

**Communication tools used to educate High School Learners about HIV/AIDS in  
the Mthatha area**

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**(National Diploma: Public Relations Management, B.Tech: Public Relations Management)**

**Dissertation submitted in fulfillment of the requirement for the**

**Masters Degree of Technology (Public Relations Management)**

**Department of Public Relations Management**

**Durban University of Technology**

**2015**

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## ACKNOWLEDGEMENTS

- To God be the glory for if it weren't for His profound guidance, the ability he granted me to carry on even when I believed I didn't have it in me, for the angels He sent my way in a form of my supervisor, family and friends, from whom I got tremendous encouragement. Indeed it is by God's grace that I have made it this far.
- I am at a loss for words when it comes to my wonderful supervisors, Prof. Veena Rawjee and Prof. J.P. Govender who have been my source of strength throughout this journey. Had it not been for their encouragement, patience and valuable inputs, I strongly believe I would have given up the dream. Thank you for believing in me even when I doubted myself, you are the best supervisors.
- I believe no one is as blessed as me when it comes to a supporting family and friends, whose love endures forever. My Mother, Nokhwezi, Uncle Nkosinathi, Aunts Nosisa and Noloyiso, my sister Iviwe, from the bottom of my heart I thank you for being there all my life.
- To my friends, Zimkhitha Ramakgale, Zanele Sobetwa, Bonile Mooi and Zukiswa Gqamane, may you do to others what you have done to me, God bless you.
- To the love of my life, my husband, Solly Leta Vuso, I cannot express my gratitude enough to you for your tremendous support in this study.
- Lastly, to my son, Limile, this is for you, though you are only an infant, you have been a great inspiration throughout this journey. It is the will of wanting to give you the best out of life that has seen me through the rocky paths of this study. My love for you is unconditional.

## **DECLARATION**

I, Nonceba Madikizela, do hereby declare that the work presented in this dissertation is my own work and findings, except where indicated. All sources used have been duly acknowledged.

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Date

## **ABSTRACT**

The growing number of HIV/AIDS infections amongst the youth is a cause for concern, particularly with prevention messages being communicated through various media platforms. This signals gaps between the senders and receivers of these messages. Therefore, people are either not learning the message about the dangers of HIV, or are unable or unwilling to act on it.

Mthatha is in the centre of the old Transkei region of the Eastern Cape. It falls under the King Sabata Dalindyebo Local Municipality and the OR Tambo District Municipality. Teenage pregnancy is a major challenge in this area, which indicates that most teenagers do not use protection during sexual intercourse. This suggests that the HIV infection rate may be too high. With there being no cure for this disease, communication has been identified as an ideal method of helping to curb the spread of this disease. The purpose of the study was to assess communication tools used to educate high school learners about HIV/AIDS in the Mthatha area.

Data was collected through questionnaires administered to 341 high school learners. Three out of the eight high schools from the Mthatha Central Business District (CBD) in the Eastern Cape were identified for the study. The selection of these high schools was based on the demographics of the learners, which are age, gender and background.

The findings have revealed that there are numerous methods used to educate learners about the HIV/AIDS pandemic. Learners identified mostly with three sources as the accurate tools of communication in HIV/AIDS education; Health education/curriculum, Entertainment-education and Peer Education.

## **TABLE OF CONTENTS**

1. Cover page	i
2. Acknowledgements	ii
3. Declaration	iii
4. Abstract	iv

### **Chapter One: Introduction**

1.1 Introduction	1
1.2 Problem Statement	2
1.3 Aim and Objectives	4
1.5 Rationale for the study	4
1.6 Scope of the study	5
1.7 Literature study	5
1.8 Research Methodology	5
1.9 Division of Chapters	6
1.10 Conclusion	6

### **Chapter Two: Literature Review**

2.1 Introduction	7
2.2 Defining Communication	7
2.3 The Communication Process/Model	9
2.3.1 Sender-receiver	10

2.3.2 Message	11
2.3.3 Channel	11
2.3.4 Noise	11
2.3.5 Feedback	12
2.4 Health Communication	12
2.4.1 Planning and Strategy Development	14
2.4.2 Developing and prototyping concepts, messages and material	14
2.4.3 Implementing the programme	14
2.4.4 Assessing effectiveness and making refinement	14
2.5 Communication Tools /Campaigns	15
2.6 Communication tools used to educate high school learners about HIV/AIDS education	16
2.6.1 Curriculum	16
2.6.2 Sex education	18
2.6.3 Mass Communication/Media	19
2.6.3.1 Television	20
2.6.3.2 Radio	21
2.6.3.3 Entertainment education	22
a) loveLife campaign	23
b) loveLife billboard campaign	25

c) Khomanani campaign	30
d) Soul City & Soul Buddies	31
2.6.4 Community Media	31
2.6.5 Peer education	34
2.6.6 Teacher training	36
2.7 Conclusion	38

### **Chapter Three: Research Methodology**

3.1 Introduction	39
3.2 Research design	39
3.3 Target population	40
3.4 Sample	41
3.5 Sample size & selection	41
3.6 Judgemental sampling	41
3.7 Data collection method	42
3.8 Data analysis	43
3.9 Validity and Reliability	43
3.10 Conclusion	44

### **Chapter Four: Data Analysis & Interpretation**

4.1 Introduction	45
4.2 The sample	45

4.3 The research instrument	45
4.4 Reliability statistics	46
4.5 Demographics	47
4.5.1 Place of study	47
4.5.2 Gender distribution by age	48
4.5.3 Learners' grades	50
4.5.4 Place of residence	50
4.6 Communication tools used to educate high school learners about HIV/AIDS in the Mthatha area	51
4.6.1 Scoring patterns	51
4.6.2 Learners' concerns	51
4.6.3 Test statistics on learners' concerns	53
4.6.4 Learners' knowledge of HIV/AIDS education	54
4.6.5 Communication tools	54
4.6.6 Popular media	56
4.6.7 Useful sources	56
4.6.8 Media information	57
4.7 Most used and effective communication tools	58
4.8 Communication Sources	59
4.8.1 Learners' views on HIV/AIDS	60
4.9 Effective tools for reporting HIV/AIDS information	61



4.10 Relevance of information	63
4.10.1 Relevant sources of HIV/AIDS information	63
4.10.2 Relevant information to the youth	65
4.10.3 Effect of messages on learners' behaviour	66
4.11 Conclusion	68

## **Chapter Five: Conclusions and Recommendations**

5.1 Introduction	71
5.2 Summary of the study	71
5.3 Conclusions	72
5.3.1 HIV/AIDS education	72
5.3.2 Communication tools used in HIV/AIDS education	72
5.3.3 HIV/AIDS communication	73
5.4 Limitations of the study	73
5.5 Recommendations	74
5.6 Direction for future research	75
5.7 Conclusion	75

<b>Bibliography</b>	76
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## **Annexures**

Annexure A: Letter of consent (researcher)	83
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Annexure B: Questionnaire	85
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## **List of Figures**

2.1 The communications model	10
2.2 Health communication programme cycle	13
2.3 loveLife billboard campaign	26
2.4 loveLife billboard campaign	27
2.5 loveLife billboard campaign	28
2.6 loveLife billboard campaign	29
2.7 Peer education	35
2.8 Teacher training	37
4.1 Place of study	48
4.2 Learners' grades of study	50
4.3 Learners' concerns	53
4.4 Learners' knowledge of HIV/AIDS education	54
4.5 Popular media	56
4.6 Useful sources of information for HIV/AIDS education	57
4.7 Most used and effective tools in HIV/AIDS information	59
4.8 Communication channels	61
4.9 Effective tools for reporting HIV/AIDS information	63
4.10 Sources of relevant information	65
4.11 Sources of relevant information	66

## **List of Tables**

4.1 Cronbach alpha scores	46
4.2 Age and gender	49
4.3 Place of residence	51
4.4 Scoring patterns on learners' concerns	51
4.5 Test statistics on learners' concerns	53
4.6 Sources of information for HIV/AIDS education	55
4.7 Awareness of sources for HIV/AIDS information	58
4.8 Effect of messages on learners' behaviour	68

## **CHAPTER ONE**

### **1.1 INTRODUCTION**

Eye Witness News (2013:1) reports that one in every ten South Africans is infected with HIV. The total number of people living with the virus increased from 4 million in 2002 to more than 5 million in 2013. Furthermore, around 17% of those infected with the virus are women, and around 80% are between the ages of 15-24. The South African Institute of Race Relations (2012:1) further states that there are currently 5.58 million people living with HIV in South Africa. The youth aged 15 to 24 years account for 13% of those living with HIV. With the rising number of HIV-infected people, particularly young people, one questions whether this sector of the community is engaged in helping to curb the spread of the disease?

Msimang (2000:7) challenged the country to break the AIDS chain which led to the development of the National Strategic Plan. According to the National Strategic Plan (2007-2011), young people (aged 15-24) are viewed as a priority group for HIV prevention. The trend of the HIV epidemic can be reversed if young people are informed and empowered to change their behaviour and reduce their risk. Furthermore, clear and ongoing communication is an essential tool for the attainment of the plan. With there being no cure for this disease, communication has been identified as an ideal method of helping to curb the spread of this disease.

Baldwin, Perry and Moffit (2004:6) argue that communication is the mechanism by which culture is constructed, shaped, and sustained over time and across generations. This means that a culture of responsibility on sexual activities can be formed and sustained through proper communication. According to the World Press (2006:1), communication is, by definition, participatory. It is a two-way process. Furthermore, it refers to the full involvement of participants in communication processes and includes giving those individuals access to communication channels, thus enabling them to participate freely and equally in dialogue and debate as a way to impact on their

behaviour. Their involvement will, therefore, ensure that the appropriate messages and channels are identified.

Communication has been categorised as one of the methods that are used to curb the spread of HIV/AIDS. Cleary (2004:6) postulates that communication is effective when the idea or message, as it was initiated and intended by the sender, corresponds closely with the message as it is perceived and responded to by the receiver. This means that when the respondent clearly understands the message, communication becomes effective. The National Society of Strategic Communication Professionals (2009:1) defines strategic communication as getting the right message, through the right media, to the right audience at the right time and with the right effect. However, in order to ensure that communication tools are effective, continual evaluation and readjustment of messages needs to occur. This study, therefore, sets out to assess communication tools used to educate young people about HIV/AIDS in selected schools in the Mthatha area.

## **1.2 PROBLEM STATEMENT**

The South African Institute of Race Relations (2012:1) states that there are currently 5.58 million people living with HIV in South Africa. The youth aged 15 to 24 years account for 13% of those living with HIV. This shows that despite efforts to educate and inform young people about the epidemic through national AIDS campaigns, the media and the school curriculum, high infections continue. Hartell (2005:1) adds that the scale of the AIDS epidemic among youth in South Africa is enormous, and HIV/AIDS continues its deadly course. The afore-mentioned author further states that when one considers that 40% of the South African population is less than 15 years of age and that 15.64% of the South African youth between the ages of 15-24 are infected with HIV, one recognises that HIV/AIDS represents a devastating pandemic among the youth of South Africa.

According to research conducted by Averting HIV/AIDS (2009:1), each year there are more and more new HIV infections, which shows that people either are not learning the message about the dangers of HIV, or are unable or unwilling to act on it. Many people

are ignorant about the virus, with surveys around the world showing alarmingly low levels of awareness and understanding about HIV amongst many groups. Steinberg (2008:19) argues that one communicates with some purpose in mind and that the most important purpose is to satisfy a personal or social need. Educating young people about the HIV/AIDS pandemic through schools' curricula forms part of efforts to combat the pandemic. However, as more young people are diagnosed with the pandemic, there is a need to interrogate communication sources used to educate the youth about the pandemic. Based on this need, the study attempts to assess communication tools used to educate high school learners about HIV/AIDS .

Life Orientation is one of the methods used in schools to educate learners about the HIV/AIDS pandemic. According to the University of South Africa (2009:24), Life Orientation is the study of the self in relation to others and to society. It guides and prepares learners for life and its responsibilities and possibilities. The subject addresses knowledge, values, attitudes and skills about the self, the environment, responsible citizens and so on. Furthermore, it equips learners to solve problems, make informed decisions and choices, and to take appropriate actions to live meaningfully and successfully in a rapidly changing society by allowing them opportunities to develop and practice a variety of life skills.

Mthatha is in the centre of the old Transkei region of the Eastern Cape. It falls under the King Sabata Dalindyebo Local Municipality and the OR Tambo District Municipality. Teenage pregnancy is a major challenge in this area, which indicates that most teenagers do not use protection during sexual intercourse. This suggests that the HIV infection rate may be too high, hence the study under review. The Daily Dispatch (2011:01) indicates that the Eastern Cape has the highest rate of teenage pregnancy. During 2010, 8 427 school girls fell pregnant in the Eastern Cape, with 728 pregnancies recorded in the Mthatha District reflecting a high rate of HIV infection. Therefore, interventions to help curb the spread of HIV are essential within this area and age group. This study, therefore, sets out to assess communication tools used to educate high school learners about HIV/AIDS in the Mthatha area.

### **1.3 AIM AND OBJECTIVES**

The aim of this study is to assess communication tools used to educate high school learners about HIV/AIDS in the Mthatha area. This aim will be accomplished through the following objectives:

- To determine communication tools used to educate high school learners about HIV/AIDS in the Mthatha area;
- To assess the high school learners' perceptions on which communication mediums are most used and most effective; and
- To assess the relevance of the information being sent through these sources.

### **1.4 RATIONALE FOR THE STUDY**

Health education is, by far, the most, if not only, relevant method to inform young adults about health issues such as HIV/AIDS. This education can be achieved through workshops conducted in schools, HIV/AIDS programmes integrated into the school curriculum, parents freely sharing information about sexual behaviours with their children and rollout of effective communication campaigns.

In some cultures in South Africa, it is morally correct for a man to have more than one partner. Based on this custom, it can be rather challenging, if not confusing, to communicate the Abstain, Be faithful to one partner, Condomise (ABC) message to learners who are from this culture. Therefore, does HIV/AIDS education have the intended impact on learners? According to Card, Amarillas, Conner, Akers, Solomon and DiClemente (2007:136), the ABC message is sometimes hard to implement. Communication about sex is needed for people to judge their own risks of getting and giving HIV and to make responsible decisions about condom use and other risk-reduction strategies. The extent to which health education on HIV/AIDS, through use of communication tools, impacts on behavioural change of learners shall be reviewed. Recommendations to Non-Governmental Organisations (NGO's) and the Education Department regarding HIV/AIDS communication methods will be made. Mthatha



experiences high volumes of teenage pregnancies, which may signal a high rate of HIV/AIDS infections.

### **1.5 SCOPE OF THE STUDY**

The researcher targeted three out of the eight high schools located within Mthatha Central Business District (CBD) in the Eastern Cape, namely, St Johns College, Christ the King and Mthatha High School. The selection of these high schools is based on the demographics of the learners which are age, gender and background. The researcher feels that the selected learners represent the views of the target population on HIV/AIDS education.

### **1.6 LITERATURE STUDY**

A literature study was conducted with the objective of establishing and reviewing the literature related to the study. The review was done using various sources of information which discuss HIV/AIDS education, communication, mass media, community media and communication campaigns on HIV/AIDS. A questionnaire for the selected sample was developed from the literature review conducted.

### **1.7 RESEARCH METHODOLOGY**

Data was collected through questionnaires administered to 341 high school learners. Three out of the eight high schools from the Mthatha Central Business District (CBD) in the Eastern Cape were identified for the study. The selection of these high schools was based on the demographics of the learners which are age, gender and background. To ensure validity and reliability of the study, the questionnaire was scrutinised by an HIV/AIDS facilitator (expert in the field), an academic and a statistician. Reliability was also addressed using Cronbach Alpha.

## **1.8 DIVISION OF CHAPTERS**

Chapter two presents an overview of the theoretical foundation. A critical assessment of the literature and its relevance to the study is conducted in this chapter. Emphasis is on HIV/AIDS education, communication, mass media, community media and communication campaigns on HIV/AIDS and their effects thereof.

Chapter three examines the methodology employed in the study through the determination of the research instrument, sample, and the method of obtaining data, reliability and validity of the research study.

Chapter four presents the results of the fieldwork conducted in order to analyse and interpret the data gathered from the interviews. These findings shall either confirm or reject the literature review.

Chapter five presents an overview of preceding chapters. Conclusions are drawn from the findings of the study as well as recommendations based on the interpretation of data.

## **1.9 CONCLUSION**

This chapter introduced the research problem, objectives of the study and justified the necessity for the research. It also presented the limitations, key assumptions upon which the study is based and the methodology. Finally, the chapter presented an overview of the chapters that follow and laid the foundation for this dissertation. On this basis, the study now proceeds to chapter two which constitutes the literature review on various communication tools/campaigns.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 INTRODUCTION**

The previous chapter provided an outline of the study, which sets out to assess communication tools used to educate high school learners about HIV/AIDS education in the Mthatha area.

The number of school-going age youth infected with HIV/AIDS increases every year, making schools a priority area of focus for HIV/AIDS education. The Eastern Cape is faced with a high rate of pregnancies amongst learners which signals the lack of condom use. This puts these learners at a risk of being infected by the disease. The South African Institute of Race Relations (2013:1) adds that condom use is regarded as one of the important ways to curb the HIV/AIDS pandemic that is projected to have claimed close to 200 000 lives in 2013 alone. This high rate of infection signals a need for robust interventions in terms of HIV/AIDS communication.

This chapter examines the literature related to the study. Emphasis is on HIV/AIDS education, communication, mass media, community media and communication campaigns on HIV/AIDS and the effects thereof.

#### **2.2 DEFINING COMMUNICATION**

Hybels and Weaver (2004:7) define communication as any process in which people share information, ideas, and feelings. Furthermore, communication does not only involve the spoken and written word but also body language, personal mannerism, and style-anything that adds meaning to a message. Gamble and Gamble (2005:10) state that communication is a continuous stream in which everything is simultaneously a reaction and instigation. Thus, when one communicates with one or more people, one simultaneously sends and receives the message. In essence, these definitions agree on one thing, that is, communication is a two-way process that involves interaction and

information sharing. Therefore, communication is vital in sharing HIV/AIDS information with the target group in order to influence behavioural change.

Shober (2010:2) postulates that communication always involves sending and receiving information, ideas and images. Furthermore, there are different participants within the communication process that have roles they need to fulfil in order for the communication to be successful. DeVito (2005:5) states that communication occurs when one sends or receives messages and when one assigns meaning to another person's signals. Cleary (2000:2) defines communication as a process of creating meaning between two or more people through the expression and interpretation of messages.

