Bellamy 1999) because instructors and the learners can learn from each other (Holt and Willard-Holt 2000).

The learning context: The Social Constructivist and Interpretivist paradigms view the context in which the learning occurs as central to the learning itself. The background and culture of the learner helps to shape the knowledge and truth that the learner acquires (Wertsch 1997). Individuals are presumed to make meanings through the interactions with peers, adults and the social environment (Kukla 2000; McMahon 1997). The myths, taboos, and customs learnt from families, peers and the media partly constitute the social experiences of the learners and play a major role in the way individuals perceive reality (UNESCO 2002; Hebdige 1979). Social interactions also enable individuals to make use of the symbols that are used in communication.

The role of the learners: according to Social Constructivism and Interpretivism, the learner is the prime factor for learning. The educator and the subject matter are secondary factors (Gamoran, Secada, & Marrett 1998). The learners are expected to play an active role in the learning process because they use accumulated knowledge, experiences and world views to interpret new information (Eggan & Kauchak 2004; Wink & Putney 2002). They compare their version of the truth with that of the educators and peers in order to get to a socially tested version of truth (Kukla 2000). Social Constructivists expect learners to leave their own imprint in the learning process (Clark & Elen 2006).

In conclusion, the way youth experience televised HIV and AIDS programmes is likely to be influenced by factors such as; the source of knowledge about HIV and AIDS, the learning context itself (the way media are used) and the roles of educators and the youth in televised

HIV and AIDS education. My investigation of the way youth experience televised HIV and AIDS education will be guided by these considerations. However, I am aware of the limitations associated with Constructivism and Interpretivism.

Limitations of Constructivism and Interpretivism: the approach based on Constructivism and Interpretivism is not applicable in a situation where the topic under investigation is new to the individuals participating (Kirschner, Sweller & Clark 2006; Mayer 2004). The argument is that novices do not possess the underlying mental models, or "schemas" necessary for this type of inquiry. Mayer (2004) describes this approach as "the constructivist teaching fallacy" (p. 15). Instead, he proposes that individuals should be made "cognitively active" and that facilitators should use "guided practice." Kirschner Sweller & Clark (2006) describes the approaches based on Social Constructivist as "unguided methods of instruction." They suggest more structured activities for individuals who have little or no prior knowledge. With regards to televised HIV and AIDS education, the approach may not be ideal for individuals who do not have basic facts on HIV and AIDS.

The above discussed limitation can be overcome by integrating Social Constructivism and Interpretivism with aspects of *Diffusion of innovations Model* (Rogers 2003). This model describes a process by which an innovation is communicated to the population through five stages: (1) knowledge dissemination, (2) persuasion, (3) decision making, (4) implementation, and (5) confirmation of the new practice. Adoption or rejection of the innovation occurs when new knowledge reduces uncertainty to a tolerable level, allowing a decision to occur. In this regard, television as a mass medium is used to convey basic information because it can have direct, immediate and influential effect upon the audiences (Watson & Hill 1997).

Conducting this study under the guidance of Social Constructivism and Interpretivism necessitates the use of appropriate theoretical frameworks. Given that my study deals with investigating how youth experience televised HIV and AIDS education, it is appropriate to base the study on the Uses and Gratification Model.

1.7.2 THE THEORETICAL FRAMEWORK

Within the Social Constructivist and Interpretivist paradigms, the study will be guided by the *Uses and Gratification Model*. The Model explains that individuals have specific needs that they intend to fulfill by using media. Katz and Blumler (1974) identified four needs that motivate individuals to access and use media. They include; 1) the need for diversion (from the routine of work and pressures of every day); 2) the need to enhance personal relationships (getting companionship, either with the television characters, or through conversations with others about television); 3) the need to enhance personal identity (where the viewer is able to compare his/her life with the lives of characters and situations on television, to explore, re-affirm or question their personal identity) and; 4) the need for surveillance (where the media are looked upon for a supply of information about what is happening in the world).

The Uses and Gratification Model suggests that the choices that audience members make in selecting media are based on the gratifications that they anticipate to get. Severin & Tankard (1997) indicate that the needs are based on individual social and psychological requirements. The choices they make are commensurate with their needs and interests (Katz & Blumler 1974a). The Uses and Gratification Model attempts to explain why individuals seek information or content selectively, and why they choose certain media but not others (LaRose, Mastro & Eastin 2001). One of the factors that motivate audiences to use a particular media more often is the need for entertainment (Luo 2002). This is the reason why HIV and AIDS education relies on edutainment to pass on messages (De Fossard 2004).

I will investigate the way youth experience televised HIV and AIDS education in the light of those four needs. However, I am aware of the limitations of the Uses and Gratification Model and therefore my study will go beyond the confines of the Model. For instance, the Model pays relatively little attention to how individuals interact with the media content. There is a tendency to concentrate on why audiences consume media rather than extending the investigation to discover how the media are received and what meanings and interpretations are produced (O'Sullivan, Dutton & Rayner 1994). The model also pays less attention to investigating ways in which the social background of the audience influences the interpretations of the media messages. Furthermore, the Model addresses only individual psychological gratification derived from media use and ignores the social context of media

use. There are also methodological limitations. Data collection has to depend on self-reports. This is because it is hard to keep track of exposure patterns through observation (Katz 1987). Nagel, Hudson & Abowd (2004) are skeptical about self-reports because they are based on personal memory. Respondents might inaccurately recall how they behave following or during media use and this may create distortions in the study.

These limitations are fundamental given the fact that Social Constructivism and Interpretivism emphasize the role of the social and cultural contexts in learning (Kukla 2000; Vygotsky 1978). As discussed in chapter five (paragraph 5.4.2), television viewing is communal and the subsequent interpretations are collectively done (Gavin 2000). The socio-cultural structures not only contribute to pleasurable watching of television but also influence the interpretation of messages. Aware of these limitations, I will attempt to integrate aspects of *Symbolic Interactionism Theory and the Social Cognitive Theory* in the study and relate them to the Uses and Gratification Model.

Symbolic interactionism: Televised HIV and AIDS education uses symbols to represent reality and young people are presumed to have the capacity to perceive and interpret reality through symbols. The *Symbolic Interactionism Theory* explains that people use culture to learn social roles through social interactions (Blumer 1969). With regards to the urban youth, they have unique sub-cultures which are characterised by distinctive fashion, styles, interests, slang, music and film genres (UNESCO 2002; Hebdige 1979). In responding to the messages in a communication, individuals are likely to depend on the interpretation of the symbols used, rather than just acting on a conditioned response (Charon 2001; Hewitt 2003). The sender's message is interpreted by the receiver with input from both external and internal social elements (Hewitt 2003; Charon 2001). The interpretation of symbols is done against a complex network of audience factors, picture coding factors, and socio-cultural factors (Muturi 2005; Hugo 2002). This therefore calls for an understanding of how the symbols are understood by the youth within the context of their sub-cultures. The Symbolic Interaction perspective sees individuals as active and dynamic in their media environments because reality is constructed in flexible, adjustable social processes (Blumer 1969; Charon 2001; Gingrich 2003).

Social Cognitive Theory: In Televised HIV and AIDS programmes, young people learn new behaviors by observing and imitating iconic role-models (Glanz, Rimer & Lewis 2002). Learning by observing the behavior of others is explained by Social Cognitive Theory (Bandura 2002). An iconic or symbolic/pictorial representation of behaviour is one of the ways in which individuals learn new behaviors. Glanz, Rimer, & Lewis (2002) identify other ways in which young people could learn new behaviors. These ways (which are outside the scope of this study) include observing live role-models (family members, teachers, peers, etc.) and attending to text or verbal instructions (non-performance models). The importance of role-models is that they illustrate to young people the processes of behavioral change (Galavotti, Pappas-Deluca & Lansky 2001) and the costs and benefits associated with change (Bandura 2002). However, within the Social Constructivist and Interpretivist perspective, role-models must be those that the target audience identifies with (Parker, Ntlabati & Hajjiyannis 2005; Sood 2002; Barker & Sabido 2005). For the messages to be effective there has to be a para-social interaction between viewers and the role models (Obregón Rafael 2005). This interaction enables viewers to reach a deeper understanding of messages being conveyed (Lacayo 2007). However, in line with the uses and Gratification model, there should be a perceived similarity between the situation depicted by the role-models and the situation experienced by the viewer (Cohen 2001).

According to Social Cognitive Theory, the performance of behavior is to a great extent determined by the expected outcomes of the behavior (LaRose, Robert & Matthew 2004). Expected positive outcomes of television watching should cause further television watching. Whereas the Uses and Gratifications Model focus on needs and gratifications, the Social Cognitive Theory focuses on expected outcomes and behavioral incentives. By reflecting on the benefits of past media use, individuals are in position to anticipate potential benefits of continued use the media (LaRose, Mastro & Eastin 2001). As television users become more self-efficacious, the expectations that they will obtain specific outcomes (e.g., finding useful information) also increase. The increased expectation encourages more usage of the media. Bandura (1986) describes *self-efficacy* as the belief in one's capability to organize and execute a particular course of action

In investigating how youth experience televised HIV and AIDS programmes, the three theoretical frameworks discussed above converge. Televised HIV and AIDS education depend on symbols to represent reality (symbolic Interactionism) and the youth are expected

to learn new behaviors by observing the iconic role models (Social Cognitive Theory). In the context of the Uses and gratification Model, the desire to identify with the iconic role models motivates the youth to continue watching certain programmes on television (LaRose, Robert, Matthew 2004).

This study will depend on the discussed theoretical framework to investigate how youth in Uganda experience televised HIV and AIDS education. The nature of the research topic and requirements of the selected paradigms necessitate that my investigation will rely on qualitative research methods (Creswell 2003; Silverman 2001). The research paradigm determines data collection and analysis methods (Mackenzie & Knipe 2006; Mertens 2005).

1.8 METHODOLOGICAL APPROACH

In this section, I attempt to describe the research design and approaches that I will use to collect data and the reasons for using them. I also describe the procedures for the analysis of the data.

1.8.1 QUALITATIVE RESEARCH APPROACH

In order to have a comprehensive picture of how youth in Uganda experience televised HIV and AIDS educational programmes, a qualitative research approach will be applied for data collection. The choice to use qualitative approach is based on the fact that it enables rich and deep explorations and descriptions (Myers 2000). The thick descriptions give rigour to qualitative analysis and also present detail, context (Denzin 2001). Qualitative research explores the richness, depth and complexity of phenomena (Baxter & Jack 2008). In qualitative research, meaning and influence are understood in a more multi-faceted way (Parker, Dairymple & Durden 2000). As Myers (2000) observes, qualitative studies enable a researcher to gain insights through discovering meanings. The approach will provide me with unanticipated information because the discussions with participants will not be limited by closed questions and pre-determined response formats (Green & Thorogood 2004). The methodology and approach that will be used in this qualitative study will be different from that of the objective positivist tradition in which reality is measured using quantitative methodologies (Silverman 2001). The means of data collection will be interactive and will

necessitate the active presence of the researcher. This is because the approach calls for sensitivity to the participants and to their responses (Baxter & Jack 2008).

I am aware of the challenges associate with qualitative studies. The study generates big volumes of data which call for detailed level of analysis even when research is confined to a small number of subjects (Myers 2000). Another challenge is the temptation by researchers to answer questions that are too broad. I have placed boundaries with regard to geographical location, time and number of participants (Creswell, 2003).

1.9 RESEARCH METHODOLOGY AND DESIGN

In this section I present an elaborate description of the approach, procedures and rationale behind my data collection and data analysis. Unlike quantitative research, there is no overarching framework for how qualitative research should be conducted; rather each type of qualitative research is guided by particular philosophical stances that are taken in relation by the research to each phenomenon (Baxter & Jack 2008).

1.9.1 INSTRUMENTAL CASE DESIGN

An instrumental case study design is used to provide deep insights into a specific issue or phenomena (Stake 2000). It allows researchers to explore individuals, complex interventions, relationships and programmes (Yin 2003). The design allows issues to be explored through more than one perspective. The case may or may not be seen as typical of other cases (Luck, Jackson, & Usher 2007). I will use this approach because it suits the exploratory nature of my study. It is consistent with my inductive approach and enables me to investigate how youth in Uganda experience televised HIV and AIDS educational programmes. The design will enable me to obtain an in-depth description of the lived-in experiences of the urban youths and the key role players.

The design allows exploration of a phenomenon using a variety of data sources (Baxter & Jack 2008). In this study, the sources will include analysis of documents and records, interviews, focus group discussions and participant-observation. The convergence will add strength to the findings and the various strands of data will be braided together to promote a greater understanding of the topic.

I do acknowledge, however, that the design limits the extent to which my study can be generalized. A single or a few studies may not enable making generalizations. It is not easy to test causal links because they are prone to problems of personal researcher/observer bias and subjectivity (Cohen, Manion, & Morrison 2003). Nevertheless, the detailed information and insights that will be generated through the design may help in refining theory and development of hypothesis for further studies (Berg 2001).

1.9.2 SELECTION OF PARTICIPANTS

As proposed by Murphy (2000), qualitative research can be conducted using small samples unlike quantitative studies that call for calculations to understand sample size. Participants will be selected according to clusters that represent typical youth populations in the urban settings. These will include non-school going community youth, those working in HIV and AIDS projects, high school students, the college students, two groups of University students and the fresh graduates. Given the qualitative nature of the study that requires in-depths insights from the participants, the participants will not be as many as those required in the surveys. Krueger & Casey (2000) suggest that smaller numbers are easy to recruit and manage. Between six and ten participants in each category will be invited to participate in the study. The participants will be selected using snowball sampling technique. The key informants will identify a few participants who watch television regularly. Those who will be identified will in turn propose their friends who are regular viewers of television programmes.

Other participants in the study will include key informants like health educators, staff from television stations and the theatricals who organize educational drama. Two key informants will be selected from each of the identified organizations. As suggested by McMillan and Schumacher (2001), it may be good practice to select strategic informants other than taking big samples. Key informants will be selected on basis of their contributions in developing and implementing HIV and AIDS educational programmes. While some of them are involved in producing the dramas, others use the dramas to educate the youth on HIV and AIDS the detailed description is done in table 4.3 in chapter four (4.5). The aim of including key informants is to get their in-depth insights into the subject and to triangulate the data from the youth.

1.9.3 DATA COLLECTION

In this section, I describe the procedures that I will use to collect data. I will use multiple data collection methods in order to enhance data quality control through crystallization and triangulation (Baxter & Jack 2008). The following data collection methods will be used and they reflect the qualitative research design and the paradigms on which this study is based.

1.9.3.1 Documents analysis

One of the sources that will be used in data collection is the analysis of documents and records. It involves the use of texts and documents as source materials in both hard and electronic form (Scott 2006). In this study, I will examine government publications, newspapers, certificates, diaries and innumerable other written, visual and pictorial sources in or other 'hard copy' form. Prior (2003) states that documents analysis is one of major sources of data widely used for social research. The documents will be obtained from institutional offices and government departments which deal with HIV and AIDS educational programmes. These will include offices of: Uganda AIDS Commission, the NGOs dealing with HIV and AIDS campaigns and various television stations.

1.9.3.2 Focus Group Discussions (FGDs)

FGDs will be the major data collection method of my research because they present a forum for intensive interactions with the participants (Krueger & Casey 2000). In this way the approach increases the researcher's understanding of the participants' views (Green & Thorogood 2004). FGDs will be conducted with small groups of people on specific topics. My preference will be based on the fact that the approach yields rich qualitative information which may be used to identify what works well with the urban youths and what does not work well. I will aim at explaining meanings, beliefs and attitudes of the participants (Rabiee 2004) within the context of the research question. In focus groups, information can be obtained more quickly because only one session is scheduled for several persons. More importantly, the group setting allows individuals to use the ideas of others as cues to elicit their own views. The effectiveness of the focus group will be maximized by keeping the group size small, between 6-10 people. Each of the different categories mentioned will constitute a focus group. In total there will be seven focus groups each of which will constitute 6-10 individuals. The groups will preferably have equal numbers of males and

females. Respondents' ages ranged from fifteen to twenty four with a mean age of 20 years. Following suggestions of (Krueger & Casey 2000), It will be arranged that members of a particular focus group must be familiar with each other, and comfortable watching and discussing television together. The choice of the venue for watching and for subsequent discussion will be left to the members of the group.

Some of the sessions of focus groups will involve viewing recorded excerpts of television programmes that are used to educate the youth about HIV and AIDS. The discussions will be open and informal and participants will be encouraged to interact freely within the group sessions. Great care will be taken on the part of the researcher to avoid introducing terminology and influencing the terms of the discussion. The respondents will be allowed to use the expressions that they use normally in their everyday lives. Besides introducing the lead questions, the researcher will play a simple role of facilitation. A few prompts will be made to trigger more discussions. After audio-taping, the conversations which will last between forty minutes to an hour will be transcribed. A research assistant will help me in the process of recording the proceeds of conducting focus group discussions and personal interviews.

1.9.3.3 Personal interviews

Personal interviews will be used to generate in-depth insights with regard to the way youth in Uganda experience televised HIV and AIDS educational programmes. Open-ended questions will be used so that the responses of the participants would not be restricted or limited. Personal interviews will enable participants to share their personal experiences, opinions and beliefs (Cohen, Manion & Morrison 2003). I will seek the permission of the respondents to tape-record the responses. Personal interviews will be used to collect data from various categories of people. These will include selected representatives from the youths, staff from health educators, staff from television stations and staff from the other organizations that educate the youth on HIV and AIDS.

1.9.3.4 Participant observations

Some of the information will be collected through participant observation. This procedure enables description and explanation of people's behavior (Bernard 2002). As pointed out by Angrosino (2002) observation as a method requires a researcher to immerse himself in a new

culture to participate in the daily lives of the researched. I will visit and observe youth at Naguru teenage centre where adolescents are invited regularly to participate in video and television shows which they eventually discuss. I will also attend sessions at St Kizito High school where students are shown educational films during their leisure time. The other places that I will visit will be halls of residence at Makerere University where students watch television soaps. Information will be generated by observing their activities and observing the facial expressions particularly when reacting to the presentations which they like as well as those that they do not like. I will also make observations during focus group discussions. Field observation as a method is regarded as fundamental to most research (McMillan & Schumacher 2001).

1.9.3.5 Reflective journal

I will maintain a reflective journal in order to reflect on my visual experiences, perceptions and interpretations (Baxter & Jack 2008). Visual data collection will contribute to the diversity and wealth of my data. Besides, it will enable me to capture data that I could miss during focus group discussions and interviews. I will take photographs and pictures and use them to illustrate and clarify study findings. The reflective journal will help me to be mindful of personal bias and subjective interpretations that are common in qualitative studies (Creswell 2003). Within the journal, I will also note the tensions, issues and challenges met during the data collection processes.

1.9.4 DATA ANALYSIS

The process of data collection and analysis will be done concurrently (Green & Thorogood 2004) to enable modification of subsequent strategies where need arises, Transcript based data will be used to provide framework for analysis (Krueger & Casey 2000). Data will be analyzed at both a conversational and a thematic level, in order to examine the processes by which individuals and audience groups interpret televised educational programmes. The similarities and differences in perceptions will be examined and analyzed. Transcripts will be organized into manageable segments, or sections depicting the meaning that correspond to the ways the audience experience televised HIV and AIDS educational programmes. By analysing common concepts and ideas, themes will be developed by way of organizing findings into identified categories (Raibee 2004). The categories and the patterns will not be predetermined, but will emerge in the process of data collection and analysis (McMillan &

Schumacher 2001). The process of developing themes will help in reducing the amount of details that has to be recorded (Raibee 2004). Relevant information from the interviews, focus groups and from documents will be put into small segments according to identified categories and meanings. Areas of diversity and areas of recurring themes and commonality will be identified. A full descriptive account of the findings will be examined and reported in terms of topics, themes and issues. I will develop thematic constructs and endeavored to put the synthesized picture together.

1.9.5 QUALITY CRITERIA

One of the central issues in research is to establish trustworthiness of findings (Babbie & Mouton 2001). Trustworthiness in qualitative research is equivalent of the positivist notion of internal and external validity, reliability and objectivity. In ensuring the trustworthiness of this study, I will focus on credibility, transferability, dependability and conformability (Denzin and Lincoln 2001)

1.9.5.1 Credibility

Credibility implies professional integrity, intellectual rigour and methodological capability (Lincoln & Guba 2003). The following procedures and strategies will be used to meet the criteria of credibility.

- I will constantly make reflections to consider the ways in which my theoretical approach and my personal and professional characteristics may affect the interpretation of data (Richards & Emslie 2000)
- I will use rich and authentic descriptions of the interactions with the participants, the research setting and the research process. To an extent, this may enhance transferability of the findings.
- I will continually reflect on my subjectivity, bias, prejudices, experiences, feelings, competences and assumptions and try to remain open-minded. I will guard against all personal orientations that may influence the research findings and the interpretations.
- Using a field journal, I will attempt to document my observations in order to monitor my developing interpretations. I will keep record of the research process to so that I can describe the research context and environment. Multiple data sources

will be used to enhance credibility (Yin 2003) and to create a complete, holistic and contextual portrayal of the phenomena in the study. Methodological triangulation means using various methods of collecting data. In this study, methods will involve in-depth interviews, observation, surveys and focus groups interviews. Data triangulation will necessitate collecting information from different categories of people, including the youth and key informants. Data from interviews and focus groups will be tape-recorded and transcribed so that it would be possible to cross-check the data analysis and confirm the accuracy of the data. The collection and comparison of data from various sources enhances data quality.

Credibility and trustworthiness will be focused on to provide comprehensiveness and to address the weaknesses and intrinsic bias and problems that come from a single method, single theory study. The advantages of each procedure will fill up possible gaps within others procedures. It will also allow for valid and reliable findings. I will ensure that enough detail is provided so as to enhance credibility of the findings (Baxter & Jack 2008). I will also ensure that collection and analysis of data is done systematically and correctly (Russell, Gregory, Ploeg, DiCenso & Guyatt 2005).

1.9.5.2 Transferability

Given that the study will be conducted using an instrumental case design, I will not envisage generalizing the findings to other settings. As suggested by Babbie & Mouton (2001), I will provide rich descriptive information on the topic under study to allow transferability of findings to situations and settings that are identical to the one where the research was conducted.

1.9.5.3 Dependability

Dependability is the measure of the extent to which findings of the study could be the same if the study was replicated in the same context and with the same participants. However, the display of credibility may not be sufficient to establish dependability (Babbie & Mouton 2001). I will aim at providing elaborative methodological descriptions that could be used to repeat the same study in similar contexts.

1.9.5.4 Conformability

I will ensure that findings of my study are not influenced by bias and other personal factors. I will use member-checking method after each focus group discussion and interview session. As proposed by (Baxter & Jack 2008) I and my research assistant will paraphrase respondents' statements and seek clarifications to ensure that what is heard or written down is correct. I will also present the findings using rich, thick descriptions (Myers 2000). This will call for self-control on our part as researchers. We will record all the oral responses from the focus groups and personal interviews. For purposes of keeping records, we will constantly re-play the records to ensure that our interpretations matched with what we will put on paper. We will also make an effort to engage some of the respondents after the analysis of data so that they could cross-check on the authenticity the data. This procedure will help to overcome any personal bias that is likely to influence the findings.

We will undertake respondent validation to cross-check interim research findings with respondents. The reactions of respondents to emerging findings will help us to refine the explanations. This procedure is described by Mays & Pope (2000) as tedious and that it consumes time. While I agree with this observation, respondent validation is likely to ensure that the reports represent the views of the participants.

1.9.5.5 Authenticity

Authenticity is the measure of the extent to which research findings are original representation of data obtained from the primary sources (Cohen, Manion & Morrison 2003). In this study, participants will be engaged in the process of cross-checking reports of the study to confirm whether it represents their responses. The risk of misrepresentation will also be minimized by ensuring reflexivity with regards to the influence of researchers' personal and professional characteristics (Morse 2001)

1.9.7 ETHICAL CONSIDERATIONS

HIV is primarily a sexually transmitted infection and a study on the subject is very delicate. This is because discussions on sex and sexuality generate a lot of anxiety and fear. The potential for stigma and discrimination against those identified as living with HIV and AIDS is very high. I will strive to preserve the dignity of the participants as demanded by the

University of Pretoria and the government of Uganda. The following ethical issues and concerns will be addressed during the study.

1.9.7.1 Informed consent

Most of the persons who will participate in the study will those that are capable of giving informed consent (Gauld 1999; Hornsby-Smith 1993). They will be above 18 years of age, mature and of a sound mental state. For the few who will below 18 years, consent will be obtained from their parents or guardians. The consent will be in both verbal and written form. In both cases, I will uphold the participants' right to decide whether to participate or not.

1.9.7.2 Disclosing details of the study

The participants will be informed of the overall purpose of the study and its main features, as well as the expected risks if any. Information that was provided to the participants included the purpose and scope of the study, the types of questions likely to be asked, the use to which the results may be put, and the extent to which participants' responses would be used in the reports.

1.9.7.3 Opportunity to withdraw

Kennedy (2005) emphasizes that besides obtaining ongoing consent from participants and their parents/guardians, participants should be given opportunities throughout the research to withdraw. This would also mean that the information cannot be used in the study. Participants will be given time to consider their participation and to ask questions. They will be given an opportunity to withdraw from the study if new themes that are undesirable to them emerge during the course of the study. This will also meant withdrawing consent for the use of their data.

1.9.7.4 Risks and benefits

Oberle (2004) notes that it may not be possible to anticipate risks to participating individuals in qualitative research because the questions asked keep on evolving throughout the research. I will attempt to make this clear to the participants at the beginning of the FGD and

interview sessions and allow them to refrain from answering questions that they feel uncomfortable with. Qualitative research involves publication of lengthy quotations from participants. Knapik (2002) and Oberle (2002) indicate that even when names and other identifiers are excluded in the reports, subtle cues might enable those familiar with the research context to identify the participant. I will offer to allow participants to view any material intended for publication so that they decide whether they are comfortable with it.

With regards to benefits, I will make it clear to the participants that the importance of the knowledge gained will outweigh the risk of harm, if any, to the participants. This will be done to facilitate the decision to participate in the study. There will be reciprocity in what participants give (in time and information) and the knowledge they would gain from the project. Reciprocity will entail providing informal feedback, providing refreshments, tutoring and being a good listener. Feedback on research results was in the form of recognition and gratitude to participants for their participation.

1.9.7.5 Ensuring confidentiality

Aware that qualitative data by its nature is full of clues to participants' identities, we will make efforts to keep the anonymity of participants (Gauld 1999; Hornsby-Smith 1993). In order to reduce harm and to protect the privacy of the participants, we will ensure that the information generated or gained in the process would not be detrimental to the participants. Categories of sensitive information requiring anonymity included sexual attitudes/practices, preference of practices, use of addictive substances, illegal conduct, financial information, employability/reputation, medical records that may lead to stigmatization or discrimination, psychological well-being and mental health. The researcher will not report private data that identifies participants. The participants will be encouraged to use nick names for purposes of identification. The real names of the participants will not to be recorded, except in situations where the participant requested otherwise.

1.10 SIGNIFICANCE OF THE STUDY

The study may lead to a more effective use of television campaigns to address HIV and AIDS educational needs of the youth. Television will be a good source of relevant HIV and AIDS education to those that do not acquire this information from schools.

The study may suggest guidelines that may improve the presentation style in the programmes for HIV and AIDS on television. It may also help in the improvement of the programmes that are conducted in the institutions of learning. HIV and AIDS education is currently considered authoritarian and conformist (Mirembe 2002). The proposed approaches will give urban youth a voice with which to share their views and concerns about HIV and AIDS education with adults.

The findings of the study may enable educators understand ways young people interpret television and value message on HIV and AIDS issues. They will duly use television to develop critical life-skills among the youth which will enable them to interpret and challenge negative social norms in the media.

1.11 ANTICIPATED CHALLENGES

The study deals with a sensitive topic that centers on sexuality and HIV and AIDS. Some participants, especially young girls, may not feel free to talk about the subject matter. Many cultural and social factors prevent both young people and adults from talking openly about sexuality. For instance, making reference to the act of sex and talking about reproductive organs is considered promiscuous and obscene.

The diversity of the participants in the study may complicate data analysis. Information will come from non-school going youth, those in school/institutions and the fresh graduates. It will include both male and female participants. The participants will come from various cultural backgrounds since the study area is cosmopolitan.

1.12 OUTLINE AND ORGANIZATION OF THE INQUIRY

Framed by an interpretive approach, this exploratory study investigated the way the urban youth in Uganda experience televised HIV and AIDS education programmes.

In **chapter one**, I have given the background of HIV and AIDS and the media programmes that have been developed to raise awareness. I have also shown the way in which the research problem will be addressed.

Chapter 2 focuses on the review of the existing literature. The purpose is to contextualize this inquiry in the knowledge domain of the urban youth and televised HIV and AIDS programmes. The study is specifically narrowed on the youth in Kampala district, in Uganda.

Chapter 3 deals with the selection and justification of the research design and the methodological strategies used to accomplish the inquiry. It also includes the discussion on the research instruments as well as the strategies for enhancing the trustworthiness of my study.

In **chapter 4**, I presented the findings of the study.

Chapter 5 will be dedicated to an interpretive commentary resulting in an understanding of the outcome of the study. Within the same chapter, the limitations, delimitations and the significance of the study will be highlighted. I will also propose further studies to advance knowledge in this particular field of inquiry. A graphic representation of the entire study is provided in table 1.

Table 1.1: Outline of the study

	Chapter 1	Chapter 2	Chapter 3	Chapter 4	Chapter 5
1	Introduction	Introduction	Introduction	Introduction	Introduction
2	Key terms/concepts	Prevalence and incidence		Educational television dramas and subminimal cuts	
3	Aim of chapter	Youths and HIV/AIDS	Aim of chapter	<i>Life choices</i>	
4	Introduction	Youths and urbanization	Introduction	Analysis of youth experiences on educational dramas and subminimal cuts	
5	Rationale	urban youths and media	Paradigmatic approach	Commercial television soaps	
6	Problem statement	sexual socialization and HIV/AIDS education	The conceptual framework	<i>Secreto D'mour</i>	
7	Purpose of study	Television edutainment	The qualitative approach to the study	Analysis of youth experiences on television soaps	
8	Delimitations	Conclusion	Research design and methodology	Findings from key informants interviews	
9	Epistemology		Instrumental case design	Applying insights generated by findings	
10	Methodological Approach		Selection of participant	Conclusions	
11	Research Methodology		Data collection		
12	Significance of study		Data analysis		
13	Anticipated challenges		Quality criteria		
14	outline and organization of the inquiry		Ethical considerations		
15			Conclusions and summary		

CHAPTER 2 REVIEW OF RELATED LITERATURE

2.1 INTRODUCTION

In this study, I investigate ways the urban youth in Uganda experience televised HIV and AIDS educational programmes. There are reasons why I focus on the urban youths and televised HIV and AIDS educational programmes. In Uganda, a large number of new HIV infections occur among young people aged between 15-24, representing a great challenge for the prevention of new infections (UAC 2007, UNFPA 2002; UNFPA 2003). This vulnerability is the reason why I focus on this group as the ideal target of my study. While half of all HIV infections worldwide occur in young people aged 15 to 24, urban youths are more affected by HIV and AIDS than those in rural areas (UNAIDS, 2004). In Uganda, HIV prevalence is higher among urban areas and highest in the central region where the capital city is (UAC 2007).

My interest in televised HIV and AIDS educational programmes is that it has potential to be used to conduct educational programmes through edutainment. This can be instrumental in reaching out to the youth who are not likely to pay attention to other types of interventions on HIV and AIDS. Besides, a big number of young people are hard to reach by the conventional HIV and AIDS educational interventions. Many of them drop out of school early in their life and others do not attend school at all (Muyinda, Nakuya, Pool & Whitworth 2004). It is hoped that they can be reached by televised HIV and Aids programmes.

In this chapter, I begin by describing the incidence and prevalence of HIV and AIDS in Uganda. This is followed by a general discussion on young people who are targeted by prevention strategies. I explore the complexity of urbanization in order to show the social cultural context that may influence their behavior. Within the urban setting, the media plays a significant part in increasing the vulnerability of the youth to HIV and AIDS. The same media (particularly television) is what the study investigates as playing a role in educating urban youth on HIV and AIDS. The discussion culminates into examining issues and challenges of conducting HIV and AIDS education using television edutainment.

2.2 THE PREVALENCE AND INCIDENCE OF HIV AND AIDS IN UGANDA

The 2004-05 Uganda HIV and AIDS Sero-Behavioral survey found urban residents to have a significantly higher rate of HIV infection. It was at 10% higher than rural residents at 6% (UAC 2007). The difference in incidence between the urban and rural areas is much more evident among women than men. Prevalence among urban women is 13 percent compared with 7 percent for rural women, and prevalence among urban men is 7 percent compared with 5 percent for rural men. A study by Kibombo, Neema and Fatima (2008) indicate that prevalence for men is generally higher than for women at ages 15-49. Similar trends were noted in Tanzania (Bloom, Urassa, Isingo, Ng'weshemi & Boerma 2002). The findings of 2004-05 Uganda HIV and AIDS Sero-Behavioral survey reveal that prevalence for both women and men increases with age until it reaches a peak, which for women is attained at ages 30-34 (12 percent) and for men at ages 35-44 (9 percent). This trend could be attributed to the fact that women start to engage in sexual activities when they are young (Slaymaker, Bwanika, Kasamba, Lutalo, Maher & Todd 2009). Other groups that are considered vulnerable to HIV prevalence include: commercial sex workers, the widowed, divorced or separated, patients with sexually transmitted infections, the uncircumcised men and people in the highest wealth quintile (UAC 2007).

Research indicates that despite high levels of knowledge on HIV and AIDS, higher risk sex is the main driver of the epidemic. One of the identified factors behind higher risk sex is the perception of HIV risk (UAC 2007). Gray, Serwadda, Kigozi, and Nalugoda (2006) suggest that the use of the same HIV messages and the same modes of presentation over a long period have contributed to prevention fatigue and media saturation. The tendency to consider HIV and AIDS to be an inevitable aspect of life is referred to as normalisation (Stoneburner & Low-beer (2004).

2.2.1 NEW TRENDS IN THE FIGHT AGAINST HIV AND AIDS

After more than 20 years of intensive sensitization and communications about HIV and AIDS, there is prevention fatigue (Gray *et al.* 2006). This challenge is aggravated by complacency to HIV and AIDS due to availability of Antiretroviral drugs (ARVs) (UAC 2007). The campaigns in the past were built on the fear factor of an imminent and early death caused by HIV and AIDS. With the knowledge that death is no longer immediate, the perception of risk has changed. The trends in HIV and AIDS infections call for revitalized

preventive strategies and innovative approaches to communication. Television is the medium that is abundant and accessible to many of the urban youth. The potential to use television to convey knowledge, attitudes, skills and values for prevention HIV and AIDS through edutainment is big.

2.2.2 EXTRA-MARITAL SEX

Extra-marital sex has been a tolerated practice for men (but not for women) since traditional times (UAC 2006). Recent data shows that the proportion of men reporting extra marital sex has not declined substantially since 1995 (Kirungi, Musinguzi & Madra 2006). Approximately 60 percent of new infections are occurring within married relationships. Epstein (2005) describes how the practices of formal and informal polygamy together with other extramarital relationships create a giant web that can extend across huge regions. If one member contracts HIV, then everyone else in the web gets exposed.

Multiple extra-marital relationships, low condom use, reluctance to test for HIV and failure to disclose one's HIV status are some of the main drivers of the epidemic. Socio-cultural beliefs and expectations do condone gender-stereotypes with regard to men's extra-marital relationships (UAC 2006).

2.2.3 MOTHER TO CHILD TRANSMISSION OF HIV (MTCT)

This is one of the common means of transmission of HIV and AIDS in Uganda. Available data shows that MTCT accounts for 15-25 percent of new infections (UAC 2004 a). At the end of 2000, a cumulative total of 58,165 AIDS cases had been reported in Uganda and of these, 4,286 were children below 12 years. Ninety percent of these children had acquired infection through MTCT. About one third of babies infected with HIV and AIDS survive up to two years (MoH 2003). This situation has continued despite the availability of an effective and affordable programme for the prevention of mother to child transmission of HIV (PMTCT) using Nevirapine. Socio-cultural and economic factors have been identified as the major deterrents towards utilization of PMTCT (UBOS 2000). The prevalence of HIV stigma, the use of traditional birth attendants and the limited male involvement in PMTCT programmes have aggravated the situation (UAC 2007).

2.2.4 HIV DISCORDANCE AND NON-DISCLOSURE

Five percent of the married or cohabiting couples are HIV discordant (this is the situation where one partner is infected with HIV and AIDS and the other is not) (UAC 2006). Because they are not aware of their HIV status, couples are not motivated to take action towards prevention. Studies show that couples who test individually are more likely to disclose to persons other than their spouses. Even when they disclose to their partners, they do so after two years (UAC 2006). Women do not disclose their HIV status to their spouses because of fear of domestic violence and marital disruption (Koenig, Lutalo, Zhao, Nalugoda, Wabwire-Mangeni, Kiwnuka, Wagman, Serwadda, Wawer & Gay 2003). These situations make marital sex more risky.

2.2.5 TRANS-GENERATIONAL SEX

Trans-generation sex is defined as sex with a partner considered much older than his or her sexual partner. In most cases it involves an element of exploitation due to economic and social vulnerability (UAC 2007). Economic factors are the major drivers of trans-generational sex among young people in Uganda. Poverty drives people to engage in commercial sex, transactional sex and trans-generational sex. Ten percent of women aged 15-19 who have higher risk sex have it with a partner who is 10 or more years older (UAC 2007). Young women in the age groups 15-17 and 18-19 have sex with a non marital, non-cohabitating partner who is more than 10 years older.

2.2.6 VULNERABLE GROUPS

Uniformed personnel are some of the groups vulnerable to HIV and AIDS in Uganda. Deployment to places far away from their homes exposes them to increased risks of contracting HIV and AIDS (UAC 2007). Other people within similar circumstances are the people living in fishing communities who move from one landing site to another. Their accessibility to daily income enables them to engage in the abundant commercial sex within the fishing communities (Seeley & Allison 2005)

The other category of vulnerable people is the orphaned children and youth. Information from the Ministry of Health, Uganda (MoH 2006) indicates that orphans and vulnerable children are slightly more likely to have sex by age 15 than other youth. Young female

children classified as vulnerable are 1.5 times more likely to initiate sex before age 15 than other younger women, while young men are 1.1 times as likely. About 14.6 percent of female orphans had had sex before age 15 while 18 percent of male orphans had sex by age 15 (MoH 2006).

2.2.7 NATIONAL RESPONSES TO HIV AND AIDS IN UGANDA

Uganda fought HIV and AIDS between 1992 and 2002 with a remarkable vigilance and was cited as one of the world's most compelling national success stories. This vigilance however appears to have waned towards the end of the century with a shift away from the more personalized methods of communication (Low-Beer & Stoneburner 2003). The new approach focused on the use of electronic and printed media to disseminate prevention messages. This change in approach has been identified as one of the factors leading to the resurgence of HIV and AIDS (Airhihenbuwa, Makinwa & Obregon 2000).

Provision of antiretroviral drugs (ARVs) was another form of national response to HIV and AIDS. Prior to 2003, the high costs associated with antiretroviral drugs made it economically unfeasible and unsustainable. Since then, there have been dramatic reductions in the price of antiretroviral drugs combined with multiple treatment access initiatives of the global fund. In June 2004, the ministry of health launched an integrated program for universal access to free antiretroviral treatment in Uganda. However, the availability of ARVs is believed to be one of the factors contributing to the complacency in the fight against HIV and AIDS (Gray, *et al.* 2006). Because of the ARVs, there is evidence of a fall in use of condoms among men (UAC 2006) and an increase in reported symptoms of sexually transmitted infections. Sexual behavioral patterns especially among the out of school youth also show a reversal of earlier progress (UAC 2006).

2.2.8 TRENDS IN SCOPE AND INTENSITY OF INFORMATION, EDUCATION AND COMMUNICATION (IEC) FOR BEHAVIOR CHANGE

Community sensitization and education on HIV and AIDS is one of the pioneer prevention interventions in Uganda. The national HIV and AIDS committee on health promotion and education was set up in the late 1980s to inform people on ways in which HIV and AIDS is transmitted and to promote less risky sexual behavior. The messages in the first public HIV and AIDS awareness campaigns rotated around cautioning people to love carefully, to love

faithfully, to practice zero grazing, and to reducing number of non regular sexual partners (UAC 2007). Another key message was “beware of AIDS, AIDS kills!” The message was intended to caution all sexually active people to avoid risky sexual behavior which increased the risks of HIV and AIDs infection (UAC 2004c). Panos (2004b) indicates that ABC messaging (abstain, be faithful, use condoms) has not made significant impact on prevention over the last 20 years. The argument put forward is that the approach is not realistic and that it is likely to intensify infection and deepen stigma and discrimination (Van Kampen 2006). Another study by Sanders (2005) indicates that intensification of messages about abstinence and being faithful led to an increase in HIV and AIDS prevalence, after more than a decade of decline.

