Gender Representations, Cultural Norms and Message Features in Jamaican HIV/AIDS Advertisements: A Textual Analysis of Television Campaigns

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This dissertation titled
Gender Representations, Cultural Norms and Message Features in Jamaican HIV/AIDS
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ABSTRACT

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Televised advertisements form a major part of the HIV prevention efforts in Jamaica. Though much progress has been made in reducing HIV infection rates, this Caribbean country still has features of a low-level generalized and a concentrated HIV epidemic among key-risk groups. The significance of gender and sexuality in health and other development issues has also become increasingly apparent in the last few decades. The types of gender and sexual representations utilized in media campaigns have the power to help or hinder HIV prevention programs, especially when the messages are misinterpreted. Through textual analysis and from a critical/cultural studies perspective, this dissertation explores the gender and sexual representations present in Jamaican HIV prevention advertisements. Additionally, it addresses the socio-cultural norms that underlie these representations, as well as the message features of the advertisement.

The study found a progression from more stereotypical representations of men and women in earlier advertisements to counter-hegemonic and empowering gender and sexual representations in more recent advertisements. The results also highlight several socio-cultural norms underlying the gender representations, such as male promiscuity, irresponsibility, male dominance and expectations of superior sexual knowledge in men. The norms of female assertiveness, love and trust were also underscored. Regarding the message features, this study found that most of the advertisements lacked features that
would likely gain the attention of audience members; they also had low information load which facilitates comprehension and used more proximal sources and emotional appeals to increasing audience yielding and retention. Finally, the findings revealed overwhelmingly heteronormative representations, with no reference to homosexuals or bisexuals, despite the high rate of infection among this key risk group.
DEDICATION

This dissertation is dedicated to my parents Hugh and Novrene Darlington, and my grandmothers, Lucille Allen Braham and Florence Sharpe, who have always believed in me, supported me and prayed for me.
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CHAPTER 1: INTRODUCTION

Remarkable progress has been made in the fight against HIV/AIDS in Jamaica and the Caribbean. According to the Joint United Nations Program on HIV/AIDS (UNAIDS, 2014), from 2005 and 2013 the Caribbean registered a 40% decline in new HIV infections. This is in comparison to a 33% decline in Sub-Saharan Africa and 38% globally, for the period 2001 to 2013 (UNAIDS, 2014). In its most recent report to UNAIDS, the Jamaica National HIV/STI Program (NHP, 2014) highlighted a 25% decline in the number of new HIV infections in the past decade. Figueroa (2014) asserts that this decline in new HIV infections in Caribbean countries may be attributed to the priority given to HIV prevention and care in the region.

Despite these advances in the efforts to control the HIV epidemic and mitigate its impact, this disease remains a serious health problem all over the world, including the idyllic island paradise of Jamaica. With a population of 2,717,991 as of the end of 2013 (Statistical Institute of Jamaica, 2014) Jamaica has an estimated HIV prevalence of 1.8 per cent (NHP, 2014). The country exhibits features of a low-level generalized and a concentrated HIV epidemic as epidemiological data show higher prevalence among key-risk groups such as men who have sex with men (MSM) (32%), homeless persons (12%) and female sex workers (4.1%) (NHP, 2014, p. 26). The NHP highlights the link between poverty, related development issues and HIV, noting that the main drivers of the epidemic include: “slow economic growth, high unemployment, low academic achievement, early sexual debut, multiple partnerships, transactional and commercial sex” (NHP, 2014, p. 10).
The gendered nature of the epidemic is also becoming increasingly apparent. Although total AIDS cases in men exceed that in women, the gap has narrowed and the gender distribution varies by age group (NHP, 2014). Whereas women accounted for 37% of AIDS cases prior to 1995, by the period 2004 to 2008 this had increased to 44% and between 2009 to 2012, it further increased to 46% (NHP, 2014). According to the NHP report, this steady increase in AIDS cases among women may be due to “exposure through their MSM or other high risk male partners” (NHP, 2014, p. 24). Nearly three-quarters (74%) of all AIDS cases in Jamaica occur among people between the ages of 20 and 49 (NHP, 2014). On the one hand, females between the ages of 10 and 29 account for the majority of cases in that age range and the reported number of AIDS cases among women between the ages of 15 and 19 is four times the number for men in the same age group (NHP, 2014). On the other hand, men account for 61% of the cases in people between the ages of 30 and 79 (NHP, 2014).

In an earlier review of the HIV response in Jamaica, Figueroa and colleagues (2008) assert that the higher number of cases among adolescent girls (10-19 years old) may be “due to age mixing with young females having sexual intercourse, including transactional sex, with older men, some of whom are HIV infected” (Figueroa et al., 2008, p. 565). The figures quoted above attest to that possibility. Though the total numbers indicate higher levels of HIV among men than women, the growing trend of younger women becoming infected at higher rates than younger men points to risky sexual behaviors such as early sexual debut and multiple sexual partners that are influenced by the social, cultural and gender norms that persist despite a comprehensive response to HIV for over 20 years. There is therefore a clear need for consideration of
Jamaican gender dynamics that put both men and women at risk and the possible impact on HIV/AIDS prevention and support efforts.