Gamble and Gamble (2005:9-10) differentiate between five types of communication, namely, interpersonal, group, public, mass and online or machine-assisted communication. This study considers two types of communication, namely, public and mass communication. Through public communication, one informs and persuades the members of an audience to hold certain attitudes, values or beliefs so that they will think, believe, or act in a particular way. During mass communication, the media entertains, informs and persuades an individual. In essence, both public and mass communication involve influence one's behaviour/attitude, and thus are both relevant methods of communication for the study under review.

Singhal and Rogers (2003:206) argue that in the absence of a vaccine for therapeutic cure, communication strategies represent a key "social vaccine" against HIV/AIDS. The aforementioned authors claim that combating HIV/AIDS presents challenges on following four fronts:

- 1) *Transmission challenges*: HIV/AIDS is invisible, silent, and non-debilitating for many years, yet infectious. It can spread through multiple transmission modes, and does not discriminate on the basis of age, gender, religion, or geography. The role of communication here is to help make the public knowledgeable about the existence of HIV/AIDS, the means of its transmission, and how to prevent infection;

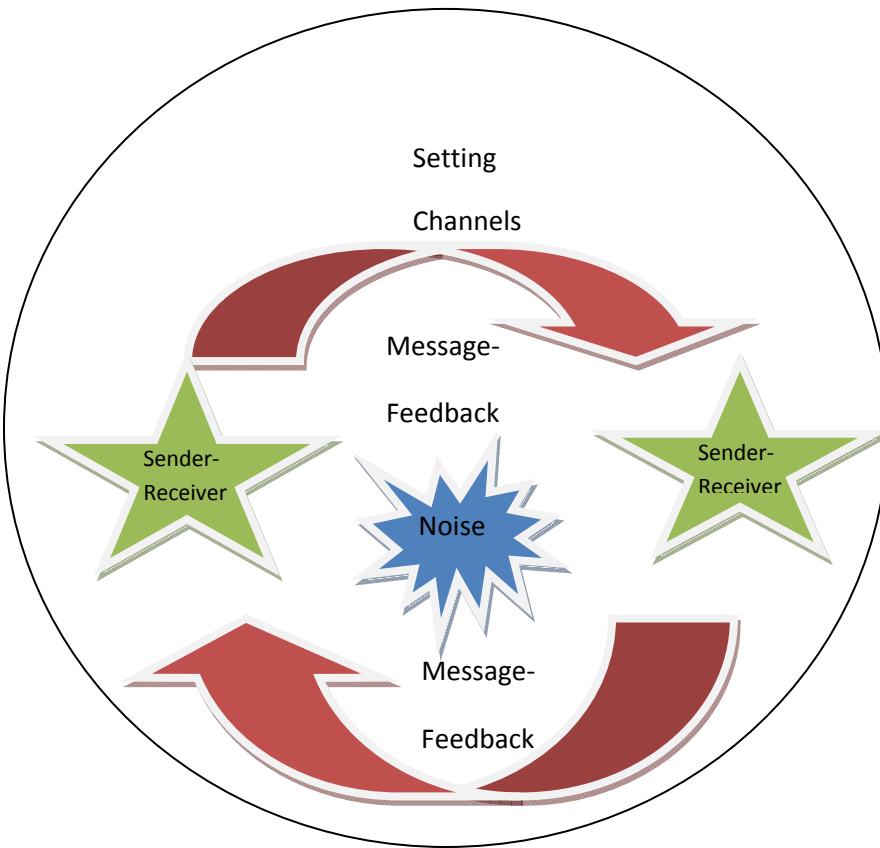
- 2) *Behavioral challenges*: HIV/AIDS deals with human behaviours that often involve interaction between unequal parties. Here, communication helps to create awareness of these inequalities, and to institute policies that may increase equality;
- 3) *Response challenges*: Efficacious responses to HIV/AIDS involve the adoption of behaviours that depend on the compliance of more than one party (for example, condom use), behaviours that depend on the availability of services (for example, HIV testing). Here the role of communication is to convey the prevention message to the intended audience, and to bring about behaviour change; and
- 4) *Targeting challenges*: HIV/AIDS deals with populations that are often hard to reach by means of conventional media channels, such as individuals marginalized by society (for instance, commercial sex workers), those who are most vulnerable and powerless (for instance, women and children). Communication messages such as those from peer educators can get through to these unique target populations.

### **2.3 THE COMMUNICATION PROCESS/ MODEL**

Cleary (2000:2) indicates that when studying communication, it is examined theoretically. This is done by using models which are illustrations or constructions intended to help with the understanding of elements and interactions in the communication process. Erasmus-Kritzinger, Bowler and Goliath (2010:4) state that a good model should indicate the main elements of communication and the relationship between these elements clearly.

One such model is the communication model, as illustrated in figure 2.1

**Figure 2.1 The Communications Model**



**Source: Hybels and Weaver (2004:9)**

The process indicates that for the communications model to be effective, both the sender and receiver must fully participate. The message is sent through the relevant channel to the receiver who will, in turn, give feedback. The sender gets an indication of the success/failure of the message from the feedback received. Figure 2.1 illustrates how HIV/AIDS education may be communicated to high school learners using the processes identified in this model. These processes are further discussed below:

### **2.3.1 Sender-Receiver**

Hybels and Weaver (2004:9) illustrate in figure 2.1 that people get involved in the communication process because they have information, ideas, and feelings they want to

share. This sharing, however, is not a one-way process, where one person sends ideas the other receives them, and then the process is reversed. In most communication situations, people are sender-receivers, both sending and receiving at the same time. This means learners would be in a position of being champions of HIV/AIDS education to other fellow learners by being both receivers and senders of information.

### **2.3.2 Message**

Gamble and Gamble (2005:10) argue that during every interpersonal, small group, or public communication encounter, one sends and receives both verbal and non-verbal messages. In essence, a message is the content of a communicative act. Everything a sender or receiver does or says is a potential message as long as someone is there to interpret the behaviour.

### **2.3.3 Channel**

Barker and Gaut (2002:11) indicate that the channel is the conduit through which a message is sent. One may decide that it is better to deliver some news face-to-face rather than by phone or e-mail. One's motives, goals, and familiarity with a particular channel may influence one's choice in selecting a channel. In addition, the message may have more impact on students when a relevant medium is used to communicate HIV/AIDS.

### **2.3.4 Noise**

Erasmus-Kritzinger *et al.* (2010:6) postulate that noise is referred to as a communication barrier or interference. During the communication process, something may prevent communication from taking place successfully. This could be anything which causes communication breakdown or prevents the receiver from receiving the message.

### **2.3.5 Feedback**

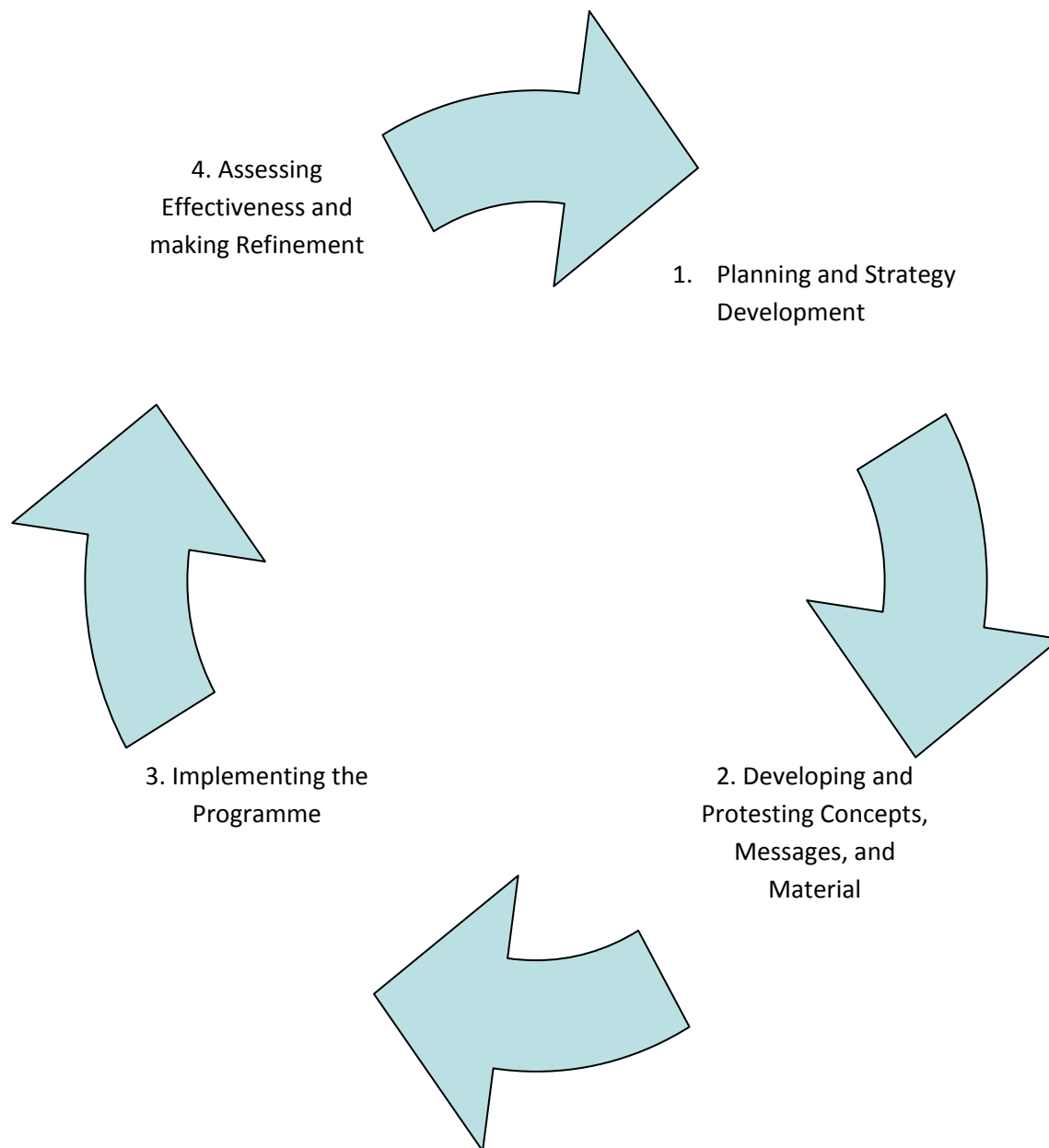
Mersham and Skinner (2002:18) explain that decoding is the reverse process that occurs in the mind of the recipient. It is the activity required to interpret the sensory data into meaningful information. To this, Hybels and Weaver (2004:11) add that feedback is vital to communication because it lets the participants in the communication see whether ideas and feelings have been shared in the way they were intended. Feedback, therefore, should serve as a basis for all stakeholders working hand in hand in a fight against HIV/AIDS to determine whether communication sources available to high school learners about the pandemic are, in fact, effective. Figure 2.1 illustrates how HIV/AIDS education may be communicated to high school learners using the processes identified in this model.

### **2.4 HEALTH COMMUNICATION**

According to the Healthy People 2010 Information Access Project (2009:1), health communication encompasses the study and use of communication strategies to inform and influence individual and community decisions that enhance health. Furthermore, health communication can help raise awareness of health risks and solutions. According to the International Conference on AIDS (2004:1), HIV/AIDS communication needs to evolve as the HIV and AIDS epidemic evolves. The communication model presented in figure 2.1 illustrates how health communication can be used to influence behaviour.



**Figure 2.2 Health Communication Programme Cycle**



**Source: National Cancer Institute (2002:4)**

The Health Communication Cycle shows steps that are taken when planning a health communication campaign. The National Cancer Institute (2002:4) argues that for a communication program to be successful, it must be based on an understanding of the

needs and perceptions of the intended audience. It is important to remember that these needs and perceptions may change as the project progresses so as to be prepared to make changes to the communication programme as one proceeds.

#### **2.4.1 Planning and Strategy Development**

The planning and strategy development stage consists of outlining plans to communicate health education in an effective manner. Effective communication methods that will be utilised for the campaign are decided in this stage for implementation. This is where stakeholders decide on various communication tools that are used to educate high school learners about HIV/AIDS, that is, mass communication, peer education, community media, and so on. Bensley and Brookins-Fisher (2003:59) state that strategy is a general plan of action that may encompass several activities and considers the characteristics of the target population.

#### **2.4.2 Developing and prototyping concepts, messages and material**

Developing and prototyping concepts, messages and material is a stage in which content is developed on the target audience. Aligning the content makes it easier to achieve the objectives of the campaign. Bensley and Brookins-Fisher (2003:69) indicate that the strategy selected will influence the type of messages the target audience will receive. Furthermore, effective messages are based on how the method will bring about change to appeal to its intended audience. A message is more likely to be effective if it possesses specific characteristics that appeal and relate to its audience.

#### **2.4.3 Implementing the programme**

Implementation of the programme/campaign involves distribution of material produced to reach the target audience.

#### **2.4.4 Assessing Effectiveness and making refinement**

This is the stage where stakeholders go back to the drawing board and assess the effectiveness of the campaign and make adjustments, where necessary. Figure 2.2

presents that assessment in Health Communication; a clear strategy needs to be developed with relevant messages and channels for its implementation. The National Strategic Plan (2007:6) states that Government developed this plan to address HIV/AIDS pandemic. It is the purpose of this study to review relevance of messages developed emanating from this plan, channels used to disseminate these messages, as well as the assessment of this plan through received feedback.

## **2.5 COMMUNICATION TOOLS/CAMPAIGNS**

Baden (2005:543) points out that a communication campaign is an organised exercise of significant scale. This means that campaigns are planned activities based on the target audience. According to the World Health Organisation (2008:1), all countries in the region currently have national AIDS prevention and care programmes and are organising efforts to combat the spread of HIV. Such initiatives include Information, Education and Communication (IEC), condom programming, providing Sexually Transmitted Disease (STD) services and ensuring blood safety. The general goal of IEC is to promote and support appropriate changes in behaviour, especially among populations with high-risk behaviour. This report concludes that while cultural differences are likely to require different styles of presentation of material between countries and between different target groups, the desired behaviours or behavioural changes will be similar (or even the same).

The Nelson Mandela Foundation (2005:25) indicates that HIV/AIDS knowledge and awareness is often represented as occurring mainly as a product of HIV/AIDS campaigns. Such campaigns typically focus on key knowledge areas and include informing diverse audiences about behaviours and practices necessary to prevent HIV infection, encouraging the uptake of services and providing information on other aspects of HIV/AIDS. Furthermore, HIV/AIDS includes political and social communication emanating from diverse sources (for example, political, religious, traditional and other leaders), and a considerable body of HIV/AIDS information exists in the mass media beyond the sphere of formal campaign inputs. Such information occurs in the context of

news, but also increasingly, many talk shows, feature programmes and articles, and entertainment programmes include reference to HIV/AIDS. In essence, this means HIV/AIDS campaigns have an impeccable behavioural influence on HIV/AIDS awareness, thus preventing the spread of the epidemic.

## **2.6 COMMUNICATION TOOLS USED TO EDUCATE HIGH SCHOOL LEARNERS ABOUT HIV/AIDS**

There are various methods/sources used in a bid to educate high school learners about HIV/AIDS, namely:

### **2.6.1 CURRICULUM**

The Department of Education has included HIV/AIDS education in its curriculum to combat the pandemic. This is done through Life Orientation as a subject. Life Orientation covers social aspects of life such as values, attitudes, sexual behaviour and so on for learners to be able to make informed decisions on these issues.

Reasons behind adding HIV/AIDS education to the school curriculum are aimed at combating the HIV/AIDS epidemic. According to a research conducted by Averting HIV/AIDS (2009:1), many young people lack basic information about HIV and AIDS and are unaware of the ways in which HIV infection can be prevented. Schools are excellent points of contact for young people. This is because almost all young people attend school for some part of their childhood, and while they are there, they expect to learn new information, and are more receptive to it than they might be in another environment. Furthermore, education needs to be an ongoing process because each generation of young people needs to be informed about how they can protect themselves from HIV as they grow up.

Mishra (2005:34) postulates that school-based HIV/AIDS education programmes have been around since the last 5-10 years. Each programme has similar objectives, namely:

- The reduction of risky behaviours and attitudes that can lead to HIV infection;

- The promotion of positive attitudes and behaviours that will promote abstinence and charity and safer sex;
- Contributing to the creation of an environment in which the children are not being subjected to involuntary sexually activity; and
- Helping students to avoid infection through involuntary contact with contaminated body fluids (for example, through care of AIDS patients).

The World Health Organisation (2008:20) affirms that the purpose of school health education about AIDS/STDs is to prevent and control the spread of HIV/STD and raise the level of understanding about associated problems. It is further stated in this report that the first essential step in the development of school programmes on AIDS/STDs is the development of clear purposes. Although the purposes may be stated differently in different cultures, it is imperative that school programmes should be designed, implemented, and evaluated to ensure that young people understand the nature of HIV infection and the actions they can take to protect themselves and others from HIV infection and STD, and to counter fear and discrimination. This means that HIV/AIDS education seeks to inform young people about the pandemic and, to some extent, prevent it from spreading any further.

Mishra (2005:34-35) indicates that several reasons are commonly advanced for why the school is a particularly appropriate site for HIV/AIDS education. The first is that students are a captive audience. Due to the fact that children enroll in school at an early age, this author believes that the inclusion of HIV/AIDS education in the curriculum would seem to be an efficient and effective use of their time. The afore-mentioned author further claims that ensuring that the necessary knowledge, skills, and attitudes are inculcated in a manner that will lead to safe sexual behaviour calls for a range of learning objectives and related instructional strategies over the entire school cycle.

However, Gow and Desmond (2002:95) argue that HIV/AIDS represents the largest single threat to the education process. It should be noted that one-third of all HIV-infected persons become infected during their school years, while a further third

become infected within two years of leaving school. This confirms schools as a high-risk environment but also suggests that it is the key strategic ground on which the battle to mitigate the impact will be won or lost. The joint United Nations Programme against HIV/AIDS (2008) points out that young people also need life skills such as decision-making, communication and negotiation skills. They need to understand the concepts of risk behaviour such as unprotected sex and the use of drugs, the possible consequences of such behaviour and how to avoid them. They also need to know where to go for services and help. HIV education should cover all these aspects.

Parker, Rau and Peppas (2007:54) indicate that the South African Broadcasting Corporation (SABC) has an educational division that includes a wide range of HIV related programming. Apart from the broadcast of Khomanani programmes, Soul City and Soul Buddyz, a number of other programmes are developed in partnership with the broadcaster.