In an effort to reach more young people in the country, the Newvision newspaper launched a supplement known as *Straight talk* in 1993 (Asingwire & Kyomuhendo 2004). It provides information aimed at empowering the youth to develop healthy life skills. It has since expanded to include *Young talk*, *Teacher talk* and *Parent talk*. Other initiatives to reach the youth included the *Presidential Initiative on the Aids Strategy for Communication to the Youth* (PIASCY). It was launched in 2001 and focused on school going children. The initiative involved developing school assembly messages on HIV and AIDS (UAC 2004).

Campaigns and initiatives to prevent HIV and AIDS made use of music contests, drama, newsletters and posters (UNDP 2002). HIV and AIDS issues were deeply rooted in discussions in both social networks and public and media channels. The involvement of prominent people like singers and politicians (UAC 2003) living with HIV and AIDS created a big impact by way of reducing the stigma associated with HIV and AIDS. People living with HIV and AIDS started opening up about their HIV status. As suggested by Rogers (2003), messages conveyed by leaders, artists and other persons that influence public opinion are likely to be effective in introducing innovations in a community.

local and international non-governmental organizations (NGOs) and Community Based organizations (CBOs) helped to contextualize IEC messages. The approaches relied more on community-based, face-to-face and culturally appropriate messages than mass communication (Low-Beer & Stoneburner 2003). During the early campaigns, posters and leaflets were distributed through door to door campaigns within rural and urban areas (UAC 2003). People in the rural areas were considered to be illiterate and to have limited access to

mass media. Consequently, local artists were called upon to raise awareness on HIV and AIDS through drama, songs and comedies. Civil society organizations and family networks arranged crusades and informal gatherings to create awareness on HIV and AIDS (UAC 2006). Some of the messages in these campaigns, however, were considered threatening and they were embedded with fear (UAC 2007). Blumberg (2000) suggests that prevention messages that arouse fear and anxiety are likely to be detrimental in the fight against HIV because they could lead to defensive coping strategies among youth who encounter such messages.

In conclusion, the nature and intensity of IEC in the 1980's and early 1990's largely contributed to reduction in risky sexual behavior (Low-Beer & Stoneburner 2003). The slow changes or stagnation in HIV and AIDS prevalence recorded in recent years since 2001 have been associated with reduced vigilance, change in media approach, complacency (Asingwire & Kyomuhendo 2005) and prevention fatigue (Gray *et al.* 2006). These trends call for revitalized efforts and innovative approaches to communication. The campaigns in the recent past were built on the fear factor of the imminent death caused by HIV and AIDS. With the change in the perception of risk, development of televised HIV and AIDS educational programmes ought to be innovative and should be based on a comprehensive understanding of the target audience: the urban youth.

2.3 UNDERSTANDING THE YOUTH IN THE CONTEXT OF HIV AND AIDS AND URBANIZATION

For the purposes of this study, I have adopted the Ugandan Ministry of Health (MoH) definition of "Youth" as those aged 15-24 years. They represent the economically active age group that constitutes part of the country's workforce (MoH 2005). A number of factors make the urban youth more susceptible to HIV and AIDS compared to their counterparts in the rural areas (UN-Habitat 2007). Urban areas represent, among other things, ethnic diversity, social attractions, mobility, and working parents/guardians (Hakkert & Ralph 2007). For the bigger part of their time, the youth are either on their own, or with peers. Socio-economic and socio-cultural challenges face these youth and make them vulnerable to HIV and AIDS infections (Kelly 2000). In the proceeding sections, I review literature on these factors and the way these factors are inter-related.

2.3.1 THE PSYCHO-SOCIAL AND DEVELOPMENT ISSUES OF YOUNG PEOPLE

Adolescence and young adulthood which characterize this group, are two development phases that are marked by discovery, experimentation and emotional changes (UNAIDS 1998). The American Academy of Child and Adolescent Psychiatry (2001) analyses developmental issues related to the youth which are relevant to HIV and AIDS education. These include:

- Having unique interests, likes and dislikes;
- Being inward looking;
- Having high expectations and poor self-esteem;
- Seeking independence from elders,
- Eagerness to be heard, seen, and taken seriously; and
- Being risk takers.

According to Arnett (2002) and Ward (2002) the youth seek information on sexuality from the media, particularly television. Hormonal changes generally stimulate their interest in sexual matters and this drives them to look for information on sex and relationships (Arnett 2002). What seems to make the urban youth more susceptible to early sex and HIV and AIDS is the peculiar influences within the urban areas (Hakkert & Ralph 2007).

2.3.2 CONCURRENT MULTIPLE PARTNERS AND TRANSACTIONAL SEX

The multiple, concurrent sexual partnerships and transactional sex are probably the key drivers of the HIV and AIDS epidemic. Transactional sex is defined as sex for money or other items (UAC 2007). Concurrency in sexual relations involves complex chains of interconnected partners that place an entire network at risk. (Epstein 2005). Concurrent relationships are believed to be riskier than the patterns of serial monogamy or one-time casual and commercial sexual encounters (Shelton, Halperin, Nantulya, Potts, Gayle & Holmes 2004). It has been observed that multiple concurrent partnerships can overlap for months or years (Wilson & Epstein 2004).

As previously mentioned, young women have disproportionately higher HIV prevalence rates compared to men of similar age groups (Poulsen & Wright 2007). This is usually attributed to age-mixing in sexual relationships between older men and young women. The power imbalances and socioeconomic issues that prevail in cross-generational and

transactional sexual relationships put young women at high risk of HIV and AIDS (Dunkle, Jewkes & Brown 2004). Relationships with older men limit their power to negotiate for safe sex; particularly if it is transactional sex (Weissman, Cocker & Sherburne 2006). Besides, older men have higher rates of HIV infection compared with young men (Gregson, Nyamukapa & Garnett 2002).

In addressing cross-generational and transactional sex, focus must be put on the power and economic inequities that foster these relationships (Weissman, Cocker & Sherburne 2006). The complexity of cross-generational and transactional sex calls for innovative educational programmes. It is imperative to provide skills-based HIV and AIDS and sexual education programmes to increase knowledge, awareness and risk prevention. Addressing concurrence should be a core component of the educational intervention. Effective programmes that address partner reduction and promote fidelity to one sexual partner are greatly needed. The medium of television, with its edutainment aspects, has potential to address these issues effectively.

2.3.3 URBAN YOUTH AND ACCESSIBILITY TO HIV AND AIDS EDUCATION

Some of the urban youth drop out of schools early and some never attend school at all. Some of the young women leave their villages to avoid early marriages but they have limited education and limited access to employment (Hakkert & Ralph 2007). Attractions of urban areas and slum life can become dangerous to them (UN-Habitat 2007). Many influences can drive them into early sexual intercourse yet they have poor negotiation skills and irrational decision making (Hartell 2005). They come to see their bodies as one of their few marketable assets (World Bank 2006). Even when they get some education, there is no transition from school to work (ILO 2005). Within these circumstances, many young women are likely to face sexual harassment, abuse, and psychological violence. Having no knowledge or power to protect themselves, they are at increased risk of HIV and AIDS.

The challenge of accessing accurate information in Uganda is exemplified by the findings of a 2001 survey done by the Bureau of Statistics (UBOS). The survey revealed that 13 percent of Ugandan women and 5 percent of men do not know any method of avoiding HIV and AIDS. Sixty nine percent of girls and 83 percent of boys aged 15-19 indicated that they knew condoms would protect them from HIV and AIDS, but out of that number, only 32 percent of the girls and 64 percent of the boys said they know how to obtain them.

As rapid urbanization, westernization and mobility continue to erode traditional social networks, the youth are left with fewer socio-cultural institutions to guide them. It is therefore imperative to equip them with social skills required to deal with day-to-day challenges (Kelly 2000). The major challenges that require life skills include making responsible choices about sexual partners and marriage, choosing careers, selecting peers and deciding on suitable forms of leisure and entertainment. This is particularly important given that the age at first sex in Uganda is estimated at 15 years for girls and 17 years for boys (MoH 2006). In terms of HIV and AIDS awareness however, many of the urban youth are hard to reach.

2.3.4 THE HARD TO REACH URBAN YOUTH

High illiteracy levels among the youth complicate the provision of relevant HIV and AIDS education (Muyinda, Nakuya, Pool & Whitworth 2004). This category of youths include school-drop-outs and street children. Being out of school is likely to drive them into risky behaviors such as sex, excessive drinking and drug abuse.

The failure of the communication media to reach the uneducated youth can also be attributed to technical factors. Government and private health organizations use standard health education materials to convey HIV and AIDS messages (Kalina, Bessie & Nyanzi 2005). Occasionally, these materials are published in languages other than the mother languages of the target youth. Due to high illiteracy levels, many youths cannot access these materials (Albright, Kendra & Kawooya 2005). Innovative use of large mobile television screens in urban areas is likely to offer opportunities to reach this category of youth and divert the youth from the commercial oriented media that intensify the sex urge.

In conclusion, developers of televised HIV and AIDS programmes ought to bear in mind the context of the urban youth so as to address their unique challenges. The developers have to be mindful of the psycho-social and development issues of the youth. Given that many of the youth drop out of school and have no accessibility to HIV and AIDS information, television could be used to reach them.

2.4 THE URBAN YOUTH AND THE MEDIA

The urban youth are exposed to multiple messages in the mass media which come through television, music videos, radio, newspapers, magazines, computers, internet, billboards, and video games (Masterman 1990). In terms of HIV and AIDS education, the following is an attempt to illustrate how the urban youth are affected by the media.

2.4.1 EROSION OF CULTURAL VALUES BY THE MEDIA

In urban areas, traditional social networks are likely to be eroded due to lack of frameworks of support to orientate and initiate the youth into adulthood. Gerbner, Gross, Morgan, Signorielli & Shanahan (2002) indicate that the socio-cultural processes of story-telling have been transformed into television story structures. They add that the diverse cultural heritage of fire-place riddles, legends, myths, proverbs and fairy stories have been substituted by market-driven television storylines and that the media has homogenized the divergent values and perceptions of heterogeneous populations. The Population Council (2005) notes a high proportion of urban youths do not live with their parents. This means that they depend on media for their information on sexuality. The media therefore serves as the primary common storyteller for an otherwise heterogeneous population. As storylines become more global, the media become the cultural modifier and unifier for a heterogeneous population. Mainstreaming is the process by which media dependency erodes the socio-cultural values (Gerbner, *et al.* 2002). The urban youth who have diverse values and cultural norms are brought into the same dominant mainstream by the cumulative media exposure. The media-constructed values influence young viewers' fashion, hairstyle, artistic tastes, and social interaction (UNESCO 2002). The 'pedagogy' of the media seems to prevail over the influence that families and educational systems have over the youth (Kellner 2001). In developing televised HIV and AIDS educational programmes, this pedagogy of the media could be used constructively and creatively in the campaigns against the spread of the epidemic. In particular, it could be used to overcome the contradicting role models in the media which seem to conflict with HIV and AIDS messages.

2.4.2 CONTRADICTING MESSAGES AND CONFLICTING ROLE MODELS

Urban youths face more social contradictions than their counterparts in the rural areas. They are expected to behave in certain ways but they are confronted with social norms and role models that point in a very different direction (UNESCO 2002). They find double standards when they see adults behaving and living in ways which they (the adults would condemn). The youth are urged to remain abstinent while surrounded by images in the media, of glamorous people having sex, smoking and drinking. These images, which are completely centred on desire, say little about the arduous task of building enduring human relationships (UNESCO 2002; UNAIDS 1998).

The advertisement and entertainment industry expose the urban youth to social norms and role models that increase the likelihood of risky behaviors (UNICEF 2002). There is substantial sexual content that is contained in advertisements, cinemas and popular music (Michael 2005). The industry glorifies the physical aspects of sex, but do not seem to instill critical life-skills and values that would enable the youth to interpret and challenge negative social norms (UNESCO 2002). HIV and AIDS programmes are likely to compete with this industry for the same audience: the urban youth. The commercial messages are attractively packaged to attract the interests of the youth. Content analysis of television programming indicates that there is growing prevalence of sex content (Greenberg & Smith 2002). This exposure is significantly related with teenagers' sexual behavior (Collins, Elliott, Berry, Kanouse, Kunkel, & Hunter 2004). There are indications that young people are using media for longer periods of time (Rideout, Vandewate & Wartella; Roberts, Foehr & Rideout 2005). Greater exposure to sexual content on media is associated with sexual relationships among adolescents (Michael 2005). Unfortunately, adolescents are likely to accept, learn from and emulate behaviors portrayed in the media as normative, attractive and without risk. The presence of sexual images tends to vary from genre to genre. Viewing of sexually explicit music videos is considered to have a bearing on viewers' sexual perceptions (Ward, Hansbrough & Walker Ward 2005). A study by Hansen & Hansen (2000) revealed that music videos have a tremendous appeal for young people. Intense emotions are evoked when sexuality messages are condensed into a 3-5-minute narrative (Ward, Hansbrough and Walker 2005). Young people occasionally use the same distilled packages to learn about social relationships and sexuality (Hansen & Hansen 2000). What makes the music videos compelling is the intense sexual imagery such as kissing, embracing, and suggestive dancing (Roberts & Foehr 2004).

A study conducted by Pardun, L'Engle & Brown (2005) indicates that the media create distorted representation of reality and increase the sex urge among young viewers. Up to one quarter of the couples depicted on television do not maintain a relationship after having sex (Kunkel, Cope-Farrar, Biely, Farinola & Donnerstein 2001). Other studies indicate the media glorifies people who have sex with persons other than their spouses (Shrum 1999). This is exemplified by the fact that in one out of ten cases, people who have sex are couples who have just met recently (Pardun, *et al.* 2005). On the question of values, it is argued that many television soaps depict that male friends of a single mother will be important in her children's lives (Grunbaum, Kann & Kinchen 2004). Television is also considered to inculcate negative attitudes on virginity (Harding 2003). On the issue of sexual socialisation, Huston, Wartella & Donnerstein (1998) that adolescents are most likely to be dissatisfied with their first sexual intercourse if they relied on the media to learn about sexuality. In view of the above illustrations, It is crucial for sex educators to be aware of potential effects of the media on the sexual socialization of the urban youth. However, as indicated in chapter five (under discussion) some of these fears seem to be exaggerated. A lot of attention of the media research has been put on the study of negative effects of the media and little attention devoted on the possible positive outcomes of the media on the youth (Buckingham 2005; Gunter 2002).

As I illustrate the negative influence of the media on the urban youths, I find it inevitable to narrow my discussion on television. This is not only because it is the subject of my study, but that I consider television to be the most abundant audio-visual media for the urban youth.

2.4.3 YOUNG PEOPLE, TELEVISION AND SEXUALITY

Studies indicate that young people are watching pornographic media for longer periods of time on television (Rideou. *et al.* 2003, Roberts, Foehr, & Rideout 2005). The general feeling of many adults is that this interest is associated with permissive and earlier sexual behavior among young people (Michael 2005). While this belief could be true, I believe there could be factors behind the viewing of the sex content. A study by King and LoRusso (1997) indicate that mass media, especially television, is a significant resource for sexual information for the youth. The physiological and social transformations that young people undergo necessitate them to look for information and guidance on sexuality. They have information gaps on matters of sexuality because existing information provided in schools fails to offer comprehensive answers to their questions (Campbell & MacPhail 2002).

Because of cultural taboos, traditional biases and other socio-cultural obstacles, parents also fail to support their children in this regard (Bennett 2000). In the absence of effective sex education at home or school, the media have become important sources of sexual information for adolescents (Brown & Strasburger 2007).

2.4.4 YOUTH, PARENTS AND TELEVISION VIEWING

Studies show that parental participation in television viewing and discussion can enhance constructive sex education (Collins, Elliott, Berry, Kanouse, Kunkel, Hunter & Miu 2004; Greenfield 2004). The prompting and guidance enables the youth to think outside the programme's content. People raised in families where sex is treated as taboo may be more susceptible to the influences of sexually explicit media than those raised in homes where sex is a permissible subject of conversation (Gunter 2002). Parents need to be provided with skills on how they can reduce the negative influence of television on their children. They need to have the skill of generating prompting questions that encourage inquiry, dialogue and exploration. In order for the parents and educators to reduce the negative effects of television, young people and their parents need to be encouraged to view television collectively, other than individually.

2.4.5 PEER INFLUENCE IN TELEVISION VIEWING

The media could be among the leading source of HIV and AIDS information in Uganda (MoH & ORC Macro 2006). However, teenagers tend to rely more on the peers who occasionally provide inaccurate information. The interactions that follow television viewing can culminate into collective interpretive processes which are culturally entrenched (Gavin 2000, 2001). Collective interpretation of messages is likely to be influenced by shared history, experiences, language, and psychology (Ding 2008). The strength of peer influence is such that every effort should be made to make full use of it for educational purposes. Young people are likely to behave in ways that are approved by peers. They are very sensitive to the opinions of their peers and are reluctant to deviate from peer norms. It may be important for parents and educators to initiate programmes for peer buddy training.

In the foregoing discussion, I have illustrated how the media (television in particular) could be a negative or positive agency for the urban youths. Negatively, it is one of the factors that lead to the erosion of socio-cultural values through a process of mainstreaming. It also

presents contradicting messages and conflicting role models to the urban youth. However, the same media could assist in HIV and AIDS education of the urban youths. Successful use of television depends on so many factors including parental mediations and innovative use of peer influence. The following discussion illustrates the potential for the use of television to educate the youth about HIV and AIDS.

2.5 URBAN YOUTH, SEXUAL SOCIALIZATION AND HIV AND AIDS EDUCATION

In the discussion above, I have illustrated the various factors that can heighten the HIV and AIDS incidence among the urban youths. One of the preliminary tasks in televised HIV and AIDS education is to determine young people's educational needs related to HIV and AIDS prevention.

In the light of the challenges facing the urban youths, I concur with the suggestions of Van Rooyen and Louw (1994) with regard to the educational needs of adolescents. The following were highlighted as the needs:

- Acquisition of knowledge, promoting positive attitudes regarding sexual matters, insight regarding the consequences of deeds.
- Acquisition of norms and values in regard to responsible and irresponsible sexual behavior.
- Developing insight into the origin and course of sexual relationships and assuming responsibility for personal behavior within a relationship.
- Getting direction towards personal life, manhood/womanhood, marriage and family life.
- Developing affective stability, to enable the child to acknowledge, to understand and respect his own human dignity as well as that of others within a relationship.
- Making responsible decisions and to be accountable for the decisions.
- Acknowledgement of one's particular sex, identification with it and awareness of one's specific role as a unique person.
- Knowledge and understanding of physiological and emotional changes which are brought about by normal growth.
- Ability to take a stand and make a decision by means of personal standards.

Based on the above suggestions, the purpose of HIV and AIDS education becomes clear. Appropriate educational interventions need to be developed to meet the various challenges. Determining the needs is a precursor to deciding the purpose that HIV and AIDS education will serve.

2.5.1 THE PURPOSE OF HIV AND AIDS EDUCATION FOR URBAN YOUTH

The basic function that HIV and AIDS education is expected to fulfill is described by UNICEF (2000). The interventions must enable the youth to: Learn to *know* by communicating comprehensive and accurate information about the disease; Learn to *do* by fostering the acquisition of psycho-social and other skills that enhance the ability to protect oneself against infection; Learn to *live together* by promoting a compassionate, caring, rights-based, nonjudgmental approach to every person, irrespective of HIV and AIDS status; Learn to *be* by supporting the development of life-affirming attitudes and value systems that help learners make healthy life choices, resist negative pressures, and minimize harmful behaviors.

In addition to the above, educational interventions must generate empathy among the youth. This involves evoking both cognitive and emotional processing of elements conducive to health-promoting responses. Learners need to distinguish between healthy lifestyles and risk behaviors and to know the difference between safe and unsafe sex practices (Coombe 2001a). These include not only behaviors related to sexuality, but also over-drinking, smoking and drug abuse. The important question to ponder on is whether the existing educational structures on HIV and AIDS meet the purpose described above.

2.5.2 THE STRUCTURE OF HIV AND AIDS EDUCATION

According to Kelly (2000), the capacity for educational interventions to reduce HIV and AIDS depend on its curriculum, management, policy and organization. Against this observation, I find it imperative to analyze the principles, philosophy and practices that characterize sexuality education and HIV and AIDS awareness in particular.

Lack of conceptualization of HIV and AIDS education as a discipline is one of the weakness pertaining to the schools HIV and AIDS programmes (UNESCO 2000). There is a lack of dedicated corps of educators. Curriculum integration is spread thinly across the curriculum

and has few links with health education. Because it is relegated to optional extracurricular status, it fails to reach the entire body of learners. The methodology depends heavily on whole-class teaching in formal settings, and little room is allowed for participatory learning and peer teaching. The participation of stakeholders and the community at large is limited (UNESCO 2000).

The content of sexuality education in Uganda is tightly prescribed. It is authoritarian and conformist and students consider it irrelevant to their lives (Mirembe 2002). Campbell and MacPhail (2002) add that the education is conducted using didactic teaching methods. The methods may not allow for interaction and open discussions that are necessary for HIV and AIDS education. One of the likely outcomes of this can be the promotion of limited risk reduction measures (most usually abstinence). The messages conveyed through this method of education are didactic and paternalistic (Tulloch & Lupton 1997).

Gavin (2000) observes that educational presentations on sexuality attempt to provide neat, pre-packaged bundles of what adults consider to be the 'truth'. The content tends to be prescriptive, overly technical and biomedical, and somewhat removed from the socio-cultural context. It allows little room for participatory learning, peer teaching and stakeholders' involvement (UNESCO 2002). Another limitation relates to the learning styles. Conducting HIV and AIDS education may call for presentations that are different from the conventional classroom teaching.

The way media are used in HIV and AIDS education seems to follow the methods described above. Although traditional mass media such as newspapers, radio and television have played a vital role in raising awareness and imparting information, they are perceived as symbols of authority due to being broadcast from the center (Matewa 2002). They have scarcely been used to give a voice to grassroots communities. Their main social use is being a vehicle to convey social messages, basic assumptions, ideologies and values of a society. These values are reflected in its cultural stories. These cultural stories are distributed by television which presents the most stable, repetitive and pervasive patterns in the society (Gerbner, *et al.* 2002).

The methods of HIV and AIDS education described above may not be effective for bringing about behavioral change. Achieving a goal in the affective domains of learning is not simply

a linear transmission of messages from the source to the receiver. The educational processes used to influence behavior are expected to be more complex than those used in cognitive and psychomotor objectives. At the beginning of this chapter, I pointed out the need for revitalized prevention strategies in Uganda. It is necessitated by HIV and AIDS prevention fatigue, media saturation (Gray *et al.* 2006), and complacency to HIV and AIDS caused by availability of antiretroviral drugs (UAC 2007). If media is to be used in HIV and AIDS education, it can more effectively be done through educational entertainment (edutainment) programmes.

2.5.3 BEHAVIORAL CHANGE THROUGH EDUTAINMENT

Edutainment is an abbreviation for educational entertainment or entertainment-education. It is a form of entertainment designed to educate as well as to amuse. This is an approach where entertainment and education are seamlessly woven together in such a way that there is no clear dividing line between the two (De Fossard 2004). The purpose of edutainment is to capture the attention of people who are not likely to pay attention to conventional health messages (Tulloch & Lupton 1997). Edutainment aims at exposing different forms of social behavior and showing related consequences. It enables sophisticated levels of presentation of HIV and AIDS related issues. The approach adapts some of the techniques used in commercial marketing for prevention efforts (Husain, Shaikh & Babar 2005). Communicative arts and education theories can be combined to guide the preparation of televised HIV and AIDS educational programming. One of the major communication theories that influence edutainment include the *Social Cognitive Theory* (discussed extensively in 3.3.2), and the *Persuasion Theory* (Ajzen & Fishbein 1980). With regard to persuasion, people use information and messages to influence others. The focus is on influencing the receiver (rather than merely providing information and letting the receiver make up his/her own mind). The aim is to change attitudes and values which may lead to behavioral change (Ajzen & Fishbein 1980)

In edutainment, emotional and cognitive factors are used to influence behavior (Denning 2001). Music, stories, and theatrical performances are used to address behavior, attitudes, social norms and beliefs. Some of these aspects are deeply rooted in traditions, and they are hard to change using conventional methods. Edutainment has been successfully applied in spheres of public health to encourage people to exercise, eat more fruits and vegetables and stop smoking (Bouman 2004; Cody, Fernandes & Wilkin 2004) and to adopt family

planning. In order to make edutainment appeal emotionally to the audiences, it must be creatively produced, realistic, believable, and culturally appropriate.

Edutainment may also be in the form of popular music and music videos performed by well-known performers. These performers are selectively chosen to attract young people's attention to messages of sexual responsibility and make the messages appealing.

Edutainment has deep roots in Africa (Panford, Nyaney, Amoah & Aidoo 2001) where knowledge on sexuality and other topics are too sensitive and difficult to address using explicit statements. The use of idioms and local languages with which the youth are familiar ensures that messages can easily be embedded in their cultural, social, and psychological thinking. The combination of theatre and television has great potential to convey health information to a relatively large audience while retaining the interpersonal contact (Valente 1999). Its entertainment aspect makes it a popular tool for information sharing and discussion.

The effectiveness of cultural media in changing negative social and reproductive health behaviors in African social life is highlighted by Panford, Maud, Opoku and Nana (2001). They indicate that entertaining stories have passed on wisdom and values from generation to generation in the African traditional society. It seems, however, that the role of cultural institutions in edutainment is being taken over by the media, particularly television.

2.6 TELEVISION EDUTAINMENT FOR HIV AND AIDS PREVENTION

Television as a media is user-friendly and abundant to young people. Once the original costs of procuring it are met, maintaining it may become less problematic. It is available in many households in urban areas of Uganda (Okuti 2006). By utilizing the appeal of entertainment, television can be used to capture the attention of low involvement audiences (Igartua, Jose; Cheng, Lifan, Lopes & Orquidea 2003). With its audio-visual aspect, television is likely to convey messages to illiterate audiences. Television also provides opportunities for innovative convergence between mass media and the parallel networks of cultural media for peer-based educational interventions.

Some of the edutainment programmes on television are developed with the aim of conveying specific messages about HIV and AIDS and sexuality in general. However, there are also entertainment programmes on television that are developed for commercial purposes. Some

of the commercial entertainment programmes have social messages that could be constructive to young people (Obregón 2005). Television edutainment has potential to influence behavior at the three levels where HIV and AIDS-related interventions are needed. The first level is prevention. Before an individual is infected, it ought to provide knowledge, fosters constructive values, and inculcates skills needed to reduce risks of HIV infection. The second level is when individuals are already living with HIV and AIDS. Edutainment programmes should prepare the individuals to cope with personal and/or family infection. The programmes should promote care for those who are infected and help them to stand up for the human rights that are threatened by their personal or family HIV and AIDS condition. It should also help to reduce stigma, silence, shame, discrimination. The last level is when HIV and AIDS bring about death. The programmes should help individuals to cope with grief and loss, and to re-organize their life after the death of family members.

2.6.1 ASPECTS OF HIV AND AIDS TO BE ADDRESSED BY TELEVISION EDUTAINMENT

There are some factual aspects of HIV and AIDS that could be conveyed through linear transmission of messages. These may include bio-medical descriptions of HIV and AIDS and directions on where to access services. However, a number of issues on HIV and AIDS as described below are best handled through an edutainment component of television.

2.6.1.1 Myths and misconceptions about HIV and AIDS

One of the cardinal functions of edutainment programmes is to dispel myths and misconceptions about HIV and AIDS. Besides mystifying the obvious causes of diseases and death, myths are utilized to rationalize choices and validate certain risky sexual behavior (Kalina. *et al.* 2005). Because virgins are misconceived to be disease-free, men endeavor to have sex with them (UNICEF 2002; UNFPA 2003).

Abstinence is also misconceived to be unnatural and impossible and is associated with people who are very old, backward, poor, bewitched, ill, frigid, impotent, mentally disturbed and young (Kalina *et al.* 2005).

A view is held by roughly half of Ugandans that a female teacher living with HIV and AIDS should not be permitted to go on teaching (UBOS/ORC 2002). Exposing these misconceptions could be done by incorporating them into the edutainment storylines.

2.6.1.2 Perception of risk

Television edutainment is likely to improve the perception of risk. By identifying and exposing social hazards, televised educational programmes could ensure that individual exposure to risks is minimized. AIDS Risk Reduction Education and Skills Training (ARREST) involve influencing changes in knowledge and behavioral skills for behavioral change (Kipke, Boyer, & Hein 1993). The reason that I use the concept of risk reduction instead of risk elimination is that zero exposure to HIV and AIDS risk is not possible in reality (Bajos 1997).

In Uganda, availability of low cost antiretroviral drugs appears to have created a false sense of security among young people (UAC 2006). The false sense of security has influenced the perception and internalization of risk. Consequently, the high levels of awareness and knowledge about the epidemic are not fully translated into appropriate behaviors. In the process of normalization, young people look at HIV and AID as part of life (Stoneburner & Low-beer 2004). They tend to adopt less sustainable mal-adaptable defence/avoidance rather than the pre-cautionary danger control factors (UAC 2006) Complacency removes the fears about contracting HIV and AIDS (Gray, *et al.* 2006). While it helps reduce stigma (MoH & ORC Macro 2006), it affect risky behavior and threatens continuation of prevention through behavior disengagement. It is now looked at as any other disease (UAC 2006).

From a constructivist perspective, edutainment ought to address risk from the perspective of the target youth audience. The false perception of risk of HIV and AIDS should be addressed through edutainment programmes. Edutainment should also address issues of isolation and ostracism related to HIV and AIDS

2.6.1.3 HIV and AIDS stigma

One of the great contributions of edutainment could be in the area of HIV and AIDS stigma. This refers to the prejudice, discrimination, and biased beliefs towards people perceived to have, or to be associated with HIV and AIDS. The various ways in which it is expressed include ostracism, rejection, quarantine, avoidance and discrimination. People living with AIDS (PLWA) are blamed for the deviant sex and improper behaviors that lead to their conditions (Herek 1999). The blame is based on religious beliefs that uphold punishment theories of illness (Allen 2000). The opportunity to apply healing insights from the rich Christian legacy of compassion, liberation, and hope is lost by approaches that categorize people as “saved” or “sinner,” “pure” or “impure”. Edutainment ought to expose how such a pervasive social scheme is allowed to flourish.

The role of edutainment in overcoming stigma is threefold; the first is to challenge the unjust societal assumptions related to the cause and spread of HIV and AIDS; the second is one of advocacy, to bolster sufficient, social, legal and policy mechanisms to protect the youth that are subjected to stigma (Castro Farmer 2005), and the third is to empower the stigmatized youth to overcome self-blame. In this respect, programmes have to demonstrate to parents, friends and family members how to give instrumental, social and emotional support to those affected by HIV and AIDS.

In the discussion above I have analyzed the levels of interventions where television edutainment has potential to influence behavior. However, it is not automatic that edutainment programmes will have impact on the viewers. The developers of those programmes must have a concrete knowledge of the target audience. The way the urban youths televised educational programmes is influenced by a number of factors. The discussion below is focused on the social cultural factors that influence the perception of HIV and AIDS messages on television.

2.6.2 THE CULTURAL FACTORS IN TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES

While cultural beliefs, values, social norms, and myths have played a role in the rapidly increasing epidemic, HIV and AIDS communication programmes have not addressed these factors adequately (UNICEF 2000). The approaches that embody cultural beliefs receive little recognition in educational and outreach programmes. They do not feature prominently even when the majority of people in the heavily infected societies are likely to seek treatment through traditional healing approaches. Mysterious diseases like HIV and AIDS, whose etiology could not be readily explained, are given supernatural explanations (Awusabo & Anarfi 1997). The fact that sexual behavior and practices are rooted profoundly in local culture and norms means that HIV prevention is more than just a bio-medical intervention.

HIV and AIDS education draws heavily on the resources of different, pervasive and interacting cultures (UNESCO 2002). These resources include the following:

- The traditional culture of the community, with its beliefs, values, customs and standards.
- The quasi-modern youth culture, with its symbols, expressions, the great power of peer pressure.
- The urban culture, with its own forms of recreation, socializing, coping, and its unique role-models.

A cardinal educational principle is that these cultures should be seen as allies, bringing their own unique resources to the struggle against HIV and AIDS, and not as obstacles to be overcome. Culture is a resource that communicators need to integrate into HIV and AIDS education. The contribution of indigenous forms such as popular theatre, drumming and storytellers is an aspect of culture that educators can not overlook (UNICEF 2002).

Limitations in HIV and AIDS education have been attributed to inadequate focus on the cultural context in which the behavior is embedded (Mbori, Aoko, K'oyugi & Mutemi 1998).

The social nature of human interactions means that television viewing is communal and the subsequent interpretations are collectively done (Gavin 2000, 2001). In collective viewing,

the messages are absorbed by the audiences and transformed into forms that make them meaningful. The way youth experience messages depend on the norms and values of the different sub-cultures (Tulloch & Lupton 1997). This means that as young people watch television, they take along with them accumulated experiences from story-telling, myths, proverbs and legends. In the backyard of their minds, there are culture's dominant assumptions, expectations, and interpretations of social reality. The socio-cultural structures ensure that, as messages are passed on, meaning is amenable to change. The communal aspect not only contributes to pleasurable viewing, but also enhances interpretive negotiation towards a cultural unity. From a social constructionist perspective, the construction, maintenance, and transformation of knowledge are done through group interaction.

The cultural perspective to viewing of televised HIV and AIDS messages seems to suggest that audiences are not passive viewers. They are conceptualized as active participants in meaning construction. The interpretation as a collective process is influenced by the shared practices of the audiences (Gavin 2000). Communal viewing determines the extent to which the meaning of the messages is negotiated. Negotiation refers to the balance between the viewer's lived-experiences of sexuality and the portraits of the same on the television programs (Gavin 2001). With respect to the visual aspect of television, people interpret pictures against a complex network of various socio-cultural factors. In this regard, Muturi (2007), Hugo (2002) advocate for the harmonization between audience factors, picture coding factors, and socio-cultural factors in the design of communication programmes. The implication of this approach is that televised HIV and AIDS programmes should not conflict with the youth common sense understanding of sexuality.

However, the cultural perspective does not rule out personal factors that may influence television viewing. At the beginning of this chapter in 2.2, I discussed in detail the psycho-social and development issues of young people. These issues have a bearing on their relationships with adults. For example, it relates to the way young people would receive and comply to HIV and AIDS messages from the 'authorities'. In the discussion below, I attempt to examine how the personality of urban youths relates with television viewing.

2.6.3 PERSONALITY TRAITS AND TELEVISION VIEWING

Personality traits are considered to influence media selection and preference (Bruggemann & Barry 2002). The way young people use media depends on the degree of fit between their personality types and media content. Studies have established a link between personality traits, media preference, and post-media exposure behaviors (Kramer & Kean 2005; Weaver 2003). Television viewers have different personality traits. For example, they could be neurotic, psychotic or extraverts. Neuroticism relates to television viewing motives (Weaver 2003). Neurotics are emotional, independent, impulsive, hostile, and tough-minded, lacking empathy. They get more stressed, and tend to have low life satisfaction (Matthews, Deary & Whiteman, 2003). Psychotics are characterized by emotional instability, anxiety, moodiness, tension, shyness, and low self-esteem (Weaver 2000). The extraverts on the other hand are sociable and sensation seeking. They have preference for fast-paced and novel media messages with high sensation value (Stephenson 2003). They are not interested in mediated communication like television. They do not believe that it can serve as an adequate substitute for interpersonal interactions (Weaver 2003).

The influence of personality variables on media use (Krcmar & Kean 2005) is explained by the Uses and Gratifications model of television viewing. The level of television viewing depends on the individual's sociability or social adaptability, affiliation, and positive self-esteem (Weaver 2000). Relating personality to cognition Endler (2000) helps to understand the impact of personality variables on cognitive aspects of media use. Other contextual variables like the age of the television characters influence the meaning viewers make of televised content. It dictates the way in which the viewers identify with the characters, and the interpretations that they make (Kunkel, Cope-Farrar, Biely, Farinola, & Donnerstein 2001).

Audience segmentation may be helpful in categorizing young audiences in terms of egocentricity, sensation-seeking, socially unacceptable behavior, and autonomy (Weaver 2000). The segmentation may enable health educators and television producers to design messages that will be more attractive to their target audiences. They would be in a position to know who is likely to be drawn to what types of content and with what potential impact. Different edutainment programmes on television are likely to attract different individuals depending on the personalities, the gender, and also on the development stage of the

individuals. In the following discussion, I describe the various televised HIV and AIDS programmes. The description is generic, not specific to Uganda.

2.6.4 CATEGORIES OF TELEVISION EDUTAINMENT PROGRAMMES

In the discussion below, I begin by describing HIV and AIDS programmes that are developed for education purposes.

2.6.4.1 Advertisement spots or public service announcements (PSAs)

These presentations are alternatively referred to as subminimal cuts. These presentations are significantly shorter than drama and may take one-or two minutes (Abdulla 2004). Within those minutes, they are designed to inform audiences, show a benefit of behavior change, correct misinformation, or expose a social ill.

2.6.4.2 Television magazines and variety shows

Television hosts may weave together songs, drama, comedies, call-in segments, quizzes, and discussions into a single presentation for broadcast. This form of presentation is meant to appeal to a wide range of viewers while allowing for the educational content to be repeated in several segments of a single program (Quinn, Guyon, Schubert, Stone-Jiménez, Hainsworth & Martin 2005)

2.6.4.3 Reality television

This is a relatively new phenomenon, presenting people in a natural everyday context rather than using actors. This is the television genre based on the display of live, real-time, relatively unconstrained, apparently spontaneous social interaction (Lunt 2004). Some of the reality television programmes are developed for commercial entertainment while others have social messages. True stories and real situations are used to convey HIV and AIDS messages. Reality television could feature testimonials, interviews, diaries, or talk shows. The talks include issues of relationships, family, friends, and the way they relate with each other. It could also be about medical issues and health care providers. The popularity of reality television is steadily increasing (Andrejevic 2004).

2.6.4.4 Educational drama

Educational drama could be presented as series or serials. Serial drama (soap operas) is a continuing story, presented for a specified number of days over a specified period. The set-up of a continuing story allows for the creation of a lifelike social context in which characters change slowly and face successes and setbacks typical of what happens in real life. This gives an opportunity for the audiences to know and identify with the characters. Issues can be explored in depth and from the perspective of several characters (Piotrow & Fossard 2004; Singhal, Rao & Pant 2006).

Drama series on the other hand present a new and complete story in each episode but the main characters may be the same. This framework suits audience members who may not watch every episode in a drama serial (Singhal & Rattine-Flaherty 2006). With time, the audience gets to know and empathize with the characters. They also engage in anticipating how each character will respond to a new situation. The presentation of alternative narratives in serial drama aims to open up new possibilities for making health-promoting choices (Galavotti, Pappas-Deluca & Lansky 2001).

2.6.4.5 Television soaps

Television Soaps are presented regularly in multiple serial episodes. The presentation is a narrative composed of interlocking story lines that focus on the relationships within a specific community of characters (Mumford 1995). By tracking and sharing the moods and thoughts of television soap characters, the viewers experience a sense of reality. The viewers escape boredom and tensions (avoidance) and at the same time they are entertained (diversion). Television soaps also give viewers opportunity to socialize, interact and to pass time. To the youths, television soaps provide an opportunity to gather social information. Television soaps are more appealing to female audiences than males (Ward 2002). While some television soaps are for education purposes, the majority are developed for commercial entertainment purposes. However, even within the commercial soaps, there are health and other social messages that are incorporated in the storylines (Obregón 2005).

Television soap operas are some of the programmes that young people enjoy watching. The essence of using drama for educational purpose, and the power of the soaps in attracting the

youths lie in the way they relate to the viewer's sentiments. Both educational drama and commercial soap operas use role models to have impact on the viewers.

2.6.5 ROLE MODELING IN EDUTAINMENT

Role-models are the characters that feature in edutainment programmes. They may provide examples of desired or un-desirable behavior (Galavotti, Pappas-Deluca, & Lansky 2001). Role models could be live like peers, teachers, family members, and opinion leaders (Kelly 2000); they could be textual (non-performance models) or, could be in the form of iconic or symbolic/pictorial representations of behavior (Glanz, Rimer & Lewis 2002). Role models provide basic information and illustration on the steps taken in behavioral change (Galavotti, *et al.* 2001). Occasionally they provide awareness of the costs and benefits of behavior change (Bandura 1997).

Through drama and story-telling, edutainment presents role models who demonstrate to audiences how to adopt healthy behaviors. The role models portray situations that audience members might experience, and show them ways of handling the various situations. They could be effective in assisting young people to refuse requests for sex (Nuwagaba & Kaahwa 2007). It is used also to transmit knowledge that would be difficult to translate using explicit statements.