Mass communication campaigns constitute a widely used strategy that has been utilized to share prevention messages on a large scale (Noar, Palmgreen, Chabot, Dobransky & Zimmerman, 2009). This strategy has also been applied in Jamaica, where mass media campaigns form a major part of the Ministry of Health’s HIV prevention strategy (NHP, 2014). Use of media campaigns in this manner has implications for audience member’s knowledge, awareness and behavior, especially concerning gender and social norms (Wood, 2007).

Well-executed and documented HIV communications campaigns have demonstrated some effect on knowledge and behavior or behavioral intentions (Noar et al., 2009). However, several scholars have attributed the poor results of some HIV/AIDS campaigns to social contexts that can constrain such interventions (Campbell, Foulis, Maimane & Sibiya, 2005). These contexts include a lack of gender-sensitive programming on the part of intervention planners (Greig, Peacock, Jewkes & Msimang, 2008). Efforts to address gender-related risks have traditionally taken the form of programs “designed to reach and engage men, improve women’s legal and economic position, integrate gender-based violence prevention into HIV services, and increase girls’ access to secondary and tertiary education” (Greig et al., 2008, p. S35). However, Zaman and Underwood (2003) highlight that an essential aspect of addressing gender in health communication programs is a consideration of the gender inequalities and stereotypes within a society. This should be done to ensure that such stereotypes and

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1 Gender-sensitive programming in HIV prevention “implies explicitly mainstreaming and responding to the different identities, perspectives, barriers and needs that affect girls’ and boys’ and women’s and men’s attitudes and behaviors related to HIV prevention” (United Nations Population Fund [UNFPA], 2002, p. 4).
inequalities are not reproduced through communication campaign materials (Zaman & Underwood, 2003).

With Jamaica accounting for a relatively small percentage of the HIV epidemic, one might ask: why is it important to continue the scholarly conversation about this disease? While the number of people living with HIV in Jamaica remains relatively low – approximately 30,365 as of December 2013 – Jamaica’s 1.8% HIV prevalence among adults contributes to the Caribbean region’s 1% HIV prevalence, making it the most heavily affected region outside sub-Saharan Africa (NHP, 2014). Although the region has reported a 40% decline in new HIV infections over the past decade (UNAIDS, 2014; Figueroa, 2014), the main mode of transmission continues to be unprotected sex between men and women. In Jamaica, there is also substantial transmission occurring among men who have sex with men (MSM) and since 64% of MSM reported sex with a female in the past year, this creates a bridge for HIV to spread from a concentrated group to the general population (Figueroa, 2014). It is also important to highlight the estimate that in Jamaica, approximately 40% of HIV infections will happen among people who are engaging in low risk sex (Figueroa, 2014; UNAIDS & NHP, 2012a).

Despite the fact that Jamaica and other Caribbean countries have mounted a relatively successful response to HIV, UNAIDS officials have called for more research into “the role of power, social inequality and gender inequality, as well as social exclusion, stigma and violence in driving HIV” (UNAIDS, 2010, p. 13). While data about HIV prevalence are widely available, the published literature about gender, sexuality and HIV is sparse (Kempadoo & Taitt, 2006). The information that is available about the intersection of these issues seems to focus on issues such as sexual abuse of women,
MSM, adolescent sexuality and transactional sex (Kempadoo & Taitt, 2006). Their literature review findings prompted Kempadoo and Taitt (2006) to assert that the lack of attention to broader power relations and socio-economic situations that facilitate the aforementioned sexual expressions may negatively impact the efficacy of HIV/AIDS prevention efforts. It is therefore crucial that scholars and advocates continue to examine these issues with a view to strengthening the response to HIV, so that the growing trend of increasing vulnerability to HIV among various sections of the population, including men who have sex with men and women with high risk male partners, can be halted and reversed or at least slowed. With a better understanding of the social, cultural and gender norms that continue to undermine HIV prevention efforts, more resources can be properly channeled to address this burgeoning issue.