### **2.6.2 SEX EDUCATION**

According to a research conducted by Averting HIV/AIDS (2010), sex education that focuses on abstinence is based on the belief that encouraging young people not to have sex until marriage is the best way to protect themselves against HIV infection. This approach limits AIDS education by not providing information about how young people can protect themselves from HIV infection if and when they do choose to have sex. It is vital for HIV prevention that schools provide comprehensive sex education which educates about the importance of condom use, as well as promoting delayed initiation of sex.

Learners should be informed broadly about the dangers of engaging in unprotected sex, early initiation of sex, protection and HIV/AIDS. Sex education helps to prepare the youth for a healthy adult relationship by increasing their knowledge and helping them to explore attitudes, feelings and values about human development, relationships, dating and healthy sexual decision making. Sex education is included in schools' curriculum through Life Orientation and Peer Education. The content of the HIV/AIDS education covers prevention, abstinence, protection and encourages the youth to take a stand and

say “no” to sex. Bhatia, Grover and Gupta (2009:108) postulate that a balanced, realistic sexuality education which includes information on both abstinence and contraception can delay a teen’s onset of sexual activity, increase the use of contraception by sexually active teens, and reduce the number of their sexual partners. This means that the content of messages communicated should be made as simple as possible to avoid stigma and misconceptions that could be caused by ambiguity.

### **2.6.3 MASS COMMUNICATION**

In addition to school’s curricula, other communication about HIV/AIDS is available through the mass media. According to Brand South Africa (2010), various AIDS awareness campaigns run by government and NGO partners through mass media are bearing fruit. There is, currently, a high level of awareness among youth on HIV/AIDS. Furthermore, Life skills education, which incorporates HIV/AIDS education, is now a compulsory part of the school curriculum. The media is one of the most powerful tools that can be used to communicate HIV/AIDS to learners effectively. According to Gamble and Gamble (1999:483), the media affects one’s awareness, knowledge, attitudes, and behaviour through advertisements, various programmes, national and international seminars/workshops because the media champions the HIV/AIDS awareness campaign. However, despite all these efforts, high infection continues, hence the study under investigation. Mass communication/media is divided into the following:

- i) Television;
- ii) Radio; and
- iii) Entertainment education (loveLife, Khomanani,Tsha-Tsha, Soul city/soul buddys).

Parker *et al.* (2007:23) postulate that mass media approaches are best suited to simplified and discrete messages or themes which can be expanded, applied and nuanced through other forms of communication. Approaches utilized beyond mass media include various degrees of interaction that may directly or indirectly involve interpersonal communication. Some examples are: aesthetic approaches such as

drama, songs, poetry and murals; small-media approaches such as leaflets and posters; and specific forms of interpersonal communication such as peer education, counseling and discussion as products of resource and service delivery.

Furthermore, nuanced and localised sub-national and non-mass-media communication approaches allow for wide variations to be addressed. Examples of these variations include: differences in culture, language, race, religion, age, economic level, institutional dimensions, workplaces and schools, and level of HIV risk such as migration and sex work. Virtually, all the programmes reviewed have employed multimedia approaches typically including a cascading communication model that devolves to activities beyond mass media. With half these programmes implemented, if not all, HIV/AIDS awareness would be constant on the minds of young people, hence the study underway. In addition to citing examples taken from programmes in the mass media, schools can also look into playing clips during Life Orientation classes. This will also help those learners that do not have access to television or radio and, most importantly, it will eliminate misconceptions as there will be discussions around the content of the clip.

#### **2.6.3.1 Television**

Television has a number of programmes dedicated to HIV/AIDS education. These are in a form of short stories, commercials and so on. Schools make use of these stories and commercials as examples in putting more emphasis on HIV/AIDS education. Kundra (2005:370) indicates that television has a profound impact on our society. Furthermore, television has changed the lifestyles of many people and has become a major influence in our culture. According to loveLife (2009:22), three out of every four South African households have access to television. Thus, television programming is a key component of the loveLife strategy. Furthermore, loveLife reaches young people through various television programmes and public service announcements.

According to the SABC (2009:1), the SABC is South Africa's national public service broadcaster. As such, it is obliged to provide a comprehensive range of distinctive programmes and services. It must inform, educate, entertain, support and develop



culture and education and, as far as possible, secure fair and equal treatment for the various groupings in the nation and the country, while offering world-class programming on television. The SABC's television channels attract more than 17.5 million adult viewers daily, reaching 89% of the total adult TV-viewing population (2009:1).

#### **2.6.3.2 Radio**

Radio also has a number of programmes that specifically focus on HIV/AIDS education. This means radio is one of the sources that can be used to effectively communicate HIV/AIDS to learners through its entertainment programmes such as music. According to the Overseas Development Institute (2009:1), radio has an enormous potential to communicate to a wide audience. Furthermore, it also has the advantage of being able to 'bring to life' developmental issues in an interesting and effective way. According to loveLife (2009:23), radio is South Africa's most important source of public information, reaching 97% of the country's households. To this, loveLife produces weekly programmes that are presented by young people in national radio stations as well as community radio stations. A large variety of interesting topics are discussed during radio programmes throughout the year. These programmes are specifically designed to give opportunities to the public to participate in the dialogues or debates. Adam and Harford (1999:44) indicate that for radio to work, partnerships need to be created with interested groups that can support the media campaign with fun events on the ground and mobilize school children.

According to the SABC (2009:1), the SABC's national radio network comprises 18 radio stations. Fifteen of these are dedicated specifically to public service broadcasting and include 11 full spectrum stations, one in each of the official languages of South Africa. The SABC radio also has a regional community station. The Nelson Mandela Foundation (2005:98) points out that most South Africans access media a few days a week or more. Exposure to radio is highest, followed by television, newspapers and magazines. The aforementioned author further claims that the internet access is low although overall exposure to mass media is high, one out of five people do not access

any major form of mass media a few days a week or more. Radio is the primary mass medium in the country as a whole and is particularly important in rural areas. With regard to television in informal and rural areas, a little over half of the respondents have exposure to television a few days a week or more. Urban-rural distinctions are even more marked for exposure to print media and the internet.

### **2.6.3.3 *Entertainment education***

Singhal and Rogers (2003:289) describe entertainment-education as the process of purposely designing and implementing a media message to both entertain and educate, in order to increase audience members' knowledge about an issue, create favourable attitudes, shift social norms, and change the overt behaviour of individuals and communities. The larger purpose of entertainment-education programming is to contribute to the process of directed social change, which can occur at the individual, community, or societal level. The entertainment-education strategy contributes to social change in two ways:

- 1) It can influence audience awareness, attitudes, and behaviours towards a socially desirable end. Here, the anticipated effects are located in the individual audience members; and
- 2) It can influence the audiences' external environment to help create the necessary conditions for social change at the group or system level. Entertainment-education media can serve as a social mobiliser, an advocate, or agenda-setter, thereby influencing public and policy initiatives in a socially desirable direction.

Furthermore, entertainment-education programmes represent a viable weapon in the worldwide war against HIV/AIDS. Entertainment-education on HIV/AIDS has the ability, therefore, to influence behaviour change amongst high school learners.

The National Strategic Plan (2007-2011:44) states that the Life Skills programme has been extended to many schools in South Africa, and significant progress has been made in building capacity among educators. Behavioural change, however, remains a

problem, and reports indicate that consistent condom use among the youth is still not optimal.

The South African Broadcasting Corporation (SABC) plays a vital role in HIV/AIDS education. SABC (2009:1) points out that SABC education is a world-class provider of education broadcasting content that promotes human dignity, equality and the establishment of inclusive societies, knowledge, skills, values and attitudes that help to build individuals, families, communities, societies and nations. Entertainment education is divided into loveLife programmes and the Khomanani campaign.

**a) *loveLife Campaign***

LoveLife (2009:2) indicates that loveLife is a lifestyle brand promoting healthy, HIV-free living among South African teenagers. Organised under the auspices of the new loveLife Trust, loveLife combines a sustained high-powered multi-media campaign with nationwide community-level outreach and support programmes for youth. loveLife's programmes are implemented by national youth volunteer service corps known as groundBREAKERS and *Mpintshis* in partnership with community-based non-government organisations, schools and government clinics across South Africa. According to a sourcebook of HIV/AIDS prevention programs (2004:97), loveLife's objectives are formulated in response to findings that most existing HIV/AIDS education programmes have had limited impact on sexual behaviour. loveLife began with a three-pronged approach. Publications on Adolescent Sexual and Reproductive Health (ASRH), relationships and youth issues were developed and distributed through newspapers and directly to schools, clinics, and loveLife's youth centres. All these approaches were aimed at curbing the HIV/AIDS pandemic amongst young adults in South Africa.

Kay (2005:1) maintains that loveLife is South Africa's national HIV prevention youth programme. It was launched in late 1999 by a consortium of leading South African public health organisations and is now a key part of South Africa's national response to the HIV/AIDS epidemic. Governed by the independent loveLife Trust, loveLife has established a comprehensive, national-scale programme which includes: national youth

corps of 1 500 Groundbreakers (18-25 year old youth peer educators) who provide community-level outreach and support to young people; the participation of 3 500 schools in loveLife programmes; sixteen regional youth centres operating in all nine provinces and a sustained high intensity media campaign designed to raise awareness throughout the country about HIV prevention and help drive youth to information and services.

A sourcebook of HIV/AIDS prevention programs (2004:99) states that loveLife aims to motivate and equip young people to make healthy choices in all parts of their lives. The loveLife programme's objectives are to:

- Target the groups at highest risk;
- Deal with the broader context of sexual behaviour;
- Make condom use a normal part of youth culture;
- Sustain education and prevention over many years at a sufficient level of intensity to hold public attention;
- Let young people make informed choices;
- Encourage young people to share responsibility; and
- Encourage positive sexuality.

This study partly seeks to ascertain whether communication tools used in HIV/AIDS education are perceived by learners to have positive effects. This will be achieved by assessing, amongst others, the above objectives.

Parker *et al.* (2007:54) state that loveLife is a youth-focused campaign using mass media and outreach activities. The primary focus is on youth aged 12-17, and its reach is via television and radio programming, broadcast advertisements, billboards and promotional items. A youth magazine, *Scanto Uncut*, is also produced. Activities and events include loveTours, which comprise a travelling broadcast unit; loveGames, which

utilize sports events; a loveTrain, which conducts events in towns along the rail network, and Youth-Centres, which provide youth-friendly services and activities at clinics. A youth helpline is also provided. loveLife's primary focus is on safer sex.

This means that the Department of Education should have in its curricula, a platform in which young adults are exposed to these loveLife programmes by playing recordings of these programmes, thereby ensuring enough and constant circulation of pamphlets to learners. This would close a possible gap that might be emanating from learners who lack access to television or radio. A sourcebook of HIV/AIDS prevention programs (2004:101) postulates that loveLife has combined traditional marketing techniques with the principles of sound public health education to create a lifestyle brand with which young people will associate healthy positive living. The media campaign is constantly being revised and adapted so that it will retain the attention of young people. Large billboards are displayed in rural and urban areas. The aim of these billboards is to get young people talking about ASRH issues. Harrison (2006:1) postulates that loveLife billboards are deliberately provocative to make them stand out from all the clutter about HIV and AIDS, to keep young South Africans engaged with the loveLife campaign, but, most importantly, to ensure that South Africans continue to debate about behaviours and attitudes driving the epidemic.

#### **b) *loveLife billboard campaign***

loveLife billboards have content that is based on the ABC message. The school's curriculum also bases its sex education on the ABC message, meaning messages in these billboards should be incorporated in the curriculum. loveLife (2008:19) indicates that billboards have been particularly effective in generating publicity for social issues requiring debate in public forums as well as to encourage public dialogue in this regard. Billboards were also used to promote the tollfree HIV/Aids counselling service. loveLife (2004:25) maintains that loveLife took its outdoor campaign to new heights. loveLife's national billboard campaign has contributed significantly to the awareness of loveLife and its programmes (64% of youth overall reported having seen/heard about loveLife billboards). loveLife established a more intimate level of outdoor communication with a

fresh, new look and redistributed its national holding across a greater number of 96 and 48 sheet billboards countrywide.

loveLife (2008:22) states that these billboards are smaller, unlit and, therefore, more affordable, thus ensuring broader geographic exposure. loveLife ran a “foundation creative” on its billboard holding for the full year (as opposed to the three creative changes of previous years). The use of outdoor media has always been seen as a method to sustain the engagement of young people with the loveLife campaign by stimulating discussion around the key issues relevant to HIV/Aids prevention and securing healthy prospects for young South Africans.

**Figure 2.3 loveLife billboard campaign**



**Source: loveLife (2006:12)**

loveLife (2006:13) argues that having unprotected sex especially with a number of partners substantially increases chances of contracting HIV (figure 2.3). The aforementioned author further indicates that young South Africans are particularly vulnerable as they are becoming sexually active at the peak of the HIV epidemic, which means there is a large pool of people who are already infected with HIV. Therefore, their chances of contracting HIV are much higher than young people in other countries.

Reduction in the number of partners, remaining faithful in relationships and reducing concurrent sexual relationships is crucial. Overall, males report a greater number of sexual partners than females and younger males still show the highest rate of multiple partners. Thus, if young people know their partner is seeing other people, they must get out of that relationship. If they are in a new relationship, they must make this as the basis for the relationship – it's only me or otherwise I am out of here and play by those same rules too. Figure 2.3 encourages young people to take responsibility for their well-being and be faithful to one partner.

**Figure 2.4 loveLife Billboard Campaign**



**Source: loveLife (2006:12)**

loveLife (2006:13) argues that young people are at risk if they do not know their partner's history of sexual behaviour. Furthermore, if young people are sexually active,

condoms are an important means of preventing unwanted pregnancies since these offer the only protection against STIs and HIV infection. The use of condoms is, therefore, key in reducing new HIV infections. There is a need to ensure that condoms are used consistently each and every time young people have sex and that both males and females insist on condom usage even in long-term relationships. Figure 2.4 promotes the C for Condomise in the ABC message for young people to protect themselves when engaging in sexual activities.

**Figure 2.5 loveLife Billboard Campaign**



**Source: lovelife (2006:12)**

It is important to know one's HIV/AIDS status as it helps prevent the spread of the disease. In addition, loveLife (2006:13) states that figure 2.5 was used to prompt discussion about being tested for HIV and knowing one's status. It also proved to have the greatest support from young people in the pre-test phase where message take-out included positive statements that unless young people know that they truly love each



other, they will not have sex. Using protection consistently is crucial, especially so if one is HIV positive to prevent re-infection. Figure 2.5 encourages young people to get tested and know their status prior to engaging in sexual activities.

**Figure 2.6 loveLife Billboard Campaign**



**Source: *lovelife* (2006:12)**

Learners are often subjected to pressure to engage in sexual relations. loveLife (2006:13) points out that most young girls report that their first sexual experience was coerced, and this is supported by the fact that the most common calls to the loveLife call centre are about relationship advice (feeling the pressure to have sex from one's partner and friends). Peer pressure, coercion and violence are the primary influences on premature adolescent sexual debut and are characteristic of general adolescent

behaviour. Sex should not be the basis of a loving relationship, and young girls and guys need to be supported in standing their ground and saying NO to this pressure. Figure 2.6 encourages young people not to succumb to peer pressure by abstaining from sex.

loveLife billboards send a clear message about HIV/AIDS: abstinence, condomising and being faithful to one partner. High school learners can, therefore, be educated about HIV/AIDS by using messages on these billboards as one of the communication methods/tools.

### **c) *Khomanani Campaign***

According to Health Insite (2007:1), the Khomanani campaign is a South African government mass media and communication initiative that aims to reduce new HIV infections and increase treatment, care and support for those infected and affected by HIV/AIDS. The establishment of the Khomanani (caring together) campaign has resulted in a number of advertisements on television, radio, billboards, leaflets and flyers. Mseleku (2007:1) points out that the Khomanani campaign is expected to play a critical role in the implementation of the National Strategic Plan for HIV/AIDS for 2007-2011, which serves as a framework for South Africa's response.

Parker *et al.* (2007:53) indicate that Khomanani is the primary national HIV/AIDS campaign in South Africa and falls under the Department of Health. A range of similar sub-national campaigns, which draw on resources of the Khomanani campaign, are run by provincial governments, many of which also conduct additional provincial campaigns. HIV/AIDS materials are also available through a Red Ribbon Resource Centre run by Khomanani, which delivers material at no or low cost. The Department of Education conducts lifeskills education in schools; the Department of Social Development focuses on the needs of the children and people living with HIV/AIDS; the Department of Defence promotes HIV awareness and response in the armed forces.

The Khomanani campaign employs wide-ranging mass media messaging in combination with interpersonal communication in selected sites. The campaign also

provides support through a national toll-free helpline. An annual pledge-day, Khomanani Day, includes live broadcasts and focuses on South Africans making a commitment to the HIV/AIDS response. An interactive television talk show named Choice provides a forum for youth to discuss HIV and sexuality and has been broadcast weekly in a 13-part series. According to the International Conference on AIDS (2004:1), the Khomanani (caring together) campaign is based on a clear understanding of the priorities in HIV/AIDS prevention and care and of efficacy of mass communication.

#### **d) *Soul City and Soul Buddyz***

Parker *et al.* (2007:53) believe that both *Soul City* and *Soul Buddyz* take a multimedia approach anchored by a television and radio series. The programmes cover a range of themes, including a regular focus on HIV/AIDS, and the series have been broadcast for a number of years (*Soul City* since the mid-1990s, and *Soul Buddyz* over the past six years). The series are backed by booklets and posters with various themes; these include HIV-related topics. According to *Soul City* (2005:1), *Soul Buddyz* is a 26-minute, 26-episode drama series set in an urban centre in South Africa. It closely reflects the lives, struggles and joys of 8 -12 year olds in our changing society. Interwoven into the drama are serious issues which children deal with on a daily basis, including: AIDS, relationships, sexuality, bullying, abuse, corporal punishment, road safety and other accidents. The Department of Education, through the curriculum, should have DVD's of HIV/AIDS programmes such as *Soul City* and *Soul Buddyz* and factor them into subjects such as Life Orientation. This will benefit those children who have no access to television/radio through debate sessions that can emanate from watching these programmes.