Through edutainment, young people are encouraged to talk about issues of the realistic characters that they identify with. In doing so, they reach a deeper understanding of messages that are being conveyed (Lacayo 2007).

Audiences usually develop empathy for and identification with the characters in the story or drama (Barker 2005; Sood 2002). When characters face a problem that evokes emotion, audience members who identify and empathize with them may be motivated to solve similar problems in their own lives in a similar way (Kincaid 2002). Some forms of drama have attracted large audiences in several cultures because they present characters and themes that are universally recognizable (Sood, Menard & Witte 2004)

Role modeling could be used to demystify incapacitating story lines and to empower the youths to explore the various options available. As Bruner (1990) points out, an endangered society is the one where alternative narratives cannot be scripted, and whose members can

no longer change the stories they tell themselves. In the face of the HIV and AIDS scourge, the youths could be held hostage by a sense of fatalism. The cycles of early marriage, unprotected sexual behavior, multiple unplanned births, HIV infection, and early death are often seen as unavoidable. In such situations, patterns of personal behavior are considered to be unalterable (Galavotti, *et al.* 2001). Role modeling is expected to offer alternative narratives in which individual control over sexual and reproductive behavior is demonstrated.

When role models are properly used in edutainment, they demonstrate ways to cope with problems and setbacks, and ways of achieving success. Models could be portrayed as positive, negative, and transitional (Bandura 1977; Sabido 2004; Poindexter 2004). The positive characters depict healthy values and behavior and they are rewarded, the negative characters model unhealthy behavior and antisocial values and they suffer as a result. Transitional characters represent the audience: they tend to be uncertain at first about which behavior to adopt. They gradually become convinced and begin to practice the healthy behavior and get rewarded (Cody & Sabido 2008). In order to make informed decisions, the audience is given the opportunity to watch several characters, rather than just one.

Role models need to be those that the audience is familiar with (Barker & Sabido 2005) or those that audiences can identify with (Parker, Ntlabati & Hajiannis 2005; Sood 2002). With time, the audience identifies with and develops empathy for the characters in the story or drama (Barker 2005; Singhal & Rogers 2002). This helps the audience to reach a deeper understanding of messages that are being conveyed (Lacayo 2007) and to solve similar problems in their own lives in a similar way (Kincaid 2002). The effectiveness of role modeling lies in presenting characters and themes that are recognizable (Sood, Menard & Witte 2004). Interpersonal and community communication networks can be used to endorse the goals and behaviors of specific characters (Galavotti, *et al.* 2001).

Role modeling is the essence of edutainment in the campaigns for prevention of HIV and AIDS. Various aspects of HIV and AIDS can be demonstrated through role modeling. The aspects of learning cut across the cognitive, affective and psychomotor domains of knowledge. From the interpretivist framework, models can make meaning to the audience only if the presentation addresses the experiences of the target audience.

2.6.6 STUDIES RELATED TO TELEVISED HIV AND AIDS EDUCATION

A number of studies that are related to this one have been conducted in different parts of the world. For instance, Gavin (2002) conducted an audience research with a group of Australian youth aged 16-25. This study was based on two pro-social television drama centered on HIV and AIDS. The dramas were developed for educational purposes and particularly, to raise awareness on HIV and AIDS. The findings revealed clashes of interests between the values of the audience and the producers of the dramas.

A study conducted by Obregón (2002) investigated message effects of two commercial television soaps on young peoples in Colombia. Findings revealed presence self reported message effects at attitudinal and behavioral levels. Findings also revealed active construction of meaning among young viewers. His study differed from that of Gavin(2001) in one respect; that he used two commercial television soaps whereas the former used educational dramas. The finding revealed presence of self reported message effects among viewers. The common factor in the findings in the two studies was on ongoing processes of negotiation and reinterpretation of meanings by the young viewers. Obregón (2002) noted that researchers and practitioners overlook young people's experience of media reception and focusing primarily on the potential existence of message effects.

In another study conducted in Botswana, O'Leary, Kennedy, Pappas-Deluca, Nkete, Beck and Galavotti (2007) found that viewers of television soap *The Bold and the Beautiful* had significantly lower levels of HIV stigma compared with non-viewers. In the television soap, HIV infection was treated in a no stigmatizing, humane manner.

The unique factor about my study is that it investigates the way youth experience both types of television programmes; one that is developed for educational purposes and the television soaps which are developed for commercial purposes. I purposed to examine the distinctions that the youth make between the two types of programmes. This analysis is intended to generate insights on ways the strength and limitations of each programme can enhance the improvement of the other for purposed of HIV and AIDS education.

2.7 CONCLUSION

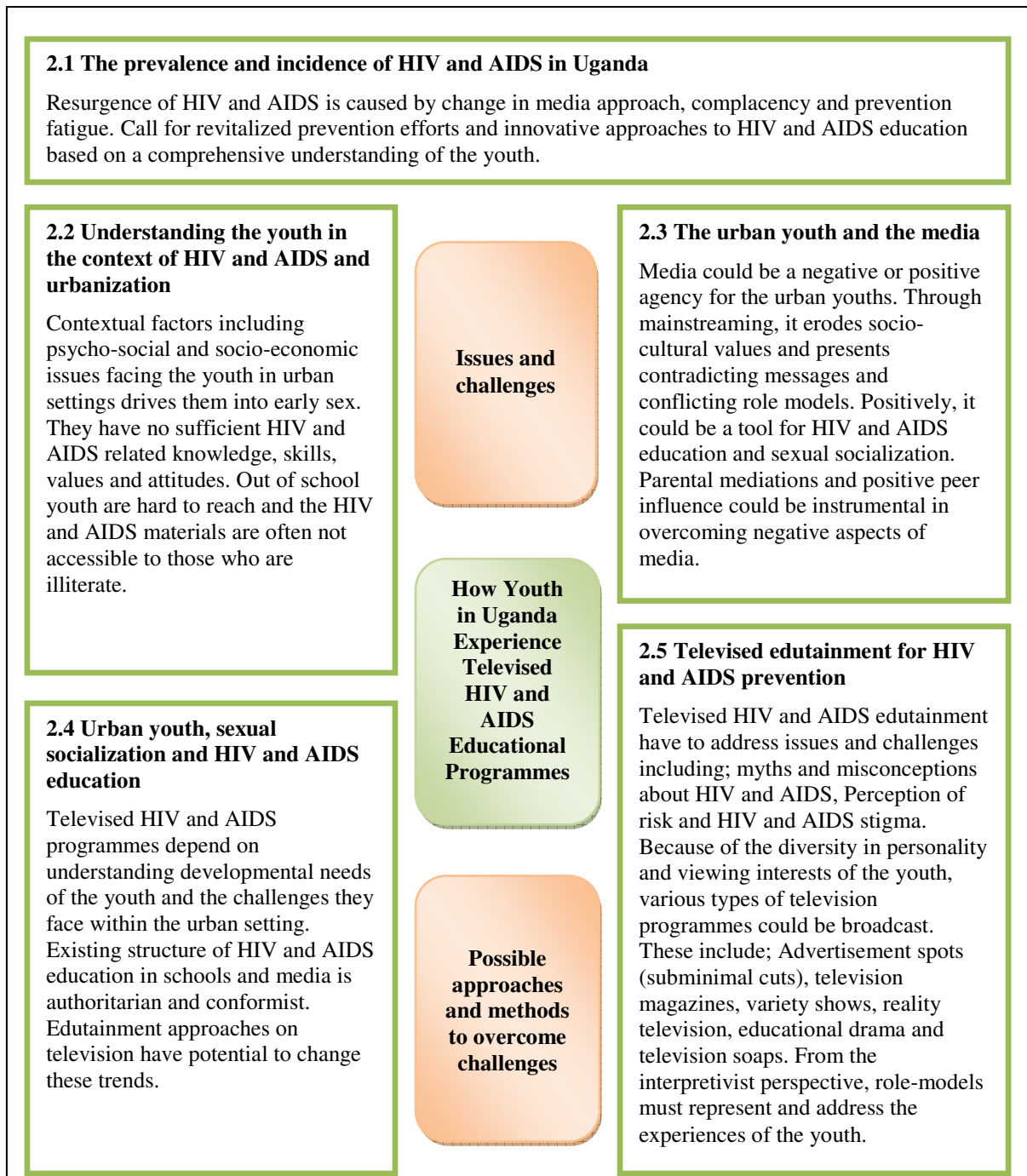
The low levels of HIV and AIDS prevalence in the 1980s and early 1990s have not continued partly due to reduced vigilance, change in media approach, complacency and HIV and AIDS prevention fatigue. The new trends call for revitalized prevention efforts and innovative approaches to HIV and AIDS education and communication, based on a comprehensive understanding of the youth. Psychosocial and economic factors in the urban areas make the youth vulnerable to HIV and AIDS infections. The media, television in particular, aggravates the problem by exposing urban youths to sexuality messages. However, given that some urban youths have no accessibility to conventional HIV and AIDS education, television can be potentially useful in the education interventions. One of the tasks facing HIV and AIDS educators is how to harness the edutainment aspects of television without risking the negative aspects in some of the programmes. Media could be a negative or positive agency for the urban youths. Through mainstreaming, it erodes socio-cultural values and presents contradicting messages and presents conflicting role models. Positively, it could be a tool for HIV and AIDS education by way of sexual socialization. Parental mediations and peer influence could be instrumental in overcoming negative aspects of media.

HIV and AIDS educators have to bear in mind the psycho-social and development issues of the youth and urbanization as a contextual factor. The struggle for independence drives them into sex at an early stage. Some of the youth are hard to reach because they are out of school and may not be located easily. Besides, reading materials used in the campaigns may not be accessed by the illiterate youth. Televised HIV and AIDS education could also get the youth from pornographic materials. Televised HIV and AIDS programmes depend on understanding developmental needs of the youth and the challenges they face as urban people. Existing structure of HIV and AIDS education in schools and media is authoritarian and conformist. Edutainment approaches on television have potential to change these trends.

Edutainment in the televised educational programmes is likely to address issues and challenges including; myths and misconceptions about HIV and AIDS, Perception of risk and HIV and AIDS stigma. Because of the diversity in personality and viewing interests of the youth, various types of television programmes could be broadcasted such that no groups of youth are left out. The types include; Advertisement spots or public service

announcements (PSAs), television magazines, variety shows, reality television, educational drama and television soaps. Educational drama and television soap operas depend on role models to influence the behavior of the youth. From the interpretivist framework however, role models can make meaning only if the situation they represent, and the messages they convey address the experiences of the youth. This study investigates how urban youth in Uganda experience the televised education programmes.

Figure 2.1: Diagrammatic summary of the literature review



The diagram above illustrates the relationship between the youths, urbanization, HIV/AIDS and edutainment. The susceptibility of the youths to HIV/AIDS is heightened by psychosocial factors and urbanization. Within the urban areas, socio-economic factors and the influence of the media increase the risk factors for HIV and AIDS. There are many components of the media but the discussion narrows on television which seems to be the most abundant to urban youths. Television has two faces; a positive and a negative influence. Depending on how the programmes are used, those that have been deemed negative could turn out to have a positive influence.

---oOo---

CHAPTER 3

DESIGNING AND CONDUCTING THE EMPIRICAL RESEARCH

“Would you tell me, please, which way I ought to go from here?” asked Alice.

“That depends a good deal on where you want to get to,” said the Cat.

Lewis Carroll, *Alice’s Adventures in Wonderland* (1865)

3.1 THE AIM OF THE CHAPTER

This chapter describes the processes and procedures through which I collected the data for this study. I attempt to describe the epistemological foundations upon which this study was based and which influenced the choices of the methodology.

3.2 INTRODUCTION

Chapter one provides a background against which the methodology for this study is presented. In the literature review, I have discussed studies that are related to the way youth experience televised HIV and AIDS educational programmes. Although the focus of those studies might not be similar to this study, some of the methodologies used may be adopted with some modification. Within this chapter, I present the epistemological underpinnings for this study as a precursor for understanding why I chose the data collection tools that I used. I have endeavored to illustrate the Social Constructivist and Interpretivist paradigms that guided my study. The data collection tools have corresponded with the research philosophy.

In this chapter, I describe and justify the research philosophy, the methodology, the research instruments, the data collection strategies and the processes of data analysis. While I attempt to justify the above mentioned issues, I also highlight the associated limitations in using the methods. I begin this chapter by discussing the epistemological underpinnings for the study.

3.3 PARADIGMATIC APPROACH

The behavioral science and communication theories contribute to an understanding of the factors that influence the way youth in Uganda experience televised HIV and AIDS educational programmes. As observed by Creswell (2003), communication paradigms provide direction and systematic approach in search for knowledge. In this study, I am guided by these communication paradigms to understand how youth in Uganda experience

televised HIV and AIDS educational programmes. In the following section, I describe the Social Constructivist and Interpretivist paradigms in the light of; knowledge and truth about HIV and AIDS, the nature and context of the learning; the positions of educators and learners in HIV and AIDS education.

3.3.1 THE SOCIAL CONSTRUCTIVIST AND INTERPRETIVIST EPISTEMOLOGY

In chapter one, I highlighted the basic principles of the Social Constructivism and Interpretivism that forms the basis of my study. Among other principles, it is emphasized that knowledge comes from a variety of sources in the environment of the learners (Mertens 2005). There are multiple realities of the same phenomena and these realities differ across time and place (Vygotsky 1978). Against the principle that knowledge comes from various sources, I decided to investigate two types of televised HIV and AIDS programmes. One is the televised HIV and AIDS programmes developed for educational purposes. The second source is television soaps that young people enjoy watching (Buckingham 2005; Gunter (2002). The reason for choosing to investigate television soaps alongside televised HIV and AIDS educational programmes is that they have received less attention from communication researchers yet they are believed to contain health messages (Obregón 2005). Buckingham (2005) suggests that the popular programmes that young people enjoy watching should be evaluated as sources of learning. The electronic and print media are part of the sources of knowledge and experiences that individuals could use to construct their own reality (Wink & Putney 2002). The various sources are expected to help the youth to search for meaning so that they can create their own reality (Cohen *et al.* 2003).

In the context of Social Constructivism and Interpretivism, the process of learning is characterised by dialogue (Rhodes and Bellamy, 1999) other than prescription (Von Feilitzen (1999; Bauersfeld 1995). The educators are expected to provide a non didactic learning environment without imposing their beliefs, standards and values of educators (Meter & Stevens 2000; Brownstein 2001). Social Constructivists believe that learners' insights could not only benefit educators (Clark & Elen 2006) but could also leave an imprint on the learning process (Holt and Willard-Holt 2000).

In a Social Constructivist and Interpretivist context, learners have to be assisted to arrive at their own understanding HIV and AIDS. Knowledge from educators is interpreted by the learners in the context of their accumulated knowledge, experiences and world views (Wink & Putney 2002; Eggan & Kauchak 2004). The socio-cultural background of the learner also

helps to shape the knowledge and truth that the learner acquires from various sources (Wertsch 1997). The educators' version of truth is compared with the learners' accumulated experiences to arrive at a socially tested version of truth (Kukla 2000). Other than attempting to expose truth to the youth, educators are expected to help the youth to search for meaning so as to create their own reality (Cohen *et al.* 2003). The meaning derived out of new information is negotiated on the basis of past experiences and knowledge (Wink & Putney 2002). Within their social and cultural experiences, there exist myths, taboos, and customs learnt from families, peers, and the media. Their perceptions and world-views of the learners are influenced partly by these cultural experiences.

With particular reference to the urban youth, they have a distinct informal culture that distinguishes them from their mainstream social entities. The quasi-modern youth sub-culture has its symbols and expressions characterised by unique choices, fashion, interests, slang, music and film genres (UNESCO 2002; Hebdige 1979). Exploring and appreciating these sub-cultures and norms is instrumental in understanding the way urban youth experience televised HIV and AIDS educational programmes.

One of the limitations associated with the approaches based on Social Constructivism and Interpretivism is that it may not be appropriate in investigating people who are new to the subject under investigation (Mayer 2004; Kirschner, Sweller & Clark 2006). However, this limitation does not seem to affect this study because awareness and knowledge on HIV and AIDS is high among urban youth in Uganda (Commonwealth Youth Forum 2007, UAC 2007). In the context of Rogers (2003) Diffusion of Innovations Theory, uncertainty about HIV and AIDS seems to have been reduced to a level that facilitates decision making. What seems to be an emerging complication is the way to deal with the ever changing transmission dynamics of HIV and AIDS.

Basing on Social Constructivism and Interpretivism to investigate how youth experience televised HIV and AIDS education necessitate called for the use of appropriate theoretical framework. In this investigation, I was guided by the Uses and Gratification Model

3.3.2 THE CONCEPTUAL AND THEORETICAL FRAMEWORK FOR THE STUDY

My investigation was based on the Uses and Gratification Model (UGM) which explains that needs and gratifications influence the way individuals select and use media (Katz & Blumler 1974). The four basic needs that are stipulated by Katz & Blumler (1974) have been described in details in chapter 1. UGM emphasizes the importance of addressing the self-perceived needs, motives and experiences of the learners. Individuals seek information or media content selectively in accordance with their needs and interests. UGM is based on the assumption that young people are active users of media. Amidst the alternative choices, they seek out programmes that best fulfill their needs. It is for this reason that I set out to base on UGM to study how youth experience televised HIV and AIDS educational programmes. as noted by Severin & Tankard (1997), the need for a particular programme and the gratification that the programme offers depend on the individual's social and psychological requirements. Katz *et al.* (1974b:20) stipulates that; “the social and the psychological origins of needs generate expectations of the mass media or other sources lead to differential exposure, resulting in the need for gratification and other consequences, perhaps mostly unintended ones”. It is suggested that the basic needs, the social situation and the individual's background influences their ideas about what they want from media and which media best meet their needs (LaRose, *et al.* 2004). It is possible, according to this model, that different individuals may use the same media for very different purposes.

Aware of the limitations associated with UGM (discussed in details in 1.7.2), I integrated aspects of *Symbolic Interactionism Theory* (Blumer 1969) and the *Social Cognitive Theory* (Bandura 2002) with the UGM. One of the limitations of UGM (addressed by Symbolic Interactionism and the social Cognitive Theory) is the failure to address social and cultural factors that influence televised HIV and AIDS education. The centrality of socio-cultural factors in televised HIV and AIDS education is emphasized by the Social Constructivist and Interpretivist paradigms (Vygotsky 1978). Given that television viewing is communal, interpretations of messages on television are collectively done (Gavin 2000, 2001). Tulloch & Lupton (1997) adds that the perception of messages depends on the norms and values of the different sub-cultures. The need for educational programmes to address social and cultural dimensions of HIV and AIDS cannot be is highlighted by Power and Skuse (2005) and UNESCO (2002).

In the context of Symbolic Interactionism, influencing the behavior of the youth necessitate programmes that address their unique sub-cultures (Hebdige, 1979). This is because people learn through social interactions and the interactions depend on culture (Blumer 1969). Young people are presumed to understand the symbols that are used to convey messages on televised HIV and AIDS programmes. In televised HIV and AIDS programmes, desirable behavior is conveyed through iconic or symbolic/pictorial representation of real life situations. Young people are expected to learn new behaviors by observing and imitating the iconic role-models (Glanz, Rimer & Lewis 2002). Learning by observing the behavior of others is explained by *Social Cognitive Theory* (Bandura 2002). The detailed discussion on how symbolic interactionism and the cognitive theory are related to HIV and AIDS education is found in chapter 1 (paragraph 1.7.2).

In investigating how youth experience televised HIV and AIDS programmes, I integrated the above three theoretical frameworks. While the focus of UGM is on needs and gratifications, the focus of Social Cognitive Theory is on expected outcomes and behavioral incentives. The Social Cognitive Theory explains that young people learn new behaviors by observing iconic role models on television. The need to identify with the role models on television and other expected positive outcomes (LaRose, *et al.* 2004) motivates the youth to continue watching certain programmes on television (UGM). Viewers are in position to predict positive outcomes by reflecting on the benefits accrued out of past media use (LaRose *et al.* 2001).

Given that reality is constructed in flexible, adjustable social processes (Blumer 1969; Charon 2001; Gingrich 2003), individuals' response to messages depends on their interpretation of the symbols used in the communication (Charon 2001; Hewitt 2003). As pointed out by Muturi (2005) and Hugo (2002), audience factors, picture coding factors, and socio-cultural factors influence the interpretation of the messages. The sender's message is interpreted by the receiver with input from both external and internal social elements (Hewitt 2003; Charon 2001). The Symbolic Interaction perspective therefore sees individuals as active and dynamic as they interact with the media.

In media research, Social Constructivism and Interpretivism differ from the *Cultivation theories* and the '*Media effects*' approaches (Gerbner, *et al.* 2002). Cultivation theories stipulate that the attitudes, opinions and beliefs of young people could be negatively influenced by exposure to certain programmes on television (or other media). Young people are considered to be passive consumers of media and that they non-discriminatively believe

whatever they see on television (Gerbner. *et al.* 2002). Studies by van Evra (2004) indicate that television influences young people to perceive social reality through the optic of the programme producers. The Media Effects theorists like Gerbner, *et al.* (2002) presume that television can be used to propagate culturally accepted social norms and that the young people will accept them without question. The assumption that comes out of this notion is that educational programmes will have direct and measurable positive impacts on the behavior of young people and that the commercial soap operas will always have negative effects. It is believed that the media homogenizes the divergent values and perceptions of heterogeneous populations. This means that the influence of television transcends the variations in age, culture and class differences of target populations. This is one of the areas where Social Constructivism and Interpretivism differ from the *Cultivation theories* and the ‘*Media effects*’ approaches. Social Constructivism and Interpretivism stress that the individuals’ socio-cultural factors and background influence the way they perceive new information.

The foregoing discussion on the theoretical framework was used to guide the investigation on the way youth in Uganda experience televised HIV and AIDS education. The nature of the research topic and requirements of the selected paradigms necessitate that my investigation would rely on qualitative research methods (Creswell 2003; Silverman 2001). The research paradigm determines data collection and analysis methods (Mackenzie & Knipe 2006; Mertens 2005).

3.3.3 THE QUALITATIVE APPROACH TO THE STUDY

I chose to use a qualitative approach because my study is influenced by Social Constructivism and Interpretivism. Unlike quantitative studies, this research did not use pre-determined response formats (Green & Thorogood 2004). My interest was to develop meaning through exploring the richness, depth and complexity of the phenomena under study (Parker, Dairymple & Durden 2000).

In line with the Social Constructivist and Interpretivist framework, the qualitative approach allowed for a detailed exploration of the way young people experience televised HIV and AIDS educational programmes. Within these paradigms, discovering meanings is more important because assessment of knowledge cannot be subjected to measurements as applied in positivist methodologies (Myers 2000; Denzin 2001; Silverman 2001). While I identify

my study as a product of the Social Constructivist and Interpretivist tradition, I acknowledge that no single method can deal with more than a tiny fragment of reality (Lang & Engel Lang 1991).

In the light of the epistemological issues discussed above, I used qualitative research methods in order to gain insights into how the youth in Uganda experience televised HIV and AIDS education programmes. Aware that such insights are internal to the group that I selected for the study, I chose to allow the participants to reveal their own understanding of the issues in the study (Green & Thorogood 2004, Schwandt 2003). I also sought insights from key informants who I considered to have deeper insights about the media habits of target group. These data collection approaches reflected the core concepts entailed in the Social Constructivist and Interpretivist paradigms. The approach called for empathetic understanding of the importance that young people attach to HIV and AIDS programmes on television. I believed that the approach would enable a multi-faceted exploration of the topic (Parker, Dairymple & Durden 2000).

The nature of my study required that I use an approach that enhances intimacy with the research participants (Lindlof & Taylor 2002). This would yield data that are rich and detailed, offering many ideas and concepts. I intended to describe how young people feel and what they think about televised HIV and AIDS messages. The qualitative aspect of the research required a wide range of interconnected interpretive practices, using empirical tools such as interviews, artifacts, and visual and observational texts (Baxter & Jack 2008). My data came from a number of sources which included: documentary analysis, participant-observation, direct observations, focus group discussions and personal interviews. The convergence of data from these sources enhanced credibility and trustworthiness of the findings (Silverman 2001). According to Denzin and Lincoln (2003) qualitative research is inherently multi-method in focus. The kind of insights that I wished to get from the qualitative analysis included what audiences like or don't like about televised HIV and AIDS programmes. I aimed at finding out not only what they really think, but also what drives their responses.

In collecting data, I kept the questions and the discussion unstructured. This was intended to allow participants make free responses that are not confined within a list of possibilities (Green & Thorogood 2004). Although many of the questions depended on the participants'

responses, I used a guide to make sure that I asked the right lead questions. I did not have predetermined sets of questions that follow a definite order. The samples were relatively small, and not all participants were asked precisely the same questions. This was because many of the questions that I asked were based on the responses that the participants gave. Given that the different groups represented diverse age and educational differences, the participants had different interests and their discussions reflected the interests. This meant that the questions asked had to differ.

3.4 RESEARCH DESIGN AND METHODOLOGY

I decided to employ a research design that fitted within the epistemological underpinnings of my study and the qualitative research methods. The approach had to facilitate exploration of a phenomenon within its context using a variety of data sources ((Baxter & Jack 2008). As suggested by Yin (2003) an instrumental case study approach enables deep investigation of the real life context of the topic under study. The design could allow close collaboration and proximity with the participants so that they would narrate their stories and describe their perceptions of reality.

3.4.1 INSTRUMENTAL CASE STUDY DESIGN

I used an instrumental case study design to provide deep insights into the phenomenon under study (Stake 2000). It suited the exploratory nature of my study with which I investigated the topic in depth. As proposed by Yin (2003), the instrumental case study is used to conduct the investigation in a naturalistic setting. The behaviour of the participants cannot be manipulated and structured as is the case positivist approaches (Myers 2000; Denzin 2001; Silverman 2001). The design enabled me to examine the contextual factors that are relevant to the phenomenon under investigation. The design is based on the Social Constructivist paradigm which claims that truth is relative and that it is dependent on one's perspective (Baxter & Jack 2008). The design enabled me to obtain an in-depth description of the lived-in experiences of the urban youth. I was able to make constant reflections on the topic and re-examine meanings and impressions that were generated (Myers 2000). The strategy, which involved integrating multiple sources, was to braid together various strands of data to draw a big picture of the issues under study (Baxter & Jack 2008). Other than handling each data source individually, I integrated the data sources such that I could get a generic understanding of the social setting under study

Nonetheless, much as I considered this design to be rigorous, I do acknowledge that there are inherent limitations. Foremost, the design limits the extent to which the study could be generalized. Being a case study, there is a limit to which the findings could be applied to other settings (Baxter & Jack 2008). Besides, the findings are also prone to problems of personal researcher/observer bias and subjectivity (Cohen *et al.* 2003). To overcome the subjectivity and to enhance data credibility, I used multiple data sources (Baxter & Jack 2008; Yin 2003). These sources included records and documentary analysis, focus group discussions, personal interviews, direct observations, and participant-observation. I had anticipated that this procedure would generate big volumes of data (Myers, 2000). I overcame this challenge by ensuring that the study is carried out systematically and critically. In undertaking this rigorous design, my interest was to generate detailed information and insights that could help in refining theory and development of hypothesis for further studies (Berg 2001).

3.4.2 SELECTION OF PARTICIPANTS

As suggested by Luck, Jackson, & Usher (2007) a case may or may not be seen as typical of other cases. My unit of investigation was the urban youth, aged 15-24 and who regularly watch television. This appears to be a small unit for investigation considering the exclusion criteria used in selecting them. This group is distinct from three other categories of young people; those who are outside the age bracket; those who live in rural areas; and those who do not watch television regularly. Nonetheless, the youth who were selected are not homogeneous. They included the non school-going youths, youth who work in HIV and AID projects, graduates from various institutions, the secondary school-going youths, the college students and the University students. I was interested in a variety so that I could get a representative picture of experiences of urban youth. The description of these different groups and the rationale for choosing them is made in paragraphs 3.4.2.1 to 3.4.2.4. Table 4.1 and 4.3 shows the composition of the various participants.

The qualitative nature of my study necessitated obtaining in-depths insights from the participants. For that matter, they did not need to be as many as those required for surveys (Murphy 2007). Besides, Krueger & Casey (2000) suggests that it is easy to manage small numbers in qualitative studies. We decided to involve use between 6-10 participants in each

category in the FGDs. They were selected through snowball sampling technique. In this procedure, we started with a few participants who were recommended by key informants. These participants in turn recommended and helped me to recruit others who were known to be regular viewers of television.

We began by using a simple questionnaire to assess the media viewing habits of the participants. We preferred to work with those who watched television more than four days a week. The following section describes the different groups that participated in the study

3.4.2.1 Community youths

Three categories of community youth were recruited. The first category was made up of young men and women who dropped out of school at an early age. They do not have specific jobs or anything that occupies them regularly. My interest in selecting them was that they spend much time watching films in video halls. I anticipated that they would generate ideas on the topic basing on their wide experiences in watching films.

The second category is community volunteers working with nongovernment organizations that educate youth on HIV and AIDS. We selected them because we considered them to be experienced with HIV and AIDS related issues and they have attended many workshops. They deal with young people in HIV and AIDS programmes so we wished to tap their experiences on these issues.

The third category was graduates fresh from colleges and universities. The orientation of this category of people usually shifts from school life and they become more focused on getting into family life and work. We expected that this shift of interests would correspond with a change in their media tastes. As they look forward to choosing marriage partners, they are likely to become what Nabi, Biely, Morgan, & Stitt (2003) refer to as instrumental viewers of television. We expected that this change of focus would bring a different dimension into the study. However, they maintained the social networks that they had while studying. This made it possible for me to get them in a focused group discussion.

3.4.2.2 Participants from the high school

High school students were recruited from St Kizito High school, Namugongo, which is 10 kilometers away from the capital city Kampala. The school is a mixed (boys and girls) school and the age of participants was between 15 and 19 years. We were interested in examining how these participants would compare the televised HIV and AIDS educational programmes with similar HIV awareness drives conducted at the school. The focus group discussion was made up of 10 participants (males and females). Some of them were residents at school and others were commuting from home. We selected students from this particular school because it is one of those in the urban areas that have both males and females, and residents and commuters. We also looked at the presence of both genders in a focus group discussion as an opportunity to get combined interactions of male and female youth. A big number of other schools in the country have either male students only or female students only

3.4.2.3 Participants from the teachers college

These participants were recruited from a teachers college located in the centre of Kampala city. The participants were between the age 18 and 21 and were in their final year of study. They are teachers in the making and they are expected to interact with young people in the school where they go for teaching practice. They were chosen to provide unique perceptions on the issues of HIV and AIDS and sexuality among the students they come across. Under the programme of PIASCY (refer to 2.2.8) they are expected to discuss HIV and AIDS issues with students whom they teach. In so doing they are expected to use a variety of learning facilities, including audio visual aids. Their perceptions and experiences on HIV and AIDS are composed of their views as youth as well as their acquired training as educators. We expected this combination to bring unique dimensions in the discussions.

3.4.2.4 University students

These were recruited from two different universities namely; Uganda Christian University and Makerere University. However, each of the 2 groups constituted a focus group. Being students of urban universities makes them almost identical. However, with regards to this study, the participants had some features that distinguished them from each other.

We selected students from Uganda Christian University because the university has a number of HIV and AIDS community outreach programmes. Besides going out to the community, they conduct awareness campaigns at the campus itself. This gives them a comprehensive idea on what young people at their university talk about HIV and AIDS and films and drama.

The second group was from Makerere University. We selected these particular individuals because of their involvement in film making and drama not only at the university but also in the community. Their insight on the way young people perceive films and media in general was considered to be vital for the study.

3.4.2.5 Key informants

Other participants in the study included key informants from the Ministry of Education, the television stations and the NGO theatricals who organize televised educational drama. Data provided by these persons came through personal interviews. Two of them were selected from each of the organizations. As suggested by McMillan and Schumacher (2001), it may be good practice to select strategic informants other than taking the big samples. These persons were selected based on their various contributions either in developing HIV and AIDS educational programmes or using the programmes for HIV and AIDS education. They offered in-depth insights into the subject under investigation. The information they provided was compared with the data collected from focus groups and students' interviews. These key informants came from the following organizations:

- The Non Governmental organization theatricals: These produce drama for the sensitization of the young people on HIV and AIDS.
- The Teenage information centre: affiliated to the government of Uganda and supported by international organizations and provides reproductive health services to younger people including information. They use the dramas to provide information to materials
- The staff of television stations: the key informants that were selected are involved in broadcasting HIV and AIDS programmes on television. They interact with the youth because they have to make audience surveys to detect changes in the media tastes of their target audiences. Occasionally, they work with other organisations to conduct call-in interaction programmes on HIV and AIDS
- The staff in the secondary schools: included the matrons, and senior teachers at the school. Their role was considered crucial in the study as they organize educational

films on HIV and AIDS for the students. The Matrons are constantly visited by students who wish to watch television soaps. Besides, students occasionally discuss the television soaps in the presence of the Matrons.

3.4.3 DATA COLLECTION

As indicated in the sub-sections below, a number of procedures were taken to collect data. The multiple data collection methods contributed to the data quality control by way of triangulation (in this regard, refer to 3.6.1)

3.4.3.1 Documents analyses

One of the sources of information I investigated was documents and records. Documents as a source of data for research in social sciences are used widely (Prior 2003) either in hard or electronic form or both (Scott 2006). The documents that were used in this study were obtained from institutional offices and government departments that deal with HIV and AIDS programmes. The main sources included; the *Uganda AIDS Commission*, *Young Empowered and Healthy*, *Naguru Teenage Information Centre*, and *National Television*.

3.4.3.2 Focus Group Discussions (FGDs)

The nature of my study necessitated that FGDs would be the major data collection method. Not only does the method present a forum for natural discussions around the subject matter (Krueger & Casey 2000) but it also increases understanding of the perceptions participants (Green & Thorogood 2004). FGDs enabled me to come up with rich, qualitative information that described the meanings, beliefs and attitudes of the participants (Rabiee, 2004). One of the strength of using FGDs is that group settings allow individuals to use ideas of others as cues to elicit their own responses (Green & Thorogood 2004). A research assistant helped me to collect data during the focus group discussions and interviews. Occasionally he assisted with the recorders and taking of notes during the sessions. He was also instrumental in the transcribing of the proceeds of the sessions. We compared notes taken during the sessions with the audio records.

We began with making a pilot presentation such that we would know the issues and challenges to expect during the real sessions. We found this procedure very useful because it

helped us to know what to expect during the sessions. It also prepared us to know what we would do if the participants were very talkative, very dull, or very reserved.

We used a remote control device which allowed us to switch the screen on and off as necessity arose to provide for discussions. The discussants were asked to analyze the DVDs and discuss whether the messages in them address their experiences. We took notes as the participants discussed. The comments and remarks were also captured on a recorder and later transcribed. Participants within each of the categories (refer to 3.4.2) constituted a focus group. Respondents' ages ranged from fifteen to twenty four with a mean age of 20 years. The research was undertaken with due consideration of ethical requirements such as getting written consent from them or from their parents (for the minors).

As a matter of procedure, we began the sessions by introducing ourselves so as to establish rapport. This was followed by a description of the project. I introduced the broad topic after which the participants were invited to discuss it. I made it a point to disclose to them the following: The purpose of the study, why a particular individual was chosen, the expected duration of the interview and the presence of voice recording equipment.

It was arranged that members of a particular focus group would be familiar with each other, and comfortable watching and discussing television together (Krueger & Casey 2000). We aimed for homogeneity within each group in order to benefit from their shared experiences. By using a snowball sampling procedure, we managed to get naturally occurring peers who freely exchange ideas. By using FGDs, we managed to get information from people who originally thought they had nothing to say. The procedure was useful in getting information from the participants who would have been reluctant to be interviewed on their own. Insights were generated through listening to jokes and slang that the youth use in their daily interactions. In doing so, we got to understand more of their values and group norms. FGDs generated dimensions of understanding that would have remained untapped by the more structured procedures of data collection.

There were occasions when participants changed and even reversed their positions after listening to the opinions of others. Whenever such a shift happened, we traced the flow of the conversation to determine clues that might explain the change. We capitalized on the interactions between participants in order to generate data. Instead of asking each person to

respond to a question in turn, people were encouraged to talk to one another. We examined how participants expressed their thoughts and the reasons behind what individuals said. We took interest in noting issues or topics that were discussed more extensively by participants and the comments that were made more frequently than others. We also considered what wasn't said and what received less attention than expected.

There were topics that participants discussed with intensity of feelings, exemplified by the voice tone, speed, and emphasis on certain words. While some of them spoke with excitement in their voices, others spoke slowly. We also noted responses that were specific and those that were vague and impersonal. We were particularly interested in details and we tried to make follow up-probes.

Some of the FGDs sessions involved showing to participants recorded excerpts of selected televised HIV and AIDS programmes. We played three DVDs in the different sessions. These included, *Life Choices* (refer to 4.3.1), selected recordings of two subminimal cuts (refer to 4.3.2.6), and selected recordings of parts of the television soap episodes of *Secreto D'mour* (refer to 4.4.1). After the viewing, participants were requested to discuss the presentations. The discussions were open and informal, and participants were encouraged to converse besides simply responding to questions. Great care was taken on the part of the researchers to avoid introducing terminology and influencing the terms of discussion. Besides introducing the lead questions, the researchers played a simple role of facilitation. On various occasions, a few prompts were made to trigger off more discussions. The conversations which lasted between forty minutes to an hour were recorded and later transcribed for analysis.

There are challenges that we encountered in the FGDs. One of them related to taking notes when more than one person spoke at the same time. We did not intend to make regulations procedures of speaking because it would disrupt the natural flow of the discussions. Although this problem could be solved by taking audio-recordings, it was not easy to tell who said what at a particular time.

Another challenge was related to group dynamics. The articulation of group norms occasionally silenced individual voices of dissent. Some of the respondents were domineering and they had to be tactfully moderated to allow others to talk. Other

participants were reserved and occasionally gave short answers. Without prompting, they would resort to listening to others talk.

3.4.3.3 Personal interviews

Similar to the focus group discussions, the process of the “unstructured” interviews was conversational. Personal interviews were used to collect data from selected youths and key informants. There were participants within the focus group discussions who looked to have more detailed information on the topics of discussion. Besides, by using a questionnaire, we got some baseline information on all the participants. We managed to know those that were more exposed to issues of HIV and AIDS and/or televised programmes. We decided to get detailed information from them by using personal interviews. We also suspected that some of the participants were shy and could not freely talk in groups. We followed them up and got information from them. There is a female participant a group of community youth (non-school goers) who kept quiet throughout the FGD. We decided to follow her up and engaged her in an interview. She ended up giving us more information than any other individual gave in that group.

We took similar introductory procedures as in the focus group discussions. The only difference was that in this case, we were dealing with one or two individuals. The format was that of normal conversation with questions asked and adjusted according to the responses. The procedure used was one of a free-flowing rather than a rigid style. In the process of answering the questions and responding to the comments, the respondents gave facts as well as opinions (Cohen *et al.* 2003).

Immediately after each session of the interview, we sat down to take notes and jot down our impressions of the interviews which the audio recorder could not pick up. Personal interviews generated in-depth insights with regard to the way the urban youth in Uganda experienced televised HIV and AIDS educational programmes. Open-ended questions were used to ensure that the responses were not restricted or limited. Personal interviews enabled participants to share their personal experiences, opinions and beliefs (Cohen *et al.* 2003).

Audio recordings helped us to overcome the possibility of slowing down the pace of the interview. After the interviews, we listened to the tapes and made additional notes. Taking notes while the participants are speaking would slow the interview. Immediately after each

session of personal interviews, we made a spot check on the tape recordings to ensure proper operation.

3.4.3.4 Participant observations

One cannot study the social world without being part of it (Silverman 2001). The importance of context and process in understanding human behavior is a core tenet of qualitative research. One of the limitations of interviews identified by Eder and Fingerson (2001) is that they may not capture some aspects of adolescent cultures. Such aspects can be captured through observational techniques. There are some valuable insights generated by body language and facial expressions that are as important as the spoken words. Field observation as a method is regarded as fundamental to most research (McMillan & Schumacher 2001). We managed to get insights on aspects of behavior of the participants (Bernard 2002). This was possible because we watched television with them and listened to their talks as well as observing their body language. Angrosino (2002) indicates that observation as a method requires a researcher to immerse himself in a new culture and to participate in the daily lives of the researched. Trauth (2001) adds that the best way to gather information is to immerse oneself in the world of the researched in order to uncover the story behind the statistics.

On a number of occasions, I watched television soaps together with students in Makerere University. I would conceal the fact that I was watching and studying them. My aim was to see their behavior in a more natural setting. I examined what they were talking about and what they were doing. I particularly studied their facial expressions whenever there were episodes showing their favorite characters get into trouble. I also listened to the way they passed judgments on the wicked characters and the way they glorified their favorite characters.