Communication about HIV/AIDS

Since the inception of the HIV epidemic the use of mass media and other forms of communication has formed a major part of the strategy to promote knowledge, awareness and behavior change concerning sexual practices. Indeed, scholars and development practitioners have hailed health communication as one of the most important tools in addressing HIV and AIDS (Myhre & Flora, 2000; Bertrand & Anhang, 2006; Bertrand, O’Reilly, Denison, Anhang, & Sweat, 2006; Noar, et al., 2009; Sood, Shefner-Rogers & Skinner, 2014). They have also brought to light some key message features that should be considered to ensure Public Service Announcement (PSA) effectiveness (Chang, 2004; Johnson, Flora & Rimal, 1997). However, research suggests that the effectiveness of mass communication campaigns depends on the extent to which such campaigns are supported by a multi-layered socio-ecological framework that includes: a supportive
policy environment; adequate supply of products and services; social and behavior change promotions at the community level (Sood et al., 2014; Wakefield, Loken & Hornik, 2010).

While it is generally agreed that communication campaigns produce moderate, as opposed to strong impacts (Sood et al., 2014), due to the paucity of resources in low-income countries such as Jamaica, it is often difficult to assess the long-term impact of such campaigns. Wakefield, Loken and Hornik (2010) found that the majority of evidence about the impact of mass media health campaigns comes from high income countries. Even when post campaign research studies are conducted in resource-strapped settings, there is a tendency to measure short-term impact of the intended messages (e.g. White, Byfield, Sutherland & Reid, 2012), with little to no attention being paid to long-term impact as well as unintended and possibly damaging messages embedded within media products.

Throughout this dissertation I use the terms ‘public service announcement’ (PSA) and ‘advertisement’ interchangeably in reference to the HIV prevention messages. A distinction can be made between paid commercial advertisements, which aim to sell specific products to the audience, and PSAs that generally seek to raise awareness, change behaviors and encourage positive social change (Ad Council, 2015). However, in the context of this study, both terms (PSA and advertisement) are used in reference to the television ads produced by the National HIV/STI Program to address HIV in Jamaica. Though the PSAs do not sell specific brands of products (such as condoms) they aim to prevent HIV by ‘selling’ certain ideas and behaviors, such as partner reduction and condom use.
Much like that of commercial television advertisements, the intended role of HIV television advertisements is to persuade individuals to accept certain messages and perform or stop performing certain actions and behaviors (Frith, 1998; Johnny & Mitchell, 2006). Jamaica’s HIV prevention efforts utilize a multi-layered, multi-sectoral approach including community outreach, special events, free HIV testing, condom demonstrations, distribution of condoms, party interventions, television programs and shows. Additionally, the NHP (2014) highlights the use of mass media campaigns to share important prevention messages as a key strategy that is helping the response to make strong headway in the fight against HIV. While there is much available epidemiological data about HIV/AIDS in Jamaica and assertions of the positive impact of intervention efforts, there is little available research (whether published or grey literature) about the effectiveness of Jamaican HIV media campaigns (see White et al., 2014 and Hope Caribbean, 2012). While such studies might indicate the number of people who were exposed to media campaign messages and the (short-term) impact of media messages, researchers also need to undertake efforts at understanding the possible unintended messages that might be disseminated in such campaigns. This is particularly critical as it concerns gender and sexual stereotypes since those that exist in a society might be replicated in media campaign materials and thus minimize the positive impact of such campaigns (Zaman, 2003).

Gender, Sexuality and HIV/AIDS in Jamaica

Gender and sexuality are at least partially socially constructed and the gender representations that are presented in media content can have implications for audience members’ understanding of suitable gender conduct, gender relations and sexual
expressions (Shaw & Lee, 2014). With mass media campaigns forming such an integral component of Jamaica’s HIV prevention efforts, a better understanding of how this type of communication can improve or undermine efforts to address the increasingly gendered nature of the HIV epidemic in Jamaica is needed.

The significance of gender in health and other development issues has become increasingly apparent in the last few decades. During that time, the development industry has transitioned through a number of perspectives on how gender should be understood and addressed. In the context of this dissertation concerning gender, sexuality and HIV/AIDS prevention, gender is not seen as relating only to women. Instead it includes a consideration of the needs of women and men. At the same time, sexuality will be considered not just in terms of sexual orientation but as the sexual practices, behaviors and interactions between people.

The concept of heteronormativity is also crucial for this research. Producers of HIV prevention messages have to be extremely careful in the creation of these advertisements because homosexuality is still stigmatized in Jamaica (Human Rights Watch, 2014; White & Carr, 2005). Anal sex is illegal and male cross-dressers as well as openly gay men have been beaten and killed as recently as May 2014 (Frater, 2013a; Frater, 2014; Mills, 2004). While the NHP uses other methods to reach men who have sex with men (MSM), there is no television advertisement campaign targeting this group because there would likely be widespread public outcry against such representations on television. Therefore the advertisements that will be analyzed only portray gender representations that fit within heteronormative frames, with none of them making any overt references to other possible sexual orientations, such as bisexual or homosexual
lifestyles. This is in keeping with the fact that “over 90% of persons reported with AIDS have identified sexual transmission, with heterosexual transmission being most commonly reported” (NHP, 2014, p. 23). Although no data were available about the sexual practices of 41% of men who have AIDS and 44% of men who have HIV, the NHP has emphasized that these figures could be a result of significant under-reporting by men who have sex with men (MSM) but who might choose not to reveal their sexual practices (NHP, 2014).