### **2.6.4 COMMUNITY MEDIA**

Community media is one of the tools that can be used to communicate HIV/AIDS to learners. Catalyst (2001:1) postulates that community media is a powerful vehicle for giving the voiceless a voice. Community media refer to community radio stations and community and regional newspapers. McKee *et al.* (2004:78-81) state that the

approaches taken in community-based responses to HIV and AIDS can differ in the degree to which communities have control over the design of programming and implementation of activities. The following communication activities and channels may be useful, depending on past experience and budget allocation for such interventions:

- **Interpersonal Communication (IPC) and Group Communication:** These are the most widely used and easiest channels to organise. However, the quality of IPC and group communication processes depends on good training in IPC and group-facilitation methods. Too often, it is assumed that anyone can be a communicator, but the community may resist poorly trained unskilled mobilisers. This means that groups are formed to discuss issues related to HIV/AIDS education in order to inform and educate one another. This can be used to model peer education amongst learners.
- **Community-Based Entertainment-Education (E-E):** E-E strategies work well at the community level through channels such as theatre, sports and music events. However, such strategies also require special training of community-level agents in HIV/AIDS issues to avoid giving incomplete or contradictory messages, reinforcing gender stereotypes, or stigmatizing certain groups. E-E methods are most effective when coordinated with other community-based programme components. Schools can also use this entertainment tool to educate learners about the HIV/AIDS pandemic through extramural activities such as drama.
- **Singhal and Rogers (1999:8)** postulate that entertainment-education is the process of purposely designing and implementing a media message to both entertain and educate in order to increase audience knowledge about an educational issue, create favourable attitudes and change overt behaviour. Furthermore, entertainment media traditions in music, drama and print have been utilised to promote messages about educational issues. Schools can encompass entertainment education in their curriculum by understanding what learners are exposed to/what information on HIV/AIDS education is at their disposal in their

respective communities and incorporate that in the discussions about the pandemic.

- McKee *et al.* (2004:81) state that local mass media such as community radio stations may be effective but rarely have personnel and technical capacity to continuously develop informed HIV/AIDS programming without a good deal of assistance. Adam and Harford (1999:53) add that a community radio is the most interactive format of all. When it is working well, a community radio is run by the community for its benefit. Lastly, it is in touch with the concerns of the listeners, and it is the focal point for contributions and debates on those concerns.
- Pre-produced documentaries, drama and regular newsletters on HIV/AIDS issues may provide valuable content. Programme presenters and disk jockeys are in dire need of HIV education and guidelines for ethical reporting on HIV and AIDS in order to avoid transmitting misinformation and inadvertently increasing stigma.

Mishra (2005:72) indicates that there are a variety of community-based programmes that are addressing HIV/AIDS education. Some of the programmes are old, and HIV/AIDS is being incorporated as part of their ongoing activities, while others have evolved as the need for more targeted HIV/AIDS prevention messages to youth arose. Card *et al.* (2007:189) add that many community-level interventions seek out people who are capable of influencing others and disseminating an intervention throughout their social networks. These are referred to as *social influence interventions*. Social influence interventions generally follow the following steps:

- 1) Identification and recruitment of popular opinion leaders;
- 2) Training of opinion leaders to become risk-reduction behaviour change agents;  
and
- 3) Dissemination of risk-reduction messages by opinion leaders to friends and other members of their social network.

loveLife (2009:37) maintains that through sustained face-to-face interaction with community-based peer mobilisers (groundBREAKERS and Mpintshis), young people receive direct and personalised information and support to live healthy lives. Young people also have the opportunity to participate in lifestyle (called *loveLifestyle*) programmes which are designed to empower and equip them to make positive and informed decisions about their future. Furthermore, community outreach efforts are enhanced through the loveLife Games festivals, which are life-affirming sport and recreation events aimed at promoting a healthy lifestyle. In addition, loveLife toll-free helpline for the youth provides personalised reproductive health information and professional counselling services to young people.

#### **2.6.5 PEER EDUCATION**

According to Averting HIV/AIDS (2010), peer education is a less formal method of educating, which can be more accessible to people who are not used to or dislike a formal classroom environment. At the same time, peer educators are trained on the subject, thus ensuring that the information they provide is accurate and reliable. This makes peer education a very effective way of reaching marginalised groups. Furthermore, it is education provided by somebody who is either directly part of the group receiving the information, or who is from a similar social background.

The United Nations Children's Fund [Unicef] (2005:1) indicates that Peer Education is based on the reality that many people make changes not only based on what they know, but on the opinions and actions of their close, trusted peers. Peer educators can communicate and understand in a way that the best-intentioned adults cannot do, and can serve as role models for change.

Peer Educators are typically the same age or slightly older than the group with whom they are working. They may work alongside the teacher, run educational activities on their own, or actually take the lead in organising and implementing school-based

activities. Peer educators can help raise awareness, provide accurate information, and help their classmates develop skills to change behaviour.

McKee *et al.* (2004:78-81) state that Peer Education is an effective approach in disseminating important HIV and AIDS messages. The approach has many challenges but also much potential. It clearly represents an important mechanism for reaching specific subgroups with lifesaving messages about HIV and AIDS prevention, as well as supporting those infected. The above explanations indicate that Peer Education is an effective method of raising awareness on HIV/AIDS amongst high school learners. Schools utilise Peer Education as a tool to educate learners about the HIV/AIDS pandemic. This is based on the fact that learners of the same age easily communicate with their peers about sensitive issues around the pandemic such as stigma.

**Figure 2.7 Peer Education**



**Source: UNAIDS (2006)**

According to the United Nations Children's Fund (2005:1), many schools across the globe are offering a life-saving learning opportunity to their students. They are placing learners in the role of educator for the very important task of preventing HIV among themselves and their classmates. Peer Education is based on the reality that many people make changes not only based on what they know, but on the opinions and actions of their close, trusted peers. Peer educators can communicate and understand in a way that the best-intentioned adults can't, and can serve as role models for change. Figure 2.7 illustrates peers educating other peers about HIV/AIDS.

### **2.6.6 TEACHER TRAINING**

Schenker and Nyirenda (2002:1) argue that teachers need to learn additional skills, instructional methods and models, and, perhaps, change some of their old ways of teaching in order to effectively deliver school-based AIDS education using many different channels. Implementing HIV/AIDS education programmes is similar to the introduction of any innovation within the school. Teachers may feel threatened, tested, concerned and uncomfortable in this new role. Beyond mastering new teaching techniques, they must, both as teachers and as individuals, deal with and overcome their own social feelings of discomfort, as well as their biases and prejudices. For educators to be able to teach human sexuality and HIV/AIDS prevention to children and adolescents comfortably and competently, it is necessary that they be well trained, otherwise they will be at a disadvantage in dealing with populations at risk from HIV infection. HIV prevention and anti-discrimination are complex issues. They demand specifically experienced educators who have acquired the particular characteristics that allow them to be effective behaviour-changing agents in schools.

According to the World Health Organization (2010:1), before teachers can expect to help other adults and students avoid HIV infection, they will need to examine their own vulnerability to infection, their own knowledge of the disease and its spread, and their own attitudes toward helping others, especially students, avoid infection. In seeking support for teacher training, it is important to explain the unique qualities of the Training Programme to trainers, teachers and others who are involved in health, education and



HIV prevention. In summary, the primary focus of the Training Programme is skill-building.

**Figure 2.8 Teacher Training**



**Source: UNICEF (2005)**

Ruland, Savariaud, Traore, and Finger (2004) indicate that teachers are often the main adults other than family members with whom young people interact on a daily basis. In an era of HIV/AIDS, teachers play an even more critical role of being a source of accurate information and persons with whom young people can raise sensitive and complicated issues about sexuality. As the AIDS epidemic spreads, the need becomes

more urgent for teachers to discuss AIDS in the context of human development, sexuality and pregnancy prevention. Teachers also need to know how to protect their own health and the importance of not putting any of their students at risk through their own behaviours. However, to meet these expectations in the AIDS era, teachers need skills and knowledge, as well as support from the educational system and broader community. Figure 2.8 shows ongoing training of teachers on HIV/AIDS.

The literature review above has identified the core communication tools that are utilised to educate high school learners about HIV/AIDS. This information was used to construct a questionnaire to assess whether these tools are perceived as being effective in selected schools in the Mthatha area.

## **2.7 CONCLUSION**

This chapter has defined HIV/AIDS education and communication tools available for HIV/AIDS education. It further discussed the importance of Health Communication in the context of schools. A number of communication tools were discussed broadly to indicate their relevance in communicating with high school learners in a fight against HIV/AIDS. The curriculum becomes more critical in HIV/AIDS education due to the fact that, generally, almost all young adults attend school at some part of their lives.

Peer Education is also an effective approach of reaching marginalised groups due to the fact that young adults make changes not only based on what they know, but on the opinions and actions of their close, trusted peers. The increasing popular demand of mass communication, that is, television/radio/newspapers and social media, makes this source a 'must' use. This will ensure that more learners are reached. The next chapter discusses the methodology used in this study.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 INTRODUCTION**

The previous chapter reviewed literature related to the study. Emphasis was on HIV/AIDS education communication. It further discussed various HIV/AIDS awareness campaigns and the importance of Health Communication in the context of schools. This chapter describes the research methodology, sampling, target population, data collection method and validity and reliability.

#### **3.2 RESEARCH DESIGN**

Burns and Grove (2003:42) define research design as a blueprint for the conduct of a study that maximizes control over factors that could interfere with the study's desired outcome. The type of design directs the selection of a population, procedure for sampling, methods of measurement, and plans for data collection and analysis. Furthermore, the choice of research design depends on the researcher's expertise, the problem and purpose of the study, and the desire to generalise the findings. Bless and Higson-Smith (2000:63) point out that research design relates directly to a testing of a hypothesis. It is a specification of the most adequate operations to be performed in order to test specific hypotheses under given conditions. The researcher has used quantitative research in this study.

Neuman (2006:151) postulates that quantitative researchers emphasize precise measuring variables and test hypotheses that are linked to general casual explanations. Creswell (2003:18) points out that a quantitative approach is one in which the investigator primarily uses post-positivist claims for developing knowledge (that is, cause and effect thinking, reduction to specific variables, hypotheses and questions, use of measurement and observation, and the test of theories), employs strategies of inquiry such as experiments and surveys, and collects data on predetermined instruments that yield statistical data. According to Burns and Grove (2003:27), quantitative research is a formal, objective, rigorous, systematic process for generating

information about the world. It is conducted to describe new situations, events, or concepts in the world. The aforementioned authors suggest that there are four types of quantitative research, namely; Descriptive, Correlational, Quasi-experimental and Experimental research. Descriptive research is relevant to this study.

*Descriptive research:* Kerlinger and Lee (2000:450) state that descriptive research is the exploration and description of phenomena in real-life situations; it provides an accurate account of characteristics of particular individuals, situations, or groups. The outcomes of descriptive research include the description of concepts, identification of relationships, and development of hypotheses that provide a basis for future quantitative research.

Burns and Grove (2003:28) state that quantitative research is selected for this study due to the fact that it is used when large quantities of data need to be collected. It is more objective due to the fact that results are considered quantifiable and can usually be generalised to a larger population. The researcher aims to generalise findings received from collected data to be representative of high school learners.

### **3.3 TARGET POPULATION**

Babbie (2009:199) defines the target population as that aggregation of elements from which a sample is actually selected. Welman, Kruger and Mitchell (2005:52) indicate that population is the study object and consists of individuals, groups, organisations, human products and events, or the conditions to which they are exposed. The aforementioned authors indicate that a research problem relates to a specific population and a population encompasses the total collection of all units of analysis about which the researcher wishes to make specific conclusions.

Basavanthappa (2007:190) states that target population refers to the population that the researcher wishes to study, that is, the population about which the researcher wishes to make generalisations. The researcher has targeted high school learners from three out of the eight high schools within Mthatha Central Business District (CBD) in the Eastern Cape namely Mthatha High School, St Johns College and Christ The King High School.

### **3.4 SAMPLE**

Neuman (2000:200) defines a sample as a unit of analysis or case in a population. It can be a person, a group or an organization that is being measured. According to Alreck and Settle (2004:55), sampling simply means taking part of some population to represent the whole population. Buckingham and Saunders (2009:99) state that a sample may consist of only a tiny fraction of the whole target population, but provided it is selected carefully and methodically, it can provide remarkably accurate estimates of the parameters of the whole population. This study has targeted three high schools in the Mthatha Central Business District. These high schools were selected in relation to their location, the number of learners they enroll and the availability of all grades (grade 8-12) since other high schools only start enrolling from grade 10.

### **3.5 SAMPLE SIZE AND SELECTION**

Babbie (2009:224) states that a sample allows the researcher to make relatively few observations but gain an accurate picture of a much larger population. This study is based on non-probability sampling. The sample comprised three high schools in the Mthatha CBD which consist of a sum total of 3 000 learners. According to Sekaran (2003:294), for a population of 3 000, a sample of 341 is advised. The researcher, therefore, chose a sample size of 341. On this basis, using quota sampling, the sample size was 61, 60 and 220, respectively. This sample is informed by the total number of learners enrolled in all three high schools, which is 3 000. The selection of these high schools is based on the demographics of the learners, which are age, gender and background. Learners from all three selected high schools range from lower, middle and higher class, thus representing views from all societal levels. The schools are mixed-gender schools (both male and female students) and have different age groups of learners. Individual respondents were chosen using judgmental sampling.

### **3.6 JUDGEMENTAL SAMPLING**

Babbie (2009:193) postulates that judgmental sampling is a sample in which the units to be observed are selected on the basis of the researcher's judgment about which ones

will be the most useful or representative. Nardi (2007:119) indicates that judgmental sampling involves designating a group of people for selection knowing they have some traits that one wants to study. Neuman (2000:198) adds that judgemental sampling is an acceptable kind of sampling for special situations. It uses the judgment of an expert in selecting cases, or it selects cases with a specific purpose in mind. The researcher felt that the selected learners would represent the views of the target population on HIV/AIDS education. Alreck and Settle (2004:79) argue that judgemental sampling is where the researcher selects what he/she thinks is a “typical” sample based on specialist knowledge or selection criteria. In this study, judgemental sampling was used to select each school. The researcher selected each learner to ensure balance in terms of race, gender and school grades. An equal number of learners from each grade (10 learners per grade in all three schools) were selected to represent the rest of the learners.

### **3.7 DATA COLLECTION METHOD**

Leedy and Ormrod (2005: 85) state that research is a viable approach to a problem only when there is data to support it. The term “data” is plural (singular is datum) and comes from the past participle of the Latin verb *dare*, which means “to give”. Therefore, data are those pieces of information that any particular situation gives to an observer. Data was collected from the respondents through questionnaires that were administered by the researcher. According to Cormack (2000:168), questionnaires are designed to elicit information through written responses of subjects. Based on the literature review, core themes on the communication tools available to high school learners about HIV/AIDS were identified.

The literature review served as primary data in compiling the interview guide, and a set of questions consisting of open-ended and closed questions (see Annexure B) were developed. The questions were personally administered by the researcher in the form of interviews, which were face-to-face. The respondents were briefed beforehand on the objectives of the research study. The most important advantage and reason for choosing interviews for this research was that interviews are a flexible method of data

collection. The researcher could also explain and expatiate on questions to give more clarity to the respondents. The interview questions were directed at the participant's experiences and thoughts about the topic, which is: "Communication tools used to educate high school learners about HIV/AIDS education". The interviews served as a primary source of data collection. The data received provided a discussion of the results, allowing the researcher to analyse the responses in the next chapter.

### **3.8 DATA ANALYSIS**

Data was analysed using the latest version of SPSS. The appropriate statistical tests were applied. Hinton, Brownlow, McMurray and Cozens (2004:1) define SPSS as a statistical analysis package that allows the researcher to undertake a wide range of statistical analyses relatively easy. Furthermore, the researcher can perform complex statistical analysis on research data in a matter of minutes, or even seconds that would have been impossible to undertake just a matter of years ago without expert help and an enormous amount of time. Data collected was analysed and presented as findings using relevant graphs.

### **3.9 VALIDITY AND RELIABILITY**

Clark and Creswell (2008:275) indicate that, in quantitative research, discussions of validity have been common and the importance of validity has been long accepted, and this is well documented in the literature. Neuman (2000:164) states that reliability means dependability or consistency. It suggests that the same thing is repeated or recurs under identical or very similar conditions. Neuman (200:164) further claims that validity suggests truthfulness and refers to the match between a construct, or the way a researcher conceptualises the idea in a conceptual definition, and a measure. It refers to how well an idea about reality fits with actual reality. Silverman (2006:282) adds that reliability refers to the degree to which the findings of the study are independent of accidental circumstances of their production. It deals with replicability, that is, the question of whether or not some future researchers could repeat the research project and come up with the same results, interpretations and claims. The aforementioned author further states that in quantitative research, reliability usually refers to the extent

to which an experiment, test, or measurement yields the same result or consistent measurements on repeated trials. Validity, specifically, face validity, was addressed. The questionnaire was scrutinised by an HIV/AIDS facilitator (expert in the field), academic and statistician. Reliability was addressed using Cronbach Alpha.

### **3.10 CONCLUSION**

This chapter focuses on the research methodology employed in this study. It further explains the necessary research steps, the instruments used to gather data and the procedures followed in the administration and co-ordination of the research instrument.

Based on the data gathered from the interviews, the next chapter will deal with data analysis. This will analyse and interpret the information from the collected data and use the findings to either confirm or reject the literature review.



## **CHAPTER FOUR**

### **DATA ANALYSIS AND INTERPRETATION**

#### **4.1 INTRODUCTION**

The previous chapter discussed the research methodology employed for the study. It explained the necessary research steps, the instrument used to gather the data and the procedure followed in the administration of the research instrument. This chapter presents the results of the field-work conducted among grades 8, 9, 10, 11 and 12 learners at the three selected schools in Mthatha, namely: Christ the King High School, St Johns College and Mthatha High School. It sets out to analyse and interpret the data gathered from the distributed questionnaires.

The data collected from the responses was analysed with SPSS version 21.0. The results present the descriptive statistics in the form of graphs, cross tabulations and other figures for the qualitative data that was collected. Inferential techniques include the use of correlations and chi square test values, which are interpreted using the p-values.

#### **4.2 The sample**

In total, 341 questionnaires were dispatched, and 243 were returned, which gave a 70% response rate.

#### **4.3 The Research Instrument**

The research instrument consisted of 82 items, with a level of measurement at a nominal or an ordinal level. The questionnaire was divided into 6 sections which measured various themes as illustrated below:

Section A: Demographics;

Section B: Communication tools used to educate high school learners about HIV/AIDS in the Mthatha area;

- Section C: High school learners' perceptions on which communication tools are most used and most effective;
- Section D: Learners' perceptions on which communication sources are most used and most effective;
- Section E: The extent to which learners think the listed tools are the most effective regarding the reporting of HIV/AIDS Information; and
- Section F: Relevance of the information being sent through the communication sources.

#### 4.4 Reliability Statistics

According to Willemse (2009: 35), the two most important aspects of precision are reliability and validity. Reliability is computed by taking several measurements on the same subjects. A reliability coefficient of 0.70 or higher is considered as "acceptable". Table 4.1 reflects the Cronbach's alpha score for all the items that constituted the questionnaire.