I managed to infiltrate the university community as a casual fan of television soaps and I was taken to be one of the friends of the students who were watching. With time, the other students got used to me and I started participating in the discussion of the characters in the television soaps. Soon I became very friendly with the students, particularly the female students who were almost addicted to the television soaps.

I also watched a number of episodes of *Secreto D'mour* and other television soaps with high school students at the home of a friend of mine, whose sisters invited their colleagues to watch soaps with them. These were some of the students that were commuting from home (day scholars).

We also regularly visited Naguru teenager information centre where adolescents are invited on a regular basis to participate in video and television shows. The centre uses video shows and interactive discussions to teach young people about reproductive health and HIV and AIDS. We listened to their comments especially when they complained about monotonous or boring films. We noted the attention that youth gave to certain films particularly those that they considered interesting. We also attended the group discussion sessions which were conducted after viewing particular presentations.

In the various places where we interacted with young people, we took note of their activities during the viewing and their body language when they watched films that aroused emotions. These observations enriched the data. Besides, it helped us to capture additional information that we had missed during the interviews or focus group discussions.

3.4.3.5 Direct observation

As noted by McMillan and Schumacher (2001), field observations as a method of data collection are fundamental in gaining important insights into the study. Through observations, we got detailed information on the interactions between the youth and the televised HIV and AIDS messages. We continued using observation as a method during the sessions of the focus group discussions and personal interviews. The difference between the participant-observations and direct observations was that during the latter, the participants were aware that we had interest in getting information from them. Nevertheless, we tried our level best to be casual, friendly, informal and inspiring. We took the opportunity to observe participants as they responded to the videos and when they discussed.

Observational techniques supplemented the documentary analysis, focus group discussions and personal interviews as a viable source of insights into how young urban people experienced televised HIV and AIDS educational programmes.

3.4.3.6 Reflective journal

Since I started this study, I have maintained a reflective journal in order to capture and reflect on my experiences, perceptions and interpretations (Baxter & Jack 2008). It has also been useful in keeping me mindful of personal bias and subjective interpretations that are common in qualitative studies (Creswell 2003). As a researcher, I have an obligation to disclose my presuppositions, choices, and experiences (Muck & Breuer 2003). I constantly made reflections to consider the ways in which my theoretical approach and my personal and professional characteristics would affect the interpretation of data (Richards & Emslie 2000). The journal helped me to be mindful of personal biases and subjective interpretations. I used the reflective journal for a number of purposes. Following the insights of Michelle Ortlipp (2008), I kept a self-reflective journal in order to facilitate reflexivity and to be able to examine personal assumptions and goals and to clarify my beliefs and subjectivity. I intended to make visible my thinking, values, and experiences. I also used the reflective journal as a source of additional information and guidance during my study (Cohen *et al.* 2003). This guidance was taken from the notes I took in relation to procedures and progress of my study. I documented my observations whenever I went out to collect data and this helped me to examine what worked well and what did not work well.

I have reserved a section in the addendum to describe the experiences, values, and assumptions that I had before beginning this study. As the study progressed, I have been in a position to take note of insights and findings that contradicted my prior experiences and values. I have also endeavored to refine my changing roles as researcher, interviewer, and interpreter of the generated data. In the reflective journal, I have noted personal achievements and shortcomings whenever they occurred. I have also documented the reflections, anxiety and emotions that came along with the shortfalls and achievements (Cohen *et al.* 2003).

I have managed to reflect on the methods of data collection that I wished to use and realized that some of them had inherent shortfalls. I have also noted within the journal, the tensions, issues and challenges met during the data collection processes.

3.5 DATA ANALYSIS AND INTERPRETATION

I carried out data collection and analysis concurrently and the process began when the first data was collected (Green & Thorogood 2004). This procedure was aimed at modifying data collection strategies whenever necessity arose. We organized the data into identified categories. The categories and the patterns were not predetermined, but emerged in the process (McMillan & Schumacher 2001). Relevant information from the documentary analysis, interviews and observations were placed in specific categories that could facilitate analysis and interpretation (Krueger & Casey 2000).

We made an interview record of data from each session of personal interviews and focus group discussions which also included notes from a notebook, and a full transcript of the tape. This record was a product of transcribing the interviews and typing field notes, alongside the contents of the reflective journal. In the process, we read through all the notes and came up with a clearer picture of the whole study. We sorted the issues into broad thematic areas arising from similarities, differences, categories, themes, concepts and ideas analyse common concepts and ideas (Raibee 2004). We took care to follow a consistent style while preparing the transcripts. We tried to read all transcripts at one sitting to get the overall picture of the study. This helped us to locate where particular information was, the missing information, and the frequencies of the issues involved.

One of the challenges we faced was that almost all the information in personal interviews and focus group discussions was verbatim, and the volume was very big. This was because we fully transcribed every interview and FGD. To overcome this challenge, we summarized each interview, as soon as the session was over. We also noted things that we expected participants to say but which they did not say. We built structures similar to logical frameworks, in which we could fit each statement.

We analyzed the data at both a conversational and thematic level, in order to examine the processes by which individuals and audience groups experience televised HIV and AIDS educational programmes. Descriptive accounts of the findings were studied and arranged in terms of topics, themes and issues. Areas of diversity and recurring themes and commonality were identified. The similarities, differences, and recurring themes within the transcripts of audience conversations were analyzed. The transcripts were organized into manageable

segments or sections and meanings that correspond to the ways the participants experienced the televised HIV and AIDS educational programmes given.

We employed an inductive thematic analysis, occasionally referred to as content analysis, to organize the data into meaningful forms. We grouped the data into sections with specific meanings and created categories that could be coded (Baxter & Jack 2008). This made it easier to identify emerging patterns and themes. We endeavored to establish relationships between concepts, constructs and variables. I identified recurring patterns and themes across all the data sources.

We attempted to distinguish between individual opinions expressed outside the group consensus. We gave particular attention to minority opinions and also to the observations that did not fit within my assumptions or theories. I paid attention to; consistent and inconsistent, vague and explicit comments and I sought for clearer understanding (McMillan & Schumacher 2001)..

A bigger part of the analysis was about exploring the subjective knowledge, opinions, and beliefs of the participants. We occasionally considered the actual words used by the participants and their meanings. We also determined the degree of similarity and differences between a variety of words and phrases used by the participants.

Although we got data from different sources, during the analysis I avoided reporting the findings separately. We made sure that the data are converged and jointly reported in an effort to understand the overall picture (Baxter & Jack 2008). We intended to present phenomena into a format that is readable and easy to understand.

3.6 QUALITY CRITERIA

One of the central issues in research is to establish trustworthiness of the study findings (Babbie & Mouton 2001). In my data, I address quality issues by focusing on credibility, transferability, dependability and conformability (Denzin & Lincoln 2001).

3.6.1 CREDIBILITY

I paid attention to professional integrity, intellectual rigour and methodological capability as suggested by (Lincoln & Guba 2003). The following procedures and strategies were used to meet the criteria of credibility. Using a reflective journal, I reflected on ways in which my theoretical approach and my personal and professional characteristics were likely to affect the interpretation of data (Richards & Emslie 2000). I continuously reflected on my subjectivity, bias, prejudices, experiences, feelings, competences and assumptions. I tried to remain open-minded and endeavored to guard against all personal orientations that might influence the findings and the interpretations. The field journal helped me to document my observations, to monitor my developing interpretations and to keep a record of the research process. This enabled me to make a description of the research context and environment. Besides the reflective journal, my research assistant was not immersed into the theoretical issues and this ensured that we came up with objective views.

As suggested by Russell, Gregory, *et al.* (2005) I made sure that that collection and analysis of data was done systematically and correctly. I attempted to make elaborate and authentic descriptions of my interactions with the participants, and of the research process. This was done with the aim of making the research findings transferable to similar situations.

We used multiple data sources to enhance credibility (Yin 2003). Triangulation as a method was used to create a complete, holistic and contextual portrayal of the phenomena in the study. Methodological triangulation involved using various tools for collecting data, including documentary analysis, focus group discussions, personal interviews, and observations. Data triangulation involved collecting information from different categories of youth and adults who were key informants. By comparing data from various sources, it was possible to promote data quality (Baxter and Jack 2008). The weaknesses in each single method were compensated by the counter-balancing strengths of another. For example,

participant observation generated insights that could have been missed if I had only used interviews and focus group discussions.

The combination of multiple methodological practices, empirical materials, and perspectives of various respondents was a good measure of credibility. Combining them in a single study increased the rigor, complexity, richness and depth to the research. Denzin and Lincoln (2003) observed that “triangulation is the display of multiple realities simultaneously” (p. 6). Multiple method strategy is likely to provide more valid results than a single research strategy.

Credibility was also enhanced when data from interviews and focus groups were tape-recorded and transcribed to enable cross-checking and to confirm the accuracy. Silverman (2001) noted that qualitative studies can achieve high reliability through using what he calls “low-inference descriptors” (p. 226). This process involves “recording observations in terms that are as concrete as possible, including verbatim accounts of what people say. In this way, the reporting does not depend on the researcher’s general reconstructions of what participants said because it is likely to allow personal perspectives that influence the reporting” (p. 227).

Involving participants in crosschecking the recorded data was also used as a measure of credibility. I undertook a process of member-checking, in which the interpretation of the data was shared with the participants, who had the opportunity to discuss and clarify the interpretation that I had made. In the process, they contributed additional perspectives on the issue under study. I also maintained field notes and peer examination of the data. As Lindlof and Taylor (2002), note “the logic of member validation is that, presumably, culture members are capable of assessing the descriptions of what others write about their practices, routines, and beliefs” (p. 242). This procedure had an additional use of ensuring that participants are part of the process of data analysis (Cohen *et al.* 2003). This was a very important procedure given that my study was based on the Social Constructivist and Interpretivist approach. Another measure of credibility was the systematic way in which Data was collected managed and analyzed (Russell, Gregory, Ploeg, DiCenso, & Guyatt, 2005).

3.6.2 TRANSFERABILITY

Transferability is the extent to which study findings could be applied to settings that are identical to the one where the research was conducted (Babbie & Mouton 2001). The key necessity is to preserve the specific meanings, interpretations, and findings in the completed study. Given that I used an instrumental case design for my study, I did not have intentions of generalizing findings. I focused more on the transferability to situations under similar conditions or contexts. In this regard, I endeavored to provide rich descriptive information on the topic under study.

3.6.3 DEPENDABILITY

This is the measure of how far the findings could be the same if the study was replicated in the same context and with the same participants (Babbie & Mouton 2001). I have applied and described measures and strategies that can be undertaken to conduct the same study under similar contexts. For instance, I have described the participants and the context of the study as well as the data collection procedures that were used in the study.

3.6.4 CONFIRMABILITY

I strived to ensure that the findings of my study are not influenced by bias and other personal factors. This called for self-control on my part as a researcher. My research assistant also helped me to paraphrase respondents' statements as we sought clarifications to ensure that what is heard or written down is correct (Baxter & Jack 2008).

During the process of data collection, I was sensitive to my relationship as an adult, with the young participants. I suspected young participants to be conscious of their lower status and lack of power (Eder & Fingerson 2001). I envisaged a possibility that I and the participants would look at issues from different angles of vision typified by our age differences (Warren 2001). This could easily influence my understanding of the process through which the participants make meanings. I tried to bracket my professional orientation, level of education, marital status, and financial status. While there were significant demographic and psychographic differences between me and the young participants, I tried to highlight my sympathetic appreciation of the contemporary youth culture.

I emphasized reciprocity through a number of ways including; self-disclosing, behaving in ways that empowered them, and encouraging self-reflection and development of insight among the participants. I occasionally asked them to interpret their slang and to teach me the current language trends. This was taken with excitement because it depicted that there are moments when they would be asked to teach an adult. Eder and Fingerson (2001) indicate the pertinence of representing youth in their own language and terminology.

3.6.5 AUTHENTICITY

The authenticity criteria identified by Lincoln and Guba (2003) addresses fairness, ontological authenticity, educative authenticity, catalytic authenticity, and tactical authenticity. Fairness refers to a quality of balance where the researcher ensures that the study participants have a chance to be represented in the inquiry. Ontological and educative authenticities are designated as criteria for “determining a raised level of awareness” (p.278) among research participants and researcher. Catalytic and tactical authenticities refer to the ability of a research inquiry to prompt participants to “take action for positive social change and community action” (Lincoln & Guba 2003:278).

I attempted to make an original representation of findings obtained from the primary sources (Cohen *et al.* 2003). Participants were engaged in the process in which they would check on the report of the study to confirm whether it corresponds with what they submitted. I also made an attempt to present the findings using rich, thick descriptions (Myers, 2002).

3.7 ETHICAL CONSIDERATIONS

HIV and AIDS is primarily a sexually transmitted infection and a study on the subject is very delicate. This is because discussions on sex and sexuality generate a lot of anxiety and fear. The potential for stigma and discrimination against those identified as living with HIV and AIDS is very high. I intended to preserve the dignity of the participants as demanded by the University of Pretoria and Uganda government. The following are the ethical issues and concerns which I tried to address during the study.

3.7.1 INFORMED CONSENT

Following the suggestions of Gauld 1999; Hornsby-Smith (1993), I made sure that the bigger number of the participants were above 18 years of age and could therefore give informed consent. Nonetheless, there were a few who were below the age of consent. These were mainly in high school and I obtained consent from their parents and guardians. The consent was in a written form. Nonetheless, they had the right to accept or refuse to participate in the study.

3.7.2 DISCLOSING DETAILS OF THE STUDY

I informed the participants about the purpose of my study as well as its main features. I also disclosed the challenges and benefits for participation. I described to the participants the scope of the study and the types of questions that I intended to ask. The information I provided included the use to which the results would be put and the extent to which participants' responses would be used in the reports.

3.7.3 OPPORTUNITY TO WITHDRAW

I gave assurance to the participants that their involvement was voluntary. They were free to withdraw from the study if new themes that are uncomfortable to them emerge during the course of the study. This was particularly important because a great deal of the discussions rotated around delicate sexuality and HIV and AIDS issues. I gave to them sufficient time to consider their participation and to seek clarification on any issue that looked vague. The possible withdrawal of their consent also meant withdrawing consent for the use of their data (Kennedy 2005)

3.7.4 RISKS AND BENEFITS

As suggested by Oberle (2004) I indicated to the participants about the possibility of publishing some of the lengthy quotations that they gave and that these quotations could identify them. This was meant to allow them to refrain from answering some questions or making statements that could identify them. With regard to benefits, the recruitment of participants was based on the premise that there could be potential benefits to them. The benefits included the knowledge that they would gain out of the study. This would form part of the reciprocity entailed in research activities. The participants would give information and

in turn they would share the information that I had accumulated from the interviews with other groups. Reciprocity also entailed providing informal feedback to the participants and informants. This feedback included details of the preliminary research findings. I also made sure that I provided refreshments and transport refunds to the participants.

3.7.5 ENSURING CONFIDENTIALITY

I saw it as an obligation on my part to protect the privacy and avoid harm being done to the participants. In this direction, I assured the participants that sensitive information which requires anonymity will be kept confidential. Such information includes: attitudes and perceptions on sexuality, medical information including HIV status, financial information, psychological well-being and mental health. Other details included information on family matters and other delicate information. This procedure is necessitated by the fact that qualitative data by its nature is full of clues that could point to participants' identities (Gauld 1999; Hornsby-Smith 1993).

I made it clear that I would not disclose, in any way, information that identifies participants. In this direction, I requested the participants to use nicknames during the interviews and focus group discussions. The real names of the participants would remain hidden unless the participant requested it to be disclosed.

3.8 CLOSING REMARKS

My study was focused on investigating how youth in Uganda experience HIV and AIDS educational programmes. In the course of the entire study, I was guided by the Social Constructivist and Interpretivist paradigms. I explored the way youth experience televised HIV and AIDS messages not only from educational programmes, but from the commercial television soaps that they enjoy watching. Because of the nature of my study and because of the epistemological underpinnings, I decided to use qualitative approaches and in particular, an instrumental case design. The approach helped me to understand the perceptions of young people towards the televised HIV and AIDS educational. I have elaborated the Uses and Gratifications Model that guided my study. I have also elaborated how it converges with, or depart from, other communication theories.

Figure 3.1: A schematic presentation of the research approach and design



The diagram above summarizes the methodology for the study. It shows the steps taken in the study, the data collection methods, and the interpretation of data.

CHAPTER 4 FINDINGS FROM THE STUDY

4.1 AIM OF THE CHAPTER

In the previous chapters, I have laid a foundation for the study. In chapter 1, I introduced the study. In chapter 2 I investigated the literature relevant to my study. In chapter 3, I described the epistemology and methodology that I used to collect the data. In chapter 4, I present the findings of the study. Unlike the formats used in quantitative studies, my presentation is made in a descriptive and natural narrative format. In many areas, I have used quotations in which I have not edited out the slang and the expressions that the young participants used. My findings are presented according to the three research questions that guided the study.

4.2 INTRODUCTION

I managed to get substantial information about how urban youth experience televised HIV and AIDS educational programmes through focus group discussions, interviews, observations and documentary sources. Despite the fact that the participants' understanding of the concepts of research was low, the level of trust to participate in this study was high. As I conducted more sessions, I learnt to establish emotional connections within each group. The emotional ties that I developed yielded the trust and rapport that helped to make the focus group discussions and interviews successful interactions. On my part, I learned a lot of the slang that they use. Each of the communities of the youth has unique and peculiar slang that they use.

The insights obtained from the participants' observations turned out to be deeper than I originally anticipated. The body language contributed to what they were telling us. Most of it confirmed what the key informants reported with regard to their experiences with the urban youths.

The findings of this study address the three research questions that I set out to investigate. These are:

- How do the urban youth value and experience televised HIV and AIDS educational programmes?

- How do health educators, television staff, and theatricals value and assess televised HIV and AIDS education programmes?
- What are the guidelines from the findings of the study that can render televised HIV and AIDS programmes more relevant to the needs of the youth?

On the first research question, I looked at the following two types of HIV and AIDS education broadcasts.

- Televised HIV and AIDS drama and subminimal cuts which are developed for **educational** purposes
- Television soaps that are developed for **commercial** purposes, containing HIV and AIDS messages.

There are fundamental reasons why I got interested in the commercial television soaps. I wanted to investigate how young people experience HIV and AIDS messages in the commercial television soap operas which they consider to be popular (although this was not the particular aim). Buckingham (2005) points out, and I agree, that it is important to investigate programmes that the youth enjoy watching as sources of learning in their own right. Within the framework of the constructivist and interpretivist paradigms, I presume that valuable sources of HIV and AIDS information for young people ought to include the programmes that they value and enjoy watching. I also intended to investigate how the urban youth value and experience HIV and AIDS television drama and spot messages that are developed for educational purposes.

During the focus group discussions I showed three different DVDs, each of which contains a different type of programme. The first one has a recorded drama titled *Life choices*. The second DVD contains two subminimal cuts on HIV and AIDS. The third DVD contains recorded excerpts of selected episodes of *Secreto D'mour* (which was popular television soap) that contains messages on HIV and AIDS. I used it to represent television soaps during the discussions.

I conducted two sessions of focus group discussions for each of the seven categories of participants. In the first session, I used the DVD on *Life Choices* and the one containing subminimal cuts to investigate how the urban youth experience HIV and AIDS messages in

the programmes developed for educational purposes. Participants were encouraged to make reference to similar presentations that they had seen before. In the second session, the DVD containing *Secreto D'mour* was used to investigate how the youth experience HIV and AIDS messages in programmes that are developed for commercial purposes. Participants were allowed to make reference to other television soaps that they had seen before. The findings on how the youth experience each of the programmes is presented separately (refer to 4.3.1 for *Life Choices*, 4.3.3 for subminimal cuts, and 4.4.1 for *Secreto D'mour*). In the final discussion however, the three types of programmes are analyzed together.

The table in 4.1 below shows the composition of the participants in the focus group discussions.

Table 4.1: Composition of the participants in the seven focus groups

Group	Basic characteristics of the group	Gender	Number	Age bracket
Community youths	Non-school goers who spend a lot of time watching television and films in video halls.	Males and females	4 males & 4 females	16-24
Community youths	Both continuing students and graduates working on HIV and AIDS youth projects.	Males and females	5 males & 5 females	20-24
Community youths	Graduates, different occupations, some not yet working.	Females	5 females	22-25
High school students	Both commuters and residential students.	Males and females	5 males & 5 females	15-18
College students: Kibuli Teachers College	Finalists: They interact with urban schools' students when they go for their teaching practices.	Males and females	5 males & 5 females	18-21
Uganda Christian University students	They are involved in on-campus and community-based HIV and AIDS awareness campaigns.	Males and females	4 males & 5 females	18-24
Makerere University students	They are involved in drama and film making and in the process interact with youth and adults of different categories	Males and females	2 males & 4 females	18-24

The table above shows that there were seven categories of participants involved in the focus group discussions. As already indicated above, there were two discussion sessions for each of the groups; One was based on educational dramas and subminimal cuts, and another was based on television soaps. The age of the participants was between 15 and 25. Out of the 58 participants, 25 were males and 33 were females. There was a problem getting males into the focus group discussions. This is because of the engendered sex-role stereotypes in Uganda. The drama and the television soaps are considered to be programmes for females. Males prefer watching fast moving action-based films, football and wrestling.

The common languages used in this study area are English and Luganda. Participants could follow the drama in English and in Luganda. They were, however, encouraged to express their views in a language of their choice.

The discussion in section 4.3 below explains how the youth experience televised HIV and AIDS education drama and subminimal cuts.

4.3 TELEVISED HIV AND AIDS EDUCATION DRAMA AND SUBMINIMAL CUTS

The presentation of the findings in this section focuses on investigating how the urban youth experience televised HIV and AIDS drama and subminimal cuts developed for educational purposes. I used focus group discussions, personal interviews and participant observations to collect data.

4.3.1 LIFE CHOICES AND OTHER TELEVISED EDUCATION DRAMA

Although I expected the participants to have seen a number of television-based HIV and AIDS drama, I made arrangements to show *Life Choices* to facilitate the group discussions. The participants, however, brought examples of other televised drama that they had seen before to illustrate their views. The drama that they mentioned frequently included; *Time to care* and *Ndiwulira* (the latter is in a local language, Luganda. it means “I will respond later”. It refers a legendary a stubborn person who refused to listen to warning to abandon a risky location. He refused to respond in time and got burnt in a bush fire), *Gampissi* (meaning lust equivalent to that of a hyena).

Life Choices is an interactive film on HIV and AIDS made out of several drama scenes. Those who produced it intended to develop a tool to enable youth leaders, peer educators and social workers to stimulate discussion between young people about important issues such as decision making, transactional sex, HIV and AIDS, early pregnancy and forced marriage. The producers aimed to develop a tool which is unique in its approach, interactive, fully participatory and suitable for active learning experiences. It was meant to benefit youth between 16 and 25 years.

4.3.1.1 Motivation for selecting *Life Choices*

I decided to use this particular film in my study because it addresses so many dimensions of the people affected and infected by HIV and AIDS. For instance, the film addresses causes for HIV transmission, HIV testing, openness, stigma and discrimination, support, care, positive and negative living. Unlike other HIV and AIDS educational dramas, it was specifically structured to facilitate learning.

The film was developed by local and international professional HIV and AIDS educators. The team included the German Technical Corporation and the John Hopkins Centre for Communication Programmes. My expectation was that the film would address the experiences of the youth on matters of HIV and AIDS, given the professional expertise involved in developing it.

The film is not a continuous story. The various scenes in the film are meant to be scenarios which represent different decisions that youth make in life and the outcomes that are to be expected if the decisions were taken. For instance in one scene, Joyce refuses to have sex and in another scene, she agrees to have unprotected sex. The two scenarios have different consequences. In this respect, Joyce appears in all the scenes and is portrayed as making different choices and meeting different consequences.

The film consists of sixteen scenes that tell a story of Joyce, a seventeen-year-old girl who is struggling to stay at school as her parents are very poor. The reality of having to survive in her difficult circumstances presents challenges. The story was developed for young people and was meant to reflect their particular problems and the situations they face in real life.

Life Choices is not an ordinary film. It is an interactive tool which requires participants to make their own choices. How the story progresses depends on the decisions viewers make. It was serialized in such a way that an index guides the viewers to choose a scene they wish to see. Watching *Life Choices* from the beginning to the end means watching several scenes. For each scene, detailed discussion and various activities are needed before the participants can choose the next scene to watch.

Life Choices is intended to create an active thinking process and to concentrate young people's minds on the consequences that their decisions can have in real life. The novelty of the film is to involve the viewers actively in the decision making and, to some extent, determine their own future. The film does not confine itself to the HIV and AIDS epidemic, but takes a real life approach and touches on many related topics such as relationships, early pregnancies, alcohol abuse, schooling and marriage.

At the end of every sequence in the film, one critical question is highlighted and the groups are called upon to make a life-important decision. It is expected that different groups are likely to take different routes and give different opinions.

4.3.1.2 The story set-up and the structure of *Life Choices*

Life Choices comprised 14 scenes. The producers intended to demonstrate that the different choices that young people make in real-life situations have either positive or negative connotations. The different scenes depict various scenarios relating to the likely effects of a particular choice. In order to show the pattern of the presentation, I begin by introducing the main characters and describing the story.

(a) The main characters

Joyce: She is the key character, born in an impoverished family which cannot afford to give her the basic necessities of life. She courts two lovers each of whom tries to demand sex. She takes different decisions which end up having different consequences.

Jackie is a friend to Joyce. However, she gives her misleading advice. She advises Joyce to go with KC. At the same time, Jackie discloses that KC is infected with HIV and AIDS. It appears that the intention of having Jackie in the story is to indicate that the guidance that peers give could occasionally be misleading.

Kasozi is a student in the same school that Joyce attends. He is a star footballer and is adored by many students at school, particularly the girls. Kasozi comes from a well-to-do family. He tries hard to win over Joyce by promising money for school fees. Kasozi also promises to request his father to get a job for Joyce.

KC: He is a cyclist who earns a living by transporting people on his motorcycle. KC is the name used in the film. Perhaps it came out of an abbreviation of his names (there is no indication of full names in the film). He gives Joyce free rides to school. In return, he demands sex.

These two people, Kasozi and KC, represent the attractions that young girls face as they grow up. They are approached by fellow students who wish to start a relationship with them. The girls are also approached by working men like KC, occasionally known as *Sugar Daddies*, who promise to give the girls the material things needed in life.

Jeff is a friend of KC. He is also a cyclist, who earns a living by transporting people using the motorcycle.

Okello is a friend to the father of Joyce. In one of the scenes, he is invited by the father to consult with him about the matters of Joyce. In another scene, he is chosen by Joyce's father to marry Joyce. He is already married but he is persuaded to take on a second wife. In the film, he is shown to be drinking alcohol with the father of Joyce. It is during the drinking sessions that the father of Joyce proposed that he should marry Joyce.

Faith: She is the co-wife of Joyce in the scene in which Joyce accepted to marry Okello.

The father of Joyce was jobless and therefore he could not take care of Joyce. When Joyce's mother died, the father became more irresponsible. He was constantly drunk which explains why he gave up his daughter to a friend who used to drink with him.

The combination of Joyce's father and Okello in the film seems to reflect the conspiracy that leads young girls into disastrous marriages. The father was willing to give away his daughter

to a man who was obviously not good for her. This can perhaps be attributed to regular drinking of alcohol.

The aunt is a sister to the father of Joyce. She is very concerned about Joyce and she tries her best to see that she gets well. She resists the arrangements made by her brother to have Joyce married to Okello. She is ready to take the father of Joyce to the police if he continues with his plans.

The mother of Joyce is the breadwinner of the family. Given that the father of Joyce is jobless, the mother tries to run a small business to earn a living. Before long, she died and this meant that the business was going to stall. After her death, Joyce could not continue with school (From the point where Joyce's mother died, the reference to Joyce's parents applies to the father only).

(b) The social environment

The family from which Joyce came was very poor and lacked the basic necessities. It appears that poverty and deprivation which characterized the family was meant to set a background to the fact that Joyce succumbed to temptations that led her into transactional sex with KC.

The school which Joyce attended was of mixed gender (for boys and girls). These types of schools are common in Uganda. In such schools, students develop love relationships which end up in sexual intercourse.

(c) The story set-up

In the following section, I narrate the story and briefly describe the socio-cultural context in which the events took place. This is intended to set a background against which the perceptions of the participants would be understood.

Joyce's family is very poor. Her father is jobless and her mother has been sick and unable to run her small business. She struggles to look after Joyce and to keep her in school. The parents can hardly provide her with the money for transport to school and they also fail to

provide other basic necessities. Amidst these constraints, two men approach her for sexual relationships. One of them is KC, a cyclist transporter. The second one is Kasozi, a student and football star within the school that Joyce attends. She seems to be genuinely in love with Kasozi, a fellow student. She is however, compelled to have a relationship with KC because he could regularly transport her to school, using his motorbike. Her friend Jackie, on the other hand, encourages her to consider KC as a partner because he is independent and working. Jackie describes Kasozi as a mere schoolboy, depending on parents.

The film begins when Joyce gets two invitations: one is from KC inviting her to a bar. The second one is from Kasozi inviting her to a football match. This was just the beginning of the challenging situations that Joyce faced. She had to make fundamental choices. There are two alternatives (choices) that Joyce had; either to go to the bar and meet KC or to go to the football match and meet Kasozi. Even after making any one of the 2 major choices, there were sequential choices that she had to make. The various scenes are described below (there is no particular order followed in the film. The viewers, guided by an index, decide on the scene to see).

Joyce and her parents: At Joyce's home, the family is very poor. They cannot even afford to buy sugar. The father is jobless and the mother, the only bread winner, has been sick and unable to run her small business. However, her mother struggles to keep Joyce at school. Joyce asks her parents for money for transport but the money is not available.

On her way, she meets her friend Jackie. Both of them find two cyclist transporters, KC and Jeff who ride them to school. Joyce gets a free ride. Outside the school, KC explains his feelings for Joyce and invites her to meet him at the bar the following evening. Joyce has doubts about going out with a simple cyclist. Her friend Jackie encourages her to go ahead with a relationship with KC. Inside the school compound, Joyce and Jackie meet Kasozi. He invites both of them to a football match to take place the following day.

Joyce goes to the bar: At the invitation of KC, Joyce decides to go to the bar. At home, she lies that she is going to visit her aunt. She finds KC sitting with a bar maid but she does not complain. She simply asks to know who the lady is and KC informs her that the woman is a barmaid. In normal circumstances, it would be difficult for the man to convince his lover that there is no affair with a woman that he is sitting close to.

At the bar, Joyce takes many bottles of beer but she remains sober. This was rather surprising because Joyce was taking beer for the first time. Joyce prepares to leave to go to the aunt's place where she was meant to stay for that weekend. KC convinces her to stop by at his place (presumably to have sex). Three scenes emerge out of this; one in which they do not have sex, another in which they have protected sex and another in which they have unprotected sex.

Joyce and KC do not have sex: Joyce refused to have sex with KC. This scene runs parallel with the one in which she refused to have sex with Kasozi. The refusal to have sex with the two men culminated into both of them abandoning her. This period coincided with the time when her mother had died. Joyce can no longer go to school because the mother who used to provide her with the school fees is dead. She starts running the small business that her mother left behind. These two skits lead to the scene in which Joyce's father proposes that she gets married to Okello.

Joyce and KC have protected sex: Within KC's apartment, KC and Joyce have protected sex. This follows a serious argument in which KC tries to persuade Joyce to have sex without using a condom. Joyce threatens to go away if KC insists on having unprotected sex. KC finally agrees to have protected sex. Many girls succumb to pressures from men to have unprotected sex with them. This is common with cross-generational sexual relationships. Girls usually fear to decline unprotected sex.

KC Agrees to have an HIV test: Joyce and KC go for an HIV test. Joyce tests HIV negative while KC tests HIV positive. KC gets upset about his condition and does not understand why he was HIV positive while Joyce was HIV negative. He tries to console himself by claiming that the results are false. He gets disturbed by the fact that Joyce is calm. Later, Joyce suggests that they both go for counseling.

KC refuses to have an HIV Test: Joyce convinces KC that both of them should take an HIV test to establish their status. However, after reaching the medical centre, KC changes his mind and says that it was of no use to take the test. He indicated that he did not need an expensive equipment to show him that he is HIV negative. Joyce however, decides to proceed with the testing.

Joyce and KC have unprotected sex: Joyce gives in to having unprotected sex with KC. A few weeks later, Joyce learns from her friend Jackie that KC could be infected with HIV and AIDS. Joyce goes to the medical centre for an HIV test. She is devastated to hear that she is HIV positive. The counselor recommends that Joyce tells her boyfriend that she has tested positive, and that both of them should go for counseling.

Joyce joins a counseling club: Joyce decides to join the counseling club where she shares her experience with other young people. She became an example of a person living positively with HIV and AIDS. She gets enough courage to approach KC and advise him to go for testing and counseling. KC rejects the advice and he decides to go on with his normal life.

Joyce does not join a counseling club: Joyce goes on the rampage and begins to dress provocatively to arouse men sexually. She is going out with any man that comes her way, regardless of age. Joyce's aunt offers to take her back to school and advises her to go for counseling. She declines the offer and refuses to go for counseling. She goes on with her life.

Joyce goes to the football match: At the football match, Jackie informs Kasozi that Joyce is going out with KC. Joyce finds them talking and demands to know what they are talking about. Kasozi also demands to know why Joyce meets KC and why she accepts his free rides. Joyce reassures Kasozi that she has no love relationship with KC. She reminds Kasozi to get her a job so that she gets enough money to keep her comfortable in school. Kasozi indicates that he would get for her a job on two conditions; that she remains faithful to him and that she sleeps with him.

Joyce and Kasozi do not have sex: Joyce resists the demands of Kasozi even when she is desperately in need of money. She declines the offers of money and a job as long as the offers are attached to having sex with Kasozi. She explains that both of them were still young and would not manage to look after a baby in case she conceived. She is also concerned that being a football star, every girl would pursue Kasozi. In disappointment, Kasozi gave up on having the relationship with her.

It is a common practice in Uganda for the males to expect to have sex with their lovers. Many of the young men believe that there cannot be love without sex. When Kasozi

demanded sex, he was doing so within the framework of social expectations. Perhaps what may be surprising is the reason given by Joyce for refusing sex: The only reason she gave was fear of pregnancy. She did not mention HIV and AIDS which appears to be more dangerous.

Joyce and Kasozi have unprotected sex: The scene begins by showing that Joyce and Kasozi go for an HIV test at a health center. The results indicate that both of them are HIV negative. With a lot of excitement, they decide to celebrate by having unprotected sex in the bush. Having sex in the bush is not uncommon in many parts of Uganda. Some youth have sex on the beach when they go for outings.

Joyce expresses worry that she may conceive but Kasozi assures her that he has the capacity to look after her. Joyce gets pregnant after the intercourse. Two parallel sub-scenes emerge out of this. One in which Kasozi accepts the pregnancy and one in which he resists responsibility for the pregnancy.

Kasozi accepts Joyce and her pregnancy: When Joyce tells Kasozi that she conceived, he is not worried. He promises that his family would take care of her and the baby. Joyce's parents received the information with calmness. They are willing to talk to the parents of Kasozi about the matter. Within this particular scene, Joyce's mother had not died.

Most young men in Uganda, particularly those in school get scared when they are told by their lovers that they are expecting a baby. In many cases, they advise the girl to abort. Occasionally, they disown the pregnancy altogether giving strange excuses. It is also out of context for the parents of either the boy or the girl to take pregnancy lightly. On the side of the girl, she may be sent away from home.

Kasozi rejects the pregnancy: When Joyce tells Kasozi that she is pregnant, Kasozi instantly suggests abortion. She refuses to have an abortion upon which Kasozi tells her to be on her own. She is sent away from home by her father. She threatens Kasozi with legal action if he refused to take responsibility for the pregnancy. She reasons that she was 17 years of age, meaning that Kasozi could be convicted for defilement. Kasozi feels threatened and decides to reconsider the matter.

The refusal of Joyce to have an abortion can be looked at from two angles. First, many girls would be willing to abort so that they do not face the wrath of their parents. In many cases, what they lack is money to have the abortion. When the money is given to them by the boyfriends, they could go on and abort. On the other hand, abortion in Uganda is not safe at all. Many girls get complications during abortion and many of them end up losing their lives.

Joyce resists marrying Okello: Joyce's father suggests that she gets married to his friend, Okello who offers a dowry of one million shillings and four cows. Unwilling to get into marriage with Okello who is already married, Joyce runs to her aunt to ask for assistance. The aunt intervenes and stops the marriage. The aunt threatens legal action against Joyce's father if he continued with the marriage arrangements. The aunt succeeds in getting her a job at the local health center as a receptionist.

Forced marriages are a common feature in many parts of Uganda. The viewers would naturally understand the context if Joyce married Okello. In normal circumstances, the aunt may not have a big voice in the family matters of her brother and it would be a rare feature if the aunt took her brother to the police. Besides, the aunt would be expected to support the marriage arrangements because she would take a share of the dowry.

Joyce marries Okello: When Joyce marries Okello, she is mistreated by her co-wife (Faith) upon which the two develop misunderstandings. Okello attempts to reconcile them but he fails. Joyce decides to run away but as she leaves with her packed bags, Okello intervenes and convinces her to stay. He indicates that if anyone has to leave, it would be Faith.

Polygamy is a common feature in Uganda. In some cases, two women or more could be made to stay in the same house even when it is tiny. It is also common for the husband to side with the new wife.

The appearance of the house where Okello stays with his two wives depicts a very impoverished home. It would not be believable that Okello managed to pay the dowry which was indicated in the film.

The summary of the various actions in the film is shown in the table 4.2 below:

Table 4.2: Comparison between the consequences of good and bad choices in the film

	Joyce goes to the bar		Joyce goes to the football match	
	<i>Good choices</i>	<i>Bad choices</i>	<i>Good choices</i>	<i>Bad choices</i>
1	Joyce and KC do not have sex	Joyce and KC have sex	Joyce and Kasozi do not have sex	Joyce and Kasozi have unprotected sex.
2	Joyce and KC have protected sex	Joyce and KC have unprotected sex	Kasozi accepts Joyce and her pregnancy	Kasozi rejects Joyce's pregnancy
3	KC agrees to have an HIV test	KC refuses to have an HIV test	Joyce resists marrying Okello	Joyce marries Okello
4	Joyce joins a counseling group	Joyce does not join a counseling group		

The table above illustrates the various scenarios in *Life Choices*. There are two main sections in the film representing the two biggest decisions (choices) that Joyce made. In one of the sections Joyce decides to go to see KC in the bar instead of going to see Kasozi at the football match. In the second section, Joyce decides to go to the football match to see Kasozi instead of going to see KC in the bar. Under each of the big decisions, there were subsequent choices that Joyce made. These choices are categorized as good or bad choices

4.3.1.2 Participants' perceptions of HIV and AIDS messages in *Life choices*

The focus groups' discussions and interviews centered on the representation of real life situations by the various scenes in the film. Participants in the various groups had varied perceptions of the scenes and they gave reasons for their perceptions. My interest was more on analyzing the arguments presented for the various perceptions than on issues of common perceptions. In the discussion below, I begin by presenting what was considered realistic by the participants across the various focus groups.

(a) Reflections of real life situations

Participants across the seven groups described some parts of the presentation as realistic. In the following discussion, I describe the instances where participants considered the presentations realistic.

- i) The scenes in which Joyce had a love relationship with KC was considered realistic because it depicted transactional sex (refer to 1.4 for the explanation of the concept). Joyce benefited from the relationship with KC by way of getting free rides to school. Her parents could not afford to give her money for transport. Participants from the two universities (refer to section 3.4.2.4) noted that there are cases of university students maintaining love relationships based on material gains. They described the phenomena of “sugar daddies” and “sugar-mummies” in the life of university students.
- ii) The scene in which Joyce refused to marry Okello was considered realistic by participants who reasoned that in contemporary times girls have many options. They gave examples of girls who run away from their home due to forced marriages. They gave a number of reasons why they would do what Joyce did if they were in a similar situation. One reason was that Joyce was aware that Okello spent time taking alcohol and his social status was also poor. They added that Joyce knew that Okello was married and that his wife was difficult to stay with. Besides, Joyce probably knew that her aunt would be on her side if she refused to marry Okello.
- iii) The scene in which Joyce accepted to marry Okello was also considered realistic by female participants particularly the non-school goers. They reasoned that forced marriages are a reality in many parts of Uganda. Young women find themselves married to men who may not be of their choice. They also commented on the tendency for men to side with the new wives whenever there is a dispute within the polygamous homes.
- iv) Both male and female participants used their experiences and considered Joyce’s insistence on condom use to be realistic. This happened in two different scenes: When she was with KC and when she was with Kasozi. An observation was made that many girls do have the courage to refuse unprotected sex. A graduate female participant noted that men could easily surrender when women insist on maintaining their values.
- v) Participants considered the scene in which Joyce had unprotected sex, realistic. They indicated that anything could happen with young people who indulge in sexual intercourse. They noted that anything could happen with young people who

indulge in sexual intercourse. In many cases, because they do it stealthily, they do not seem to have enough time to prepare sufficiently for it. They gave this reason as the factor behind pregnancies and HIV and AIDS infections.