The signing of the Declaration of Commitment to eliminate stigma and discrimination and gender inequality in 2011 highlights the importance of these issues in addressing HIV. The then Prime Minister, Bruce Golding, and the Opposition Leader at that time, Portia Simpson-Miller, signed the declaration, which should help to improve the legislative and policy framework needed to address stigma, discrimination and issues of gender inequality. The NHP also started a process of gender mainstreaming\(^2\) in Jamaica’s HIV response, on the understanding that harmful gender norms are crucial factors impacting Jamaica’s HIV epidemic (NHP, 2012a). Gender mainstreaming efforts included training of staff on gender analysis skills to help them identify and address gender dynamics in HIV intervention programming (NHP, 2012a).

The NHP’s HIV prevention team is tasked with all aspects of prevention, including the development and implementation of media campaign strategy. It is therefore important to outline the media development strategy of the HIV prevention team. Writing in reference to the *Pinch, leave an inch and roll* (NHP, 2008c) PSA, White

\(^2\) Gender mainstreaming is the public policy concept that involves assessment of the different implications for women and men of action being taken by the government. This includes but is not limited to legislation and program planning at all levels. Mainstreaming offers a means of addressing diverse issues among men and women (Booth & Bennett, 2002; UN Women, 2014).
et al. (2012) explain that the HIV prevention team in the NHP is responsible for the
development of major message themes and concepts due to their “years of experience in
addressing condom use in Jamaica” (p. 56). After the idea for a media campaign has been
generated in-house by the prevention team, independent creative consultants are
contracted to design and execute the concept (White et al., 2012). For example, in the
case of the *Pinch, leave an inch and roll* (NHP, 2008c) a consultant was hired to produce
the video advertisement and another was hired to provide branding materials for the
campaign, including posters and brochures (White et al., 2012). The authors, three of
whom were directly employed by the NHP at the time of production of *Pinch, leave an
inch and roll* (NHP, 2008c) outlined the importance of the HIV prevention team in the
design phase of HIV prevention television advertisements. The NHP prevention team
works closely with the creative team during the design phase to “ensure the message
ideas and concepts [are] executed as intended” (White et al., 2012, p. 56).

The television advertisements produced by the NHP are disseminated to local
broadcast TV stations, including Television Jamaica (TVJ), CVM TV and Love TV as
well as locally operated cable station such as RE TV, HYPE TV (S. Taylor\(^3\), personal
communication, July 20, 2015). Unlike PSAs which are sometimes aired free of charge in
the United States, The Ministry of Health is required to pay the commercial rate for airing
the ads on Jamaican television stations (S. Taylor, personal communication, July 20,
(UNESCO, 2012) approximately 87% of Jamaican households have a television.

However, the RJR Communications Group (2015), parent company for TVJ, explains

\(^3\) Shaneil Taylor is a former communications program coordinator at the National HIV/STI Program. He
worked in this capacity from 2010 to 2013 and is familiar with the process for procuring advertising spots.
that television reaches 91% of the Jamaican population on a daily basis, which is higher than radio (73%) and newspapers (30%). The RJR Communications Groups (2015) also states that in 2008, TVJ had the largest share of Jamaica’s television audience, with 62% market share. More recently, CVM TV (2013) claims to enjoy 49% share of the television market. Though these figures are somewhat dated, they are the only ones available at this time and they do suggest that TVJ and CVM TV together reach a majority of the television audience in Jamaica.

No information is available on the dates and times when the ads were aired and only one article has been published regarding audience recall of the ad titled *Pinch, leave an inch and roll* (NHP, 2008c). However, the most recent HIV/AIDS knowledge, attitudes and behavior survey (NHP, 2012a) found that recall of at least one HIV/AIDS message was 96.2% with 97.6% of respondents stating that they saw the message on television. It is clear that television is the main medium where Jamaicans are being exposed to HIV/AIDS PSAs.

Current conditions in Jamaica and the available literature on HIV/AIDS communication highlight the need for more systematic research concerning gender representations in HIV prevention advertisements, especially in low-income countries where both women and men continue to be adversely affected by HIV infections. This is particularly true for Jamaica where there is higher prevalence in the most at-risk groups such as female sex workers, men who have sex with men and people engaging in multiple partnerships - groups of people who might be constructed as the ‘Other’. The higher numbers of HIV cases in these ‘high-risk groups’ suggest a concentrated epidemic as distinguished by a low level generalized epidemic in the general population. But the
current gender, social and cultural norms still present fundamental structural barriers that need to be addressed before further progress can be made in ensuring universal access to HIV prevention, treatment and care.