**Table 4.1 Cronbach alpha scores**

<b>Section</b>	<b>Number of Items</b>	<b>Cronbach's Alpha</b>
Section B: Communication tools used to educate high school learners about HIV/AIDS in the Mthatha area.	2 of 4	.490
Section C: High school learners' perceptions on which communication tools are most used and most effective.	10 of 10	.620
Section D: Learners' perceptions on which communication sources are most used and most effective.	24 of 24	.877
Section E: The extent to which learners think the following tools are the most effective regarding the reporting of HIV/AIDS Information	16 of 16	.759
Section F: Relevance of the information being sent through these sources	17 of 17	.760

Four of the five sections have reliability scores that are close to or exceed the recommended value of 0.70. This indicates a high (overall) degree of acceptable, consistent scoring for this research. Section B has a slightly lower score. This is mainly due to the construct being newly developed with a small number of items.

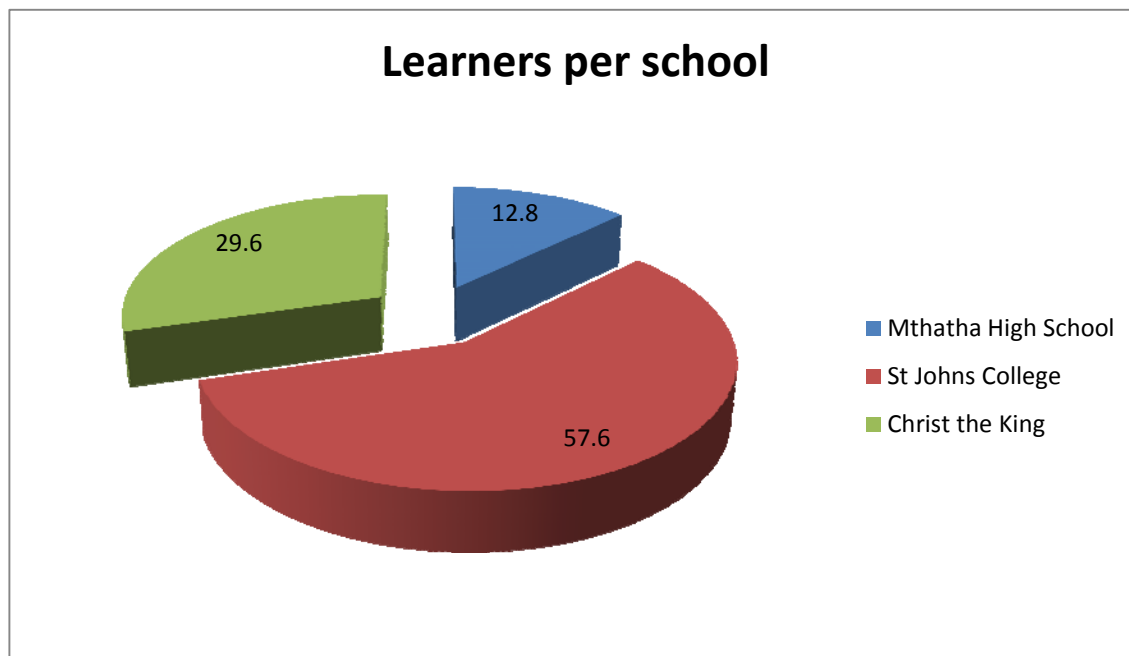
## **4.5 DEMOGRAPHICS**

Section A of the questionnaire summarises the biographical characteristics of the respondents.

### **4.5.1 PLACE OF STUDY**

Figure 4.1 identifies the school of each of the respondents. St Johns College has more learners than Christ the King and Mthatha High due to the fact that it accommodates learners making it easier for those that come from rural areas outside Mthatha CDB. The hostel life encourages more interaction between learners beyond normal learning hours. This means that learners are more exposed to a free social lifestyle. Figure 4.1 illustrates the sample of study with the majority of learners (57.6%) studying at St Johns College. St Johns College is located at the heart of Mthatha CBD and has a hostel that accommodates grades 8 to 12 learners.

**Figure 4.1 Place of study**



#### **4.5.2 GENDER DISTRIBUTION BY AGE**

Table 4.2 illustrates the learners' age and gender distribution, respectively. The ratio of males to females is approximately 2:3 (40.3%:57.6%). Within the age category of 15 years, 64.7% were female. Within the category of females (only), 7.9% were between the ages of 15 years. This category of females between the ages of 15 years formed 1.2% of the total sample.

The identified group for this study is within the targeted group of high HIV infection. The National Strategic Plan (2007-2011) indicates that young people aged 15-24 are a priority group for HIV prevention. Table 4.2 illustrates that the majority of learners (25%) are 17 and 18 years of age.

In this study, both males and females are fairly represented. Table 4.2 illustrates the gender of the learners to ensure representivity and reliability with 57.6% female learners, 40.3% male learners and 1.6% learners not disclosing their gender.

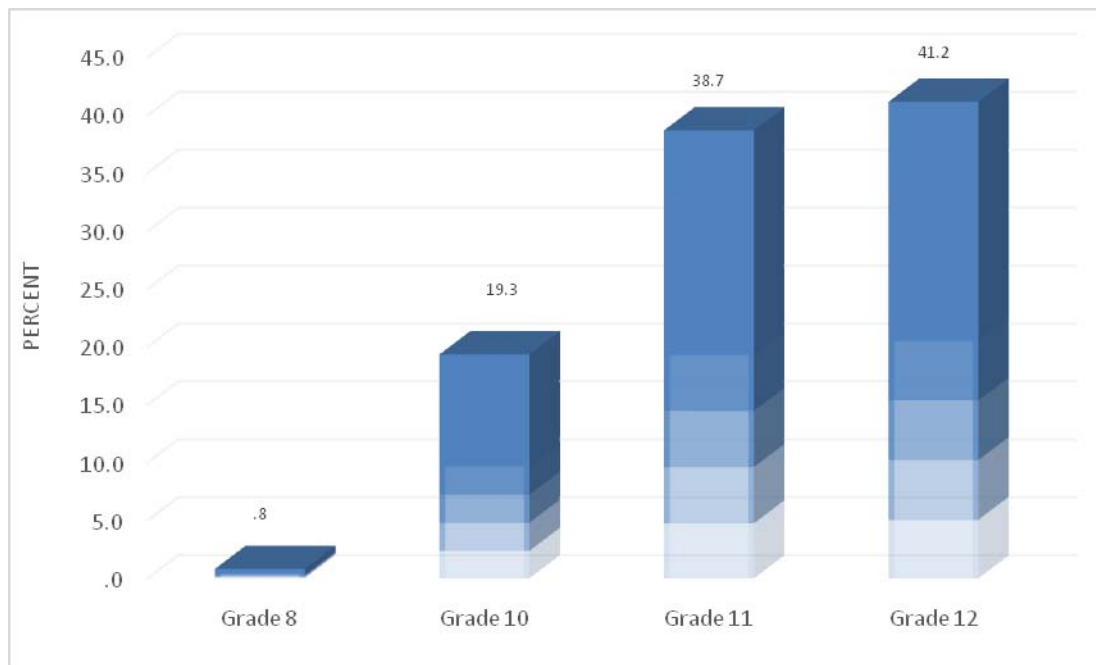
**Table 4.2 Age and gender**

		Student's gender				Total
		Male	Female	Other	Refused to answer	
Student's age	Count	3	3	0	0	6
	14 years of age % within Student's age	50.0%	50.0%	0.0%	0.0%	100.0%
	% within Student's gender	3.1%	2.1%	0.0%	0.0%	2.5%
	% of Total	1.2%	1.2%	0.0%	0.0%	2.5%
	Count	6	11	0	0	17
	15 years of age % within Student's age	35.3%	64.7%	0.0%	0.0%	100.0%
	% within Student's gender	6.1%	7.9%	0.0%	0.0%	7.0%
	% of Total	2.5%	4.5%	0.0%	0.0%	7.0%
	Count	14	20	0	0	34
	16 years of age % within Student's age	41.2%	58.8%	0.0%	0.0%	100.0%
	% within Student's gender	14.3%	14.3%	0.0%	0.0%	14.0%
	% of Total	5.8%	8.2%	0.0%	0.0%	14.0%
	Count	23	37	0	1	61
	17 years of age % within Student's age	37.7%	60.7%	0.0%	1.6%	100.0%
	% within Student's gender	23.5%	26.4%	0.0%	25.0%	25.1%
	% of Total	9.5%	15.2%	0.0%	0.4%	25.1%
	Count	23	36	1	2	62
	18 years of age % within Student's age	37.1%	58.1%	1.6%	3.2%	100.0%
	% within Student's gender	23.5%	25.7%	100.0%	50.0%	25.5%
	% of Total	9.5%	14.8%	0.4%	0.8%	25.5%
	Count	18	19	0	0	37
	19 years of age % within Student's age	48.6%	51.4%	0.0%	0.0%	100.0%
	% within Student's gender	18.4%	13.6%	0.0%	0.0%	15.2%
	% of Total	7.4%	7.8%	0.0%	0.0%	15.2%
	Count	11	14	0	1	26
	Over 19 years of age % within Student's age	42.3%	53.8%	0.0%	3.8%	100.0%
	% within Student's gender	11.2%	10.0%	0.0%	25.0%	10.7%
	% of Total	4.5%	5.8%	0.0%	0.4%	10.7%
Total	Count	98	140	1	4	243
	% within Student's age	40.3%	57.6%	0.4%	1.6%	100.0%
	% within Student's gender	100.0%	100.0%	100.0%	100.0%	100.0%
	% of Total	40.3%	57.6%	0.4%	1.6%	100.0%

### 4.5.3 LEARNERS' GRADES

Learners' grades of study are shown in figure 4.2 below. The majority of respondents were senior learners, with 41.2% being Grade 12 and 38.7% Grade 11 learners. The age and grade distribution is useful in that the respondents are the more mature learners who can relate to the nature of the research. The responses then would be from a more knowledgeable base. This is borne out by the acceptable reliability scores.

**Figure 4.2 Learners' grades of study**



### 4.5.4 PLACE OF RESIDENCE

Table 4.3 depicts the learners' place of residence. The responses received indicate that the majority (91.8 %) of learners reside in the Mthatha area, with only 8.2% residing outside Mthatha. The research conducted focuses in the Mthatha area. Therefore, the responses received indicate that the majority of learners are from Mthatha.

**Table 4.3 Place of residence**

	Frequency	Percent
Yes	223	91.8
No	20	8.2
Total	243	100.0

#### **4.6 COMMUNICATION TOOLS USED TO EDUCATE HIGH SCHOOL LEARNERS ABOUT HIV/AIDS IN THE MTHATHA AREA**

Section B of the questionnaire explores communication tools used to educate high school learners about HIV/AIDS with specific reference to the Mthatha area.

##### **4.6.1 SCORING PATTERNS ON LEARNERS' CONCERNS**

Learners' summarised scoring patterns are presented in Table 4.4. Education, Health, Economy, Crime and Safety are issues that learners are concerned about. This means that learners are the willing and relevant recipients of health education who are concerned about the unemployment rate as it may lead them to criminal activities.

**Table 4.4 Scoring patterns on learners' concerns**

	Very concerned	Concerned	Undecided	Somewhat concerned	Not concerned
Education	87.9	10.3	.9	.4	.4
Health (e.g. HIV/AIDS)	46.9	35.6	6.3	1.9	9.4
Economy e.g. unemployment	44.9	36.1	13.6	2.0	3.4
Crime and safety	60.8	26.8	1.3	5.9	5.2

##### **4.6.2 LEARNERS' CONCERNS**

Figure 4.3 below shows the concerns of learners as a complement to table 4.4 above. The average level of being concerned is approximately 87%. The responses received indicate that the majority of learners (98%) are concerned about education. This means that learners are likely to take the issue of sex education seriously, which proves the

importance of sex education in schools and affirms Gow and Desmond's (2002:95) opinion that schools are a key strategic ground on which the battle to mitigate will be won or lost.

Responses received also indicate that 81% are concerned about health-related issues, particularly on HIV/AIDS, whilst 9% are not concerned. This means that learners are the willing and relevant recipients of health communication. The National Cancer Institute (2002:4) indicates that for a health communication programme to be successful, it must be based on an understanding of the needs and perceptions of the intended audience.

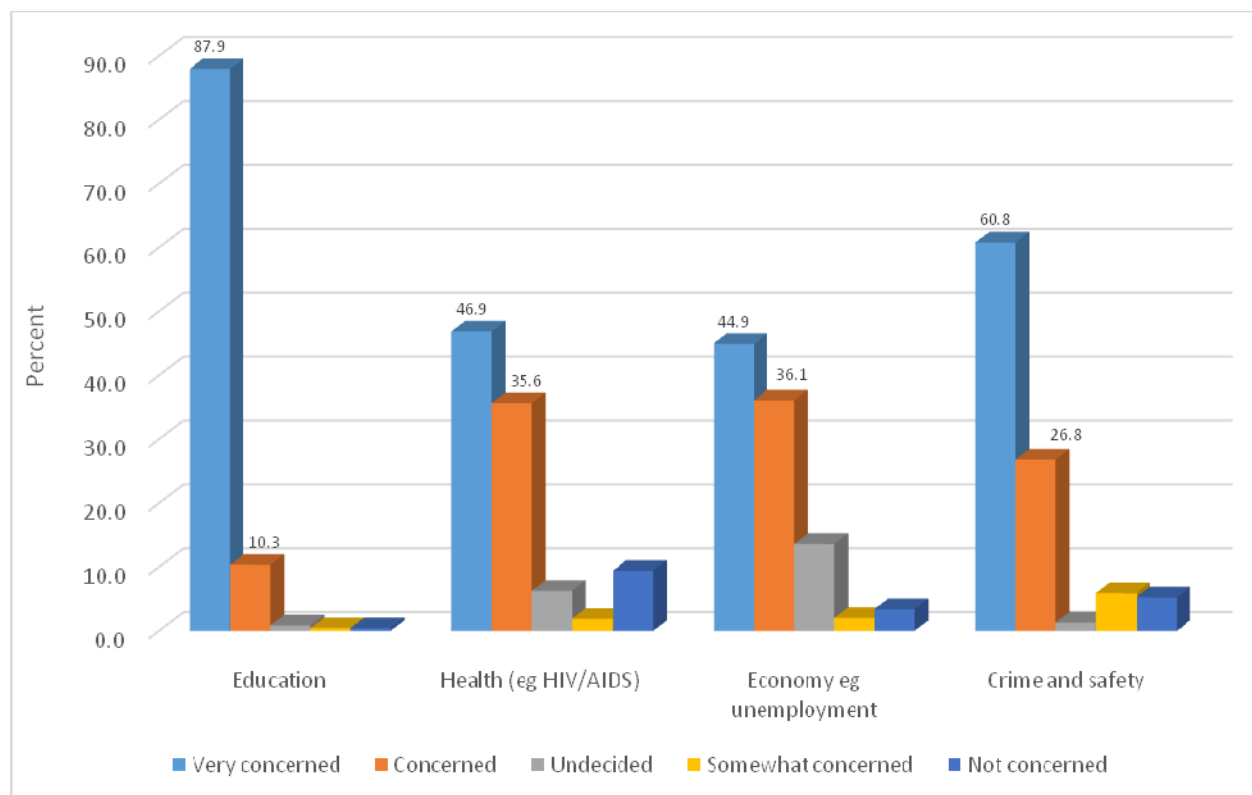
Figure 4.3 further reveals that 80% learners are concerned about the economy such as the unemployment rate, whilst 12% are undecided. Lack of skills contributes a great deal to unemployment in this country, meaning when learners drop out of school due to pregnancy, they increase the number of unskilled population. The Daily Dispatch (2011:01) recorded the Eastern Cape as the highest province to suffer from schoolgirl pregnancies with 728 pregnancies recorded in the Mthatha District. This means Mthatha is likely to see an increase in the unemployment rate due to some of these learners dropping out as a result of falling pregnant. Therefore, the rate of HIV/AIDS infection may also increase as pregnancy indicates unprotected sex.

A further 87% of learners are concerned about crime and safety. It is common that crime is associated with unemployment, meaning when learners drop out and become unemployed, they may engage in criminal activities.

To determine whether the differences were significant, chi-square tests were done by variable (statement). The null hypothesis tested the claim that there were no differences in the scoring options per statement. The results are shown in table 4.5.



**Figure 4.3 Learners' concerns**



#### 4.6.3 TEST STATISTICS ON LEARNERS' CONCERNS

Since all of the levels of significance are less than 0.05, it implies that the distributions were not evenly spread. That is, the differences between concern and low levels of concern were significant.

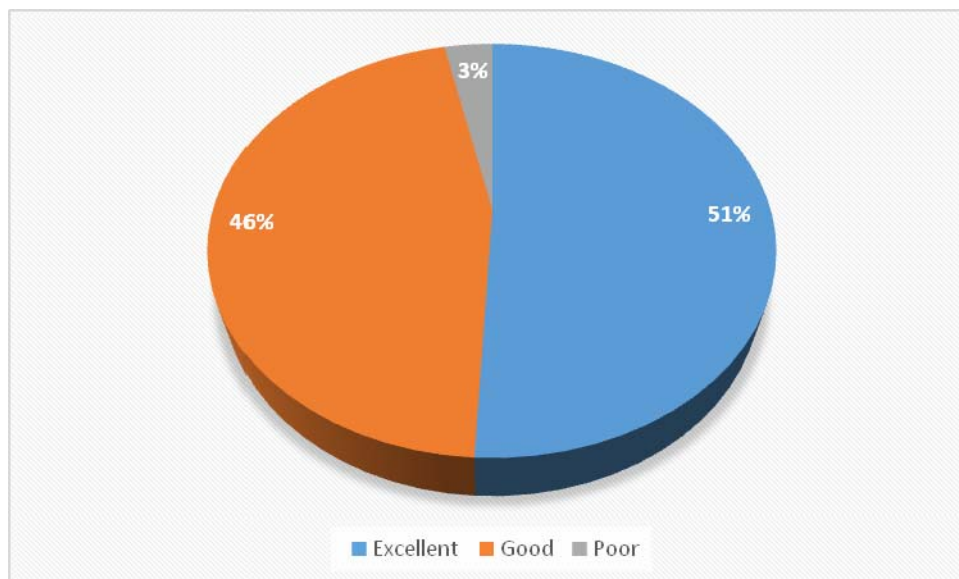
**Table 4.5 Test statistics on learners' concerns**

	Education	Health (e.g. HIV/AIDS)	Economy e.g. unemployment	Crime and safety
Chi-Square	677.440	127.750	111.469	189.451
df	4	4	4	4
Asymp. Sig.	.000	.000	.000	.000

#### 4.6.4 LEARNERS' KNOWLEDGE OF HIV/AIDS EDUCATION

Figure 4.4 illustrates how learners rate their knowledge of HIV/AIDS education. Only 3% of the respondents indicated that their knowledge of HIV/AIDS was poor. The remainder of respondents believed that they had decent knowledge regarding HIV/AIDS education. This means that HIV/AIDS education is well communicated to learners. However, the growing number of HIV/AIDS infected young adults is a cause for concern. These findings further indicate that Health Communication does help raise awareness, thus affirming the Healthy People 2010 Information Access Project (2009:1) that Health Communication can help raise awareness of health risks and solutions.