- vi) The talk on hurried sex prompted participants to deliberate on sex in the bush. One of the skits shows Kasozi and Joyce having sex in the bush. Most of the participants who have spent almost their entire life in the urban areas could not believe it was real. The participants who were brought up the countryside however, acknowledged that it is common to hear people talking about sex in the bush. One of the reasons they gave for infrequent bush-sex in urban areas is that there are not many bushes. Besides, there are many abundant facilities in urban centers where people could have sex. These include guest houses or residences belonging to friends. The graduate participants noted that there is a likelihood of having an equivalent of bush-sex among both urban youths. An example was cited of sex on the beach when young people go for picnics and retreats.
- vii) The participants considered as real, the scene in which Kasozi suggested to Joyce that she should abort. They argued that proposals for abortion are frequently advanced by young men who fear the responsibilities associated with parenting at an early age. They also fear the wrath of their parents of the female's counterparts.
- viii) Participants also considered as real, the depiction of Joyce's refusal to abort. The majority identified physical consequences of abortion as the main cause for the fear to abort. Some participants indicated that abortion was unethical and that it is considered to be murder.
- ix) The tendency by Joyce's father to blame her pregnancy on her mother was also considered to be typical of men. The fathers normally suspect that mothers get to know about their daughters unwanted pregnancies early enough but they decide to keep quiet. Girls agreed that it is true that mothers come to know about their daughters' pregnancies early enough, but because of fear of their husbands, they take their time before announcing it.
- x) The fact that Joyce tested negative to HIV and AIDS and KC tested positive was one of the depictions that was considered real. The explanation given, of the two having protected sex was considered sound. The participants with strong spiritual

background however, lamented that the scene that justifies the use of condoms promotes sexual promiscuity.

- xi) The majority of the participants observed that the portrayal of Joyce in two scenarios was convincing: Living positively after joining the counseling club and becoming reckless when she refused to join the counseling club. Examples were given by participants, illustrating how the two scenarios were real in life situations. They indicated that HIV and AIDS counseling enables people to live positively after knowing their HIV status. It was also noted that people who refuse to go for counseling behave in the same way as Joyce did when she refused to go for counseling. They noted that some of the people who are living with HIV and AIDS intend to spread it as a way of revenging on society. A high school student remarked that such people who do not wish to die alone argue that they were not born with the disease.
- xii) Both of the scenes in which KC refused to go for HIV testing, and one in which he tested HIV were considered possible in real life situations. It was noted that people like KC cannot handle the reality of having HIV and AIDS. A male participant who works in AIDS projects indicated that those who go for testing and prove to be HIV positive react to the information in the same way as KC did. Because they refuse to go for counseling, there is no way they can get medical assistance.

(b) Identification of conflicts and contradictions with social realities

As already indicated, the participants across the seven groups looked at the same drama from different perspectives. There were scenes that some participants described as unrealistic. These are discussed in the paragraphs below.

- i) The possibility of getting a job at the health centre immediately after running away from her father's house was considered unrealistic. One of the reasons given was that in real life, good things do not seem to be as simple as it appears in the scene. Besides, Joyce's age and her education level could not get her the type of job that was depicted in the scene.
- ii) Commenting on the same issue of getting a job after running away from the father, the Teachers College participants noted that if they had been the producers of the

film this scene could have been developed differently. The way it appears does not project expectations of the youth. Although the scene intended to convey the possibility for a young girl to resist sexual advances, the end product may not appeal to young girls. The participants would not consider Joyce to be successful because her interests were not on working at an early age but to complete school.

- iii) Another scene that was considered unrealistic particularly by male participants was that in the middle of difficult circumstances, Joyce declines offers given by Kasozi or KC. She had come to a level when she had to decide between surviving and perishing. In view of this argument, it was not easy for the participants to be convinced that she simply declined the offers. They reasoned that in real life, some of the girls who are given much of what they need by their parents also succumb to cheap attractions from men. A female student from the Makerere University remarked that the scene would have been more convincing if Joyce got the opportunity to study while working. She based this opinion on the fact that orphaned girls or those whose parents cannot support them financially study as they work.

This argument however, was countered by other participants who argued that producers might have wanted to communicate to the youth that in the midst of problems, the youth should accept the few opportunities that come by. They argued that the message was that the youth should stick to values other than looking at life with a materialistic mind.

- iv) Graduate participants noted that in the typical African society, it was not common for an auntie to challenge the father of a girl on issues of marriage. One of the male participants noted that in real life, the aunt looks forward to the marriage of the girls because they take a share of the dowry. Another one added that there are specific roles of the aunt that do not conflict with the decisions of the father. The aunties have their own children and domestic problems to worry about and have no time to fight unnecessary wars. They reasoned that the film did not depict the aunt as educated and therefore she could not advocate for girls' rights.

Those who considered the scene realistic however, remarked that there are many women activists in both urban and rural areas who sensitize people about the rights of the girl-child. Joyce's aunt may have been enlightened by the activists. She was

aware of the drunken state of her brother and knew that he could not make good decisions. In any case, she knew that Joyce was a minor. She also knew that Okello was married. Being a woman, she knew what could come out of such marriage for the young girl.

- v) Male participants from the Teachers college remarked that they did not expect Joyce's father to lose the battle on marriage so easily particularly after being promised money and cows. They indicated that the typical African men persist on getting what they want. One of the female participants however, responded that the father gave up the fight after being threatened with legal action if he pursued the matter further.
- vi) The indifference by parents of Joyce over her pregnancy was considered unrealistic. The expectation was that Joyce's parents would be upset by her pregnancy and would take Kasozi to the police on charges of defilement. Alternatively, they would demand a lot of money from his parents. On the contrary, the parents of Joyce were willing to talk to the parents of Kasozi. Participants who considered the scene realistic however, remarked that Joyce's parents, being poor; were bound to embrace Kasozi's rich family with gratitude. They added that many parents considered the final destiny of a girl to be marriage, not education. In any case, Joyce's parents were struggling to maintain her in school.
- vii) The high school students indicated that they expected to see the parents of Kasozi furious over their son's affair with Joyce and the subsequent pregnancy. They reasoned that it was not in the interest of the parents to see their son parenting at that age. They would also fear possible consequences like taking Kasozi to the police.
- viii) The scene in which Kasozi accepted Joyce's pregnancy was considered unrealistic by the majority of participants. The observation was that most young men, particularly those in schools, do not easily accept responsibility for the pregnancy of their girlfriends. They fear the consequences associated with pregnancy. One of the male nonschool goers remarked that Kasozi knew of Joyce's involvement with KC and therefore could disown the pregnancy.

- ix) The participants were not convinced about the way Joyce took the issue of pregnancy lightly. Female participants observed that most girls get terrified by pregnancy. In real life situations, girls do not easily report to their parents that they are pregnant (as shown in one of the scenes). They try to conceal the pregnancy until parents detect the first signs.
- x) The female high school students indicated that they expected Joyce to be miserable in a forced marriage to Okello. However, they were surprised that she appeared to be comfortable and happy.
- xi) Most of the male participants observed that it is not believable that Okello could afford to pay one million shillings and four heads of cattle in dowry. They noted the pathetic economic situation in Okello's home. They also observed that the scene depicted Okello to be idle and redundant (not working, listening to the radio during the productive hours of the day). Some female participants supported the view, adding that Okello could not afford to maintain a family of two wives.
- xii) Female participants across the groups noted that the appearance of Joyce in the scenes does not reflect the poverty and deprivation that was implied in the whole drama. The clothes and the ornaments that she had were considered to be of high class.
- xiii) Participants noted that they expected a hot argument when Joyce found KC sitting with the barmaid in the bar. The only thing that she did was to ask who the lady was and when KC gave an explanation, she appeared convinced. Participants who work in HIV and AIDS projects however, explained that in cross generational relationships, young women do not have the courage to demand explanations. They indicated that this was one of the factors why some females do not insist on protected sex.
- xiv) All Participants found it strange that Joyce took a lot of beer for the first time but she remained composed and even took a cautious step of insisting on protected sex with KC. They noted that consuming alcohol is one of the factors that intensify the spread of HIV and AIDS

- xv) Male participants noted that at the stage where the motor cycle transporters waited for passengers, there were only two motor cycles corresponding to the two girls who were coming for transportation. They considered this unnatural. In their experiences, there were supposed to be many cyclists at that stage such that when the two girls are taken, others remain.

(c) Gaps identified in the drama

Part of my interest was to investigate whether there were aspects in the drama that the participants considered to be lacking. The following are some of the gaps in *Life Choices* that were identified by the participants:

- i) Participants indicated that they expected the drama to depict the consequences of refusal by Joyce and KC to adhere to HIV testing and counseling. Instead, the drama seemed to show that Joyce and KC did not have regrets for their refusal to go for testing and counseling
- ii) Another gap identified by the participants was the lack of evidence in the film that Joyce was given enough sexual education and guidance, either at home or at school. They argued that there was no basis for judging Joyce for the mistakes she committed in her life. At her age, it would be unrealistic to expect her to handle difficult situations.
- iii) Makerere university students remarked that films that intend to influence behavior should indicate that individuals have a number of alternatives to choose from. It would then be clear that by making poor choices, an individual would face undesirable consequences. They noted that Joyce did not seem to have good alternatives. The scenes in which she tried to be brave and resist sex demands did not depict outcomes that youth would consider satisfactory.
- iv) Participants noted that the drama should have had scenes indicating that youth from rich families could also contract HIV and AIDS. The presentation was based on the fact that Joyce was from a poor family. They noted that viewers may conclude that economic issues were the only problems leading to behavior that can lead to HIV and AIDS infections.

- v) Graduate female participants noted the engendered stereotypes within the film. The film seemed to insinuate that women are cheap and materialistic, and that they are responsible for the spread of HIV and AIDS. Besides, when it came to pregnancy, the film did not indicate anywhere that the parents of Kasozi were bothered. This may suggest that pregnancy worries parents of girls.

4.3.1.3 Analyzing participants' perceptions of HIV and AIDS messages in *Life Choices* and other televised drama

The discussion that follows illustrates the way the participants perceived HIV and AIDS messages from *Life Choices* in particular, and other televised HIV and AIDS educational drama in general. The participants did not have uniform perceptions on the different scenes in the drama. However, individuals gave reasons why they perceived the scenes the way they did. What they seemed to have in common is the fact that their perceptions were based on experiences they had of HIV and AIDS and sexuality in general. These perceptions could have been influenced by real life experiences or exposure to media or by interactions with peers.

There did not seem to be clear-cut differences in opinions among participants based on differences in age, gender, educational levels and occupations. What seemed to emerge was that some individuals had more insights on particular issues like drama, film making and youth sub-cultures (I use the concept of youth sub-cultures to refer to the unique styles, tastes, slang, interest and expectations of the youth). The section below is a discussion of the themes that emerged out of the perceptions of the participants on life choices and other drama that they had seen before.

(a) Concepts of rewards and punishments

- i) The portraits of rewards and punishment in life choices do not seem to match with the experiences of the participants. For instance outcomes of Joyce's brave resistance to sex demands and her refusal to marry Okello were considered unsatisfactory. A student of Makerere University compared the depictions of rewards in the drama to the legendary tales that are used to teach young children

good behavior. By virtue of their age, these children do not challenge the simplistic nature of the cause and effect relationships in the tales.

- ii) With regard to punishment, the youth expected to see negative consequences for Joyce and Okello for their refusal to go for counseling. Reference was made to another drama, *Time to Care* which attempted to show that positive living and HIV testing were beneficial to the individuals. It appears that the participants expected the positive and the negative outcomes of specific behaviors to be clearly indicated so that messages on desirable behavior are made explicit.

b) Preachy storylines and Didactic messages

Observation was made that the storylines in television drama are characterized by dos and don'ts. They indicated that it is not different from what is done in the church, the classroom and at home. They are based on the belief that young people have to be guided all the time. Producers of the drama believe that they know all the answers to HIV and AIDS. One of the girls had this to say;

“You can hardly separate them from biology or CRE lessons. In the school, you sit down and listen to an individual teacher teaching things that were prepared long ago. I think there should be a difference when dealing with HIV issues. I do not think there could be definite right or wrong answers. Things keep on changing and new issues arise every day”.

During an interview, two participants working on HIV and AIDS projects indicated that drama is pre-constructed with stereotype opinions, biases and attitudes. The drama reflects a misconception that the youth acquire HIV and AIDS through voluntary acts of misbehaviour. The dramas did not seem to address the context in which a certain behavior could be considered unacceptable. For instance, it was argued that Joyce was caught up in situation that she could not control given that she had not been given sufficient guidance to live in a difficult situation.



c) Attention to details

The observations made during the focus group discussions and interviews illustrate the fact that the youth are critical when watching television. They identify small details which adults may overlook and ignore completely. For example, while watching *Life Choices*, females easily noticed the discrepancy between the dressing of Joyce and the poverty depicted in the drama. The males observed the status of Okello in relation to his capacity to pay a big dowry. These details may look trivial but the meaning they have to the young audience is big and may influence message reception and interpretation.

“Imagine a man who looks pathetic and miserable manages to pay that entire dowry. It is simply not convincing”

d) Direct messages and conclusions in the drama

One of the features noted was that messages in educational drama were very obvious and the participants do not actively engage their minds to come up with individual interpretations. Viewers are not taken through thoughtful moments that challenge them to struggle with interpretation of meaning. The answers are pre-constructed and abundantly provided within the drama. They gave examples of drama like *Time to Care*, *Ndiwulila*, and *Gampissi* (*Gampissi* refers to strong lust compared to that of a hyena). The drama is used as a tool to illustrate messages, not to enhance comparative angles of vision. Some of the participants however, commended the way *Life Choices* attempted to use various scenarios to present diverse and complex issues. It was observed that television soaps generally take the viewers through a process of contemplation which lead to debates and discussion.

(e) Messages detached from social reality

The comments and opinions of the participants seemed to indicate that televised dramas do not provide practical remedies for the challenges faced by the youth. The dramas are characterised by criticisms of the behaviour of young people. The participants were of the view that televised HIV and educational drama is used by adults to impose social control over the youth. A male participant from the High school commented on the plight of Joyce;

“The drama clearly illustrates the difficult situation that Joyce faced. In the circumstances, most of us would do exactly what she did”

A female participant in the same group added;

“Problems of the youths are more complex than what the health education campaigns seem to suggest. When you depend on those messages, you may think things are very simple”

This idea was also echoed by a Makerere university female participant;

“Take an example of generation-sex campaigns. What the campaigns do is to advise young people not to get sexually involved with older persons. The messages do not address the underlying factors that send these girls to sugar daddies and boys to sugar mummies. They think girls are simply interested in pleasure for the sake of it. It is true that some of them are, but people should not generalize”.

(f) Technical aspects of televised drama

Participants who seemed to understand the processes of film making explained why some youth do not like to watch local televised drama. Lack of adequate funding contributes to poor quality productions. In addition, the actors are not full time on the job. Because they are fully employed elsewhere, they do not seem to have sufficient time for training and practice.

Some participants however, appeared to like local television drama more than television soaps. They argued that some of the drama presents messages more clearly and they address the local context. Male participants indicated that one of the reasons why he likes local televised drama is that it is precise and developed by people who experience the challenges in society.

“Local dramas are not as endless as television soaps. For God’s sake where do you get the time to follow all those unending gossip stories?”

4.3.2 SUBMINIMAL CUTS

Two Recorded excerpts of Subminimal cuts used on television for HIV and AIDS awareness drives were shown to the participants who analyzed them alongside others that they had seen before. Both of these spots were done in English and in a local language. In the section below, I briefly describe them and later discuss the perceptions of the participants.

4.3.2.1 Missing the goal

During a world cup football match, young men are watching and a lady passes by walking provocatively, swinging her body. One of the young men tips his friends to look at the lady. In the process, a goal is scored. The other people in the audience who are not looking at the lady applaud the goal scoring. By the time the young men turn their eyes back to television, they have missed the opportunity to see the goal. They regret that they looked at the woman instead of sticking to what had brought them.

The female participants considered the description of young viewers to be accurate. They observed that it is common for men to abandon whatever they are doing and look at a woman passing by. They added on that occasionally, they make gestures that are embarrassing and annoying to the women. This was considered to be a realistic representation of real life situations. The females indicated that men should learn from the subminimal cut that they should stick to the issues that are important to them.

While some males agreed with the perception given by the females, they commented that the producer of the message put undue stress on missing the goal. The producer should have known that during world cup matches, goal scoring is replayed so many times. Those who miss it could see it again. It would have been very regrettable if what was missed could not be recovered. One of the males among the community non-schooling group commented;

“It is no big deal man. You know so well that those damned goals are replayed many times over. It is those swinging hips that cannot be replayed. De guys were right. The optical was worthwhile noting”.

They indicated that the likelihood for the same people to look at the woman again if she passed by was high.

4.3.2.2 The caring father and husband

The second subminimal cut shows a man who is caring for his family. He is compassionate to the wife and children. The wife indicates that the man does not cheat on her.

Most of the male participants indicated that the situation depicted in the subminimal cut was idealistic, not representative of typical men. Some of the female participants agreed, saying that although it was desirable, it is very rare.

Some of the females confessed that they would prefer their men to behave like typical men who do things men do. One of the graduate female participants indicated that if she was to get married, she would not expect her husband to come back home early.

“I would be pissed off by a guy who comes home too early. I may need space to sort out myself. In any case, what type of man would that one be? I do not imagine... It is not even real”

Male participants observed that men would jeer at a fellow man who does not behave as a man. They would think that he is lacking something or has a problem. Both male and female participants observed that peer influence drives men into behaving like other men.

Comments on the above topic culminated into a general discussion of the broad media campaigns known as *Be A Man*, under which the Ideal father and husband was developed. It was hoped that by conveying virtues of fidelity, boys and men would reconsider the cultural and social norms that relate to marriage and relationships. The purpose of the campaign was to project a picture of an ideal man who does not cheat on his wife. Both male and female participants noted that the title of the campaign was misleading because in the social and cultural contexts, a Real man is one who proves his masculinity by having a number of wives or lovers.

Participants made reference to other subminimal cuts which they had seen before on television. They indicated that they were not different from the dramas in that they were giving instructions. They indicated that the common messages included; be faithful to one partner, use condoms, AIDS kills, not-before-marriage, and ‘abstain from sex’.

Describing other subminimal cuts, participants observed that they occasionally end up with unintended effects particularly if the design is poor. One male participant observed that the messages may result in intensifying what is being guarded against. An example is the marketing of condoms which convey sensational feeling among the audience which may generate the urge for sex.

4.3.3 CONCLUSION ON TELEVISED HIV AND AID EDUCATIONAL DRAMA AND SUBMINIMAL CUTS

The findings of the study reveal that as young people watch televised HIV and AIDS educational programmes, they perceive messages against accumulated experiences of real life situations. In view of that, they expect the messages to match with their understanding of youth culture, sexuality, and HIV and AIDS situation. Some of the televised programmes however, conflict with the youth experiences and expectations. When this happens, the programmes are considered unrealistic. This means that such programmes fail to correctly convey the intended messages. Some aspects of the drama however, are considered real and representative of real life situations. The youth find such drama both interesting and educative. The findings show that the youth have capacity to identify gaps and contradictions within the drama and in the subminimal cuts.

Televised HIV and AIDS educational programmes are complicated by a number of factors. There are challenges in message construction, storyline development and technical issues of film production. With regards to message construction in the drama, participants compared it with the way instructions are given in institutions like schools, the church and the family. Adults are accused of attempting to influence the youths, through the television drama, to adopt what the adults themselves consider to be acceptable behavior. The young viewers classify televised HIV and AIDS programmes as didactic, and this prompts them to ignore the intended messages. The youth try to resist what they consider to be social control by the adults. Using their experiences in television viewing, they interpret the genre in the programmes and determine that the intention of the producers is instruction other than entertainment. In particular, the audience interpretation of genre and the clarity of the intention make the television drama appear as if they are instructions.

On their part, young people also have their biases towards the locally made drama on HIV and AIDS. They are more inclined to watch television soap operas which are presumed to have better plots and sophisticated presentations. Given the limited funding base and other technical issues in the development the programmes occasionally fail to attract the youth. Nevertheless, there are a number of participants who admitted that they prefer watching locally made drama because of the proximity to socio-cultural contexts of society.

4.4 HIV AND AIDS MESSAGES IN COMMERCIAL TELEVISION SOAPS

The findings in this section deal with how urban youth perceive HIV and AIDS messages in commercial television soaps. I focused on television soaps that are not produced for educational purposes but which have HIV and AIDS messages.

The majority of the participants in the focus group discussions and interviews were viewers of television soaps and the majority had seen *Secreto D'mour*. This is one of the many television soap operas that featured on the Uganda television stations shortly before this study was done.

The procedure that I used in collecting data was similar to that described in section 4.3 above. The limitation was that the majority of the participants who had seen television soaps were females. A number of participants indicated that males do not enjoy watching television soaps.

With technical assistance, I managed to record episodes of *Secreto D'mour* that had HIV and AIDS content. These episodes were edited and compressed into a single DVD. I used the DVD during to focus the discussions on specific events in the story. This was one way of reducing the scope of discussion of *Secreto D'mour*. Participants were encouraged to make reference to other television soaps that had concepts related to sexual risk and responsibility.

4.4.1 MOTIVATION FOR SELECTING *SECRETO D'MOUR*

Unlike other television soaps that the youth are exposed to in Uganda, *Secreto D'mour* makes significant reference to sexual risk and responsibility. HIV and AIDS features prominently in *Secreto D'mour*. These concepts include; HIV transmission, HIV testing, counseling, care and support, HIV and AIDS stigma, openness, HIV discordance, and living positively with HIV and AIDS among others.

Secreto D'mour was watched by a very big number of people particularly females. The few who never watch it regularly seem to have got updates from their friends.

4.4.2 THE STORY SET-UP AND STRUCTURE OF *SECRETO D'MOUR*

In the section that follows, the central characters in the television soap are introduced. This is followed by the brief description of the story. The story which is described below brings out only the parts of the television soap that are related to HIV and AIDS. There are other episodes of *Secreto D'mour* that are left out. The programme was not developed for purposes of HIV and AIDS education. The depictions of HIV and AIDS in the soap are just part of the big storyline in the television soap. *Secreto D'mour* is one of the few television soaps shown in Uganda that has extended presentations on sexual risk and responsibility.

4.4.2.1 The main characters

Maria Clara is the central character in *Secreto D'mour*. She however, features only once in the plot that has HIV and AIDS themes. In those episodes, Browlio is the central character.

Browlio is a son of a rich single mother, Victoria. He is brother to Leonardo. He strives to achieve his desires through crooked means. Alongside his close friend Alexander, he has multiple sex partners many of whom are picked from bars. He engages in a transactional sex deal with a rich lady called Barbara. He agrees to kidnap Maria Clara (the main star in the soap) and to do evil things to her in exchange for sex with Barbara.

Leonardo is a brother to Browlio. He is caring, compassionate, and calm. He falls in love, and eventually marries a house keeper.

Victoria is the mother of Browlio and Leonardo. She is rich and has big businesses. She falls in love with Roshano, a young man of the age of his sons. While Browlio openly confronts her and requests that she stops the affair, Leonardo struggles quietly with the embarrassment. Under intensive pressure, Victoria declares that she would stop the affair.

Pelina is one of the multiple lovers of Browlio. She was a former wife to Roshano (the lover of Victoria). She gets to know that Victoria's sons disapproved of the affair between her and Roshano. She also knows that Victoria secretly continued to see Roshano. Upon this, Pelina blackmails Victoria, extorting a lot of money from her. Trouble comes when Pelina discloses to Browlio that she knew that Victoria was the lover of Roshano. She also discloses that she was once married to Roshano. In anger, Browlio confronts his mother to condemn her about the continued affair with Roshano. The mother, in disappointment, reveals to Browlio that Pelina was blackmailing her. In annoyance, Browlio attacks Pelina and rebukes her for what she did and later threatens to stop their affair.

Roshano is the lover of Victoria. He is also a doctor. He was formerly the husband of Pelina. The sons of Victoria are embarrassed that Roshano is in love with their mother. Roshano is the same age as the sons of Victoria

Barbara is a rich woman but very reckless. She hates Maria Clara and she is ready to do anything to destroy her. She gets to learn that her husband had fallen in love with Maria Clara.

4.4.2.2 The saga of HIV and AIDS in *Secreto D'mour*

The plot on HIV and AIDS begins with Pelina going for HIV testing. This follows consistent health complications that she experienced. She requests Browlio to take her to hospital but Browlio declines. Instead Roshano, the former husband, takes her. She is devastated on learning that she tested HIV positive. No amount of counseling, either from Roshano or the doctor, seems to calm her down. She requests Roshano to keep it a top secret. Roshano also took the tests but he was declared HIV negative.

Roshano later discloses to Victoria whatever had happened. The information then spreads like wild fire. Upon hearing this, Browlio decides to abandon Pelina but Roshano continues

to give her instrumental support. However, Roshano makes it clear to Pelina that he would not resume their affair.

Feeling rejected, abandoned and isolated, Pelina commits suicide by drowning herself in the sea. As the information continues to spread, people around Browlio start questioning his HIV status. Victoria, Leonardo, and Erasmus (manager to the gym owned by Victoria) advise him to establish his HIV status through testing. He is defiant and he embarks on harassing whoever suggests that he could be HIV positive. One of the victims of this harassment was Erasmus. Browlio stops him from working in the gym, accusing him of spreading rumors that Browlio HIV status. Browlio was equally rude to his mother and his brother. They had insisted that the only way of dismissing all the rumors was to go for HIV testing.

Browlio tests for HIV: Browlio went for HIV testing after intensive persuasions from his mother. Victoria had dropped the affair with Roshano so as to please him. It was now his turn to please her by going for HIV testing. The mother goes with him to hospital to keep him steady. He receives pretest and post-test counseling. Despite this, he goes wild and even faints on learning that he is HIV positive.

As he comes to terms with reality, he decides to mend his relationship with all those he had mistreated before. These include Maria Clara, Erasmus, and two men who compete for the love of Maria Clara. He agrees that Victoria could marry Roshano. He also encourages his brother Leonardo to marry his longtime lover (the house keeper). He had vehemently fought against the marriage on grounds of the latter's social status. The only person he does not make peace with is Barbara. He feels sympathetic for the people she continued to mistreat and decides to champion their cause. He devotes the rest of his time, energy and resources to make sure that she is convicted.

Browlio leads a positive life and follows the prescribed medical instructions. He gets moral, social and instrumental support from many people, including his former enemies. Alexander, his closest friend, decides to abandon him when he learns that he had contracted HIV.

Browlio comes across a young beautiful woman called Federico. They get attracted to each other and later fall in love. However, conscious of his HIV status, he hesitates to rush into an

affair. He seeks the doctor's advice on the matter. The doctor gives him assurance that HIV positive persons have a right to love and to be loved. The doctor advises Browlio on how he could keep his partner safe from HIV and AIDS infection.

Browlio decides to disclose to Federico his HIV status. He is surprised when Federica decides to continue with the love affair. She indicates that she knew how HIV is transmitted and could keep herself safe from infection. Victoria welcomes the idea of a proposal for marriage on condition that Browlio discloses his HIV status to her. The marriage takes place and they live happily for a number of years.

The turning point is when Federica is diagnosed with another incurable disease (not HIV and AIDS). As she agonizes with the disease, Browlio devotes all his energy to support her. The last part of the television soap depicts the relentless efforts of Browlio to save the life of Federica. She eventually dies and Browlio is devastated.

In short, there were four remarkable phases in Browlio's life; the years before infection, the realization that he was HIV positive, the meeting of Federica, and the death of Federica. Nevertheless, even after the death of Federica, something keeps him alive with energy; the hunt for Barbara. He wants to ensure that she faces the dock for the mischievous activities against innocent people.

4.4.3 PARTICIPANTS' PERCEPTIONS OF HIV AND AIDS MESSAGES IN *SECRETO D'MOUR*

Participants across the groups indicated that *Secreto D'mour* seemed to have more elaborated messages on HIV and AIDS than life choices. Those who reported to have watched many television soaps noted that they had not seen a television soap that dwelt so much on the issue of HIV and AIDS like *Secreto D'mour*. When asked to highlight the themes that they had noted in *Secreto D'mour* the responses across the seven groups were almost identical. As in the *Life Choices* however, individuals deferred in the way they attached meaning to the different themes on AIDS. The following concepts on HIV and AIDS were noted by the participants.

4.4.3.1 Irresponsible sex behavior

Participants remarked that the story of Browlio represented people who are reckless in their love relationships. They forget about the possible consequences without anticipating the risk of contracting HIV and AIDS. It was remarked that he should not have been surprised by his HIV status. Some of the participants indicated that people like Browlio who are from rich families may be tempted to think that their wealth could get them out of their problems.

4.4.3.2 Peer influence and role modeling

- (a) The role of peer pressure in the transmission of HIV and AIDS was also considered to be presented well in the film. Participants in the two university focus groups attributed the behavior of Browlio to negative peer influence. They gave an example of his friend Alexander who encouraged him to have many women. Other participants within the group disagreed with this argument, reasoning that peer influence would have affected Alexander and he too would have contracted HIV and AIDS. This challenge was counter-argued by a male participant who pointed out that in real life, people who mislead others into wrong directions may themselves proceed to do the right things.
- (b) Some of the participants in the high school commented on the way the film illustrated role modeling as a factor in HIV and AIDS. They suggested that Victoria provided negative role modeling for her sons. She fell in love with a man the age of her sons. She had no moral authority to restrain Browlio from irresponsible and mischievous behavior. The same observation was raised by a female student of the Teachers college. However, other participants who disagreed with this reasoning noted that if it had been the fault of the mother, Leonardo would also have been in the same category as Browlio. On the contrary, Leonardo was noble, humble and modest. They argued that the behavior of a person is determined more by the personality than by social influences.

4.4.3.3 Testing and counseling

The participants noted that in *Secreto D'mour* the concept of HIV testing was well developed. The youth who work in HIV and AIDS projects observed that many people in real life situations only test when they are compelled either by their parents, their love partners, their employees or by some other forces beyond their wish. The discussion was prompted by the fact that Browlio was not willing to take an HIV test. He agreed to test after intensive pressure. The majority of the participants managed to identify the benefits of testing from the different episodes of the television soap. For instance, it was pointed out that by following the medical prescriptions, Browlio lived positively and responsibly for a longer time than he would probably have taken. Some participants argued that hesitation by Browlio and Pelina to take HIV tests could be explained by fear of death. Both of them kept referring to death before and after they went to take HIV tests. However, other participants argued that the other big issue to them was fear of ostracism and isolation. For instance, Pelina was abandoned and isolated, and that is why she decided to committed suicide.

On the issue of counseling, participants commented that the reactions of both Browlio and Pelina after learning that they were HIV positive film illustrated the concept. Both of them were shocked and fainted when they were told. This demonstrated the fact that people need intensive counseling before and after testing for HIV.

4.4.3.4 Social and moral support for people living with HIV and AIDS

Participants remarked that *Secreto D'mour* managed to illustrate the importance of social and moral support given to people living with HIV and AIDS. The film made the illustration by comparing two people, Browlio and Pelina. Browlio received moral and social support from his immediate family and friends but Pelina had few persons to fall back to. This was the main reason why she committed suicide. The participants noted that some people may not commit suicide but their life span may be shorter if they lack support.

4.4.3.5 Behavioral transformations

The film was commended for illustrating that positive living could be a reality. Browlio made peace with his former enemies after testing HIV positive. For instance, he decided to give personal apologies to Maria Clara whom he had persecuted and also to the manager of

the gym whom he had fired from his job. He became positive about his mother's affair with Roshano and his brother's marriage to the former house keeper.

Comparing with what they had seen in *Life Choices*, and what they practically see in real life situations, participants noted that many people decide to go on the rampage and transmit other people with HIV after discovering that they are HIV positive. Examples were cited about people in real life situations who decide to infect others when they discover that they are infected.

4.4.3.6 Openness about one's HIV status

The issue of openness generated a lot of debate across all the groups. Although participants appreciated Browlio's openness about his HIV status to Federica, the question was whether it is practical in real life situations. A male graduate participant remarked that that it is not very easy for a person to confess such a thing to a new lover. He indicated that people who are responsible try other methods of preventing the infection of HIV to the lover. Another participant in the same group indicated that many people would have wished to be open, but they fear being isolated.

Female participants across all groups commented on Federica's acceptance to marry Browlio particularly after knowing his HIV status. They observed that it was a rare sign of devotion. They would not imagine that a woman would be safe with a man who was infected with HIV.

"In the beginning he could promise you that he will be careful. However, he may all of a sudden change and behave in strange ways. Men can be unpredictable"

Another one added;

"You know, you are dealing with an issue of life and death. It is not a simple STD that can be treated. You would not think of subjecting your life to a joke, a lousy gamble"

"This is because the scare of death is so spread and not limited to those who misbehave'. 'This is what we have been told so many times. Even if the condom is 99% safe, the remaining 1% is enough to take away one's life."

One female interjected;

“That is, without mentioning the possible accidents that may take place, say, the condom bursting or tearing apart during the process”.

The observation was that issues many need to be considered before getting into an affair with a person known to be HIV positive.

“It goes beyond knowing forms of transmission. It looks like there are many unknown facts about transmission of HIV”.

One of the female participants gave a practical illustration;

“Take an example of people who use tested methods of preventing pregnancy. Don’t they occasionally conceive? Remember the HIV virus could be more complicated than the other...ah ...stuff that causes pregnancy.”

They argued that the condom cannot be trusted totally. An illustration was given of people who use condoms for family planning but end up conceiving.

4.4.3.7 HIV discordance among couples

The participants also noted the concept of discordance which they noted was well developed. In one of the episodes, the doctor explains to Roshano and Pelina that one could be positive and another one negative. Roshano takes an HIV test and he was declared HIV negative. A graduate participant indicated that this issue was very important because many people in real life situations are ostracized and isolated when their spouses die of HIV and AIDS.

4.4.3.8 HIV and AIDS and death

Participants perceived the death of Federica as demonstrating that destiny of humankind can only be known by God. This view was based on the fact Browlio who was known to be HIV positive lived on, while Federica who was expected to live longer died of another sickness.

One participant who had religious inclinations reasoned that humans is predestinated to die at a particular date and time, regardless of what people do and what they suffer from. Other participants however, observed that such a perception could encourage reckless behavior. One of them observed that it is important that the scare of death remains as a deterrent to reckless behavior. Some people can only behave when they know that misbehavior could be fatal.

In conclusion, the findings show that the youth who participated in the study had viewed *Secreto D'mour* critically. It appears that the participants identified more concepts of HIV and AIDS in *Secreto D'mour* than in *Life Choices*. This could be explained by a number of factors. One of the possibilities is that the duration of television soaps is longer, and it becomes possible to develop concepts over a stretched time. The other possibility is that the youth found the messages existing in a commercial entertaining programme and they did not imagine that they were being preached to. Participants were not simply going through moments of amusement and entertainment. They managed to identify sexual risk and responsibility in the programme. Their arguments depicted sufficient level of concentration while viewing television soaps.

4.4.4 ANALYZING PARTICIPANTS' PERCEPTIONS OF HIV AND AIDS MESSAGES IN *SECRETO D'MOUR* AND OTHER TELEVISION SOAPS

In the following section, the way the youth perceive sexuality and HIV and AIDS messages in television soaps is discussed. As indicated before, there are not many television soaps that depict extensively, concepts of HIV and AIDS. However, given that HIV and AIDS spreads mainly through activities that centre on sexual relations, the participants managed to make reference to other television soaps that depict irresponsible behaviors that could accelerates HIV and AIDS. The way the youth experience television soaps in relation to HIV and AIDS education is discussed in the section below.

4.4.4.1 Representation of real life situations in television soaps

Comparing soaps with the televised HIV and AIDS educational dramas, participants noted that soaps look more real and tend to flow more naturally. In particular, it was noted that soaps communicate social messages through non-didactic formats. In the soaps, attempts are not made to make the messages too obvious as it appears in the educational television

dramas. A male student among the university (Makerere) group observed that young people may receive HIV and AIDS messages from the soaps without anybody pointing at it.

. *“Without attempting to preach, the soaps bring out the message loud and clear”*

In support of this view, a female participant in the same group commented that she could see more realistic messages on HIV and AIDS in *Secreto D’mour* than in *Life Choices* or in *Time to Care*.

In an interview, female participants explained what takes place during and after the viewing of television soaps. She commended the way television soaps generate debates. She indicated that each of the episodes end at a point when something critical is going to happen. This encourages the youth to speculate on what is likely to happen next. In the discussions that follow the episodes, individuals attempt to pass judgment on wrong doers and praise those who do the right things.

“Each of the episodes end at a point when something critical is going to happen. The girls start guessing what is going to happen next. They blame a wrong doer and praise the one who has done the right thing”.

One participant noted that the way relationships are shown on television soaps seems to be real. It is similar to what happens on the beach and other recreational centers. No one seems to hide anything about sex. She added that girls learn the tricks of men and men also get to understand more of women’s nature.

“Those chics you see in de soaps live a real life, one without pretence. They do what they want, at the time they want to do it. They speak out their heart. In real life that is what happens. But look at the dramas including the one you showed to us. Much of what we are told to do is far-fetched. Things simply don’t happen that way”.

4.4.4.2 Purposive viewing of television soaps

The findings seem to suggest that the youth watch television soaps not only for entertainment, but also to fill some information gaps in their lives. Many participants described the social distance between them, their parents and teachers. The few parents who could talk openly with children are very busy with work. Some teachers were described by participants as too shy to talk about sexuality. The Chaplains and Pastors are known to focus only on abstinence. Television soaps seem to be the only source of information about sexuality and relationships. The messages are provided in non-didactic entertainment programmes presented in plots that are entertaining. Many of the participants reported to be using television soaps to learn about norms for sexual behavior.

4.4.4.3 Sexual socialization in television soaps

Socialization is the process through which new (or young) members learn the attitudes, values, and behavior patterns of a society or group (Schaefer 2005). In *Secreto D'mour*, the participants could effectively answer such questions like; when is it appropriate to have sex? With whom is it appropriate to have sex? What are the risks entailed in having sex? What are the precautions that have to be taken when having sex? How should a person living with HIV and AIDS be treated? What happens when one tests HIV positive? The responses of participants in this study suggest that these questions were adequately answered by *Secreto D'mour*. Opinions were expressed about the moral aspects involved in Victoria's affair with a man the age of her sons. The girls were wondering whether she could get the moral authority to blame Browlio for his mischievous activities.

The observations of participants seemed to suggest that young people learn from television soaps about love and sexuality. A male high school student noted that television soaps give him answers to questions that he would normally fear to ask.

“In situations when we fear to ask embarrassing questions to our elders, or peers, we get answers from the soaps. You would not like your uncle to think you are in a hurry for a love relationship. They are too formal and they want to listen only to school related issues.”

Another male student added;

“Sometimes you do not want to ask questions that make you look so green. You may earn the nickname ‘Last American virgin’. Soaps give you some of the answers”

Female participants indicated that soaps give them an opportunity to learn the tricks of men. This prepares them for the challenges when necessity comes.

Through its story lines and appealing images, television soaps provide the information that young people look for. This includes numerous examples on dating, initiating sexual activities, and gender-appropriate sexual behaviors (Ward, Gorvine & Cytron 2002). Television soaps present an opportunity to convey social messages in an entertaining format. It seems that there is a neat balance between education and entertainment. Without knowing it, young people find themselves picking HIV and AIDS messages. The findings show that soaps create both realistic and unrealistic representations of love and sexuality.

4.4.4.4 Attachment to television soap characters

The strong attachment to the soap characters makes the programmes attractive to the youth. The females indicated that during the time that *Secreto D’mour* was broadcast, a relationship developed between them and the characters, particularly the central character, Maria Clara. A female participant among the teachers college youth observed;

“These characters become our friends, we admire the way they solve their problems and escape trouble. We have seen them in so many soaps. They are like our own sisters. At times you want to ask her a question and get advice on problems that you yourself are facing.”

With regard to HIV and AIDS education, self-efficacy is increased among the viewers if a character that seems to be in the same condition as the viewers is seen overcoming tempting situations. Participants admitted that they learnt a lot from the experiences of Browlio particularly the way he handled HIV and AIDS infections.

Para-social interaction is the relationship viewers develop with soap characters (Obregón 2005). The behavioral dimension of para-social interaction facilitates modeling and other media effects. This happens when there is perceived similarity between the situation depicted in the film and the situation faced by the viewer (Cohen 2001).