Focus of the Study and Research Questions

In light of these circumstances, research can provide a better understanding of gender representations in HIV media campaign materials such as television advertisements. Given the dearth of research exploring this issue, the body of knowledge on HIV prevention would be augmented by inquiry that seeks to provide critical analysis of the representations that currently exist. Therefore, the intent of the study is to contribute to an understanding of gender representations in Jamaican HIV television advertisements. In particular, this study addresses the following questions:

1. What are the different gender representations present in Jamaican HIV prevention television advertisements?
2. What are the social and cultural norms embedded within these representations in the advertisements?
3. What message features are employed in Jamaican HIV prevention television advertisements produced by the National HIV/STI Program?

Research that seeks to provide answers to these questions has significance for HIV prevention knowledge, practice, policy and action regarding the gendered nature of the HIV pandemic. Information garnered through rigorous, theory-based research such as this textual analysis can contribute to better understanding of gender representation in HIV media campaigns. This in turn builds on our knowledge of media portrayals of this disease and how such portrayals can affect people’s perceptions. Furthermore, Jamaican
society stands to benefit from the findings of a study of this nature, since it can inform communication interventions to address HIV/AIDS. In fact, scholars have highlighted the need for more critical analysis of media texts such as HIV/AIDS media campaigns, since research has confirmed the possibility of such texts providing confusing and contradictory messages (Khan, 2014; Mitchell & Smith, 2001; Mitchell, Walsh & Larkin, 2004).

Overview of the Dissertation

This analysis explores the gender and sexual representations present in HIV/AIDS television advertisements in Jamaica. Utilizing critical media studies in the form of a textual analysis and informed by insights from cultural studies (particularly those of Stuart Hall), the analysis seeks to show how the social and cultural norms of Jamaican society are replicated in these representations and how they might support or undermine the effectiveness of HIV prevention messages. The health messages under analysis are HIV prevention television advertisements that were produced and disseminated in Jamaica between 1999 and 2014.

In this chapter I have provided background information on HIV and its gendered impact in Jamaica. The chapter also addresses the use of communication in addressing HIV/AIDS. Additionally, I briefly address gender and sexuality in relation to this disease and outline the focus of the study. In chapter two, a review of the relevant literature is provided. Chapter three outlines the theoretical and methodological frameworks that inform the analysis of the HIV/AIDS television advertisements. This includes an explanation of the textual reading tool and methods applied to the advertisements. Chapter four provides an in-depth textual analysis that shows the main findings of the
analysis. The implications of the findings for the intersection of gender, sexuality and HIV in Jamaica are discussed in the final chapter. I conclude the final chapter with a brief overview of the study, including key findings of the analysis and recommendations for HIV/AIDS television campaigns vis-à-vis gender representations as well as areas for future research, policy and programming.
CHAPTER 2: LITERATURE REVIEW

Through this literature review, the aim is to explicate the streams of literature relating to gender and sexual representation in HIV communication campaigns and how such representations may impact the audience’s involvement with and use of the messages. Specifically, this review addressed: gender representations in HIV prevention PSAs, the impact of gender representation on audience members’ understanding and use of HIV prevention messages, and PSA message characteristics. Delineation of these streams of literature contributes to better definition of the current state of knowledge on a serious health issue that requires additional research.

A search of the literature was conducted to identify useful books and articles addressing HIV prevention media communication campaigns, gender and HIV in Jamaica, sexuality, as well as gender representation’s impact on the audience’s processing of campaign messages. Search terms included: ‘media’, ‘mass media’, ‘mass communication’, ‘media campaign’, ‘gender’, ‘television’, ‘advertisement’, ‘PSA’, ‘sexuality’, ‘gender representation’, ‘HIV prevention’, ‘campaign’, ‘communication campaign’, and ‘health promotion’. As it concerns the audience’s use of HIV prevention messages, the search terms included the constructs of ‘similarity’ and ‘identification’. The search for articles was conducted on the following electronic databases: Communication & Mass Media Complete, Communication Abstracts, Women’s Studies International, Gender Studies, PubMed, PsychInfo and the Social Sciences Citation Index. The reference lists of articles were also examined to identify pertinent articles and books.
In order to be included in this review articles had to be full-text research studies or reviews that were published in English from 1995 to 2014. The year 1995 was chosen as the starting point because scholars identify the mid-1990s as the period when there were increased calls for research and programming to address the gender dynamics that impact HIV/AIDS (Patton, 1993; Chong & Kvasny, 2007). Articles were included if they were judged to present valuable findings about issues of theory, methodology, practice and policy concerning knowledge, beliefs, attitudes and behaviors that relate to the role of gender and sexuality in HIV communication campaigns. Additionally, theses and dissertations that addressed gender representations in HIV/AIDS campaigns were included. Finally, the review includes grey literature4 from the Caribbean and Jamaica, so that documents judged to be relevant to the topic could be considered despite the continued “privileging [of] the work of researchers who have access to the global academic publishing industry” (Kempadoo, 2009, p. 2).