**Figure 4.4 Learners' knowledge of HIV/AIDS**



#### 4.6.5 COMMUNICATION TOOLS

Section B of the questionnaire relates to communication tools used to educate high school learners about HIV/AIDS in the Mthatha area.

**Table 4.6 relates to sources used by learners to obtain HIV/AIDS information**

Responses received in table 4.6 indicate that learners rely on a number of sources to get information related to HIV/AIDS. However, only 1.48% of the learners agree to receiving this information through school curriculum and 7.04% get their information through peer education. This signals the fact that over 90% of the learners rely on sources, such as mass media, that are not within the school curriculum.

These sources play a crucial role in creating awareness of the pandemic amongst the youth, thus affirming the opinion of Gamble and Gamble (1999:483) that the media affects one's awareness, knowledge, attitude and behaviour. Mass media (particularly online sites) appear to be more popular than curriculum. This could be based on the informal manner in which online sites are structured. Online sites are, therefore, one of the key elements that drive HIV/AIDS education.

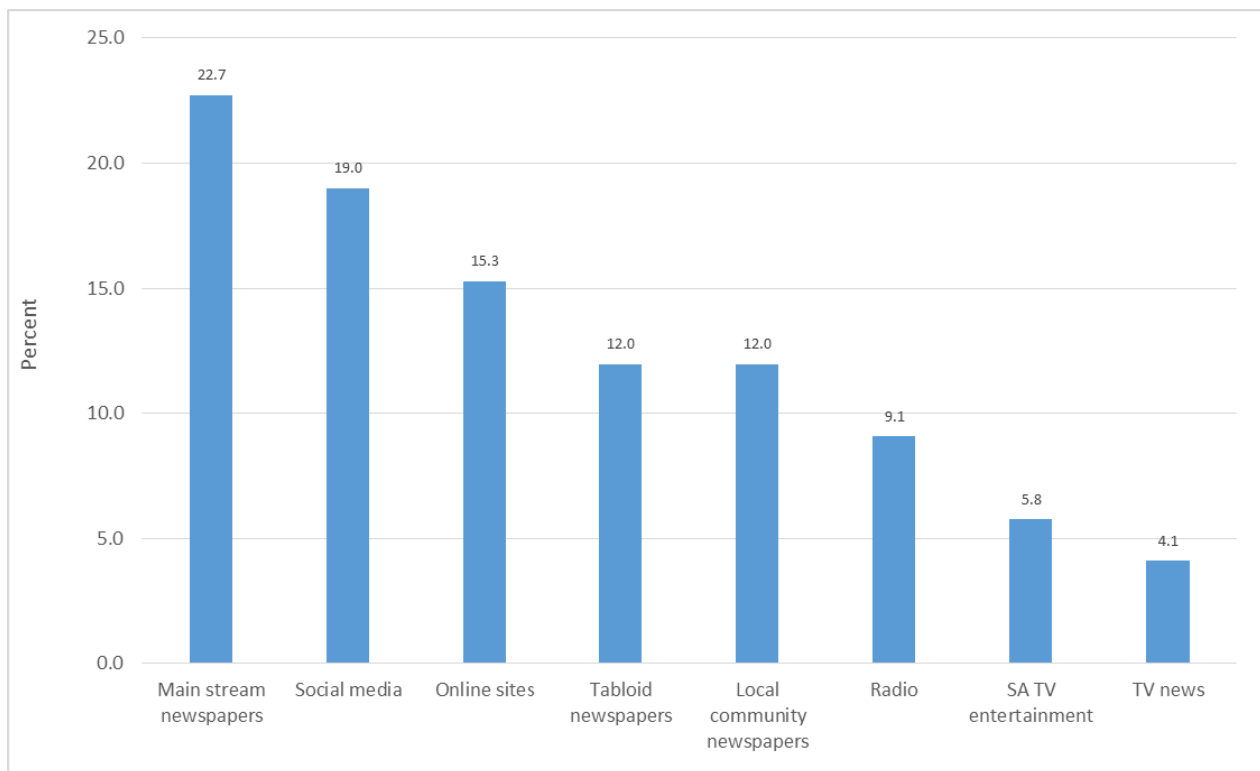
**Table 4.6 Sources of information for HIV/AIDS education**

	Frequency	Percent
Online sites	45	18.5
Newspapers	44	18.1
Radio	29	11.9
TV News	24	9.9
SA TV entertainment	22	9.1
Peer education	17	7.0
Local community newspapers	16	6.6
Social media	16	6.6
Magazines	10	4.1
Tabloid newspapers	7	2.9
School curriculum	5	2.1
AIDS Day	4	1.6
Missing System	4	1.6
Total	243	100.0

#### 4.6.6 POPULAR MEDIA FOR HIV/AIDS INFORMATION

Figure 4.5 illustrates the types of media that learners enjoy most. Findings, as depicted in figure 4.5, indicate that 22.7% of learners prefer getting HIV/AIDS information through mainstream newspapers, 19% through social media, and 15.3% through websites. These findings indicate that learners enjoy mass media the most. This could be based on its informal and entertainment nature that consists of simplified themes. Parker *et al.* (2007:23) indicate that mass media approaches are best suited to simplified and discrete messages or themes.

**Figure 4.5 Popular media for HIV/AIDS information**

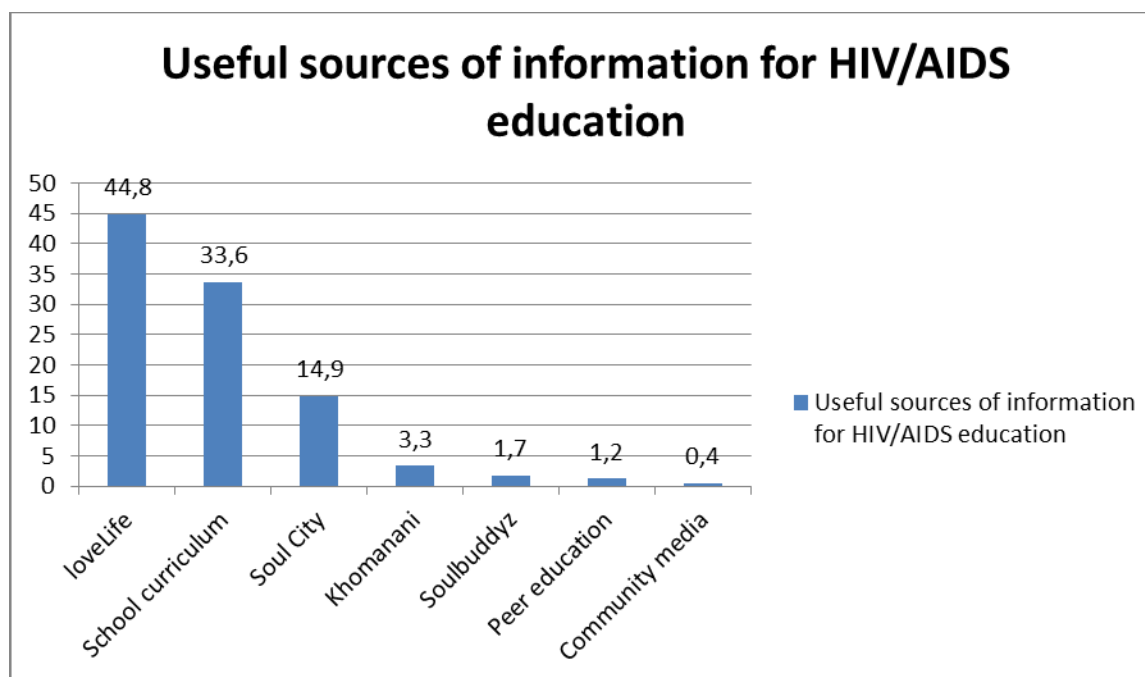


#### 4.6.7 USEFUL SOURCES

Figure 4.6 below illustrates the sources that are most useful to learners regarding communication about HIV/AIDS. Responses received indicate that 44.8% of learners

view the loveLife campaign as the most useful source through which they learn about HIV/AIDS. This sets apart the loveLife campaign as a relevant tool that equips young people about HIV/AIDS. In support of this finding, loveLife (2009:2) defines this campaign as a lifestyle brand that promotes healthy, HIV-free living amongst South African teenagers.

**Figure 4.6 Useful sources of information for HIV/AIDS education**



#### **4.6.8 MEDIA INFORMATION**

Table 4.7 below expatiates on responses found in figure 4.6 above in terms of showing the sources that determine learners' awareness of HIV/AIDS. In terms of media information, responses received in table 4.7 indicate that the majority of learners are aware of the selected HIV/AIDS sources through social media (17.6%), online websites (16.3%) and mainstream newspapers (14.6%). The internet is one of the most powerful tools used to access and share information. With the rising number of social networks through which young people communicate and share information, learners make use of

the internet access they have. This means that the internet is one of the powerful tools through which HIV/AIDS awareness campaigns can be driven.

**Table 4.7 Awareness of sources for HIV/AIDS information**

	Percent
Social media	17.6
Online sites	16.3
Main stream newspapers	14.6
TV news	10.9
Local community newspapers	10.0
Radio	8.4
SA TV entertainment	7.9
Tabloid newspapers	6.7
Magazines	5.9
Billboards	1.7
Total	100.0

#### **4.7 MOST USED AND EFFECTIVE COMMUNICATION TOOLS**

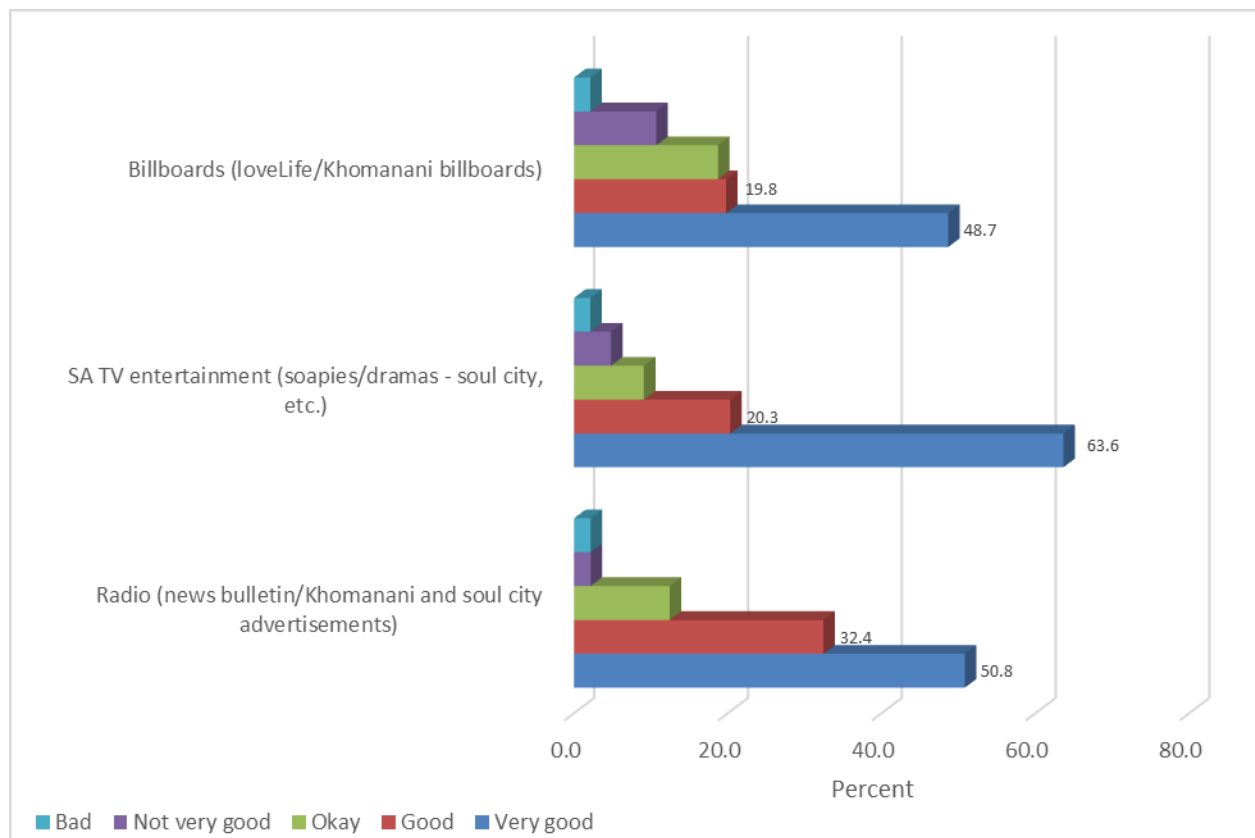
Section C of the questionnaire refers to learners' perceptions on which communication tools are most used and most effective (figure 4.7 below). On average, figure 4.7 shows that the majority of the respondents believed that radio (83%) and SA TV (84%) entertainment was good or better at communicating the message to the target audiences. About two-thirds (68%) of the respondents felt that billboards were just as effective.

Entertainment education proves to be crucial and effective based on its entertainment nature. This is in line with Singhal and Rogers' (2003:289) views that it is a process of purposely designing and implementing a media message to both entertain and educate.

The findings depicted in figure 4.7 further reveal that learners view positively the information received through radio about the pandemic. This places radio as one of the important sources that are able to reach a wide range of learners on various issues

such as HIV/AIDS. This is in line with the Overseas Development Institute (2009:1) opinion that radio has an enormous potential to communicate to a wide audience.

**Figure 4.7 Most used and effective tools in HIV/AIDS information**



## 4.8 COMMUNICATION SOURCES

Section D of the questionnaire deals with the learners' views about information being sent through the various communication channels.

#### **4.8.1 Learners' views on HIV/AIDS**

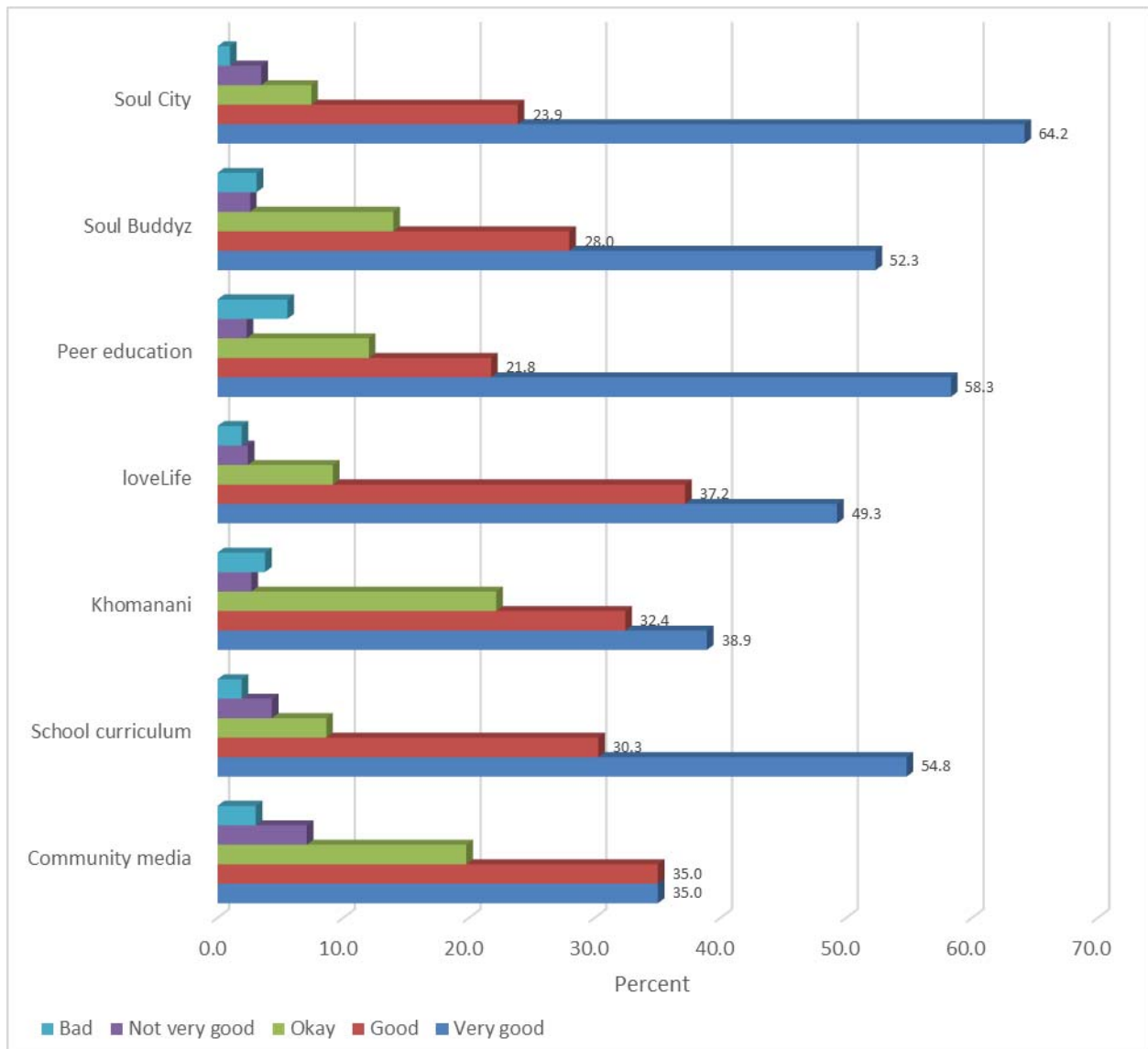
Figure 4.8 below indicates the learners' perception of the most used communication channels on HIV/AIDS information. The majority of the responses received (64.2%) indicate that Soul City dominates in sending out HIV/AIDS information to learners. This is in line with Parker *et al.* (2007:53) views that Soul City is an educational entertainment programme which covers a range of themes, including a regular focus on HIV/AIDS. Entertainment, therefore, becomes key to educating the learners about the pandemic. Singhal and Rogers (2003:289) agree with this finding by sighting that entertainment-education purposely implements a media message to both entertain and educate.