4.4.4.5 Role model in television soaps

Participants across the various focus groups managed to identify various types of models in *Secreto D'mour*. The variety of models helped illustrate the processes of behavioral change. Some of the models like Leonardo depict healthy values and behavior and they are seen to be rewarded. The negative characters like Browlio and Barbara model unhealthy behavior and antisocial values and they are seen to suffer as a result. The episodes also show that transitional characters are uncertain at first about which behavior to adopt. With time, they become convinced and begin to practice the healthy behavior and get rewarded. It is presumed that the audience is typical of those who are not sure at the beginning but as the soap ends, lessons are picked up. The audience is given the opportunity to watch several characters, rather than just one (Cody & Sabido 2008). Models illustrates to young people not only the processes of behavioral change (Galavotti, Pappas-Deluca & Lansky 2001), but also the costs and benefits associated with change (Bandura 2002). Female students in the high school and the teachers college indicated that the long time that *Secreto D'mour* lasted enabled them to bond with the characters. As suggested by Lacayo (2007), the bond enables them to reach a deeper understanding of messages being conveyed.

Other female participants reported having seen their friends modify their appearance, attitudes, values, talking and other features to look like the soap characters. Based on this principle of observational learning, HIV and AIDS educators and theatricals can use popular models in society to illustrate behavioral change processes.

4.4.4.6 Influence of television soaps on non-television viewers

Participants remarked that it was possible for individuals to follow the stories in television soaps without watching the programmes. This explained how students in the high school followed the stories given that they have irregular accessibility to television. Their friends at home write to them letters and describe the episodes. Besides, the commuters watch the programmes when they go back home in the evening. One participant among the high students group elaborated;

“It is very simple. Our sisters and friends at home write to us letters narrating the episodes. In fact, some of the girls do not have TVs at home but they know the whole story. In the evening after classes, we sit down and read the stories. Then the debates start; what is likely to follow, who will chuck who, who will win over whose heart? Who is to blame, who should go to prison? When it is time to go back home in holidays, we are as updated as those who have been watching it daily.”

Within the framework of the Social Influence theory, *Secreto D’mour* and other popular television soaps influence non-television viewers through interpersonal communication. The discussions that usually follow the viewing promote dialogue among the youth. The findings of the study indicate that students who did not practically view the programmes managed to follow the stories by indirect influence. This happened days and weeks after the viewing process. In *Secreto D’mour*, the discussions rotate around values such as fidelity, respect, and trust. The consequences of abandoning these values are subconsciously debated. The interpersonal communication that follows viewing of television soaps is an important concept that can be instrumental in developing televised HIV and AIDS education programmes.

4.4.4.7 Fantasy and fiction in television soaps

The participants were asked the extent to which they could rely on soaps for information on relationships and sexuality. They noted that some television soaps were exaggerated.

“Of course not; there is lots of fantasy and fiction and you can easily tell”.

During interviews and focus group discussions, live examples were cited of young girls who wanted to emulate the settings in the soaps. A female participant among the working youth commented;

“Actually those who experiment soap ideas get a lot of disillusionment with their love affairs. They think guys here could be as romantic. Perhaps they are when they are still conning you. Once the relationship gets off, they go back to their real selves. Chics who continue nagging end up being chucked”

A female participant in Makerere University remarked that television soaps create the impression that things are easy. She compared them with romantic novels.

“The soaps create the impression that things are pretty easy. The plots are typical of the stories that adolescents read in the Mills and Boons novels, or the legendary stories of Cinderella.”

A graduate participant who appeared to have seen a number of soaps indicated that the plots of television soaps are almost the same. She mentioned those that had the same patterns. They included; *Woman of my life, Passions, The Rich also Cry, Riviera, Wild Rose, Lorenzo, All about Camilla, and The Gardener’s Daughter*. The films are about young women from a humble families getting rich all of a sudden. Occasionally, they achieve it through attachment to rich men. Another female participant added that occasionally, a powerful man abandons a wife from a rich family and courts a humble girl from the village.

Describing a typical love relationship in the television soaps, a participant in the high school noted that in a typical story;

“The love affair starts well but develops into complications. Each of the two lovers is too proud to initiate reconciliation. Somehow a strange event happens which brings them together again and they resume the love and eventually get married”.

One of the students in the Uganda Christian University observed that those who experiment with television soaps ideas get a lot of disillusionment with their love affairs. They expect to be treated in the same way as those in the soaps and when it does not happen in the way they expect it to, they are disappointed.

These examples show that the participants are critical and could identify exaggerations and fantasy in television soaps. The youth may not be passive consumers of television soaps. They can identify instances where fiction and fantasy are depicted in the plots and storylines. They seemed to know how television soaps affect young people who do not distinguish

fiction from reality. The remarks and observations above indicate that those who participated in the study were critical viewers of television programmes.

4.4.4.8 Engendered sex-role stereotypes in television soaps viewing

One of the conspicuous features of the television soap is that they are seen mainly by females. There are few males who appeared to enjoy television soaps. It was noted by both male and female participants that some males declined to see television soaps because the programmes are known to be for females. Both males and females do not expect men to see television soaps. The males who were interviewed indicated that men do not like to watch programmes that are dominated by ‘gossip’ and which do not seem to end. They prefer short episodes with two hours duration at most. Besides, they are interested in action-based films which have quick conclusions.

Some of the female participants particularly in the two university focus groups indicated that television soaps, just like most of the other presentations, endorse engendered stereotypes. They uphold the notion that men are socially expected to be sexually insatiable. The more lovers they have, the more masculine they appear to be. They added that females appear to be comfortable with the sex role stereotypes. They indicated that television soaps endeavor to depict women devoting energy in trying to out-compete fellow women over a man. They focus on their physical appearance as a tool for enhancing their femininity. Even when the woman is very powerful financially, she would wish to prove her femininity by out-competing her rival.

The failure by females to challenge the engendered stereotypes leads to poor self-efficacy and reduced capacity to demand safe sexual practices. In this respect, the television soaps do not seem to empower females in the struggle against HIV and AIDS. On the other hand, by legitimizing the existing social expectations about having multiple lovers, the television soaps seem to reinforce the masculine norms which intensify the spread of HIV and AIDS.

4.4.5 CONCLUSION ON YOUTH PERCEPTIONS OF HIV AND AIDS MESSAGES IN TELEVISION SOAPS

By attaching the risk narratives to popular characters in the stories, the producers of television soaps have higher chances of captivating young audiences. The structure and set-up of television soaps could be emulated by HIV and AIDS educators to captivate the youths. Television soaps need to be studied by HIV and AIDS educators to identify the strength and limitations inherent in the genre. As suggested by Buckingham (2005), the programmes that young people enjoy watching should be investigated as sources of learning in their own right. Given that young people have limited sources of information on love, relationship and sexuality, television soaps are likely to play a role in sexual socialization. In the television soaps, role models that are almost identical to the viewers are used. By attempting to emulate what the role models do and how they overcome problems, the viewers are in a position to see the processes of behavioral change. While television soaps could have negative effects on some young people, findings of the study indicate that youth are capable of differentiating between reality, fiction and fantasy in the television soaps. This means that the youth are not passive recipients of commercial programmes on television. The findings suggest that many young people are purposive viewers of television soaps.

4.5 KEY INFORMANTS ASSESSMENT AND VALUING OF TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES

In this section, I address research question two of my study; how health educators, television staff, and theatricals value and assess televised HIV and AIDS education programmes. The term *key informants* will be used in this discussion to refer to health educators, television staff, and theatricals.

The data was obtained through personal interviews with health educators, television staff, and theatricals. Part of the data was also got from documentary analysis. The data was supplemented by my observations as a participant-observer. The insights provided by each of the three categories of staff did not differ significantly.

The Ministry of Health in conjunction with the Ministry of Education provides health care and information through Naguru Teenage Information Centre. In this task, the Uganda AIDS

commission and other governmental organizations provide the print and electronic media resources that are needed by the centre. The commission does not produce the films, but it coordinates activities of organizations that produce films. Health educators also include Non-governmental organizations that give services to young people in the form of behavioral change campaigns for prevention of HIV and AIDS.

Table 4.3 shows the composition of the key informants for the personal interviews.

Table 4.3: Composition of the key informants for personal interviews

	Key informants	Description of the organization	Gender	Number
	Health educators			
1	Programme officer: Naguru teenager information centre	End users of media products. Give services to teenagers: school and non-school goers	Males	2
2	Communication specialist: Health Communications partnership (HCP)	An international Non-governmental organization that facilitates production of materials and media for health education and communication	Female	1
3	Media specialist: Health Communications partnership (HCP)		Female	1
	Script writer and producer: Young, Empowered and Health (YEAH)	Non-governmental organization that develop dramas and other communication materials for HIV and AIDS campaigns	Male	1
3	Producer and trainer: Uganda television Institute	Privately owned television training institute for people who plan to work in television stations.	Male	1
4	Television presenter: National Television NTV	The station is one of the many privately owned television stations. It broadcast <i>Secreto D'mour</i>	Males	1
5	Audio-visual media officer: Uganda AIDS Commission (UAC)	The official governmental organization charged with prevention of HIV and AIDS in Uganda.	Males	1
6	Health educators: St Kizito High School	One of the high schools in the vicinity of Kampala city, with mixed, boys and girls, residential and commuting students.	Males and females	3
7	Education officer: Ministry of Education	In charge of educational television	Males	1
8	Script writers, and actors: Young Empowered and Health	Theatrical group that develop dramas with health messages	Males	2
TOTAL				13

The table 4.4 shows the distribution of the 13 key-informants who each of the category of participants was chosen with a purpose. Some of them are producers of the media materials like recorded dramas while others are end users of the same.

The information that I collected from the key informants is presented in one flowing presentation. I considered this to be the most appropriate way of presenting this information in a coherent pattern.

4.5.1 USING MEDIA TO ADDRESS THE YOUTH EXPERIENCES ON HIV AND AIDS

In order to understand the way the key informers' value and assess televised HIV and AIDS educational programmes, I found it imperative to investigate what they identify as challenges in communicating with the youth on HIV and AIDS. The discussion below describes what they consider to be the contemporary issues and challenges.

4.5.1.1 Saturation of HIV and AIDS talks in the media landscape

A number of respondents observed that one of the central concerns is that the youths have become used to the talk of HIV and AIDS and the talks seem to make no more impact. The problem of media saturation was stressed by the communication specialist from *Health Communication Partnership*. She pointed it out as one of the biggest challenges that she has seen in her career as a communication specialist.

Documentary analysis from the UAC indicates that even the funding levels for the education and communication campaigns have reduced. More focus is now put on curative measures. The dissemination of HIV and AIDS has consequently been left to poorly funded government departments and non-governmental organizations. This partly accounts for the technical limitations in the message construction.

4.5.1.2 Complacency about HIV and AIDS transmission

The programme officer at Naguru teenager information centre observed that one of the problems was that the youths knew that HIV and AIDS no longer necessarily kill and therefore the anxiety had reduced. Many of the youth are born with HIV and AIDS and they live with it as long as they get good medication. It was noted that the campaigns had to find new formats of message construction that does not depend on the fear factor.

4.5.1.3 Contradicting messages on HIV and AIDS

The communication specialist in Health Communications partnership (HCP) indicated that there are contradicting messages that are exposed to the youth by multiple organizations. Some of the messages are not professionally done. Consequently the youth get confused by contradicting messages. For instance, while some organizations are advertising condoms, others are castigating condom use. This is usually caused by differences in beliefs pertaining to what works, what is immoral, and what is feasible. The contradictions appear not only on television, but also on billboards, newspapers, radio, posters, fliers and dramas. In addition to this, it was noted that the youth read and get information from many sources. The people who conduct HIV and AIDS education may not estimate how much the youth know. The educators need to know how much the target audience knows so as to determine the approach to be used in the campaigns.

4.5.1.4 Multiplicity of television channels and the cost of airtime

The Media specialist in Health Communications Partnership observed that there are many television channels in Uganda making communication very expensive and less effective. If an organization wished to broadcast a television programme, all the television stations have to be contacted. Given that airtime is expensive, this is not affordable. The big costs of airtime on television force them to sponsor programmes that fit within the limits of their finances.

4.5.1.5 Existence of competing programmes on television

Information provided by the television staff indicates that a big number of young females preferred to watch television soaps. The males prefer watching European soccer, wrestling and other fast-action movies. This was confirmed by an Education Department staff whose explanation was that these programmes seemed to suit the interests of the youth. The programmes competed with the educational dramas with regard to the youth audience. Given that the youth had a variety of channels to choose from while at home, they would always watch what was exciting to them.

4.5.2 ASSESSMENT OF TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES

By interviewing the key informants, I wished to investigate how they assessed the televised HIV and AIDS educational programmes in the light of what they know about the experiences of the urban youth. The information provided by the key informants did not differ from what the youth had provided in the focus group discussions and interviews. The main themes that can be identified from the key informants are discussed below.

4.5.2.1 Fear arousing presentations

The programme officer at Naguru teenager information centre revealed that the youth dislike presentations that arouse anxiety and discomfort. They easily detect aspects of the presentations that contain the unwanted messages. As soon as they suspect that the presentation has aspects of discomfort, they lose concentration and divert their attention to other activities.

As suggested by Blumberg (2000), fear-provoking HIV prevention messages could lead to defensive coping strategies among youth who encounter such messages. What I discovered as a participant-observer at Naguru teenage information centre and St Kizito High school confirms what the key informants described about the youth. They occasionally avoid the entire programme when they suspect that it contains anxiety-arousing messages. They engage in distractive activities to avoid messages that generate discomfort.

Some of the presentations contain fear-arousing messages and depict bitter consequences of sexual behaviour. The messages appear to be blunt and scaring. Rather than achieving the intended objective, the presentation ends up arousing anxiety. In the minds of the youth, drama that is patronizing does not serve the intended purpose.

The analysis of documents at the Uganda AIDS commission reveals that at the beginning of the media campaigns in the 1990s, communications was characterised by fear arousing messages. Some of the key informants admit that this approach is still being used even when the likelihood of imminent death from HIV and AIDS has reduced.

4.5.2.2 Defiance and resistance to HIV and AIDS messages

During the process of data collection, I visited Naguru teenage information centre and attended some of the sessions in which the youth watched films and later discussed them. I noted that the youth occasionally disliked some presentations shown to them. The manifestations of discomfort included; constantly moving out of the viewing hall ostensibly to go to washrooms, conversing and making all sorts of fun during the video shows, and reading novels or newspapers during the shows. However, I realized that there were moments when they were all attentive and seemed to enjoy the show. I later got information from one of the youth that they did not like some presentations. He indicated however that those that were good attracted the attention of the youth.

The behavior of the youth at Naguru teenage information centre was similar to that of the students at St Kizito High school Namugongo. The school counselor and the entertainment teacher occasionally organize video shows that are aimed at educating the youth about HIV and AIDS. This is done under the guise of providing entertainment to the students during their leisure time. The identification of the genre of the presentation enables the students to recognize the intention of the presentation. Consequently, they lose interest in the presentation.

Information provided by the organizers of these shows indicates that the audience easily recognizes the intention of the show. According to them, the producers of the presentations do not make appropriate efforts to balance entertainment with education. The intended message is so abundantly signaled to viewers that they lose concentration immediately.

The Programme officer at Naguru teenager information centre noted that response of the youths towards unpopular films is reflected in the discussions that follow television or video presentations. Their participation is low and they give answers that are not related to the presentation.

4.5.2.3 Balancing stories

A producer and trainer at the Uganda television Institute described balancing stories to be parts of the drama that may not be considered relevant to the main storyline but are intended to provide entertainment and to spice up the presentation. He indicated that balancing stories add amusement such that the educative aspect in the story is not very conspicuous. The use of balancing stories is an attempt to hide the objective in such a way that the audience might not easily detect the purpose of the drama. These stories are not part of the main theme of the presentation. They may not have any educational value, but can be used to entertain the audience and keep them focused. He noted that the effectiveness of the balancing story depends on the resourcefulness and creativity of the producers. He observed that many of the producers fail to strike a balance and that is when the youth describe the drama as boring and didactic.

4.5.2.4 Bias towards adults' materials

An education officer at the Ministry of Education remarked that young people have biases towards what they consider to be adults' materials. A similar observation was made by the staffs who were interviewed at St Kizito Junior School. They explained that the youth suspect the dramas produced by adults. They believe that adults are old-fashioned and they do not understand the problems of the young. Young people believe that educational dramas on television are intended to shape the youth to behave like adults. The respondents who deal with young people on a daily basis indicated that the youth enjoyed frustrating anything that adults proposed. They indicated that the youth believe that adults are over-patronizing.

4.5.2.5 Preachy and didactic plots in educational dramas

The key informants admitted that it is true that educational drama is didactic and preachy. The producer and trainer at Uganda television Institute and the television presenter at the National Television NTV indicated that televised education drama appears to be focused on giving instructions and prescribing right modes of behavior to the youth..

The script writer and producer at the Young, Empowered and Health (YEAH) noted that adults' misconceive young people to be non-informed about social affairs. She explained that occasionally, the youth are regarded as people who behave irresponsibly and who take

risks but in reality, they seem to know much about HIV and AIDS. She noted that as long as the youths feel that their lifestyles are unacceptable to the adults, they will act defensively.

The communication specialist at Health Communication partnership gave views that were similar. She noted that as long as developers of the dramas have a skewed perspective of young people, their media products may not address the issues and challenges of young generations. She commented that the values and messages in the dramas should match with young people's world views.

4.5.2.6 Preference for television soaps

An education officer at the Ministry of Education observed that the youth liked the portrayals of sexuality on television soaps because it appeared to be in conformity with their understanding of sexuality. The programme officer at Naguru teenager information centre added that the youth were not comfortable with depictions of the conventional educational dramas on sexuality, relationships and HIV and AIDS. The educational dramas are considered to be old fashioned and unrealistic to the youth. According to the youth, educational drama leaves out a lot of details about love, relationships and sexuality. Given that young people have sources of information on sexuality from other media, it is easy for them to identify gaps in the televised educational programmes.

4.5.2.7 Youth' involvement in the development of dramas

The communication specialist at Health Communication partnership indicated that the best way to develop HIV and AIDS programmes for the youth is to involve them in all stages of media production.

The idea of working with the youth to develop educational drama has already been adopted at Young Empowered and Health (YEAH). They identify existing groups of young dramatists and work with them. The process begins by allowing the youth to generate ideas about a particular issue or problem. The youth group analyzes the problem from their angle of vision. The development of storylines follow and the organizers and the youth jointly develop the drama. The drama is pre-tested in different settings of the target audience and the adults. The purpose is to identify gaps and contradictions within the dramas so that they are corrected before the final product is developed. She observed that at this stage, they are

sure that the drama will address the experiences of the youth. The producer and trainer at the Uganda Television Institute also described the rationale for working with the youth in media development. He indicated that young people understand the experiences and expectations of fellow youth.

These observations do not differ from the insights generated by youth during the focus group discussions and personal interviews. By making reference to *Life choices* and *Time to Care*, the youth had noted that there are small details in film production that adults consider trivial but which may affect the perceptions of the youth towards the drama.

4.5.3 CONCLUSION ON KEY INFORMANTS' ASSESSMENT AND VALUING OF TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES

A number of insights were generated by health educators, television staff and edutainment theatricals. Almost all of them acknowledge that there is a need to develop innovative strategies for HIV and AIDS education. Some of the factors that necessitate the innovation are the growing complacency to HIV and AIDS and the media saturation. They also acknowledge that educational programmes on television face stiff competition from other programmes. These programmes include, among others, the television soaps.

The Key informants do not deny the fact that there are limitations in the televised educational programmes on HIV and AIDS. They noted in particular, the preachy and didactic messages and the messages that arouse fear and anxiety among the youth. It was noted that occasionally, the youth have bias towards the televised HIV and AIDS educational drama which they perceive to be prescriptive, old fashioned and unrealistic. The televised HIV and AIDS educational programmes often fail to address the youth's understanding of sexuality. Based on what they see on the television soaps, the youth identify information gaps in the televised HIV and AIDS educational programmes. Suggestions that were given to make the programmes attractive to the youth included the incorporation of balancing stories in the dramas and involving the youth in all stages of production of the drama.

4.6 APPLYING INSIGHTS GENERATED BY THE STUDY FOR TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES

In this section, I address research question three of my study: What knowledge, skills, attitudes and values suggested by the study, should be considered for televised HIV and AIDS educational programmes?

In trying to investigate how youth in Uganda experience televised HIV and AIDS educational programmes, I got information from the youth themselves and also from the key informers. In the section that follows, I discuss ways in which the findings of the study could be applied in developing televised education programmes on HIV and AIDS in Uganda.

4.6.1 ADDRESSING THE CHANGING FACE OF HIV AND AIDS

The presentations of HIV and AIDS educational programmes call for innovative transformations to respond to the changing trends in HIV and AIDS. Many of the key informers in the study observed that over the long period of HIV and AIDS campaigns in Uganda, the epidemic has changed its shape and manifestations. Among other things, improvements in health care have ensured that people are no longer dying at the early stages of the infection. A significant segment of the campaigns had been based on using the fear factor of imminent death caused by HIV and AIDS. Despite the change in the perception of risk, many of the messages are still constructed in the same way as before.

Whereas the unmarried youth used to be the most vulnerable group to HIV and AIDS, recent studies show that the young married people have also become equally vulnerable. The messages used to emphasise abstinence from sex. Given the fact that abstinence does not apply to the married, the focus in message construction has to change.

Development of televised educational programmes may call for use of the abundant opportunities provided by multi-media. Television soaps are likely to promote a wide range of cognitive, affective and behavioral dimensions for learning about HIV and AIDS.

4.6.2 COMPLEMENTARY FUNCTIONS OF EDUCATIONAL DRAMAS AND TELEVISION SOAPS

Although educational dramas and television soaps could appear to be different, findings of the study reveal that they could play complementary roles in the education of youth on HIV and AIDS. What may be needed is to examine the relative strength, opportunities and limitations of each of these programmes. For instance, according to the study findings, educational dramas and spot messages do well in providing general information and facts about HIV and AIDS. Television soaps may provide the simulated life situations to enable the youth examine the processes of behavioral change. Parents and educators leave out a lot of details about sexuality, love and relationships which could be provided by television soaps.

Televised HIV and AIDS educational programmes could be enriched by adopting aspects of television soap genre. The study findings reveal that one of the strengths of television soaps is the way in which risk narratives are attached to exciting plots and popular characters in the stories. By adopting this genre, televised educational programmes on HIV and AIDS are likely to captivate the youth. The programmes should use role models that address the experiences of the youth. The study findings indicate that the youth are likely to emulate what the role models do to overcome their problems.

One of the features that separate educational dramas and television soaps is the nature of role models. For instance, comparing *Life Choices* with *Secreto D'mour*, one realizes that in the latter, three types of role models are presented. These are positive models, negative models and transitional models. Barbara was one of the negative models; Leonardo (the brother of Browlio) and Maria Clara were among the positive models. Browlio started as a negative model but with time, he became transitional. In *Life Choices*, this pattern was not used. What the producers tried to do was to present multiple scenarios. The fact that the same characters acted in different scenarios could have confused the youth who are not very observant.

4.6.3 ENHANCING SEXUALITY EDUCATION AND SEXUAL SOCIALIZATION

As pointed out by Schaefer (2005), socialization helps new (or young) members learn the attitudes, values, and behavioral patterns of the society. While televised educational programmes are designed to provide sexuality education for HIV and AIDS prevention, equal attention needs to be devoted to providing sexual socialization. The television soap

genre should be adopted to perform this function. Study participants revealed that youth who attended single sex schools face problems when they join higher institutions of mixed genders. These institutions provide no orientations specifically meant to socialize them into living with opposite genders. Consequently, they fall victim to manipulations by fellow students or by sugar daddies and sugar mummies. This may subject them to HIV infections. Sexuality education ought to enable young girls and boys to fit into the environment that a new social environment. Televised education programmes that integrate the television soaps genre with the traditional sexuality education approaches are likely to provided sexual socialization. Both male and females participants in this study indicated that they learn a lot about the opposite genders from the television soaps.

Without using didactic approaches, *Secreto D'mour* enables the youth to answer questions like; when is it appropriate to have sex? With whom is it appropriate to have sex? What are the risks entailed in having sex? What are the precautions that have to be taken when having sex? How should a person living with HIV and AIDS be treated? What happens when one tests HIV positive? The answers to these questions may constitute part of what is entailed in sexual socialization.

4.6.4 IMPROVING ADULTS' PERCEPTIONS TOWARDS YOUTHS CULTURES

As proposed by Harding (2003), HIV and AIDS educators need to re-orient their educational philosophy and focus on empowering the youth. The youth should no longer be perceived as passive consumers of television programmes. Findings of this study confirm what was suggested by Buckingham (2003) that young people are active consumers of media. As they were watching *Life Choices* and *Secreto D'mour*, the participants reflected on their life experiences. This enabled them to determine whether the presentations were realistic or detached from reality. HIV and AIDS educators need to understand that the youth can competently use the symbolic representation of reality (Semali 2002). This competence enables them to construct knowledge about the world using the diverse programmes on television (Cortés 2001).

Improved perceptions towards youth's cultures entail uunderstanding of the experiences of the urban youths. The findings seemed to suggest that when they have alternatives, young people selectively seek information that is consistent with their needs and interests. They choose programmes that provide several functions that are central to experiences.

4.6.5 THE EVOLVING ROLES OF TELEVISION

In developing televised HIV and AIDS education programmes, it is imperative to note that most urban youth lack the frameworks of support to initiate them into adulthood. The socio-cultural networks that traditionally performed this function are less likely to exist in urban settings. A big section of the study participants indicated that they come from families that are nuclear, where parents are working. The diverse cultural heritage of fire-place riddles, legends, myths, proverbs and fairy stories are being replaced with television formats (Gerbner, Gross, Morgan, Signorielli & Shanahan 2002). In the absence of reliable venues for seeking information, television may help to fill information gaps for the youth on topics that parents and schools are not adequately discussing.

However, television should not replace the parents and the teachers. As suggested by Greenfield (2004), parents need to participate in viewing and discussing television programmes with their children. The few participants, who said they occasionally discuss sexuality with parents, indicated that parents use television as an entry point for the discussions. Without parents' participation, young persons may become more influenced by the *Cultivation Effect* of television viewing (Van Evra 2004). The Cultivation Theory explains that massive television exposure is responsible for shaping, or 'cultivating' viewers' conceptions of social reality (Gerbner et.al 2002). This could happen when television is the only source of information on sexuality for the youth. Participation of parents in television viewing may help moderate the way the youth perceive the messages.

4.6.6 TURNING LIABILITIES INTO ASSETS: USING TELEVISION SOAPS FOR HIV AND AIDS EDUCATION

It may be difficult to stop the youth from watching television soaps or other sex related programmes on television. These programmes are an indispensable aspect in the social life of urban youths. Other than trying to censor television, educators need to identify how such programmes could be used for sexual socialization. This depends on whether the educators and parents have enough knowledge on how young people experience sexuality content in the television soaps. As suggested by Greenfield (2004), a warm and communicative parent-child discussion about sexuality on television is considered to be important in reducing the harm which the content could have on the youth. From an interpretivist perspective,

educators need to consider the programmes that young people value and enjoy as sources of learning in their own right.

A number of studies have shown evidence of negative effects of the electronic media on young people (Van Evra 2004, Greenberg & Smith 2002, Pardun et.al 2005; Kunkel, et.al 2001; Shrum 1999). In this study, young participants also acknowledged that television soaps occasionally influence the behavior and style of some young people. The findings of this study, however, seem to suggest that the participants have the capacity to differentiate between reality, fiction and fantasy in the television soaps. This means that not all youth are influenced by the sexuality content on television. The participants appeared to be purposive viewers of television soaps because they managed to note themes of sexual risk and responsibility in *Secreto D'mour*.

In situations where the youth are likely to be influenced by the negative effects of television soaps, media literacy should be introduced. Media literacy is the ability to access, understand, and create communications in a variety of contexts (Sutter 2000). The concepts of accessing, understanding, and creating communications relate to the distinction between functional, critical and creative media literacy. The youth need to recognize and evaluate the messages in the media such that the messages can lead to constructive influence on behaviour. This is likely to help them to deal with the contradicting messages and conflicting role models that they confront on television. As observed by Kellner (2001), the 'pedagogy' of the media is likely to prevail over the influence that families and educational systems have over young people. This is evidenced by the fashion, hairstyle, artistic tastes, and social interaction that the youth adopt from the media. This pedagogy could be used constructively by HIV and AIDS educators.

4.6.7 ENHANCING CULTURAL ASPECTS IN TELEVISION VIEWING

In a typical African society, the pattern of viewing television programmes is communal other than individual. The socio-cultural environment provides for communal responsibility and collective decisions. In many cases, individuals defer to others for support in decision making. The group seems to be the basic unit where discussions precede decision making. Whereas a typical youth in the western world may be viewing television alone in the bedroom, typical Africans watch television in groups. Communal viewing is mandated not only by socio-cultural considerations, but economic factors. Given that only about 25% of

households in urban areas in Uganda have television (UBOS 2006), it follows that the few television sets are shared by neighbors, extended family members and friends. Watching television in groups facilitates shared perception of messages in televised HIV and AIDS programmes. The collective interpretation of viewers is influenced by shared history, experiences, language, and psychology.

4.6.8 SEX ROLE STEREOTYPES

Televised educational HIV and AIDS programmes need to address the engendered sex-role stereotypes. Findings from the study indicate that both the televised HIV and educational programmes and the soap operas propagate society's expectations of gender roles. These gender norms and social expectations are contradictory. Society expects girls to remain ignorant and innocent regarding sexual matters. For a young female to have knowledge on sex matters is perceived to be equivalent to promiscuous and ignorance is associated with purity. This trend needs to be addressed because females risk their sexual health because they must appear to be ignorant, and cannot openly seek information on sexuality.

On the other hand, males are not discouraged by the media to prove their manhood through sexual activity and aggressiveness. They are socially expected to seek sexual experience with a variety of partners. They are expected to be knowledgeable and therefore not expected to openly seek information on sexuality.

In *Life Choices*, female participants complained that the drama seemed to portray that women are responsible for transmitting HIV and AIDS. They wished to see a man also acting as poor and acquiring HIV and AIDS because of his loose sexual behaviour. In the television soap operas, males are portrayed as sexually insatiable, striving to have more and more women. The women are the sexual objects depicted as being hunted (Ward, Gorvine & Cytron 2002).

4.7 CONCLUSIONS

It is expected that the need for revitalized HIV and AIDS prevention strategies can be addressed by the use of television. Findings of this study indicate that while there are some gaps in the televised HIV and AIDS educational programmes, they are caused by insufficient understanding of how youth perceive and experience messages on the media. The development of the programmes has to be based on an understanding of how the youth perceive messages as they watch various programmes. Youth selectively seek information or content that is in accordance with their needs and interests. To this end, they are active consumers of the media. While it is true that soaps distort social reality and increase the sex urge among young viewers, the impact on the youths may not as big as it has been portrayed by *Cultivation* analysts. Discussions with participants indicate that young viewers could detect the fantasy, fiction and distortions inherent in television soaps.

---oOo---

CHAPTER 5 SYNTHESIS, FINDINGS AND RECOMMENDATIONS

5.1 THE AIM OF THE CHAPTER

In this chapter, I summarize the findings of the whole study and give the conclusions that tie up all chapters. I have discussed the major highlights of the findings, and given their implications. Based on these highlights, I proceeded to give recommendations. At the end of this chapter, I have also suggested the possible areas of future study.

5.2 SYNTHESIS

Without renewed focus on prevention, the decline in the prevalence of HIV and AIDS in Uganda realized in the past may not continue. The new trends in HIV and AIDS are characterized by, among others, growing prevention fatigue, the saturation of the media with HIV and AIDS issues, and complacency to HIV and AIDS due to improved treatment. The fear factor upon which the educational programmes were constructed in the past, no longer prevails. Consequently, there are signs of a possible resurgence of HIV and AIDS among the youth. The changing trends in HIV and AIDS call for revitalized preventive strategies and innovative approaches to HIV and AIDS education.

In this study, I have focused on the use of television as one of the innovative approaches to HIV and AIDS education for the urban youth. Through this approach, many categories of the youth could be reached. The edutainment aspect in television is expected to influence discussion around sexuality, and to shape knowledge, skills, values, and attitudes of the youth on HIV and AIDS issues.

I investigated how the urban youth in Uganda experience televised HIV and AIDS educational programmes. Some of the programmes are developed for purposes of HIV and AIDS education while others are television soap operas developed for commercial purposes. I wished to determine whether young people could identify HIV and AIDS messages in the commercial television soaps and found that the programmes young people enjoy watching could be a source of learning in their own right. This perspective is in line with the interpretivist and social constructivist that guided this study. It is based on the understanding

that truth cannot be exposed. The youth can only be helped to search for truths and meaning so as to create their own reality.

My primary aim was to investigate how youth in Uganda experience televised HIV and AIDS educational programmes. I answered it by addressing three secondary questions that are outlined below

- How do the urban youth value and experience televised HIV and AIDS educational programmes?
- How do Health educators, television staff, and theatricals value and assess televised HIV and AIDS education programmes?
- What knowledge, skills, attitudes and values suggested by the study, should be considered for televised HIV and AIDS educational programmes?

Each of these secondary questions constituted a major part of the research findings. This study report has been made in five different chapters.

In **chapter one**, I gave the historical background and the general context against which this study was undertaken. This became the basis for specifying the rationale, the aims and objectives for the study. In turn, the aims and objectives enabled me to come up with the questions that guided the research. I also stated what I considered to be the contribution of my study to knowledge. Within the same chapter, I made an outline of the entire study, specifying the epistemology and the methodological approaches that I intended to use for the study.

In **chapter two**, I examined studies and literature that are related to my study. I attempted to establish the relationship between the youths, urbanization, the media and HIV and AIDS. The literature contained an analysis of factors that make the urban youth susceptible to HIV and AIDS. These included psychosocial factors, socio-economic factors, urbanization, and the influence of the media. My discussion narrowed on the television which, besides being the focus of my study, seems to be the most abundant medium available for the urban youths. The literature described the two types of programmes that have potential to provide HIV and AIDS education to the urban youth. These programmes are television educational drama and commercial television soaps. The discussion also highlighted factors that influence the youth perceptions of televised HIV and AIDS education.

In **chapter three**, I described in detail the epistemological and methodological approach to the study. In the chapter, I described the *Uses and Gratifications model* and other related communication theories that guided my study. I indicated that the epistemological underpinnings and the very nature of my study called for qualitative approaches for data collection. In particular, I used an instrumental case study to investigate how the urban youth experience televised HIV and AIDS education programmes. I went on to describe in detail the data collection procedures which included documentary analysis, focused group discussions, personal interviews and participant-observations. I presented detailed justifications for the use of above the methods, showing their merits and challenges. Within the same chapter, I described the procedures that I took to ensure data quality control. Lastly, I endeavored to discuss the research ethics guidelines as I concluded the chapter.

Chapter four constituted the presentation and discussion of the findings for the study. Given that my study was qualitative, I used descriptive narratives to present the findings. I endeavored as much as possible to present the findings in a naturalistic setting. I paid particular attention to preservation of slang and expressions used by the youth during the process of data collection. I presented the findings and the corresponding discussions according to the research questions. The summarized findings from each of the research questions are discussed in the section that follows.

5.3 PRESENTATIONS OF FINDINGS ACCORDING TO RESEARCH QUESTIONS

The primary question for this study is; how do the youth in Uganda experience television HIV and AIDS education programmes? This research question, together with the secondary research questions were spelled out in section 1.4. The findings of the study are summarized below, in accordance to the secondary questions.

5.3.1 RESEARCH QUESTION ONE: *How do the urban youth in Uganda value and experience televised HIV and AIDS education programmes?*

The following section is the summary of the data collected through focus group discussions and personal interviews with the youth.

5.3.1.1 Message construction and presentation in televised educational drama

- (a) The presentation in many televised HIV and AIDS educational dramas may not serve the purpose of edutainment which balance education and entertainment. The educational aspect is overemphasized and the entertainment is trivialized, leading the audience to lose interest in the presentation.
- (b) Televised HIV and AIDS educational dramas are characterized by preachy storylines and didactic messages. They are designed to prescribe to the youth, how to live and how to stay safe from HIV and AIDS.
- (c) According to the participants, subminimal cuts and educational drama do not seem to differ a lot as they both appeared to be giving instructions. The drama plots are typical of the traditional African story structures. The portrait of rewards and punishment reflected in the drama is detached from the experience of the youth.
- (d) The dramas are patronizing, reflecting the pedagogical approaches used in conventional teaching. Adults are convinced that young people have to get guidance from the adults before making big decisions.
- (e) In many of the televised HIV and AIDS educational drama, answers are pre-constructed and abundantly provided within the text. The audience is not challenged to grapple with the interpretation of the messages and to come out with personal meanings. The programmes do not create opportunity for debate.
- (f) Some of the televised HIV and AIDS educational programmes are described as reflecting reality. Participants indicated that they choose to view local educational drama because they are produced in the local cultures and context. They also indicated that the dramas are not as lengthy as the television soap operas and they are easy to understand.

5.3.1.2 Generation gaps, clash of interests and defiance

- (a) There are clashes of interests created by the generation gaps between the youth and the adults. The drama storylines reflect the stereotype opinions, biases and attitudes of the adults towards young people. Messages are based on assumptions that young people are irresponsible, adventurous, and risk taking and acquire HIV and AIDS through voluntary acts of misbehaviour.
- (b) The youth believe that educational drama is a tool in the hands of adults to impose social control over them. Given the development stages that most of the youth undergo, they are inclined to be independent minded.
- (c) The youth defy and resist educational programmes which seem to misrepresent what they consider to be reality. They perceive televised HIV and AIDS programmes against real life experiences. The youth suspect, and occasionally reject drama where people are depicted as being ‘too good to be true’.

5.3.1.3 Characteristics of the youth as an audience

- (a) The youth are so critical that they identify small details which adults may overlook and ignore completely. The trivial details have meaning to the young audience and may influence message reception and interpretation. In *Life Choices*, females were quick to note that the dressing and ornamentation of Joyce did not correspond with the poverty depicted in the drama.
- (b) The youth are active audiences and have the capacity to detect gaps, contradictions and conflicts in the televised educational programmes and in television soaps. For instance, they noted that some condom adverts create the urge for sex and increase chances of HIV and AIDS infection which the programmes are guarding against.

Many of them have the capacity to distinguish between fiction, fantasy and reality. They are instrumental viewers of television and they purposely choose what they want to watch and determine what they want to achieve out of the viewing.

- (c) It is true that some youth could be influenced by the television soaps and end up adopting the lifestyles depicted in the programmes. The females particularly wish to be loved in the same style as depicted in the television soaps.
- (d) Comparing televised educational drama with television soaps, participants identified technical challenges in the presentations televised educational drama. The quality of performance in the televised educational drama and the resources used to develop them make the presentations unattractive to the youth. They are more inclined to watch television soap operas which are presumed to have better plots and sophisticated presentations.

5.3.1.4 Television soaps and sexual socialization

- (a) The youth indicated that television soaps reveal everything about love and sexuality. The programmes were described as representing love and sexuality in the way the youth understand it. On the other hand, the developers of educational dramas only show what is considered culturally acceptable.
- (b) Many of the non-television viewers follow up the stories in the soaps by getting updates from those who watch television. They eventually get influenced by television soaps through interpersonal communications
- (c) The discussions that usually follow the viewing promote dialogue among the youth including those that may not have seen the presentation programme. The discussion rotates around values such as fidelity, respect, and trust.
- (d) While most adults assume that television soaps are for entertainment and amusement, the study found that these programmes address information gaps that are not handled by parents and teachers.
- (e) Sexual socialization in television soaps is a form of orientation in which the youth learn the attitudes, values, and behavior patterns of a society with regard to sexuality and gender roles. The strong attachment to the television soap characters attracts them to the programmes and they end up identifying with them leading to para-social interaction (which is a relationship viewers develop with soap characters and is more pronounced when the main characters are of the same age as the viewers).

5.3.2 RESEARCH QUESTION TWO: *How do Health educators, television staff, and theatricals value and assess televised HIV and AIDS education programmes?*

Information from the key informants indicated that there are a number of issues and challenges associated with televised HIV and AIDS educational programmes which include the following.

5.3.2.1 Saturation of HIV and AIDS talks in the media landscape

There is HIV and AIDS prevention fatigue in the country as the media appear to be saturated with HIV and AIDS issues talks. It was suggested that new formats of message construction be developed to convey similar messages in different forms. The availability of antiretroviral drugs and the improved medication calls for a shift in the messaging. Previously, the messages were based on the fear factor of imminent death caused by HIV and AIDS.

5.3.2.2 Didactic and fear arousing programmes

- (a) Key informants shared the concern of the youth that a number of campaigns were characterized by didactic and authoritarian tendencies. They observed that such programmes make the viewers uncomfortable.
- (b) The key informants were aware that the youth liked to watch television soaps because the programmes seemed to reveal a lot about love, relationships and sexuality. They noted that by comparing television soaps with televised educational drama, the youth identify gaps about love, relationships and sexuality in the educational drama.