The literature confirmed the growing importance of gender in the HIV pandemic, with a preponderance of articles speaking to the need to address gender issues in HIV prevention (e.g. Bowleg, Teti, Massie, Patel, Malebranche & Tschann, 2011; Greig et al., 2008; Gupta, 2000, 2002; Gupta, Ogden & Warner, 2011; Jesmin, Chaudhuri, & Abdullah, 2013; Pulerwitz, Michaelis, Verma & Weiss, 2010; Wyatt, Gomez, Hamilton, Valencia-Garcia, Gant & Graham, 2013). There was also evidence of efforts to examine representations of HIV and gender in non-campaign media texts such as newspaper articles (e.g. Gibbs & Jobson, 2011; Gibbs, 2010; Hoffman-Goetz, Friedman, & Clarke, 2005; Raimondo & Patton, 2002; Sacks, 1996). The intersection of gender, sexuality and

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4Grey literature refers to “works that are not formally reviewed and have not appeared in standard, recognized publications…. [that] can serve a valuable supplementary role to formal publication” (Grey literature, 2006).
HIV as issues that impact each other became increasingly common in research articles beginning around the year 2000 with Geeta Rao Gupta’s plenary address at the XIIIth International AIDS Conference in Durban, South Africa (Gupta, 2000). Subsequently, there was increasing scholarly interest in sexuality in the development industry\footnote{The term ‘development industry’ is being used as defined by Jolly (2007) in reference to “all those involved in giving or spending international development funding. This includes United Nations agencies, donor governments, recipient governments, international foundations, consultants, non-governmental organizations, activists and development studies institutions” (Jolly, 2007, p. 9). HIV/AIDS is a public health challenge that falls within the purview of the development industry as it can seriously impact the development of a country.}, including HIV/AIDS interventions (e.g. Aggleton, 2004; Cornwall & Jolly, 2009; Fletcher, Dowsett, Duncan, Slavin, & Corboz, 2013; Jolly, 2007, 2011; Knerr & Philpott, 2009; Magar & Kambou, 2011; Magar & Storer, 2009; Oosterhoff, Waldman, & Olerenshaw, 2014; Parker, 2001, 2009a, 2009b).

Additionally, several reviews of mass communication campaigns addressing HIV/AIDS were found (e.g. Bekalu & Eggermont, 2013; Bertrand, O’Reilly, Denison, Anhang, & Sweat, 2006; LaCroix, Snyder, Huedo-Medina, & Johnson, 2014; Myhre & Flora 2000; Noar et al., 2009). There were three systematic reviews (Bertrand et al., 2006; Myhre & Flora 2000; Noar et al., 2009); one comprehensive descriptive review (Bekalu & Eggermont, 2013) and one systematic meta-analytic review (LaCroix, Snyder, Huedo-Medina, & Johnson, 2014). While these reviews sometimes mentioned gender as a variable utilized for audience segmentation, none of them focused on gender or sexual representations in HIV prevention campaign messages and how such representations might affect audience understanding and use of the message. Furthermore, Bekalu & Eggermont (2013) confirmed that despite the Caribbean being the second most affected region after Sub-Saharan Africa, they found no peer-reviewed published articles about
HIV prevention media campaigns from that region for the period under review (January 2000 – February 2010). The most recent review (LaCroix et al., 2014) included one study from Jamaica (Weir, Figueroa, Byfield, Hall, Cummings & Suchindran, 2008) but the review indicated that gender, as a sample characteristic, was not a significant predictor of the effect of any reported campaign outcomes.

Several studies from the United States (Raheim, 1996; Sacks, 1996) and a few from low-income countries such as India (Khan, 2014), Kenya (Mbure, 2007; Mabachi, 2008), Ghana (Faria, 2008) and Brazil (Meyer, Santos, Oliveira, & Wilhelms, 2006) addressed gender representation in HIV campaigns, through analysis of materials from HIV prevention campaigns. The key findings and conclusions from these studies are discussed below.

Gender in HIV/AIDS Discourse

While they may not seem to directly impact HIV prevention efforts, the popular and public discourses that present information on HIV, gender and sexuality are pertinent to our understanding of a disease that has been constantly presented in the media. The construction and representation of gender in HIV/AIDS discourses have some influence in social and behavior change processes (Chong & Kvasny, 2007). As early as 1996, scholars such as Sacks (1996) and Raheim (1996) began to explore how discourses on HIV/AIDS might impact prevention efforts among women but there have been relatively few similar analyses, with most of them focusing on the Western world, such as the United States and Australia (Khan, 2014). These studies are outlined later in this chapter.