The findings further reveal that information received through peer education is very good (58.3%). This means that peer education is one of the effective methods through which HIV/AIDS education can be communicated. McKee *et al.* (2004:78-81) define peer education as an effective approach in disseminating important HIV and AIDS messages.

Figure 4.8 illustrates that 54.8% respondents view the curriculum as the most effective source regarding the reporting of HIV/AIDS information. This places schools as one of the key reliable sources of HIV/AIDS communication for learners. Averting HIV/AIDS (2009:1) agrees with this finding by stating that almost all young people attend school for some part of their childhood.



**Figure 4.8 Communication channels**



#### 4.9 EFFECTIVE TOOLS FOR REPORTING HIV/AIDS INFORMATION

Section E of the questionnaire explores the extent to which some tools are viewed as most effective regarding the reporting of HIV/AIDS information (figure 4.9). Responses received indicate that the majority of learners in the selected sample (68.6%) think that the Soul Buddyz programme is a very good source for HIV/AIDS reporting. This means that through the Soul Buddyz programme, learners find meaning in HIV/AIDS reporting. This agrees with the communication definition by Cleary (2000:2).

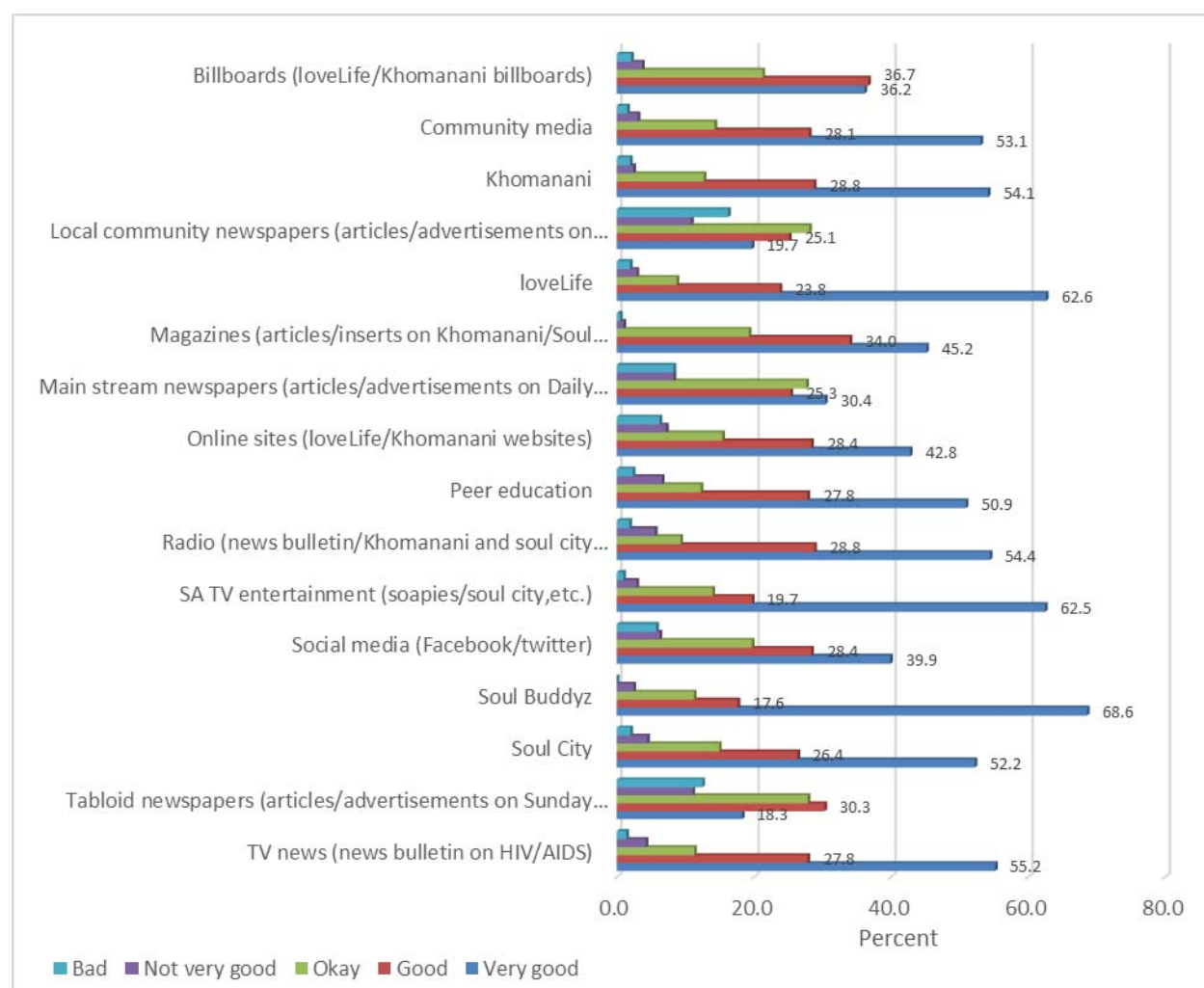
A further 62.5% of learners view television entertainment programmes as effective in terms of reporting HIV/AIDS information. Entertainment education, in this regard, proves to be crucial and effective, in line with Singhal and Rogers' (2003:289) views that it is a process of purposely designing and implementing a media message to both entertain and educate in order to enhance audience members' knowledge about an issue.

The findings reveal that 54.4% of the respondents think that radio is the most effective source regarding the reporting of HIV/AIDS information. This means that the respondents have good access to radio and the programming that focuses on HIV/AIDS. In agreement with this finding, the Nelson Mandela Foundation (2005:98) views radio as the primary mass medium in the country that is particularly important to rural areas.

The findings also reveal that 55.2% learners view TV news as the most effective source in communicating HIV/AIDS information. This means that learners get the relevant meaning out of the messages sent through the news bulletin, thus affirming the definition by Cleary (2002:2) that communication is a process of creating meaning between two or more people through the expression and interpretation of messages.

62.6% of the respondents think that the loveLife campaign is very good in communicating information related to HIV/AIDS. This finding shows accuracy of the loveLife campaign in promoting the HIV-free lifestyle amongst learners, confirming the view of loveLife (2009:2) about healthy living amongst South African teenagers. Figure 4.9 clearly shows the preference of learners for the most effective tools regarding the reporting of HIV/AIDS information.

**Figure 4.9 Effective tools for reporting HIV/AIDS information**



## 4.10 Relevance of information

Section F of the questionnaire investigates the relevance of information being sent through various sources.

### 4.10.1 Relevant sources of HIV/AIDS information

Figure 4.10 highlights HIV/AIDS information that learners found to be relevant. The findings reveal that 62% of the respondents view HIV/AIDS messages that are sent through entertainment-education as easily understood. This means that entertainment-education is most reliable in communicating HIV/AIDS messages. Singhal and Rogers

(2003:289) confirm this finding by stating that entertainment-education programmes represent a viable weapon in the worldwide war against HIV/AIDS.

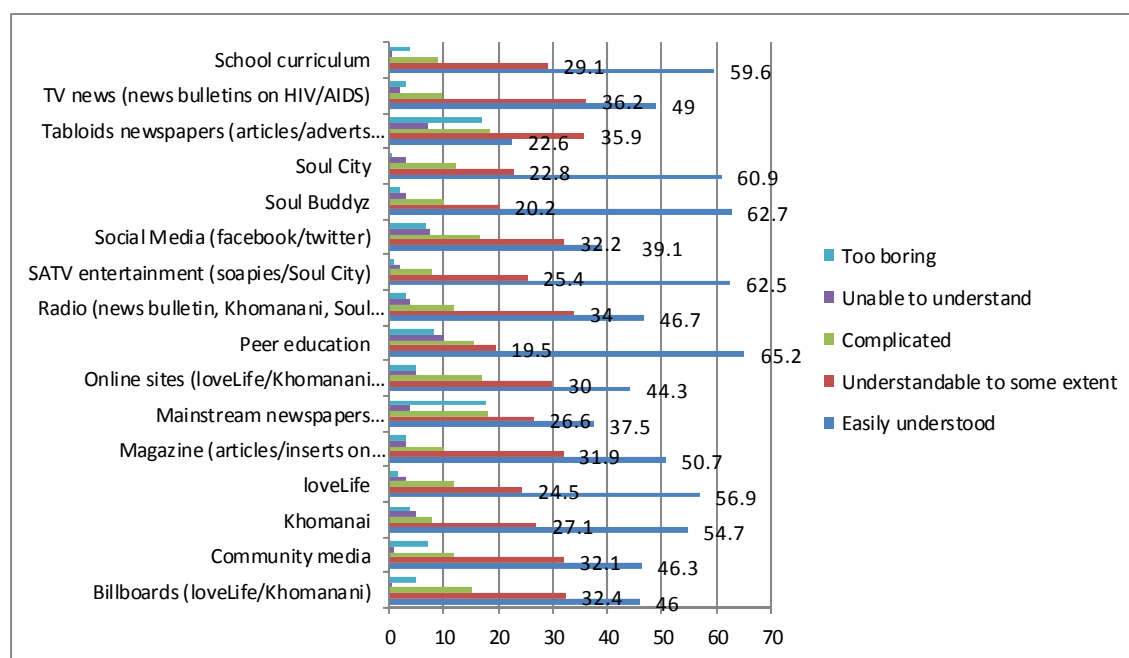
Responses received indicate that 60.9% find HIV/AIDS messages sent through Soul City easily conveyed. This finding indicates that Soul City is a very reliable communication campaign through which HIV/AIDS message is sent. Barden (2005:543) agrees with this finding.

Responses received also indicate that 62.7% find HIV/AIDS messages sent through Soul Buddyz easily understood. This is due to the fact that the Soul Buddyz campaign is based on the struggles faced by the youth in society on a daily basis, that is, HIV/AIDS which learners easily relate to. Soul City (2005:1) concurs with this finding.

Responses received further reveal that 46.3% of the respondents find HIV/AIDS messages sent through community media as easily conveyed. This indicates that community media is one of the best methods used to address HIV/AIDS education. Mishra (2005: 72) agrees with this finding. Almost all learners have access to community media as it is directed at the communities they live in; this makes this method worth investing in.

The findings reveal that 65.2% of the respondents find HIV/AIDS messages sent through Peer Education easily understood. This finding indicates that Peer Education is a preferred method of communication due to the nature of the campaign, that is, informal method of education. Averting HIV/AIDS (2010) agrees with this finding. Learners are most likely to trust what their peers say and feel more comfortable to discuss matters related to sexual activities than they would with adults.

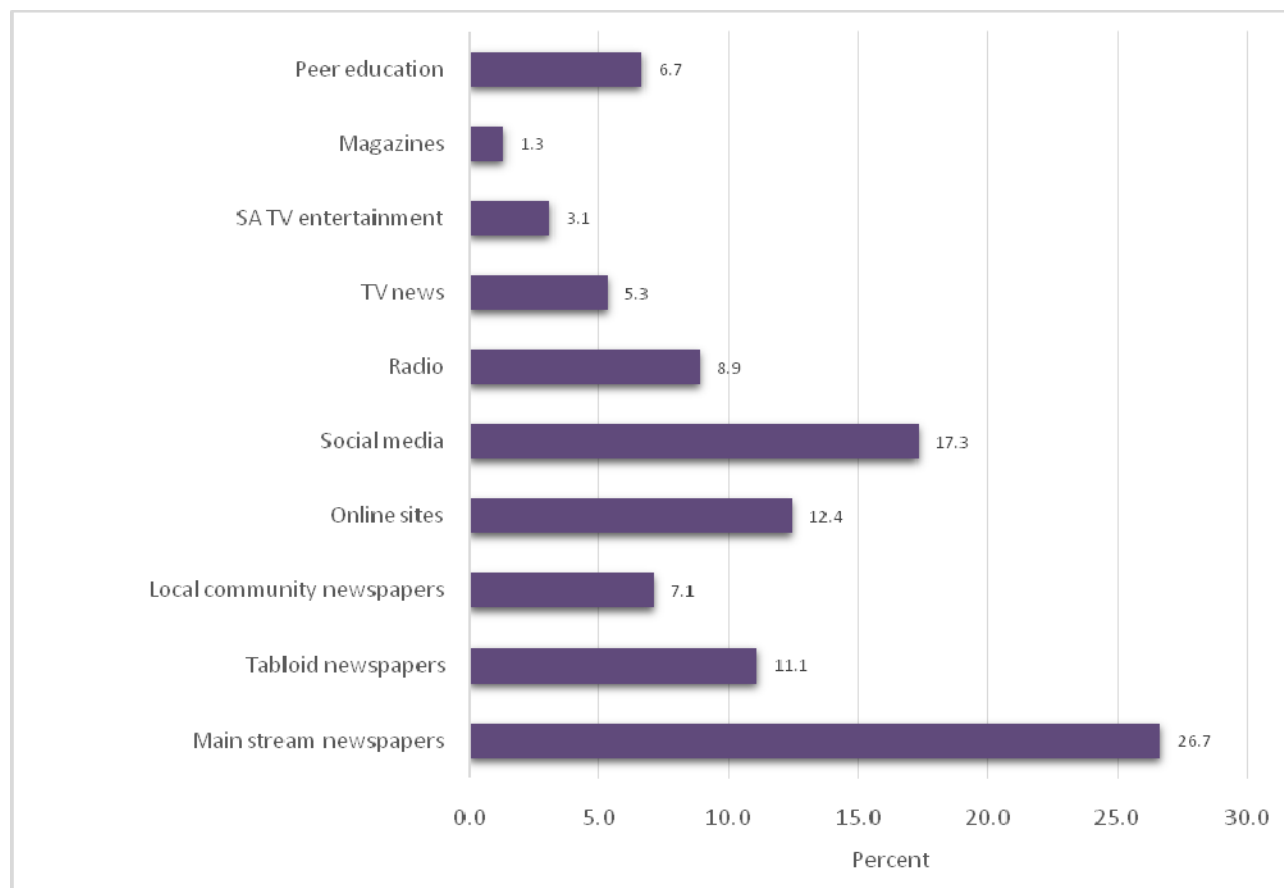
**Figure 4.10 Sources of relevant information**



#### 4.10.2 RELEVANT INFORMATION TO THE YOUTH

Figure 4.8 below illustrates sources which provide information that is relevant to the youth. The findings reveal that 26.7%, 17.3% and 12.4% of the respondents, respectively, find mainstream newspapers, social media and online sites as the most relevant sources that provide related and relevant information to the youth. This means that mass communication is a relevant source through which relevant information can be sent to the youth. These findings can be attributed to the literacy levels of the learners as well as their active participation in social networks. It is important to ensure that these tools are effectively used in communicating HIV/AIDS to learners.

**Figure 4.11 Sources of relevant information**



#### **4.10.3 EFFECT OF MESSAGES ON LEARNERS' BEHAVIOUR**

Table 4.8 below rates the effect that the sources have on the respondents. Responses received indicate that 48.4% (radio), 50% (television), 53.1% (loveLife), 47% (Khomanani) and 55.7% (Soul Buddyzy) of the respondents tend to be more responsible when engaging in sexual activities due to the HIV/AIDS messages being sent through radio, television, loveLife, Khomanani and Soul Buddyzy respectively. This means that mass media has a positive impact amongst the youth regarding HIV/AIDS. Brand South Africa (2010) agrees with this finding by stating that many HIV/AIDS programmes run by government and NGO partners through mass media are bearing fruit.

Responses received also reveal that 53.5% of the respondents are more responsible when engaging in sexual activities due to messages being sent through entertainment education. This finding means that entertainment education has the ability to influence social change amongst the learners. Singhal and Rogers (200:289) agree with this finding by stating that the larger purpose of entertainment education is to contribute to the process of direct social change. Entertainment, in its nature, is informal and attention-seeking, thus making it almost impossible to ignore.

With school being an ultimate point of contact for learners at some stage of their lives, this method of communication should be improved to accomplish even better results. Table 4.8 illustrates that (55.7%) of the respondents are more responsible when engaging in sexual activities based on the messages sent through this source.

Responses received further reveal that 37.2% of the respondents are responsible, to a certain extent, when engaging in sexual activities due to messages sent through community media. This finding could be based on the method used (group communication) and the assumption that anyone can be a communicator. McKee *et al.* (2004:78-81) state that too often, it is assumed that anyone can be a communicator, but the community may resist poorly trained and unskilled mobilisers. This means that community media leaves a gap in the change of behaviour of learners when used to educate learners about HIV/AIDS. This communication tool must be reviewed to assess the content of the message as well as its mobilisers to ensure positive results are attained.

The research conducted shows that Peer Education is one of the most effective sources that reach out to a number of learners and has the ability to influence behavioural change amongst learners. Averting HIV/AIDS (2010) agrees with this finding by stating that peer education is a very effective way of reaching marginalised groups. Table 4.8 below illustrates that the majority of the respondents (62.5%) are more responsible when engaging in sexual activities as a result of the messages sent through Peer Education.

**Table 4.8 Effect of messages on learners' behaviour**

	More responsible when engaging in sexual activities	Responsible to an extent	Responsible temporarily	No effect	More reckless when it comes to sexual behaviour
Billboards	41.5	29.8	15.8	8.8	4.1
Community media	37.8	37.2	10.4	7.9	6.7
Khomanani	47.0	25.0	17.7	6.1	4.3
Local community newspapers	23.5	34.6	19.6	15.1	7.3
loveLife	53.1	30.2	6.7	4.5	5.6
Magazines	43.9	28.9	13.4	10.2	3.7
Main stream newspaper	35.2	21.9	18.4	15.8	8.7
Online site	40.6	28.9	18.7	9.1	2.7
Peer education	62.5	14.1	10.3	7.1	6.0
Radio	48.4	30.1	10.2	7.0	4.3
SA TV entertainment	53.5	25.9	11.4	7.0	2.2
School curriculum	55.7	25.6	8.5	5.1	5.1
Social media	39.3	32.8	11.5	9.3	7.1
Soul Buddyz	55.7	23.4	11.4	6.0	3.6
Soul City	60.5	26.0	6.2	4.0	3.4
Tabloid newspapers	25.8	32.4	19.8	16.5	5.5
TV news	50.0	26.9	10.8	7.0	5.4

#### **4.11 CONCLUSION**

The aim of this study was to assess communication tools used to educate high school learners about HIV/AIDS in the Mthatha area. The findings have revealed that there are numerous methods used to educate learners about the HIV/AIDS pandemic. Learners identified mostly with the following three sources as the accurate tools of communication in HIV/AIDS education:

- 1) Health Education/curriculum;
- 2) Entertainment Education; and



### 3) Peer Education.

This finding concurs with Mishra (2005:34-35) who argues that several reasons are commonly advanced for why the school is a particularly appropriate site for HIV/AIDS education. The first is that students are a captive audience. Mishra (2005:35) believes that since children enroll in school at an early age, the inclusion of HIV/AIDS education in the curriculum would seem, therefore, to be an efficient and effective use of their time. The afore-mentioned author further states that ensuring that the necessary knowledge, skills, and attitudes are inculcated in a manner that will lead to safe sexual behaviour calls for a range of learning objectives and related instructional strategies over the entire school cycle. Entertainment-education is also popular amongst learners due to the fact that though it tackles important issues; it is also able to capture the audiences' attention easily. Data collected indicated that learners' sexual behaviour was positively influenced by messages received through entertainment education.