5.3.2.3 Quality of the HIV and AIDS programmes

- (a) The key informants noted that due to the multiplicity of organizations that educate the youth about HIV and AIDS, there are conflicting and contradicting messages on HIV and AIDS in the media. Some of the messages are not professionally conveyed and end up confusing the youth.
- (b) The existence of many television channels is a challenge to HIV and AIDS educators. The youth are spread all over the stations and the organizations have to

spend a lot of money contracting many television stations to broadcast the programmes. This forces them to develop programmes that may be brief and that may be cheap to put on air.

5.3.2.4 Balancing stories

It was suggested that there should be a proper balance between education and entertainment through the use of balancing stories. The main purpose is to provide entertainment and to spice up the presentation and camouflage the intention of the presentation. The effectiveness of the balancing story in the drama depends on the resourcefulness and creativity of the producers.

5.3.2.5 Bias towards adults' materials

Young people have bias towards what they consider to be adults' materials. They believe that adults are old-fashioned and do not understand the problems of the youth. The youth suspect that the purpose of drama on television is to shape them to behave like adults. Key informants indicated that some young people aim to frustrate anything that adults propose so long as they feel their lifestyles are being compromised by the adults.

5.3.2.6 Youth's involvement in development of drama

A number of informants proposed that the youth should be involved in production of the educational programmes to bridge the communication gaps in the drama.

5.3.3 RESEARCH QUESTION THREE: *What knowledge, skills, attitudes and values suggested by the study, should be considered for televised HIV and AIDS educational programmes?*

In this section I attempt to show how the insights generated from the findings above could be used to develop effective televised HIV and AIDS educational programmes.

5.3.3.1 Addressing the changing face of HIV and AIDS

An effective response to the changing trends in HIV and AIDS in Uganda calls for innovative forms of education and communication strategies. There is a need to make use of the abundant opportunities provided by multi-media.

5.3.3.2 Complementary functions of educational drama and television soaps

HIV and AIDS educators need to examine the strong points, opportunities and limitations of educational drama and television soaps. Televised HIV and AIDS educational programmes could be enriched by adopting aspects of television soap genre.

5.3.3.3 Improving adults, perceptions towards youth's cultures

In order to address the experiences of the youth through televised HIV and AIDS educational programmes, educators need to re-define their roles. They should no longer look at the youth as passive consumers of television programmes. Educators also need to understand the experiences of urban youths as they normally select and seek information that is consistent with their needs and interests.

5.3.3.4 The evolving roles of television

Educators need to realize that television is continuously replacing the socio-cultural processes that orient and initiate urban youth into adulthood. This means that the youth have to be given appropriate media literacy so that they constructively benefit from various television programmes. Parents could also be assisted by professional educators to use television as an entry point to discuss sexuality with their children. Participation by parents in television viewing may reduce the negative effects of television viewing.

5.3.3.5 Using television soaps for sexual socialization

Parents and educators need to realize that television soaps are indispensable aspects in the social life of urban youths. It may be worthwhile exploiting the learning opportunities that they offer other than stopping the youth from watching them. From an interpretivist perspective, educators need to consider the programmes that young people value and enjoy as sources of learning in their own right. Besides, findings of this study suggest that many of the youth have the capacity to differentiate between reality, fiction and fantasy in the television soaps.

A warm and communicative parent–child relationship and discussion about the television soaps content is likely to enhance sexual socialization. This is the process through which individuals learn the attitudes, values, and behavior patterns of the society (Schaefer 2005). Some young people need special orientation to guide them on how to live with people of the opposite sex. This is particularly important because many young people study in single sex schools for a bigger part of their youthful lives.

5.3.3.6 Cultural dimensions in televised education HIV and AIDS programmes

- (a) A cultural approach to televised HIV and AIDS education examines and engages the subcultures of the youth. It entails adopting forms of communication and expressions that are popular to the youth and which address their life experiences. Popular media such as television soaps, video, theatre, community radio, dance and oral testimony are some of the media that the youth enjoy.
- (b) Peer education is an aspect of HIV and AIDS programmes that seems to thrive on communal television viewing. Findings in this study confirm the observations of Gavin (2000 2001) that the youth’s interpretation of television messages is communal.
- (c) The youth engage in debates to sort out what is real and what is exaggerated in the television programmes. The interactions that follow television viewing can culminate into collective interpretive processes which are culturally entrenched (Gavin 2000 2001). Collective interpretation of the television programmes is influenced by the shared history, experiences, language, and psychology of the viewers.

5.3.3.7 Engendered stereotypes

Televised educational HIV and AIDS programmes need to address the engendered sex-role stereotypes. Findings from the study indicate that both the educational programmes and the soap operas propagate engendered sex-role stereotypes. Programmes that endorse multiple partners for men are likely to make them run the risk of acquiring HIV and AIDS.

5.3.4 CONCLUSION

The findings that emerge from the three research questions above address the primary question of this study. The findings show how the urban youth in Uganda value and experience televised HIV and AIDS educational programmes. The information collected by interviewing the key informants supplemented the information obtained from the youth. The insights generated could be instrumental in developing televised HIV and AIDS educational programmes. In the following section, I present a general discussion on the televised HIV and AIDS educational programmes and relate it with the experiences and expectations of the urban youth in Uganda.

5.4 DISCUSSION OF FINDINGS

At the beginning of this report, I highlighted the need for revitalized HIV and AIDS prevention strategies following a resurgence of HIV and AIDS among the youth. This study is based on the belief that the media, particularly television, could play an important role in HIV and AIDS education. Given that television can convey HIV and AIDS messages creatively through edutainment, it is likely to initiate the youth into new ways of talking about the HIV and AIDS. Against this background, I set out to find out how the urban youth in Uganda value and experience televised HIV and AIDS educational programmes.

5.4.1 ADDRESSING THE CHANGING TRENDS OF HIV AND AIDS IN UGANDA

This study confirms the observations of Singhal and Rogers (2003) that many HIV and AIDS educational programmes provide information and moralistic messages. As pointed out by the Panos Institute (2004 a) a health communication strategy that focuses on prescribing modes of behavior is likely to miss out the message. The youth prefer programmes that foster debate, dialogue and knowledge sharing. From a constructivist perspective, televised

HIV and AIDS programmes ought to address HIV risk from the perspective of the target youth audience.

It has been argued that ABC messaging such as “abstain, be faithful, use condoms” has not made significant impact on prevention over the last 20 years (Panos 2004b). Because it is not realistic, this approach could intensify infection and deepen stigma and discrimination (Van Kampen 2006). In recent years in Uganda, when messages about abstinence and being faithful were intensified, there has been a reported increase in HIV and AIDS prevalence, after more than a decade of decline (Sanders 2005).

The key informants noted that a number of HIV and AIDS programmes continue to be based on the fear factor. The youth try to resist presentations that arouse discomfort, anxiety and fear. Blumberg (2000) suggested that fear-provoking HIV prevention messages could lead to defensive coping strategies among sexually active youth who encountered such messages. Using an information processing model of defensive responses, he identified and operationally defined four mediating processes which lead to the rejection or denial of threatening health messages. These are attention avoidance, blunting, suppression, and counter-argumentation. In this particular study, attention avoidance was reported to occur when the youths indiscriminately avoided the entire programme that was anticipated to contain unwanted messages. Blunting involved the use of distraction to avoid the messages in the programme that generated anxiety and discomfort. Suppression happens when young people tried to stop thinking about the information and avoid forming inferences about its self-relevance. Counter-argumentation was experienced in the form of biased interpretation and assessment of the presentation.

Many of these tendencies were reflected at Naguru teenage information centre, where young people are regularly invited to discuss contents of selected television and video programmes. Some of the indicators of defensive tendencies of the viewers included; constantly moving out of the video hall ostensibly to go to washrooms, conversing and making all sorts of fun during the video shows, and reading novels or newspapers during the shows. None of these tendencies were experienced during presentations that the youths considered ‘interesting’.

5.4.2 INTEGRATING YOUTH SUB-CULTURES INTO TELEVISED HIV AND AIDS EDUCATION

It may not be easy to modify lifestyles of the youth without addressing their sub-cultures. The transmission of HIV and AIDS could be attributed to trends in the behavior and sub-cultures of the youth (Gorringe 2004). The youth also have their sub-cultures which are reflected in their preferred forms of communication, entertainment, values and social structures. HIV and AIDS educators ought to understand how the youth attach meaning to depictions of sexuality in the media.

The quasi-modern youth culture has its symbols and expressions (UNESCO HIV 2002) which may differ from the mainstream culture within their communities of their communities. The urban youth's sub-culture has its own forms of recreation, socializing, coping, and unique role-models.

Power and Skuse (2005) stress the need to address the economic, spiritual and cultural dimensions of HIV and AIDS. A cultural approach to education needs to examine and engage the subcultures of the youth. For instance, efforts have to be made to adopt forms of communication and expressions of the youth. To be affected by a message, the youth have to hear it in a form that is appropriate to their sub-cultures and should connect it with their life experiences. Among other things, this entails promoting popular media such as video, theatre, community radio, dance and oral testimony enhance.

Television soaps and other popular programmes that young people enjoy could be used as some of the tools for HIV and AIDS education. They offer opportunities to present HIV and AIDS issues in a form that differs from what is done using conventional televised educational programmes. Through their storylines and attractive characters, television soaps offer diverse, re-structured and innovative forms of presentation of HIV and AIDS messages. This form of presentation could be the answer to the prevention fatigue and saturated media landscape in Uganda. HIV and AIDS educators in Uganda are likely to increase the attractiveness of televised educational drama by adopting some of the television soaps genre. Among other things, this calls for attaching risk narratives to popular characters in the storylines.

Research shows that cultural approaches that are based on the experiences of people living with HIV and AIDS have helped to reintegrate them into society (Robins 2005). By

addressing their anxieties, the approach makes them socially active and able to combat stigma. A study conducted in Botswana by O’Leary, Kennedy, Pappas-Deluca, Nkete, Beck and Galavotti (2007) indicate that viewers of television soap *The Bold and the Beautiful* had significantly lower levels of HIV stigma compared with non-viewers. In the television soap, HIV infection was treated in a no stigmatizing, humane manner.

Integrating youth cultures into HIV and AIDS education can promote solidarity and empowerment and encourages self-reflection among the youth (Somma & Bodiang 2004). It enhances sustainable development of knowledge, skills attitudes and values for the prevention of HIV and AIDS. The social nature of human interactions means that television viewing is communal and the subsequent interpretations are collectively done (Gavin 2000, 2001). The socio-cultural structures ensure that as messages are passed on, meaning is amenable to change. The communal aspect not only contributes to pleasurable viewing, but also enhances interpretive negotiation towards a cultural unity. In collective viewing, the messages are absorbed by the audience and transformed into forms that make them meaningful. The perception of messages depends on the norms and values of the different sub-cultures (Tulloch & Lupton 1997). I learnt from the interactions with the participants that as they watch television, they take along with them accumulated experiences on love, sexuality and HIV and AIDS.

5.4.3 ISSUES AND CHALLENGES IN DEVELOPING TELEVISED HIV AND AIDS EDUCATIONAL PROGRAMMES

As I investigate the way youth in Uganda experience televised HIV and AIDS education programmes, and as I make suggestions and recommendations, I am conscious of the associated issues and challenges.

i. One of the possible challenges in developing televised HIV and educational programmes is addressing the diverse segments of the youth. Findings of the study suggest that the youth may not be homogeneous even when they are of the same educational levels, cultures, sex and age. Differences in interests and perceptions could be attributed to personality traits. As suggested by Weaver (2000), some of the youth are neurotics, psychotics or extraverts. Different edutainment programmes on television may not appeal to individuals of diverse personalities. It may not be easy to determine who is likely to be drawn to what types of programme and what would be the likely impact of the programme.

ii. Bruggemann & Barry (2002) indicate that personality traits have a bearing on media selection and preference. The way young people use media depends on their personality (see a detailed discussion in section 2.3.1.). During the focus group discussions, a young lady indicated that she likes watching films that other people find unpopular and gets attracted to the aspects of the film which repel other viewers.

iii. HIV educators may find it difficult to address the diverse viewing habits and interests of neurotics, psychotics or extraverts. In the process of conducting focus group discussions, I realized that participants within the same focus group had diverse personality traits as some of them could be emotional, others independent minded, impulsive, shy or had low self-esteem. There were participants who kept quiet all through the discussions until I prompted them to talk. Others looked to be sociable and were talkative.

iv. Producers of televised HIV and AIDS programmes also face the challenge of addressing the expectations of both instrumental and ritualistic viewers (Nabi, Biely, Morgan & Stitt 2003).

v. Instrumental viewers watch television with a purpose that goes beyond mere amusement. They are selective and their viewing has a purpose. They seem to have limited networks in terms of close relatives or peers to provide them with information on sexuality. They plan to watch specific programmes and specific content as they actively use the television soaps to gratify their needs.

vi. On the other hand, ritualistic viewers watch television programmes precisely for purposes of amusement. The viewing is aimed at companionship, passing time, relaxation, arousal and escape. The viewing is non-selective and they only view to pass time without focusing on any specific programmes and their engagement with the programme does not last long. They are neither captivated to follow the chronology, nor influenced by the characters. They do not mind skipping some episodes or even abandoning the programme altogether. They actively choose when to watch the programme, what meanings to assign, which model to like or to hate. They have sufficient guidance from their peers or close relatives.

vii. Audience segmentation can be explained by the use and gratification model. The level of television viewing depends on the individual's sociability or social adaptability, affiliation, and positive self-esteem (Weaver 2000). The need for a particular programme and the

gratification that the programme offers depends on the individual's social and psychological requirements (Severin & Tankard 1997). *Cultivation* theorists like Gerbner, *et al.* (2002) have a different opinion with regard to audience segmentation. They suggest that the variations in perceptions towards television messages can be mainstreamed by regular television viewing. Mainstreaming is the process by which heavy television viewing (or other media dependency) erodes variations in perceptions. The urban youth who have diverse values and cultural norms are brought into the same dominant mainstream by cumulative exposure to television viewing.

5.4.4 THE KNOWLEDGE CLAIM

I set out to investigate how the youth in Uganda experience televised HIV and AIDS educational programmes based on the Social Constructivist and Interpretivist paradigms. In line with these paradigms, I used a qualitative research approach and an instrumental case study design to collect and analyse data (Mackenzie & Knipe 2006; Mertens 2005). The convergence of focus group discussions, documents analysis, interviews and participant observation led to a comprehensive understanding of the topic under investigation (Baxter & Jack 2008). It also helped to reduce the problems of personal researcher/observer bias and subjectivity that are typical of qualitative studies (Cohen, *et al.* 2003). The credibility of the findings was further enhanced by the diverse categories of urban youth and key informants that participated in the study. The following sections tie together the research findings, the paradigmatic underpinnings and theoretical framework of the study.

a. Paradigmatic underpinnings

In line with the Social Constructivism and interpretivism, findings reveal that the way the youth experience televised HIV and AIDS programmes is influenced by factors like; the source and nature of knowledge about HIV and AIDS, the learning context; and the perceived roles of educators and the youth in televised HIV and AIDS education.

i. The source and nature of knowledge about HIV and AIDS: the traditional pedagogical approach to education appears to be based on the principle that knowledge is transmitted from the educator to the learner. On the other hand, the Social Constructivists and Interpretivists have a different approach. They maintain that truth cannot be fully revealed

because there are multiple realities which differ across time and place (Vygotsky 1978). Basing on the position that knowledge comes from a variety of sources (Ding 2008; Mertens 2005), I investigated two types of television programmes: HIV and AIDS programmes developed for educational purposes and television soaps that are developed for commercial purposes. Participants indicated that HIV themes were elaborated more clearly and more convincingly by *Secreto D'mour* (which was developed for commercial purpose) than in *Life Choices* (which was developed for educational purposes). From the perspective of the participants, useful insights on HIV and AIDS came from a source that is often condemned by conventional educators. Television soaps and other programmes that are popular to the youth are believed to have only negative effects (Collins *et al.* 2004; Michael 2005). One of the fears is that the programmes increase the sex urge among young viewers (Pardun, *et al.* 2005). Media Effects Theorists like Gerbner *et al.* (2002) maintain that such programmes distort social reality. It is believed that young viewers are 'cultivated' into perceiving social reality through media-conjured images and storylines (Van Evra 2004). On the contrary, participants in this study indicated that *Secreto D'mour* provided useful insights into issues related with relationships, sexuality and HIV and AIDS. It provided guidelines on the appropriate time to have sex, the appropriate partner to relate with, the risks involved in sexual relationships, living positively and negatively with HIV and AIDS; and HIV stigma and discrimination. These findings support the suggestion of Buckingham (2005) that the programmes that young people enjoy watching could be sources of learning. In this respect, the programmes can play a meaningful role in sexual socialization (Gunter 2002).

On the other hand, findings of this study suggest that conventional sources of knowledge and truth about HIV and AIDS occasionally clash with the perspectives of the urban youth. Participants identified gaps, contradictions and conflicts in HIV and AIDS messages in *Life Choices*, *Gampissi*, *Time to Care* and *Ndiwulira*. Among other issues, these dramas were described as having preachy storylines and didactic messages. Most of the participants indicated that the guidance offered by the dramas is detached from social reality. As indicated by Gavin (2000), educators tend to provide what they consider to be the truth about HIV and AIDS. The content is prescriptive and occasionally removed from the socio-cultural context (Mirembe 2002).

ii. The learning context; according to Social Constructivism and Interpretivism, the social background, the culture and the past experiences of the individuals helps to shape the

knowledge and truth that those individuals acquires (Wertsch 1997; Vygotsky 1978). Learning is considered to be a product of interactions between the individual, the peers, the adults and the social environment (Kukla 2000; McMahon 1997). With regard to televised HIV and AIDS education, this interaction assists individuals to attach meaning to symbols that are used in communication. The factors that influence the interpretation of symbols include audience factors, picture coding factors and socio-cultural factors (Muturi 2005; Hugo 2002). Contrary to the beliefs of the Media Effects theorists, Symbolic Interactionism perceives individuals as active and dynamic in the way they interact with the media. It is believed that individuals construct reality in flexible, adjustable social processes (Blumer 1969; Charon 2001; Gingrich 2003). Study findings reveal that there is insufficient knowledge on part of educators on how symbols are used by the youth for communication within their sub-cultures. This is exemplified by prevalence of communication gaps, conflicts and contradictions identified in educational dramas like *Life Choices*, *Gampissi*, *Time to Care* and *Ndiwulira*. The majority of participants indicated that HIV and AIDS concepts were more vividly illustrated in *Secreto D'mour* than in the televised educational dramas. This could be attributed to the way role models are used in the two types of programmes. In television soaps, HIV and AIDS messages seem to be convincing because role models make meaning to the viewers. Risk narratives are attached to exciting plots and popular characters in the stories. To be affected by a message, the youth have to hear it in a form that is appropriate to their sub-cultures and they should be in position to connect it to their life experiences. In the context of Symbolic Interactionism (Blumer 1969), HIV and AIDS programmes are expected to address the quasi-modern youth sub-culture. The youth sub-culture has unique symbols, expressions, forms of recreation, socializing and preferred role-models (UNESCO 2002; Hebdige, 1979). According to the Social Cognitive Theory, observational learning is enhanced when the viewers desire to identify with the attractive role models (LaRose, *et al.* 2004).

iii. The perceived roles of educators and the youth in televised HIV and AIDS education: the conventional approach to education considers young people to be passive and ready to receive and accept the attitudes, opinions and beliefs on HIV and AIDS from the educators. The proponents of the *Media Effects* approach believe that ideas can be 'injected' into the minds of young people to effect behavioural change (Gerbner *et al.* 2002). In such a setting, television (or other media) becomes the principal tool for the propagation of established knowledge, values and cultural norms. The main duty of education is to

maintain, stabilise and reinforce conventional beliefs and behaviours. Gerbner, *et al.* (2002) indicate that television presents the most stable, repetitive and pervasive patterns in the society and propagates society's values which are reflected in its cultural stories. As noted by UNESCO (2002) approaches that are based on didactic and pedagogical philosophies allow little room for participatory learning, peer teaching and stakeholders' involvement. On the other hand, Social Constructivism and Interpretivism stress the need for dialogue between educators and the learners. Both learners and educators are expected to develop an awareness of each other's viewpoints and perspectives (Meter & Stevens 2000; Rhodes & Bellamy 1999). It is believed that educators and the youth can learn from each other (Holt and Willard-Holt 2000) and that learners can leave their own imprint in the learning process (Clark & Elen 2006). Some of the key informants in this study noted that on the few occasions when the youth were involved in the development of educational media programmes, the communication gaps were reduced. In line with Social Constructivism and Interpretivism, the role of educators is to help the youth to search for meaning so that they can create their own reality (Cohen *et al.* 2003).

b. The theoretical framework

i. The Uses and Gratification Model: In analysing the way youth experience televised HIV and AIDS education, the Uses and Gratification Model is the major theoretical framework that I based my study on. However, because of the limitations associated with the Model (refer to 1.7.2) I integrated it with Symbolic Interactionism and the Social Cognitive theory.

Among other things, the model clarifies that the youth actively engage with the media particularly in making choices. The findings of the study confirm that their choices are driven by purposes. Katz and Blumler (1974) identified four needs that motivate individuals to access media. They include; 1) the need for diversion (from the routine of work and pressures of every day); 2) the need to enhance personal relationships (getting companionship, either with the television characters, or through conversations with others about television); 3) the need to enhance personal identity (where the viewer is able to compare their life with the lives of characters and situations on television, to explore, reaffirm or question their personal identity) and; 4) the need for surveillance (where the media are looked upon for a supply of information about what is happening in the world).

Diversion and escape: In view of the need to use television for emotional release and for overcoming tension, young viewers do not enjoy watching programmes that arouse fear and anxiety. Participants indicated that many of the televised educational drama generate fear and anxiety and therefore cannot be used for relaxation. The essence of edutainment is to convey HIV and AIDS messages in an entertaining mode so that there is no clear dividing line between amusement and learning (De Fossard 2004). Edutainment is meant to capture the attention of the youth who are not likely to pay attention to conventional health messages (Igartua *et al.* 2003; Tulloch & Lupton 1997). The element of fear and anxiety in televised educational programmes is likely to kill the purpose of edutainment and to drive away the youth from the programmes.

Enhancement of personal relationships and companionship: Participants indicated they are motivated to watch television soaps in order to fit into conversations with peers. A person seems to be ‘out of place’ when he/she cannot name characters in the television soaps. This also applies to the male participants whose initial interest in watching European soccer is to fit into the conversations of their peers. Because the Uses and Gratification Model does not stress socio-cultural factors, I find it fit to use Symbolic Interactionism to discuss the centrality of peers influence in televised HIV and AIDS education. As suggested by Gavin (2000) communal watching of television culminates into collective interpretations. The structures within the youth sub-cultures influence the way they perceive HIV messages (Gavin 2001). Communal watching of television also encourages self-reflection among the youth (Somma & Bodiang 2004). According to the participants, the watching of television soaps is followed by debates and discussions. The debates may take days and weeks after the watching of the programme. The topics that featured prominently after watching *Secreto D’mour* rotated around fidelity, respect, and trust. The debates occasionally connected these values to HIV and AIDS. The consequences of abandoning these values were subconsciously debated. For instance, one of the incidents in *Secreto D’mour* that was intensively debated is Victoria’s falling in love with a man who was the same age as her sons. Another topic is Federica’s acceptance to marry Browlio who testified to her that he was HIV positive.

Identification with the drama characters: findings of the study confirmed that the need to identify with characters motivates the youth to watch television programmes. In *Secreto D’mour* the central character that most females identified with is Maria Clara. Many of the

participants indicated that they liked the way she managed a situation whereby powerful men asked for her hand in marriage. The concept *para-social interaction* is used to describe the relationship viewers develop with soap characters (Obregón 2005). This relationship develops only when viewers feel that there is similarity between the situation depicted in the drama and the situation faced by the viewer (Cohen 2001). The situation faced by Maria Clara could easily be compared with what many girls face in the real life situations. Female participants indicated that she solved her problems in ways that could be emulated by many females

The need for surveillance: (information). Findings confirm the Uses and Gratification notion that young people watch television to get information. The need to get information about dating and managing love relationships and sexuality is central among the participants' desires. They indicated that talk on sexuality and love is treated as taboo and it rarely features in academic, family and religious institutions. To make matters worse, many students attend single-sex schools and only come to interact with people of the opposite sex at the university. They need information about the behaviour and interests of people of the opposite sex to guide them in making enduring future relationships. The few male participants who watch the television soaps are motivated to learn how to initiate a love relationship. Female participants on the other hand indicated that they are motivated to learn about men and to get used to their tricks. Both males and females indicated that educational dramas lack the relevant information that could to guide them on the practical issues of relationships and sexuality. This is a clear indication that the youth actively choose to watch television soaps to bridge information gaps on sexuality, love and relationships. Social and cultural factors prevent the adults from providing relevant information on relationships and sexuality and this compels the youth to look for alternative sources (Brown & Strasburger 2007; Campbell & MacPhail 2002; Bennett 2000). In the light of this, television soaps play a central part in Sexual socialization (Schaefer 2005; Gunter 2002). The few occasions when this information is provided, the youth consider it authoritarian, conformist and irrelevant to their lives (Mirembe 2002; Campbell and MacPhail 2002). Given that the same television set can provide the two different programmes on HIV and AIDS, the youth are more likely to choose television soaps which gratify many of their psycho-social needs.

Passive or active consumers of media: Contrary to fears expressed by Media Effects Theorists (Gerbner *et al.* 2002) and other media researchers (Collins *et al.* 2004; Michael

2005; Pardun, *et al.* 2005), the participant's demonstrated awareness of fiction, fantasy; distortions and commercial orientation in television soaps. Some of them indicated that the intention of the producers was to keep the viewers watching the television screen so that they could attend to the commercial advertisements. They also identified paternalistic tendencies behind HIV and AIDS educational programmes on television. This suggests that they actively engage with the televised programmes. When they choose to watch television soaps, they aim to enjoy the glamour as an entertainment but they also identify pro-social messages in the programmes. They value television soaps for the social experiences and opportunities for discussion that the programmes provide.

Findings of the study confirm the categorization made by Nabi, Biely, Morgan & Stitt (2003) with regards to instrumental and ritualistic television viewers. The Instrumental viewers have a practical purpose for watching television; they want to fill information gaps on love, relationships and sexuality. They have limited networks that provide that information. On the other hand, the motivation for ritualistic viewers is simply amusement, companionship, passing time, relaxation, arousal and escape. For that matter, they are non-selective, they do not focus on any specific programmes and they do not follow chronology of the storyline.

One of the other motivations for the selection of media (not among the four needs cited by Katz and Blumler {1974}) is the need for privacy while accessing information about sexuality. Choi and Haque (2002) noted that the youth are likely to use media that affords them anonymity. Occasionally, when television is not considered safe, the youth will go to the Internet which seems more secure and serves the same purposes of entertainment, passing the time, relaxation/escape and social information (Ferguson & Perse 2000).

ii. Symbolic Interactionism and Social Cognitive Theory: these two theories helped in covering up the limitations inherent in the Uses and Gratification Model. The three theoretical frameworks were converged and made it possible to investigate and explain how youth experience televised HIV and AIDS programmes. Given that Televised HIV and AIDS education depend on symbols to represent reality, educators have to understand the symbolism within the youth subcultures and also within the mainstream cultures in order to communicate to them effectively. This observation is illustrated by the comments of the participants on the media campaign known as '*Be a Man*'. The purpose of the campaign was to project a picture of an ideal man who does not cheat on his wife. Participants observed

that in the cultural context, to be ‘a man’ means proving masculinity by having a number of wives or lovers. Incidentally, this picture of manhood is also projected through television soaps, films and music videos from the Western world (Ward *et al.* 2005; Hansen & Hansen 2000; Roberts & Foehr 2004). The general view is that a wrong caption (*Be A man*) was used to project the intended message. In making these observations, the participants used their cultural background and media experiences. This confirms the Social Constructivist notion that individuals use their social experiences and cultural background to construct reality (Cohen *et al.* 2003; Wink & Putney 2002; Wertsch 1997; Vygotsky 1978).

Within the framework of the Social Cognitive Theory, the sub-culture determines which iconic role models are to be used to demonstrate to the youth the procedure, the costs and benefits of behavioral change (Bandura 2002). Findings of the study reveal that what made *Secreto D'mour* more convincing in conveying HIV and AIDS messages is the way role models were used. Risk narratives were attached to attractive role models and to interesting storylines. In the context of the Uses and Gratification Model, the desire to identify with the iconic role models motivates the youth to continue watching certain programmes on television (LaRose, Robert, Matthew 2004).

5.4.5 CONCLUSION

Findings of this study confirm Social Constructivist and Interpretivist notion that all knowledge is socially situated and that it comes from a variety of sources. Some of the unexpected sources are commercial television soaps which are considered by conventional educators to be detrimental to the social life of the youth. While it is true that those popular programmes have potential negative influences on the youth, the programmes are indispensable aspects in the lives of the urban youth. Other than attempting to censor the programmes or to limit their exposure to the youth, educators should empower through critical media literacy to be able to navigate through the massive media exposure. Existing televised HIV and AIDS education programmes are dominated by the behaviourist’s pedagogical philosophies. They are developed on the basis of the assumption that educators are the primary sourced of truth about HIV and AIDS. This knowledge is presumed to have enduring validity. Integrating aspects of the television soaps genres into the televised HIV and AIDS education programmes will be one of the ways the youth sub-cultures will be accommodated. Above all, involving the youth in the various stages of programme

development is one of the possible means of closing communicational gaps. It is likely to ensure that televised HIV and AIDS programmes will appropriately symbolize reality through use of representative role models. The marginalised youth may have the capacity to perceive truths about HIV and AIDS in more realistic ways than the way dominant groups do (Harding 2003). Behavioural change is possible when young people are invited to tell their own stories and, as such, extend the development of their self-concepts with regard to HIV and AIDS. It is imperative to sustain the critical autonomy of young people in such a manner that they are not indoctrinated into particular worldviews. For this reason, HIV and Aids educators need to deconstruct their own positions and to accommodate critique from the youth.

Table 4.2 below summarises the epistemological perspectives and approaches to televised HIV and AIDS education

Table 5.2 Epistemological perspectives and approaches to televised HIV and AIDS Education

	Innovative approaches	Conventional approaches
Epistemological underpinnings	Social Constructivist and Interpretivist paradigms	Positivist paradigms
Theories and models applied	<ul style="list-style-type: none"> • Use and Gratifications Model • Symbolic Interactionism • The social cognitive theory 	<ul style="list-style-type: none"> • The cultivation theory • The “media effects “ approach
Perception of social reality	Reality is socially situated and subjective. It is multi-layer, interactive and interpreted by the perceiver. Truth is seen from the optic of the learner. Truth cannot be exposed. But youths can be guided to search meaning to create their own reality	Reality is objective. The truth is determined by authorities who are considered to be the custodians of knowledge. The truth is seen from the optic of the educator
Televised HIV and AIDS Educational strategy	<p>Televised HIV and AIDS programmes address experiences of youth and stimulate learning</p> <p>Television helps young people to explore truth based on their experiences.</p>	Teach and give basic facts and preferred modes of behavior. Insights originate from the educators who are expected to influence behavioral change among the youth. Provide pre-packaged sets of “the truth and reality
Source of knowledge and ideas on HIV prevention	Experiences that have meaning and importance to the target audience. They may be educational or entertainment programmes that young people value and enjoy watching (like Television soaps)	Ideas propagated by the authorities through educational programmes on HIV and AIDS; developed by adults for the youths. Television Soap operas are considered to have only negative effects on young people
The images about the youths culture norms	They are marginalized but could have rich insights and experiences on HIV that could be used alongside those of the dominant groups	The youth have deficits in knowledge, attitudes, and skills. The deficits can only be remedied by adults.
Approach to research	Qualitative approaches including instrumental case studies. Findings are expressed in terms of rich descriptions	Quantitative studies including correlation studies, surveys etc. the findings are expressed in figures.

Table 5.2 above illustrated the epistemological dimensions of the study. It shows the Social Constructivist and Interpretivist perspectives in the light of other epistemologies. The contrasts indicated in the table are meant to give a clear picture of the importance of the paradigms to the study.

5.5 RECOMMENDATIONS

The recommendations that I present in this section are based on the findings of the study in chapter 4 and the discussions in chapter 5. They are also based on some of the related studies that appear in chapter 2, particularly those that are supported by my study findings.

5.5.1 FOCUSING ON NEEDS OF THE YOUTH

HIV and AIDS educators should modify beliefs upon which they develop HIV and AIDS programmes for the youth. They need to accommodate critique and transformation such they develop programmes that address the experiences of the youth. This entails involving young people in all stages of the programmes development.

5.5.2 MEDIA LITERACY

Media literacy programmes should be developed as a way of empowering young people. They should be enabled to discover their voices and invited to tell their own stories. Behavioural change is possible when young people are invited to tell their own stories and, as such, extend the development of their self-concepts with regard to HIV and AIDS.

5.5.3 UTILIZATION OF EXISTING RESOURCES

The programmes that young people value and enjoy watching should be explored further and treated as resources for HIV and AIDS education in their own right. Given that they are already on television, no financial resources are entailed in using them. Alongside educational drama, such programmes can perform complementary roles in the education of youth on HIV and AIDS.

5.5.4 AREAS FOR FURTHER STUDY

In line with the findings and the recommendations above, further studies should be focused on the processes through which non-educational entertainment programmes on television could be turned into educational resources. This is likely to be significant in that it will lead to optimum utilization of abundant multi-mediated resources on television for HIV and AIDS education. It is also likely to mitigate the feared negative influences that various programmes could have on the youths.

Given that this study was focused on television as medium and urban youth as target group, further studies could focus on the role of other media like the radio, in the HIV and AIDS education of either the urban or rural youths. It may also be very useful to study the role of television or other media for the HIV and AIDS education of adults in urban areas or in the rural areas. This is because there are reports that adults particularly those who are married and are above 25 years of age are becoming more vulnerable to HIV and AIDS than other groups.

5.6 POSSIBLE CONTRIBUTIONS OF MY STUDY

There is a possibility that educators have been conducting their activities without reflecting on the experiences of the youths as the target audience. This study is likely to enable them to re-orient their perceptions towards the youths and to revisit their approaches as well as the content of the messages.

The study is likely to lead to reforms and modifications in the way educational strategies for HIV and AIDS are developed. For example more participation of the youth in the development of the programmes is likely to make them more effective in addressing the experiences of the youth. The study is also likely to increase the conceptualization of available media resources for HIV and AIDS education. Educators are likely to move outside the box; of imagining that the only resources available are those that they have produced. By looking at other television programmes as resources, they will cease to consider financial limitations as an obstacle in the campaigns for HIV and AIDS prevention.

5.7 POSSIBLE LIMITATIONS OF MY STUDY

The possible limitations include methodological challenges or other shortcomings. In chapter three (section 3.9) I indicated that the instrumental case study design that I employed limits the extent to which the findings could be generalized to apply to a wide range of young people. My research participants were largely homogeneous with regard to viewing habits, value structures, viewing conditions and demographics. To overcome this bias, I tried to use triangulation (using multiple sources) during the study and maintained a field journal to help me constantly reflect on my bias.

The findings of my study cannot be used to apply to young people below 15 years. In the course of the study, I came to learn that this category of children watch more television than older ones (Roberts & Foehr 2004). Therefore, they may be more likely to expose themselves to music videos than college students. The study cannot also be used for the adults above 24 years (either in rural or urban areas), or rural youths. Equally, the findings may not be used in reference with other media like the radio, internet, bill-boards magazines and other print and electronic media. However, I have given a detailed description of the methodological and the epistemological framework such that the study could be replicated. In the light of that I propose that future studies be conducted to further this line of inquiry by testing and replicating the study among more diverse samples.

5.8 FINAL REMARKS

Given the dispositions and opinions that I had before I began this study, I consider myself as one of the biggest beneficiaries of the findings of this study. As I interacted with young people and adults, I came across new realities. Not even the preliminary literature review that I had consulted prepared me for some of the new realities about the youth's cultures. Occasionally I could not help disclosing my surprise at what the young participants revealed.

Television can play a significant role in the education of the urban youths about HIV and AIDS. The audio visual aspects of television make it a potential medium for the edutainment approach for HIV and AIDS because urban youths find it to be popular. What it calls for is the harmonization of the messages and presentation formats to address the experiences of the urban youths.

---ooOoo---

REFERENCES

- Abdulla, R. 2004. Entertainment-education in the Middle East: Lessons from the Egyptian oral rehydration therapy campaign. In: Singhal, A., Cody, M.J., Rogers, E.M. & Sabido, M. Eds.). *Entertainment-Education and Social Change*. Mahwah, NJ: Lawrence Erlbaum, pp. 301-320.
- Airhihenbuwa, C.O., Makinwa. B. and R. Obregon. (2000). Toward a New Communication Framework for HIV/AIDS. *Journal of Health Communication*, 5: 101–11 (supplement): 101-111.
- Albright, K.S. & Kawooya, D. 2005. The role of information in Uganda's reduction of HIV/AIDS: Individual perceptions of HIV/AIDS information. *Information Development*, 21 (2), 106-112.
- Allen P.L. 2000. *The wages of sin: Sex and disease, past and present*. Chicago, IL: University of Chicago Press.
- American Academy of Child and Adolescent Psychiatry, 2001. *Normal adolescent development*, Part 1, Part 2, Nos. 57 & 58.
- Andrejevic, M. 2004. *Reality TV: The work of being watched*. New York: Rowman Littlefield.
- Angleman, S. 2000. Uses and gratifications and Internet profiles: A factor analysis. Is Internet use and travel to cyberspace reinforced by unrealized gratifications? *Paper presented to the Western Science Social Association 2001 Conference*, Reno, NV. June 4, 2005.
- Angrosino, Michael V. 2002 *Doing Cultural Anthropology: Projects for Ethnographic Data Collection*. Prospect Heights: Waveland press
- Arnett, J.J. 2000. Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55, 469-480.

Asingwire, N.S. & Kyomuhendo. 2005. Turning the tide: How openness and leadership stemmed the spread of HIV/AIDS in Uganda. In: L. Fox & R. Liebenthal (Eds.). *Attacking Africa's poverty: Experience from the ground*. Washington, DC: World Bank.

Awusabo-Asare, K. & Anarfi, J. 1997. Health-seeking behavior of persons with HIV/AIDS in Ghana. *Health Transition Review*, 7, 243-256.

Babbie, E. & Mouton, J. 2001. *The practice of social research*. 2nd ed. Cape Town, South Africa: Oxford Press.

Bajos, N. 1997. Social factors and the process of risk construction in HIV sexual transmission. *AIDS*, 9 (2) 227-238.

Bandura, A. 2002. Social cognitive theory of mass communication. In: J. Bryant & D. Zillmann (Eds.). *Media effects: Advances in theory and research*. 2nd ed. Mahwah, NJ: Lawrence Erlbaum, pp. 121-153.

Bandura, A. 1997. *Self-efficacy: The exercise of control*. New York: Freeman.

Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Englewood Cliffs, NJ: Prentice Hall.

Barker, K. & Sabido. 2005. *Soap operas for social change to prevent HIV/AIDS: A training guide for journalists and media personnel*. Shelburne, VT: Population Media Center, p. 75.

Barker, K. 2005. Sex, soap, and social change: The Sabido methodology. In: M. Haider, (Ed.). *Global public health communication: Challenges, perspectives, and strategies*. Sudbury, MA: Jones & Bartlett, pp. 113-154.

Batchelor, S. 2003. Teenage Sexuality in the Media: Too much too young? In S. Batchelor, J. Kitzinger & E. Burtney, (2004). Representing young people's sexuality in the 'youth media'. *Health Education Research*, 2004 19(6):669-676.

Bauersfeld, H. 1995. The Structuring of the Structures: Development and Function of Mathematics as a Social Practice. In L. P. Steffe & J. Gale (Eds.), *Constructivism in Education*. Hillsdale, New Jersey: Lawrence Erlbaum Associates Publishers.

Baxter, P. & Jack, S. 2008. Qualitative case study methodology: Study design and implementation for novice researchers. *The Qualitative Report*, 13 (4), pp. 544-559.

Bennett, L. 2000. Sex talk, Indonesian youth and HIV/AIDS. *Development Bulletin*, 52, pp. 54–57.

Berg, B. L. 2001. *Qualitative research methods for the social sciences*. Needham Heights, UK: Allyn & Bacon.

Bernard, Russell H. 2002. *Research Methods in Anthropology: Qualitative and Quantitative Methods*. Walnut Creek Walnut Creek: AltaMira Press.

Bloom S S, Urassa M; Isingo R; Ng'weshemi J; Boerma J T. 2002. Community effects on the risk of HIV infection in rural Tanzania. *Sexually transmitted infections* 2002;78 (4):261-6.

Blumberg, J.S. 2000. Guarding against threatening HIV prevention messages: An information-processing model. *Health Education & Behavior*, 27 (6), pp. 780-795.