Though there has been encouragement by scholars to consider the use of language, images and narratives in HIV/AIDS discourse (Airhihenbuwa, 2007; de Souza,
2007; Sastry & Dutta, 2011; Hall, 1992; Khan, 2014; Lupton, 1994; Tulloch & Lupton, 1997) there has been a relative dearth of textual analyses on health media campaigns (Khan, 2014). There have been a few studies that seek to use or inform textual analysis in relation to HIV/AIDS (e.g. Johnny & Mitchell, 2006; Khan, 2014; Myrick, 1996; Triechler, 1999; Tulloch & Lupton, 1997). Indeed, Khan (2014) argues that this lack of attention to such interpretive techniques is not surprising, given the scarcity of articles on textual analysis found in his review of the literature. This was also previously confirmed in an analysis of 22 years of publication in *Health Communication*, the oldest journal publishing research on the field of health communication (Kim, Park, Yoo & Shen, 2010). Kim et al., (2010) found that over the period, there was continued dominance of quantitative research in the post-positivist paradigm, to the detriment of research in the interpretive and critical paradigms, such as textual analysis. The current review confirms the relative paucity of textual analyses about HIV prevention campaigns, especially those that consider gender and/or sexual representation.

The early textual analyses conducted about AIDS discourses highlighted two main themes in relation to how women were portrayed: women as vectors and women as victims. In ‘Women and AIDS: An analysis of media misrepresentations’, Sacks (1996) says that the negative portrayal of women in AIDS discourses works to stigmatize some women and suggests that “those who have AIDS are responsible for their illness” (p. 59). Through a close reading of popular discourses, such as mainstream U.S. literature about women and AIDS, Sacks (1996) argued that women were portrayed in two extremes. At one end of the spectrum, they were portrayed as prostitutes who were responsible for infecting heterosexual men and (as unfit, HIV-positive mothers) responsible for infecting
their children; at the other end of the spectrum, they were shown to be ‘innocent’ women “who became infected by her dentist or by the sole unsafe activity of her life” (Sacks 1996, p. 60). This dichotomous representation of women as either victims or vectors of the disease was also highlighted by Raheim’s (1996) content analysis of newspaper articles in the New York Times.

More recently, Chong and Kvasny (2007) utilized Gupta’s (2000) explication of various categories of HIV/AIDS prevention programs addressing gender as a framework for their review of the literature on the social construction of gender and sexuality in HIV/AIDS discourses. Gupta (2000) identifies five approaches ranging from damaging to empowering, namely stereotypical, gender-neutral, gender-sensitive, transformative and empowering. According to Chong and Kvasny (2007), several constructions of gender and sexuality evident in HIV/AIDS discourses have evolved over the decades. Through the stereotypical construction of gender in HIV/AIDS discourse, the authors argue that women are portrayed in narrow ways that replicate feminine moral ideals such as purity and faithfulness and repeat stereotypical views about females’ roles such as wife, mother and caregiver (Chong & Kvasny 2007).

In the initial phase of the epidemic, the stereotypical construction of gender represented women as being immune to HIV/AIDS, which resulted in women being ignored due to the association of HIV/AIDS with white gay men (Patton, 1993). According to Chong and Kvasny (2007) the second stereotypical construction of women in HIV/AIDS discourse presented females as transmitters of HIV/AIDS, in keeping with Sacks’ (1996) and Raheim’s (1996) finding that women were seen as vectors of the diseases. Chong and Kvsany (2007) argue that this stereotypical portrayal of women in
popular HIV/AIDS discourse resulted in placement of the responsibility for HIV prevention squarely on the shoulders of women. Other stereotypical constructions of gender identified by these authors include the role of caregiver and the term ‘flower-pots’ (Charlesworth, 2003) that was assigned to pregnant women being warned to ensure that they do not transmit HIV to their children.

Chong and Kvasny’s (2007) review also briefly explicates the use of neutral, sensitive, transformational and empowering social constructions of gender in HIV/AIDS discourses. However their discussion lacked specific examples from the literature, which reduced the strength of their analysis concerning the social construction of gender in HIV/AIDS discourse but also underlined the dearth of studies that seek to address this issue.

While there have been continued calls for more research into gender, sexuality and HIV in the context of low-income countries, they remain few (e.g. Brijnath, 2007; Campbell & Gibbs, 2008; Chong & Kvasny, 2007; Gibbs, 2010; Khan, 2014). The studies that do examine the representation of women and HIV tend to focus on African countries and present arguments that often portray women as passive receptors rather than active subjects who are able to effect change and improve their own lives (Gibbs, 2010). Additionally, when studies do focus on African women the default construction represents African women as those who need to be ‘rescued’ through interventions from external actors (Brijnath, 2007; Campbell & Gibbs, 2008; Chong & Kvasny, 2007; Gibbs, 2010). This led one scholar from South Africa, a country ravaged by HIV/AIDS, to assert that current portrayals of the relationship between HIV and gender either pay no attention
to the social context of women’s lives, or portray women as passive and unable to act (Gibbs, 2010).