Peer Education becomes more relevant because it is designed to be informal and, most importantly, there is an already existing trust as peer educators are no strangers to fellow learners. The United Nations Children Fund [UNICEF] (2005:1) affirms this by stating that Peer Education is based on the reality that many people make changes not only based on what they know, but on the opinions and actions of their close, trusted peers. Furthermore, peer educators can communicate and understand in a way that the best-intentioned adults are unable to, and can serve as role models for change. It has emerged through learners' responses that the content of the message on HIV/AIDS education communicated through Peer Education is, in fact, relevant to the youth. This method is also one of the methods mostly preferred by learners to receive HIV/AIDS information. The study revealed that whilst various methods are used to educate learners about the pandemic, and whilst the content of the message is relevant to the youth, some learners choose to ignore messages. This was revealed when learners were asked if their behaviour changed after receiving HIV/AIDS education in some communication media such as community media. The majority of the responses indicated that learners were sexually responsible to a particular extent. Whether this is

as a result of unclear messages received or pure ignorance is a concern and could be the reason why there is a constant rise in HIV/AIDS infection amongst learners.

This chapter supports the literature undertaken and has shown that Health Education/curriculum, Entertainment Education and Peer Education are the most relevant methods of informing high school learners about HIV/AIDS. This research has also revealed that learners are, in fact, aware of the pandemic through messages communicated using various communication methods.

It has emerged that learners' behaviour is positively influenced as a result of messages received through various communication tools on HIV/AIDS. The rising number of HIV/AIDS-infected learners leaves more questions than answers in relation to learners indicating that they are, in fact, aware of the pandemic through various tools made available to them. Statistics paint a gloomy picture of learners that are increasingly infected every year.

This chapter presented the results of the field-work conducted amongst high school learners. It analysed and interpreted the data gathered from the responses received through questionnaires. The findings of the study were then compared to the literature review to assess communication tools available to high school learners about HIV/AIDS education within selected schools in the Mthatha area.

The next chapter presents the conclusions that are drawn from the study. It further highlights the summary, conclusions and limitations of the study and offers recommendations based on the interpretation of the results. These recommendations may be used for further studies.

## **CHAPTER FIVE**

### **CONCLUSIONS AND RECOMMENDATIONS**

#### **5.1 INTRODUCTION**

The previous chapter presented the results of the field-work. It analysed and interpreted the data gathered from the respondents through questionnaires. The findings of the study were then compared to the literature review underpinning the assessment of communication tools utilised to educate high school learners about the HIV/AIDS pandemic within the selected schools. This chapter, therefore, presents conclusions that were drawn from the study. It also presents a set of recommendations based on the interpretation of the results. It further highlights the summary, conclusions and limitations of the study.

#### **5.2 SUMMARY OF THE STUDY**

The aim of this study was to assess high school learners' perceptions of the communication tools used to educate them about the HIV/AIDS epidemic in the Mthatha area. The literature review revealed that there are a number of communication tools utilised to educate learners about HIV/AIDS, namely:

- 1) Mass Communication;
- 2) Entertainment Education;
- 3) Peer Education; and
- 4) Community Media.

It explained that the main focus of HIV/AIDS education is to inform young people about the pandemic and, to some extent, prevent it from spreading any further. Furthermore, it put the South African Broadcasting Commission as a key stakeholder in communicating HIV/AIDS messages. It also emerged that entertainment-education plays a vital role in designing and implementing media messages that entertain and educate while at the same time, increasing the audience's knowledge about an issue, creating favourable

attitudes, shifting social norms, and changing the overt behaviour of individuals and communities. The study further reveals that Peer Education is an effective tool in combating the pandemic.

### **5.3 CONCLUSIONS**

The purpose of the study was: to assess high school learners' perceptions of the communication sources available to them on HIV/AIDS education; to assess communication sources available to high school learners on HIV/AIDS education; to examine learners' perceptions on which communication medium is most used and most effective, and to further ascertain the relevance of the information being sent through these sources. A sample of three high schools in the Mthatha Area was selected to represent various high schools. The following section presents the conclusions to the study based on the objectives set out in chapter 1.

#### **5.3.1 HIV/AIDS EDUCATION**

The research revealed that HIV/AIDS education is the main source of information relating to the pandemic. The majority of learners is aware of HIV/AIDS education through their school curriculum and Peer Education. This means that a school is one of the key methods used to drive HIV/AIDS campaigns, as learners are a 'captive audience'. The study further revealed that most learners prefer receiving HIV/AIDS information through Peer Education than through the curriculum. This is based on the informal setting of Peer Education. It is, therefore, evident that the spread of HIV/AIDS amongst young adults is mostly caused by behaviour rather than lack of information.

#### **5.3.2 COMMUNICATION TOOLS USED IN HIV/AIDS EDUCATION**

The research has revealed that various communication methods are used to educate high school learners about the pandemic, namely:

- 1) Curriculum;
- 2) Peer Education;

- 3) Mass communication;
- 4) Entertainment education;
- 5) loveLife programmes; and
- 6) Community media.

This finding indicates that the Department of Education, Department of Health, NGO's and other relevant stakeholders are working together towards curbing the spread of the pandemic. However, though tools are in place, the content of the messages in community media must be reviewed to ensure their relevance. This is evident in the responses received from learners when asked about their behaviour change based on information received through community media. The majority of learners indicated that information received through community media results in them being responsible to a certain extent. This could be as a result of poorly trained and unskilled mobilisers that this method of communication uses, that is, facilitators of group discussions or community radio programmes directed at HIV/AIDS education.

### **5.3.3 HIV/AIDS COMMUNICATION**

Communication is key in behaviour change that prevents the spread of the pandemic. Effective communication can be attained when the target population understands what is being communicated to them. The study revealed that the majority of learners find HIV/AIDS communication informative. This was revealed through various communication methods, with entertainment education taking the lead. The researcher feels that entertainment education can play a vital role in changing perceptions of the majority of learners that find HIV/AIDS communication boring.

### **5.4 LIMITATIONS OF THE STUDY**

The researcher experienced the following problems:

- Due to the delay in data collection, the number of learners enrolled in St Johns College dropped and therefore, the sample size also dropped from the initial

number. However, the new sample selected was still sufficient to draw valid conclusions; and

- Lack of cooperation by some learners, mostly males, resulted into the study being dominated by female students who were more than willing to cooperate.

## **5.5. RECOMMENDATIONS**

Based on the study, the following recommendations are made:

- Communication has been identified as one of the key methods that used to curb the spread of HIV/AIDS. Therefore, clear messages must be developed in order for the youth to understand what is being communicated to them.
- The content of the messages communicated through community media must constantly be evaluated to ensure its relevance to the target population. Furthermore, training of community mobilisers must be conducted to prevent communities from rejecting messages from unskilled mobilisers.
- Health education has proven, in this study, to be the key method through which students learn about HIV/AIDS pandemic. Adjustments and improvements must be made in the curriculum to maintain the effectiveness of this method. This will result in more learners being informed of the pandemic at the most crucial time in their lives, that is, when they are teenagers.
- Peer education must also be encouraged and strengthened even more, as it also plays a vital role in communicating messages.
- The media is one of the most powerful tools that effectively communicate HIV/AIDS education to learners through various entertainment programmes. The youth mostly relate to entertainment education due to its relevance. This tool

must, therefore, be strengthened and maintained as it reaches marginalized groups.

- The behaviour of learners remains a challenge in curbing the spread of the pandemic as it has shown in this study that most learners are aware of the pandemic but choose to turn a blind eye on the prevention methods communicated to them.

## **5.6 DIRECTION FOR FUTURE RESEARCH**

Even though HIV/AIDS education is accessible to learners, there is still uncertainty regarding HIV/AIDS. Other communication tools can be developed to curb the spread of the pandemic, and methods of tracking these tools must also be established. The content of the messages in community media must be reviewed to ensure its relevance.

## **5.7 CONCLUSION**

HIV/AIDS education is conducted through various methods of communication. This is done to curb the spread of HIV/AIDS. Mass communication is one of the most popular tools of communication amongst the youth due to its entertainment programmes. These programmes are based on the real challenges that the youth is faced with in society. It has emerged that due to its informal nature and the fact that peers make decisions not only based on what they know but also on the opinions of their trusted peers, Peer Education is also a vital method of communication.

The study revealed that learners are familiar with all communication methods presented to them meaning they are aware of HIV/AIDS messages communicated through them. However, the numbers of HIV/AIDS infections amongst the youth continue to rise. This signals behavioural issues more than lack of information.

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## **Annexure A**

2 Swallow Street

Southern Wood

Mthatha

5099

16 April 2009

Mthatha High School

Mthatha

5099

The Principal

### **RE: RESEARCH METHODOLOGY**

I am currently enrolled for a Masters Degree in Public Relations Management with the Durban University of Technology (student number 20926495). As a requirement to complete my Masters, I have to submit a dissertation based on a research study. My research topic is *“Communication Tools used to educate High School Learners about HIV/AIDS in Mthatha area”*. My mentors are Dr V.P. Rawjee and Dr J.P. Govender, Senior Lecturers in the Department of Marketing, Retail and Public Relations Management.

This letter serves to request your permission to interview Grades 8, 9, 10, 11 & 12 pupils. The interview is anticipated last for a maximum of 1 hour. Assurance is hereby guaranteed for privacy and confidentiality in terms of responses. In addition, note that responses will be used strictly for the benefit of the study under review and nothing else. Should you require any

further information, kindly contact me on the above details. I would like to thank you for your invaluable time and information.

Yours sincerely,



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Nonceba Madikizela

Cell: 083 516 9122

E-mail: [madikizelan@gmail.com](mailto:madikizelan@gmail.com)



## **Annexure B**

### **Questionnaire for Learners**

The following questions shall take a few minutes to complete. The data collected from your survey will be filed in a secure place to safeguard your privacy and ensure confidentiality. The collected information concerns HIV/AIDS education in High Schools around Mthatha CBD only.

#### **Title of the project:**

**Communication tools used to educate High School learners about HIV/AIDS in the Mthatha area**

*Please select your answer by placing a tick inside the relevant box*

#### **A. Demographics**

##### **A1. Which school do you attend?**

☐

Mthatha High School

☐

St Johns College

☐

Christ the King High School

**A2. Gender**

☐

Male

☐

Female

☐

Other

☐

Refused to answer

**A3. What grade are you in?**

Grade 8	Grade 9	Grade 10	Grade 11	Grade 12
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**A4. Do you live in Mthatha?**

☐

Yes

☐

No

**A5. Age, please specify:**

Under 14yrs	14yrs	15yrs	16yrs	17yrs	18yrs	19yrs	Over 19yrs
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**B. Communication tools used to educate high school learners about HIV/AIDS in the Mthatha area.**

**B1. Which of the following issues are you most concerned about?**

	<b>Very concerned</b>	<b>Concerned</b>	<b>Undecided</b>	<b>Somewhat concerned</b>	<b>Not concerned</b>
Education					
Heath (eg HIV/AIDS)					
Economy eg unemployment					
Crime and safety					

**B2. How would you rate your knowledge of HIV/AIDS education?**

☐ Excellent

☐ Good

☐ Poor

**B3. Which of the following do you use to get your HIV/AIDS information from? (tick 3)**

Mainstream newspapers ( <b>Articles/Advertisements on daily dispatch, Sunday times, city press newspapers etc</b> )	
Tabloid newspapers ( <b>Article/Advertisements on Sunday World, Daily Sun etc</b> )	
Local community newspapers ( <b>Articles/Advertisements on Fever Publication</b> )	
On line sites ( <b>loveLife/ Khomanani websites</b> )	
Social media ( <b>facebook/twitter</b> )	
Radio ( <b>news bulletin/ Khomanani and Soul City advertisements</b> )	
TV news ( <b>news bulletin on HIV/AIDS</b> )	
SA TV entertainment ( <b>soapies/ Soul City etc</b> )	
Magazines ( <b>articles/inserts on Khomanani/Soul City/loveLife</b> )	
Peer education	
School curriculum	
AIDS Day	
Any other, specify	

**B4. Which of the following media do you enjoy the most? (tick 3)**

Mainstream newspapers ( <b>Articles/Advertisements on Daily Dispatch, Sunday Times, City Press newspapers etc</b> )	
Tabloid newspapers ( <b>Article/Advertisements on Sunday World, Daily Sun etc</b> )	
Local community newspapers ( <b>Articles/Advertisements on Fever Publication</b> )	
On line sites ( <b>loveLife/ Khomanani websites</b> )	
Social media ( <b>facebook/twitter</b> )	
Radio ( <b>news bulletin/ Khomanani and Soul City advertisements</b> )	
TV news ( <b>news bulletin on HIV/AIDS</b> )	
SA TV entertainment ( <b>soapies/ dramas- Soul City etc</b> )	
Any other, specify	

**B5. Which of the following sources are most useful to you to learn about HIV/AIDS? (tick 3)**

School Curriculum	
loveLife	
Khomanani	
Soul City	
Soul Buddyz	
Community Media	
Peer Education	

**B6. I know about this source/s through:**

Mainstream newspapers ( <b>Articles/Advertisements on Daily Dispatch, Sunday Times, City Press newspapers etc</b> )	
Tabloid newspapers ( <b>Article/Advertisements on Sunday World, Daily Sun etc</b> )	
Local community newspapers ( <b>Articles/Advertisements on Fever Publication</b> )	
On line sites ( <b>loveLife/ Khomanani websites</b> )	
Social media ( <b>facebook/twitter</b> )	
Radio ( <b>news bulletin/ Khomanani and Soul City advertisements</b> )	
TV news ( <b>news bulletin on HIV/AIDS</b> )	
SA TV entertainment ( <b>soapies/dramas- Soul City</b> )	
Magazines ( <b>articles/inserts on Khomanani /Soul City/loveLife</b> )	
Billboards ( <b>loveLife/ Khomanani billboards</b> )	

**C. High school learners' perceptions on which communication tools are most used and most effective**

**C1. What is your view about HIV/AIDS information being sent through the following sources?**

<b>Sources</b>	<b>Very good</b>	<b>Good</b>	<b>Okay</b>	<b>Not very good</b>	<b>Bad</b>
Radio ( <b>news bulletin/ Khomanani and Soul City advertisements</b> )					
SA TV entertainment ( <b>soapies/dramas- Soul City etc</b> )					

Billboards (loveLife/Khomanani billboards)					
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**D. Learners' perceptions on which communication sources are most used and most effective.**

**D1. What is your view about HIV/AIDS information being sent through the following sources?**

Sources	Very good	Good	Okay	Not very good	Bad
School Curriculum					
loveLife					
Khomanani					
Soul City					
Soul Buddyz					
Community Media					
Peer Education					

**E. To what extent do you think the following tools are the most effective regarding the reporting of HIV/AIDS Information?**

Sources	Very good	Good	Okay	Not very good	Bad
School Curriculum					

Radio ( <b>news bulletin/ Khomanani and Soul City advertisements</b> )					
TV news ( <b>news bulletin on HIV/AIDS</b> )					
SA TV entertainment ( <b>soapies/ Soul City etc</b> )					
Magazines ( <b>articles/inserts on Khomanani/Soul City/loveLife</b> )					
Billboards ( <b>loveLife/Khomanani billboards</b> )					
loveLife					
Khomanani					
Soul City					
Soul Buddyz					
Community Media					
Peer Education					

## **F. Relevance of the information being sent through these sources**

### **F1. I find HIV/AIDS messages from the following sources:**

<b>Sources</b>	<b>Messages are easily conveyed/ understood</b>	<b>Understand able to an extent</b>	<b>Complicated</b>	<b>Unable to understand the messages</b>	<b>Too boring</b>
Radio (news bulletin/ Khomanani and Soul City					



advertisements)					
TV news (news bulletin on HIV/AIDS)					
SA TV entertainment (soapies/ Soul City etc)					
Billboards (loveLife/Khomanani billboards)					
School Curriculum					
loveLife					
Khomanani					
Soul City					
Soul Buddyz					
Community Media					
Peer Education					

**F2. The following sources provide information related and relevant to the youth**

Mainstream newspapers ( <b>Articles/Advertisements on Daily Dispatch, Sunday Times, City press newspapers etc</b> )	
Tabloid newspapers ( <b>Article/Advertisements on Sunday World, Daily Sun etc</b> )	
Local community newspapers ( <b>Articles/Advertisements on Fever Publication</b> )	
On line sites ( <b>loveLife/ Khomanani websites</b> )	
Social media ( <b>facebook/twitter</b> )	

Radio ( <b>news bulletin/ Khomanani and Soul City advertisements</b> )	
TV news ( <b>news bulletin on HIV/AIDS</b> )	
SA TV entertainment ( <b>soapies/ Soul City etc</b> )	
Magazines ( <b>articles/inserts on Khomanani/Soul City/loveLife</b> )	
Peer education	
School curriculum	
AIDS Day	
Any other, specify	
School Curriculum	
loveLife	
Khomanani	
Soul City	
Soul Buddyz	
Community Media	
Peer Education	

**F3. Messages received from these sources have the following effect on me;**

<b>Sources</b>	<b>More responsible when engaging in sexual activities</b>	<b>Responsible to an extent</b>	<b>Responsible temporarily</b>	<b>No effect</b>	<b>More reckless when it comes to sexual behaviour</b>
Radio ( <b>news bulletin/ Khomanani</b> )					

and Soul City advertisements)					
TV news (news bulletin on HIV/AIDS)					
SA TV entertainment (soapies/ Soul City etc)					
Billboards (loveLife/Kho manani billboards)					
School Curriculum					
loveLife					
Khomanani					
Soul City					
Soul Buddyz					
Community Media					
Peer Education					
Magazines					
Tabloid newspapers					
Social media					
On-line sites					
Mainstream					

newspaper					
Local community newspaper					

***Thank you for your participation.***