Blumer, H. 1969. *Symbolic Interactionism: Perspective and Method*. Englewood Cliffs (NJ): Prentice-Hall 1969.

Boerma J T; Urassa M; Nnko S; Ng'weshemi J; Isingo R; Zaba B; Mwaluko G. 2002. Socio demographic context of the AIDS epidemic in a rural area in Tanzania with a focus on people's mobility and marriage. *Sexually transmitted infections* 2002; 78 Suppl 1(4):i97-105.

Bouman, M. 2004.. Entertainment-education drama in the Netherlands. In: A. Singhal, M.J. Cody, E.M. Rogers & M. Sabido (Eds.). *Entertainment-education and social change: History, research, and practice*. Mahwah, NJ: Lawrence Erlbaum, pp. 225-242.

Braina, M. 2001. August). The uses and gratifications of the Internet among African American college students. Paper presented to the Minorities and Communication Division, *Association for Education in Journalism and Mass Communication*, Washington, DC.

Braun, V., Clarke, V. 2006. Using Thematic Analysis in psychology. *Qualitative research in Psychology*, 3:77-101

Brown JD, Strasburger VC. 2007. From Calvin Klein, to Paris Hilton and MySpace: Adolescents, sex & the media. *Adolesc Med: State Art Rev* 2007; 18:484–507.

Brownstein, B 2001 Collaboration; The foundation of learning in the Future. *Education*, 122 (2), 240

Brake, M 1985. *Comparative Youth Culture: The sociology of youth culture and youth subcultures in America, Britain and Canada*, Routledge, New York

Bruggemann, J.M. & Barry, R.J. 2002. Eysenck's P as a modulator of affective and electrodermal responses to violent and comic film. *Personality and Individual Differences*, 32, pp. 1029-1048.

Bruner J. 1990. *Acts of meaning*. Cambridge, MA: Harvard University Press.

Buckingham, D. 2003. *Media education: Literacy, learning, and contemporary culture*. Cambridge, UK: Polity Press.

Buckingham, D. 2005. The media literacy of children and young people: Computers: The development of young people's computer expertise in the home. *New Media & Society*, 3 (2),

Cambell, C. & MacPhail, C. 2002. Peer education, gender and the development of critical consciousness: Participatory HIV prevention by South African youth. *Social Science and Medicine*, 55 (2), pp. 331-345.

Castro, A. & Farmer, P. 2005. Understanding and addressing AIDS-related stigma: From anthropological theory to clinical practice in Haiti. *American Journal of Public Health*, 95, 1 53-59.

CCMS-Infobase. 2003. Mass media: effects research - uses and gratifications. Retrieved October 10, 2005, from <http://www.cultsock.ndirect.co.uk/MUHome/cshtml/media/>

Charon, J. 2001. *Symbolic interactionism: An introduction, an interpretation, an integration*. Cairns R.B., Bergman L.R. & Kagan J. (Eds).

Choi, Y., & Haque, M. 2002. Internet use patterns and motivations of Koreans. *Asian Media Information and Communication*, 12(1), 126-140.

Clark, R. E. & Elen, J., 2006. When less is more: Research and theory insights about instruction for complex learning. In R. E. Clark & J. Elen (Eds.) *Handling Complexity in Learning Environments: Research and Theory*. London: Elsevier. 283-295.

Cody, M.J. & Sabido, M. 2008. Entertainment-Education. In: Wolfgang Donsbach, (Ed.), *The International Encyclopedia of Communication*, Oxford, England: Blackwell Publishing.

Cohen, D.L., Manion, L. & Morrison, K. 2003. *Research methods in education*. New York: Routledge Falmer.

Cohen, J. 2001. Defining identification: A theoretical look at the identification of audiences with media characters. *Mass Communication & Society*, 4, pp. 245-264.

Collins, R. L., Elliott, M. N., Berry, S. H., Kanouse, D. E., Kunkel, D., Hunter, S. B. 2004. Watching sex on television predicts adolescent initiation of sexual behavior. *Pediatrics*, 114, 280-289.

Coombe, C. 2001. *HIV/AIDS and trauma among learners: Sexual violence and deprivation in South Africa*. Pretoria, South Africa: University of Pretoria.

Commonwealth Youth Forum. 2007. *Health, HIV, AIDS and Development A case for Uganda*. Uganda AIDS Commission in Partnership with the National Youth Council November 2007

Cortés, C. 2001. Knowledge construction and popular culture: The media as multicultural educator. In J. Banks & C. McGee Banks (Eds.), *Handbook of research on multicultural education* (pp. 169-183). San Francisco: Jossey-Bass.

Creswell, J.W. 2003. *Research design: Qualitative, quantitative, and mixed methods approaches*. (2nd ed.) Thousand Oaks: Sage.

De Fossard, E. 2004. *Writing and producing radio dramas: Communication for behavior change*, Vol.1. Thousand Oaks, CA, Sage.

Denning, S. 2001. *The springboard: How storytelling ignites action in knowledge-era organizations*. Woburn, MA: Butterworth-Heinemann.

Denzin, N.K. 2001. *Interpretive Interactionism*. Beverly Hills, CA: Sage.

Denzin, N.K., & Lincoln, Y. 2003. Introduction: The discipline and practice of qualitative research. In N. Denzin & Y. Lincoln (Eds.), *The landscape of qualitative research: Theories and issues* (2nd ed., pp. 1-45) Thousand Oaks, CA: Sage.

Dewey, J. 1966. *Democracy and education*. New York: Free Press.

Ding, H. 2008. The use of cognitive and social apprenticeship to teach a disciplinary genre: Initiation of graduate students into NIH grants writing. *Written Communication*, 25 (1), 3-52.

Di Vesta, F. J. 1987. The Cognitive Movement and Education. In J. A. Glover & R. R. Ronning (Eds.), *Historical Foundations of Educational Psychology* (pp. 203-233). New York: Plenum Press.

Donald, D., Lazarus, S. & Lolwana, P. 2002. *Educational psychology in social context*. Cape Town, South Africa: Oxford University Press.

- Dunkle, K.L., Jewkes, R.K. & Brown, H.C. 2004. Transactional sex among women in Soweto, South Africa: Prevalence, risk factors and association with HIV infection. *Social Science and Medicine*, 59 (8), pp.1582-1592.
- Eder, D. & Fingerson, L. 2001. Interviewing children and adolescents. In: J. Gubrium, H.A. Edward & J.A. Seeley (Eds.). *HIV and AIDS among the fisher folk: A threat to responsible fisheries*. Fish and Fisheries, p.215-234.
- Eggen, P., & Kauchak, D. 2004. *Educational Psychology: Windows on Classrooms*. 6th ed. Upper Saddle River, NJ: Pearson Prentice Hall.
- Epstein, H. 2005. God and the Fight Against AIDS, *New York Review Books*, 52 (7).
- Endler, N.S. 2000. The interface between personality and cognition. *European Journal of Personality*, 14, pp. 377-389.
- Erulkar, A., Onoka, C. & Phiri, A. 2005. What is youth friendly? Adolescent's preferences for reproductive health services in Kenya and Zimbabwe. *African Journal of Reproductive Health*, 9 (3), pp. 51-58.
- Ferguson, D. & Perse, E. 2000. The World Wide Web as a functional alternative to television. *Journal of Broadcasting & Electronic Media*, 44 (2), 155-174.
- Galavotti, C. Pappas-DeLuca, K. and Lansky, A. 2001. Modeling and reinforcement to combat HIV: The MARCH approach to behavior change, *American Journal of Public Health* 91 (2001) (10), pp. 1601–1607.
- Gamoran, A, Secada, W.G., Marrett, C.A. 1998. *The organizational context of teaching and learning: changing theoretical perspectives*, in Hallinan, M.T (Eds), *Handbook of Sociology of Education*
- Gauld R. 1999. Ethics committees and qualitative health research in New Zealand. *NZ Med J* 1999; **112**:196–197.
- Gavin, J. 2000. Arousing suspicion and violating trust: The lived ideology of safe sex talk, *Culture, Health and Sexuality*, 2, pp. 117-134.

- Gavin, J. 2001. Television teen drama and HIV/AIDS: The role of genre in audience understandings of safe sex. *Journal of Media & Cultural Studies*, 15 (1) 77-96,
- Gerbner, G., Gross, L., Morgan, M., Signorielli, N., & Shanahan, J. 2002. Growing up with television: Cultivation processes. In J. Bryant & D. Zillmann (Eds.), *Media effects: Advances in theory and research* (pp. 43-67). Mahwah, NJ: Lawrence Erlbaum Associates, Inc.
- Gingrich, P. 2003. *Contemporary social theory*. Saskatchewan, Canada: *Sociology 319*:
- Glanz, K.; Rimer, B.K. & Lewis, F.M. 2002. *Health behavior and health education: Theory, research and practice*. San Francisco, CA: Wiley.
- Gorringe, T. 2004. *Furthering Humanity: A Theology of Culture*, Ashgate Publishing Ltd, Aldershot.
- Gray, R.H., Serwadda, D., Kigozi, G. & Nalugoda, F. 2006. Uganda's HIV prevention success: The role of sexual behavior change and the national response. Commentary on
- Green E.C. & Witte, K. 2006. Can fear arousal in public health campaigns contribute to the decline of HIV prevalence? *Journal of Health Communications*, 11, pp. 245-259.
- Green, J. and Thorogood, N. 2004. *Qualitative methods for health Research*. London: Sage publications
- Green, S.K. and Gredler, M.E. 2002. A review and analyses of Constructivism for School-based practice: *School of Psychology Review*, 31 (1)
- Greenberg, B.S. & Smith, S.W. 2002. Daytime talk shows: up close and in your face. In: J.D. Brown, J.R. Steele & K. Walsh-Childers. *Sexual teens, sexual media: Investigating media's influence on adolescent sexuality*. Mahwah, NJ: Lawrence Erlbaum, 79 –93;
- Greene, M. 2001. *Variations on a blue guitar: The Lincoln Center Institute lectures on aesthetic education*. New York: Teachers College Press.

Greenfield, P. 2004. Developmental considerations for determining appropriate Internet use guidelines for children and adolescents. *Journal of Applied Developmental Psychology*, 25, pp. 751-762.

Gregson, S., Nyamukapa, C.A & Garnett, G.P. 2002. Sexual mixing patterns and sex-differentials in teenage exposure to HIV infection in rural Zimbabwe. *Lancet*, 359 (9321), pp. 1896-1903.

Grunbaum, J.A., Kann, L. & Kinchen, S. 2004. Youth risk behavior surveillance—United States. *MMWR Surveillance Summary* 53 (2), pp.1-96.

Gunter, B. 2002. *Media sex: What are the issues?* Mahwah, NJ: Erlbaum.

Hakkert, R. 2007. Three notes on central issues in poverty and urbanization in cities, poverty and environment: Attacking the future now, forthcoming.

Hansen, C.H. & Hansen, R.D. 2000. Music and music videos. In: D. Zillmann & P. Vorderer (Eds.). *Media entertainment: The psychology of its appeal*. Mahwah, NJ: Lawrence Erlbaum, pp. 175-196.

Haque, M. 2002. Internet use patterns and motivations of Koreans. *Asian Media Information and Communication*, 12(1), 126-140.

Haraway, D. 2003. Situated knowledges: The science question in feminism and the privilege of partial perspective. In S. Harding, ed. *The feminist standpoint reader: Intellectual and political*. New York: Routledge.

Harding, S. 2003. Introduction: Standpoint theory as a site of political, philosophical and scientific debate. In: S. Harding (Ed.). *The feminist standpoint reader: Intellectual and political controversies*. New York: Routledge, i-16.

Hartell, C.G. 2005. *HIV & AIDS in South Africa: A review of sexual behaviour among adolescents*. San Diego, CA: Libra.

Hebdige, D. 1979. *Subculture: The Meaning of Style*; in Negus, Keith (1996). *Popular Music in Theory: An Introduction*. Wesleyan University Press.

Herek, G.M. 1999. AIDS and stigma. *Behavioral Scientist*, 42 (7), pp. 1106-1116.

Hewitt, J. 2003. *Self and society: A symbolic interactionist social psychology*. Boston, MA: Allyn and Bacon.

Holmes, B Tangney, B FitzGibbon, A Savage, T and Meehan, S 2001. Communal Constructivism: Students constructing learning for as well as with others. Proceedings of SITE 2001, Florida

Holt, D. G.; Willard-Holt, C. 2000. "Lets get real – students solving authentic corporate problems". *Phi Delta Kappan* 82 (3).

Honey, P., and Mumford, A. 1995. *Capitalizing on your learning style*. Prussia, Pennsylvania: Organization Design and Development, Inc.

Hornsby-Smith M. 1993. Gaining access. In Gilbert N (ed.). *Researching Social Life*. London: Sage, 1993: 196–197.

Hugo, J. 2002. Designing trigger pictures in context: the challenge of balance *Journal of Audiovisual Media in Medicine*; 25 (3) Sep 2002, pp.99-105

Husain, S. & Shaikh, B.T. 2005. Stalling HIV through social marketing: Prospects in Pakistan. *Pakistan Medical Association Journal*, 55(7): 294-298

Igartua, J.J., Cheng, L. & Lopes, O. 2003. To think or not to think: Two pathways towards persuasion by short films on AIDS prevention. *Journal of Health Communication*, 8 (6), pp. 513-528.

ILO, 2005. Youth: Pathways to decent work. Report VI: Promoting youth employment – tackling the challenge. *International Labour Conference, 93rd Session, 2005, sixth item on the agenda*. Geneva, Switzerland: International Labor Organization, pp 13-14.

Jankowski, N. & Wester, F. 1991. The qualitative tradition in social science inquiry: Contributions to mass communication research. In: K. Jensen & N. Jankowski (Eds.). *A handbook of qualitative methodologies for mass communication research*. London: Routledge, pp. 44-74.

Kalina, B., Nyanzi, S. & Nyanzi, B. 2005. Contemporary myths, sexuality misconceptions, information sources, and risk perceptions of bodabodamen in southwest Uganda. *Sex Roles: A Journal of Research*, 52 (1/2), 104–116.

Katz, E. 1987. Communication research since Lazarsfeld. *Public Opinion Quarterly*, 51, 525–545.

Katz, EE., Blumler, J. & Gurevitch, M. 1974. Uses of mass communication by the individual. In: W.P. Davison & F.T.C. Yu (Eds.). *Mass Communication research: Major issues and future directions*. New York: Praeger. pp.11-35.

Kellner, D. 2001. *Media culture: Cultural studies, identity and politics between the modern and the postmodern*. London: Routledge.

Kelly, K. 2000. Contextual mediators of South African youth responses to HIV/AIDS: Findings of a multi-context behavioral surveillance survey. International AIDS Conference.

Kennedy, C. H. 2005. *Single-case designs for educational research*. Boston: Pearson Education Inc.

Kibombo, R., Neema, S, A and Fatima H 2008. Women's Perceptions of risk to HIV Infection among Adolescents in Uganda: Are they Related to Sexual Behaviour? Health and Action Research Centre, Scientific commons

Kincaid, D.L. 2002. Drama, emotion and cultural convergence. *Communication Theory*, 12 (2), pp. 136-152.

King, B.M. & LoRusso, J. 1997. Discussions in the home about sex: Different recollections by parents and children. *Journal of Sex and Marital Therapy*, 33, pp. 52-60.

Kipke, M.D., Boyer, C. & Hein, K. 1993. An evaluation of an AIDS risk reduction education and skills training program. *Journal of Adolescent Health*, 14 (7), 533–539.

Kirschner, P. A., Sweller, J., & Clark, R. E. 2006. Why minimal guidance during instruction does not work: An analysis of the failure of constructivist, discovery, problem-based experiential and inquiry-based teaching. *Educational Psychologist*, 41(2), 75-86.

Kirungi, W.L., Musinguzi, J. & Madra, E. 2006. Trends in antenatal HIV prevalence in urban Uganda associated with uptake of preventive sexual behavior. *Sex Transmission infections* 82, Supplement 1: i pp. 36-41.

Kitzinger, J. 2001. 'Transformations of Public and Private Knowledge: Audience Reception, Feminism and the Experience of Childhood Sexual Abuse'. *Feminist Media Studies* 1(1).

Kitzinger, J. 1999. Some key issues in audience reception research. In: G. Philo (Ed.). *Message*.

Knapik, M. 2002. Ethics in qualitative research: Searching for practice guidelines. Paper presented at the University of Calgary, centre for Leadership in learning Conference, Calgary, Alberta, July 6, 2002.

Krcmar, M. & Kean, L.G. 2005. Uses and gratifications of media violence: Personality correlates of viewing and liking violent genres. *Media Psychology*, 7, pp. 399-420.

Krueger, R. and Casey, M. 2000. Focus groups: A practical guide for Applied Research (3rd ed). London: Sage Publications.

Kukla, A. 2000. Social Constructivism and the Philosophy of Science. New York; Routledge

Kunkel, D., Cope-Farrar, K., Biely, E., Farinola, W., & Donnerstein, E. 2001. Sex on TV2: A biennial report to the Kaiser Family Foundation. Menlo Park, CA: Kaiser Family Foundation.

Lacayo, V. 2007. What complexity science teaches us about social change. MAZI: The Communication for Social Change Report, No. 10. Feb. 2007.

- Lang, K. & Engel Lang, G. 1991. Studying events in their natural settings. In: K. Jensen & N. Jankowski (Eds.). *A handbook of qualitative methodologies for mass communication research*. London: Routledge, pp. 193-215.
- LaRose, R., Mastro, D., & Eastin, M. S. 2001. Understanding Internet usage: A social-cognitive approach to uses and gratifications. *Social Science Computer Review*, 19(4), 395-413.
- LaRose, Robert E., Matthew S. 2004. A social cognitive Theory of Internet Uses and Gratifications: toward a new model of media attendance. *Journal of Broadcasting & Electronic Media* Sept, 2004
- Lincoln, Y.S. & Guba, E.G. 1985. *Naturalistic inquiry*. Beverly Hills, CA: Sage.
- Lindlof, T. & Taylor, B. 2002. *Qualitative communication research methods*. London: Sage.
- Littlejohn, S. 2002. *Theories of Human Communication* (7th ed.). Albuquerque, NM: Wadsworth.
- Low-Beer, D. & Stonneburner, R.L. 2003. Behavior and communication change in reducing HIV: Is Uganda unique? *African Journal of AIDS Research*, 2, pp. 9-21
- Luck, L., Jackson, D., & Usher, K. 2007. STAMP: Components of observable behaviour that indicate potential for patient violence in emergency departments. *Journal of Advanced Nursing*, 59, 11-19.
- Lunt, P. 2004. Liveness in reality television and factual broadcasting. *Communication Review*, 7, pp. 329-335.
- Luo, X. 2002. Uses and gratifications theory and e-consumer behaviors: A structural equation modeling study. *Journal of Interactive Advertising*, 2 (2).
- Mackenzie, N. & Knipe, S. 2006. Research dilemmas: Paradigms, methods and methodology. *Issues In Educational Research*, 16(2), 193-205.

Matewa Chido, E.F. 2002. Media and the empowerment of communities for social change: A thesis submitted to the University of Manchester for the degree of PhD in the Faculty of Education Psychology, 82 (6).

Matthews, G., Deary, I.J. & Whiteman, M. C. 2003. *Personality traits*. 2nd ed. Cambridge, UK: Cambridge University Press.

Masterman, L. 1990. Teaching the media. London: Routledge.

Mays N, Pope C. 2000. Assessing quality in qualitative research. *BMJ* 2000; 320: 50-52

Mayer, R. 2004. "Should there be a three-strikes rule against pure discovery learning? The case for guided methods of instruction". *American Psychologist* **59** (1): 14–19.

McMahon, M. 1997. Social Construction and the World Wide Web- A paradigm for learning.

McMillan, J.H. & Schumacher, S. 2001. *Research in education: A conceptual introduction*. London: Harrisonburg.

McQuail, D. (1994). *Mass Communication: An Introduction* (3rd ed.,). London, Thousand Oaks, New Delhi: Sage Publications.

Mertens, D.M. 2005. *Research methods in education and psychology: Integrating diversity with quantitative and qualitative approaches*. (2nd ed.) Thousand Oaks: Sage.

Michael R. 2005. Sex Screen: The Dilemma of Media Exposure and Sexual Behavior PEDIATRICS Vol. 116 No. 1 July 2005,

Millwood Hargrave, A. 1999. *Sex and sensibility*. London: Broadcasting Standards Commission.

Ministry of Health (MoH), 2003. *Annual report on the VCT services in Uganda*. Kampala, Uganda: ACP/Ministry of Health.

Ministry of Health (MoH), 2005. *Uganda HIV/AIDS sero-behavioral survey 2004-05: Preliminary Report*. Kampala, Uganda: Ministry of Health.

Ministry of Health Uganda & ORC Macro 2006. Uganda HIV/AIDS Sero-behavioural Survey 2004/2005. March. Kampala & Calverton

Ministry of Health Uganda (MoH), 2006. *Uganda HIV/AIDS Sero-Behavioral Survey - 2005*. Calverton, MD: ORC Macro Calverton.

Mirembe, R. 2002. AIDS and democratic education in Uganda. *Comparative Education*, 38 (3).

Mitchell, K., Nakamanya, S., Kamali, A. & Whitworth, J.A.G. 2002. Exploring the community response to a randomized controlled HIV/AIDS intervention trial in rural Uganda. *AIDS Education and Prevention*, 14 (3), 207-216.

Morse JM. 2001 Are there risks in qualitative research? *Qualitative Health Research* 2001; **11**:3-4.

Mruck, K. & Breuer, F. 2003. Subjectivity and Reflexivity in Qualitative Research -The FQS Issues. *Forum Qualitative Sozialforschung / Forum: Qualitative Social Research*, 4(2).

Mumford, A. 1996. "Effective learners in action learning sets", *The Journal of Workplace Learning*; Employee Counselling Today, Vol. 8 No.6, pp.3-10..

Murphy, M. 2007. Parents' use and understanding of front-of-pack food labeling, and the impact of Socio-economic status. Unpublished Msc dissertation, University of Chester.

Muturi, N. 2007. The Interpersonal Communication Approach to HIV/AIDS Prevention Strategies and Challenges for Faith-Based Organizations *Journal of Creative Communications* 2007; 2; 307

Muyinda, H., Nakuya, J., Pool, R. & Whitworth, J. A. G. 2004. Community sex education among adolescents in rural Uganda: Utilizing indigenous institutions. *AIDS Care*, 16 (1), p.69-79.

Myers, M. 2000. Qualitative research and the generalizability question: Standing firm with Proteus. *The Qualitative Report*, 4(3/4).

Nabi, R.L., Biely, E.N., Morgan, S.J. & Stitt, C.R. 2003. Reality-based television programming and the psychology of its appeal. *Media Psychology*, 5, pp. 303-330.

Nagel, K. S., Hudson, J. M., & Abowd, G. D. 2004. November 6-10). Predictors of availability in home life context-mediated communication; Paper presented to the 2004 ACM conference on *Computer supported cooperative work*, Chicago, IL.

Nuwagaba, A. & Kaahwa, J. 2007. *Qualitative assessment of radio serial drama "Rock Point 256" in Uganda*. Final report. Kampala, Uganda, 2007, March p. 49.

Oberle, K. 2002. Ethics in qualitative health research. *Annals RCPSC*, 35(8), 563-566.

Obregón, R. 2005. HIV/AIDS, soap operas and young viewers: Exploring the intersection of media effects and reception analysis and its implications for health communication. *Investigación Y Desarrollo*, 13 (2).

Odutolu, O. 2005. Convergence of behavior change models for AIDS risk reduction in sub-Saharan Africa. *International Journal of Health Planning and Management*, 20 (3), 239–252.

Okuti, B.R. 2006. *Overview of the Media Landscape in Uganda*. I-Network ICT4D Expertise Team. The KNN Project.

O'Leary, A., Kennedy, M., Pappas-DeLuca, K.A, Nkete, M., Beck, V., & Galavotti, C. 2007 Association between exposure to an HIV story line in *The Bold and the Beautiful* and HIV-related stigma in Botswana *AIDS Educ. Prev.* 2007 Jun;19 (3):209-17.

Ortlipp, M. 2008. Keeping and Using Reflective Journals in the Qualitative Research Process *The Qualitative Report* Volume 13 Number 4 December 2008 695-705

O'Sullivan, Tim, Brian Dutton & Philip Rayner 1994. *Studying the Media*. London: Edward Arnold

Panford, S., Nyaney, M.O., Amoah, S.O. & Aidoo, N.G. 2001. Using folk media in HIV/AIDS prevention in rural Ghana. *American Journal of Public Health*, 9 (1), pp.1559–1562.

Panos, 2004a. *Missing the message: 20 years of learning from HIV/AIDS*, Panos, London.

Panos, 2004b. HIV and AIDS communication and treatment scale-up: promoting civil society ownership and integrated approaches to communication, issues and challenges emerging from the integrated AIDS communication, meeting report, Geneva 29-30.

Pardun, C.J., L'Engle, K.L. & Brown, J.D. 2005. Linking exposure to outcomes: Early adolescents' consumption of sexual content in six media. *Mass Communication & Society*, 8 (2), pp. 75-91.

Parker, W., Dairymple, L. & Durden, E. 2000. *Communication beyond AIDS Awareness: A manual for South Africa*. Auckland Park, New Zealand: Department of Health.

Parker, W., Ntlabati, P. & Hajjiyannis, H. 2005. *Television drama and audience identification: Experiences from Tsha Tsha*. Johannesburg, South Africa: Centre for AIDS Development, Research and Evaluation (CADRE).

Patton MQ. 2002. Enhancing the quality and credibility of qualitative analysis Chapter 9 In: Patton MQ (2002) *Qualitative Research and Evaluation Methods*. Sage Publications. USA.

Petty, R.E. & Cacioppo, J.T. 1986. *Communication and persuasion: central AND peripheral routes to attitude change*. NY: Springer/Verlag.

Piaget, J. 1973. *To understand is to Invent*. New York: Grossman.

Piotrow, P.T. & Fossard, E.D. 2004. Entertainment-education as a public health intervention. In: A. Singhal, M.J. Cody, E.M. Rogers, and M. Sabido (Eds.). *Entertainment-education and social change: History, research, and practice*. Mahwah, NJ: Lawrence Erlbaum, pp. 39-60.

Poindexter, D. 2004. A history of entertainment-education 1958-2000. In: A. Singhal, M.J. Cody, E.M. Roger, & M. Sabido (Eds.). *Entertainment-education and social change: History, research, and practice*. Mahwah, NJ: Lawrence Erlbaum, pp. 21-38.

Population Communication Services, 2001. *AWSO program helps Arab women redirect their lives*. Baltimore, MD: Johns Hopkins Bloomberg School of Public Health, Center for Communication Programs, Communication Impact! No. 12. Available at: <http://www.jhuccp.org/pubs/ci/13/13.pdf>).

Poulsen, M. & Wright, L. 2007. Addressing multiple, concurrent partnerships and cross-generational/informal transactional sex: Programmatic models for HIV prevention: A resource document for PEPFAR country programs; General Population and Youth HIV Prevention Technical Working Group; President's Emergency Plan for AIDS Relief Office of the U.S. Global AIDS Coordinator. President's Emergency Plan for AIDS Relief Office of the U.S. Global AIDS Coordinator Maputo

Prior, L. 2003. *Using Documents in Social Research*. London, Sage.

Quinn, VJ., Guyon, AB., Schubert, JW., Stone-Jimenez, M., Hainsworth, MD. and Martin, LH. 2005. Improving breastfeeding practices on a broad scale at the community level: success stories from Africa and Latin America. *J Hum Lact*. 2005;21:345-354

Rabiee, F. 2004. Focus-group interview and data analysis . *Proceedings of the Nutrition Society*, 63: 655-660

Reddy, S. 2005. It's not as easy as ABC: Dynamics of intergenerational power and resistance within the context of HIV-AIDS. *Perspectives in Education*, 23 (3), 11 - 19.

Rhodes, L. K., & Bellamy, T. 1999. Choices and consequences in the reform of teacher education. *Journal of Teacher Education*, 50, 17–26.

Richards HM and Emslie, C. 2000. The 'doctor' or the 'girl from the University'? Considering the influence of professional roles on qualitative interviewing. *Fam Pract* 2000; **17:71**

Rideout, V.J., Vandewater, E.A. & Wartella, E.A. 2003. *Zero to six: Electronic media in the lives of infants, toddlers and preschoolers. A Kaiser Family Foundation Report, No. 3378.* Saddle River, NJ: Prentice-Hall.

Roberts, D. & Foehr, U. 2004. *Kids and media in America.* New York: Cambridge University Press.

Roberts, D., Foehr, U., Rideout, V. & Brodie, M. 1999. *Kids and media at the new millennium.* Menlo Park, CA: Kaiser Family Foundation.

Roberts, D.F., Foehr, U.G. & Rideout, V. 2005. *Generation M: Media in the lives of 8–18 year-olds.* Menlo Park, CA: Kaiser Family Foundation.

Robins, S. 2005. *Rights Passages from 'Near Death' to 'New Life': AIDS Activism and Treatment Testimonies in South Africa,* Working Paper 251, Institute for Development Studies, Brighton.

Rogers, E. (2003), *Diffusions of Innovations 5th Edition,* Free Press, New York.

Rossi, E. 2002. *Uses and gratifications/dependency theory.* Available at: <http://zimmer.csufresno.edu/~johnca/spch100/7-4-uses.htm>.

Russell, C., Gregory, D., Ploeg, J., DiCenso, A., & Guyatt, G. 2005. Qualitative research. In A. DiCenso, G. Guyatt, & D. Ciliska (Eds.), *Evidence-based nursing: A guide to clinical practice* (pp. 120-135). St. Louis, MO: Elsevier Mosby.

Sabido, M. 2004. The origins of entertainment-education. In: A. Singhal, M.J. Cody, E.M. Rogers & M. Sabido (Eds.). *Entertainment-education and social change: History, research, and practice.* Mahwah, NJ: Lawrence Erlbaum, pp. 61-74.

Sanders, E. 2005. Uganda Takes Up Abstinence Campaign, *Los Angeles Times,* Los Angeles.

Schaefer, R.T. 2005. *Sociology.* 9th ed. New York: McGraw-Hill.

Schwandt, T.A. 2000. Three epistemological stances for qualitative inquiry. In: N.K. Denzin & Y.S. Lincoln, eds, *The handbook of qualitative research*, Thousand Oaks, CA: Sage, 189-214.

Scott, J. 2006, *Documentary Research* London, Sage Publications Ltd.

Seeley, A J. And Allison, E H 2005. HIV/AIDS in fishing communities: Challenges to delivering antiretroviral therapy to vulnerable groups *AIDS Care*. 2005 August 17 (6): 688 - 697

Semali, L. 2002. *Transmediation in the classroom: A semiotics-based media literacy framework*. New York: Peter Lang.

Severin, W.J. & Tankard, J.W. 1997. Uses of Mass Media. In: W.J. Severin & J.W. Tankard (Eds.). *Communication theories: Origins, methods, and uses in the mass media*. 4th ed. New York: Longman.

Shelton, J.D., Halperin, D.T., Vinand Nantulya, V., Potts, M., Helene, D., Gayle, H.G. and Holmes, K.K. 2004. Partner reduction is crucial for balanced “ABC” approach to HIV prevention. *British Medical Journal*, 328, pp. 891-893.

Shrum, L.J. 1999. The relationship of television viewing with attitude strength and extremity: Implications for the cultivation effect. *Media Psychology*, 1, pp. 3 –25.

Silverman, D. 2001. *Interpreting Qualitative Data*. 2nd ed. London: Sage.

Singhal, A. & Rattine-Flaherty, E. 2006. Pencils and photos as tools of communicative research and praxis: Analyzing Minga Perú’s quest for social justice in the Amazon. *International Communication Gazette*, 68 (4), pp. 313-330.

Singhal, A. & Rogers, E.M. 2002. A theoretical agenda for entertainment-education. *Communication Theory*, 12 (2), pp. 117-135.

Singhal, A. & Rogers, E.M. 2003. Combating AIDS: Communication strategies in action (abstract), Sage Publications, New Delhi. RY 2007.

- Singhal, A., Rao, N. & Pant, S. 2006. Entertainment-education and possibilities for second-order social change. *Journal of Creative Communications*, 1(3), pp. 267-283.
- Skuse, A. (Ed.) & Power, F. 2005. *AIDS Communication*, DFID, London.
- Slaymaker, E., Bwanika, J B., Kasamba, I., Lutalo, T Maher, D and Todd, J. (2009) Trends in age at first sex in Uganda: evidence from Demographic and Health Survey data and longitudinal cohorts in Masaka and Rakai. *Sex Transm Infect* 2009; 85 (Suppl 1): i12-i19.
- Somma, D.B. & Kessler Bodiang, C. 2004. *The Cultural Approach to HIV/AIDS Prevention*. Swiss Agency for Development and Cooperation/Swiss Centre for International Health, Swiss Tropical Institute, Geneva.
- Sood, S. 2002. Audience involvement and entertainment-education. *Communication Theory*, 12 (2), pp. 153-172.
- Sood, S., Menard, T. & Witte, K. 2004. The theory behind entertainment-education. In: A. Singhal, M.J. Cody, E.M. Rogers & M. Sabido (Eds.). *Entertainment-education and social change: History, research, and practice*. Mahwah, NJ: Lawrence Erlbaum, pp. 117-149.
- Stake, R.E. 2000. Case studies. In: N.K. Denzin & Y.S. Lincoln (Eds.). *The handbook of qualitative research*. Thousand Oaks, CA: Sage, 435-454
- Stephenson, M.T. 2003. Examining adolescents' responses to anti-marijuana PSAs. *Human Communication Research*, 29 (3), pp. 343-369.
- Stoneburner, R., & Low-Beer, B. 2004. Population-level HIV declines and behavioral risk avoidance in Uganda. *Science*, 304, 714–785.
- Sutter, G. 2000. “Nothing new under the sun”: old fears and new media’, *International*.
- Sweller, J. 1988. "Cognitive load during problem solving: Effects on learning". *Cognitive Science* 12 (1): 257–285.

Trauth, E.M. 2001. *Qualitative Research in IS: Issues and Trends Publication*. Hershey, PA: Idea Group Publishing.

Tulloch, J. & Lupton, D. 1997. *Television, AIDS and risk: A cultural studies approach to health communication*. Sydney, Australia: Allen & Unwin.

UAC, 2001. *National Young People HIV/AIDS Communication Program for Young People: Concept Paper*. Kampala: Uganda AIDS Commission.

UAC, 2003. *The story of AIDS in Uganda....AND banana trees provided the shade*. Kampala: Uganda AIDS Commission.

UAC, 2004a. *The revised national strategic framework for HIV/AIDS activities in Uganda, 2003/04-2005/06: A guide to all HIV/AIDS stakeholders*. Kampala: Uganda AIDS Commission.

UAC, 2004b. *The AIDS status Report, July 2003-June 2004*. Kampala: Uganda AIDS Commission.

UAC, 2004c. *Draft national abstinence and being faithful strategy on prevention of transmission*. Kampala: Uganda AIDS Commission.

UAC, 2006. *A rapid assessment of the drivers of the HIV/AIDS epidemic and effectiveness of prevention interventions in Uganda*. Kampala: Uganda AIDS Commission.

UAC, 2007. *Accelerating HIV prevention: The road map towards universal access to HIV prevention in Uganda*. Kampala: Uganda Aids Commission.

Uganda Bureau of Statistics (UBOS) & ORC Macro, 2002. *Uganda demographic and health survey 2000-2001*. Calverton, MD: UBOS and ORC Macro.

Uganda Bureau of Statistics. 2001. *Uganda Demographic Health Survey UDHS (2000)*

Uganda Bureau of Statistics: UBOS (2000). *Uganda Demographic and Health Survey UDHS (1999)*

Uganda Bureau of Statistics: UBOS 2006. Uganda Demographic and Health Survey UDHS (2005)

UNAIDS 1998. *AIDS education through imams: A spiritually motivated effort in Uganda; UNAIDS case study*. Publication No. 98. Geneva: UNAIDS.

UNDP, 2002. *The Uganda human development report: The challenge of HIV/AIDS, Maintaining the momentum of success*. Kampala, Uganda, United Nations Development Report.

UNESCO. 2000. World Education Forum, Dakar: final report. Paris,

UNESCO, 2002. *Towards an African response: UNESCO strategy for HIV AND AIDS education in Sub-Saharan Africa 2002-2007: Final draft*. Dakar, Senegal: UNESCO.

UNFPA, 2002. *Preventing HIV&AIDS: Young people and HIV& AIDS (fact sheet)*. New York: UNFPA.

UNFPA, 2003. HIV&AIDS and Adolescents, In: *State of World Population 2003*. New York: UNFPA. Available at: www.unfpa.org/swp/2003/english/ch3/index.htm.

UNFPA, 2004. *State of the world population: The Cairo consensus at ten: Population, reproductive health and the global effort to end poverty*. New York: United Nations.

UN-Habitat, 2007. *Overview of urban crime trends*. Available at: <http://ww2.unhabitat.org/Istanbul+5/56.pdf>.

UNICEF 2000. *Progress of nations*. New York, NY: UNICEF.

UNICEF, 2002. *Young people and HIV&AIDS; Opportunity in Crisis*. New York: UNICEF.

Valente, W. & Bharath, V. 1999. An Evaluation of the use of drama to communicate HIV/AIDS information. *AIDS Education and Prevention*, 11(3), pp. 203 – 211.

Van Evra, J. 2004. *Television and child development*. 3rd ed. Mahwah, N.J.: Lawrence Erlbaum.

Van Kampen J. 2006. 'The ABC Disaster', *The Drum Beat* [online], No 345 www.comminit.com/drum_beat_345.html accessed May 2006

Van Meter, P. & Stevens, R.J. 2000. The role of theory in the study of peer collaboration. *Journal of Experimental Education*, (69), pp. 113 – 129.

Van Rooyen, L. & Louw, N. 1994. *Sexuality Education: A Guide for Teachers*. Pretoria, South Africa: Van Schaik.

Von Feilitzen, C. 1999. Media education, children's participation and democracy. In: C. von Feilitzen & U. Carlsson (Eds.). *Children and Media Violence Yearbook*. Göteborg, Sweden: Nordicom, pp. 1-29.

Vygotsky, L.S. 1978. *Mind in Society*. Cambridge, MA: Harvard University Press.

Ward, L.M. 2002. Does television exposure affect emerging adults' attitudes and assumptions about sexual relationships? Correlation and experimental confirmation. *Journal of Youth and Adolescence*, 31, pp. 1-15.

Ward, L.M., Gorvine, B. & Cytron, A. 2002. Would that really happen? Adolescents' perceptions of sexuality according to prime-time television. In: J.D. Brown, J.R. Steele & K. Walsh-Childers (Eds.). *Sexual Teens, Sexual Media*. Mahwah, NJ: Lawrence Erlbaum, pp. 95-124.

Ward, L.M., Hansbrough, E. & Walker, E. 2005. Contributions of music video exposure to black adolescents' gender and sexual schemas. *Journal of Adolescent Research*, 20 (2), pp. 143-166.

Warren, C. 2001. Qualitative interviewing. In: J. Gubrium & J. Holstein (Eds.). *Handbook of interview research: Context and Method*. London: Sage, pp. 83-102.

Watson, J. & Hill, A. 1997. *A dictionary of communications studies*. NY: Arnold Publishing.

Wawer, M. 2005. *Declines in HIV prevalence in Uganda: Not as simple as ABC*. Abstract 27 LB, 12th Conference on Retroviruses and Opportunistic Infections, February 22-25, 2005, Boston, MA.

Weaver, J.B. 2000. Personality and entertainment preferences. In: D. Zillmann & P. Vorderer (Eds.). *Media entertainment: The psychology of its appeal*. Mahwah, NJ: Lawrence Erlbaum, pp. 235-248.

Weaver, J.B. 2003. Individual differences in television viewing motives. *Personality and Individual Differences*, 35, pp. 1427-1437.

Wertsch, J.V 1997. "Vygotsky and the formation of the mind" Cambridge.

Weissman, A., Cocker, J., Sherburne L, Powers M B., Lovich, R. & Mukaka, M. 2006. Cross-generational relationships: Using a 'continuum of volition' in HIV prevention work among young people. *Gender and Development*, 14 (1), pp. 81-94.

Wilson, D. & Epstein, H. 2004. Concurrent sexual partnerships help to explain Africa's HIV prevalence:

Wink, J. And Putney, L.G. 2002. *A Vision of Vygotsky*. Boston: Allyn & Bacon; 2002.

Wood, D. 1998. *How Children Think and Learn*. 2nd edition. Oxford: Blackwell Publishers Ltd.

World Bank, 2006. *World Development Report; Development and the Next Generation*. Washington, DC: World Bank, p. 161.

Yin, R.K. 2003. *Case study research: Design and methods*. 3rd ed. Thousand Oaks, CA: Sage.