Grounded in the assumption that “representations of gender and HIV in the symbolic sphere provide the context within which people charged with designing and implementing women’s empowerment interventions…construct understandings of this relationship and how best to tackle it” (Gibbs, 2010, p. 1620), this scholar conducts a content analysis of gender and HIV in newspapers from South Africa. Gibbs (2010) found that South African media focused on the need for structural and individual-level efforts to address gender inequalities, but rarely on community-development interventions. Additionally, there was little attention to bottom-up approaches that seek to empower women, with more emphasis on the role of powerful people like politicians (Gibbs, 2010). Gibbs (2010) argues that this type of representation of gender and HIV in newspapers contributes to the view that women lack agency, especially in light of structural inequalities that ensue in such settings. Based on this content analysis, he calls for different representations of gender and HIV in media; representations that acknowledge the possibility of action on the part of women and the vital role of bottom-up responses and community level interventions (Gibbs, 2010).

Men, Masculinities and HIV/AIDS in the Media

While the overwhelming majority of research concerning gender and HIV has focused on how men’s oppression of women contributes to women’s increased vulnerability, there are also efforts to highlight how men are 'oppressed' by their gender, thereby increasing their risk to HIV infection (e.g. Barker & Ricardo, 2005; Campbell, 1995; Fleming, Lee & Dworkin, 2014; Gough, 2006; Lindegger & Quayle, 2009; Mason,
2012; World Bank, 2006). Scholars are increasingly recognizing the importance of challenging stereotypical hegemonic masculinities that support promiscuous behavior (Bujra, 2000; Gibbison, 2007; Macia, Maharaj & Gresh, 2011; Walcott, et al., 2014, Walcott, et al., 2015) and automatically select men as primary decision makers in sexual matters (Mane & Aggleton, 2001). As in the case of women’s representation in HIV prevention discourses, scholars highlight the role of media in the production and reproduction of norms of masculinity (Gauntlett, 2008).

Numerous studies address men’s ideas of masculinity in the context of HIV/AIDS (e.g. Bowleg, et al., 2011; Fleming, Lee & Dworkin, 2014; Kerrigan, Andrinopoulos, Johnson, Parham, Thomas & Ellen, 2007; Noar & Morokoff, 2002; O’Sullivan, Hoffman, Harrison & Dolezal, 2006; Walcott et al., 2014). While these studies document some of the masculine ideologies that serve to increase men and women’s vulnerability to HIV, they do not examine the role of media portrayals of masculinity in HIV prevention. Very few examples of articles that address media representations of masculinity and HIV/AIDS were found through this review (e.g. Gibbs & Jobson, 2011; Newman & Persson, 2009; Morna, 2006). South African studies did concentrate on the disproportionate representation of men’s voices concerning HIV/AIDS (Morna, 2006). Meanwhile, in a study of Australian media representations of men and HIV, Newman & Persson (2009) highlighted how the media presented certain groups of socially and economically marginalized men (such as homosexuals and immigrant African men) who were considered to be at increased risk for HIV.

One study explicitly addresses the role of media portrayals of masculinity on HIV. Gibbs and Jobson (2011) conducted a thematic analysis in order to identify “the
different narratives of masculinity that circulate in the newspaper” (p. 173). They also provide arguments concerning the possible impact of such narratives on efforts to address HIV in South Africa. One finding of this study is that the *Daily Sun* presented narratives that focused on the men who were active in the fight against HIV and AIDS but not on men who were openly living with the disease (Gibbs & Jobson, 2011). The authors explain that the most apparent implication of this finding is that the newspaper provides narrow and limited accounts of men living with HIV, thereby replicating and sustaining the view that men are not infectious agents while repeating stereotypical depictions of women as vectors of HIV (Gibbs & Jobson, 2011). This reinforcement of a narrative in support of a ‘masculinity of the healthy male’ only serves to make it harder for men to access testing, treatment and support (Gibbs & Jobson, 2011).

Gender Representations in HIV Prevention Campaigns

Media representations of HIV/AIDS undoubtedly influence audience members’ understanding of the disease and the use of mass media campaigns has become an integral aspect of HIV/AIDS prevention strategy all over the world. Such prevention strategies seek to directly impact target audiences’ assessment of their risk and their response to this disease. Much of the research on gender in HIV prevention has been published about the U.S. with a few studies in low-income countries. The studies from the U.S. will be examined first, followed by examples found about gender in HIV prevention campaigns from Kenya, Ghana and Brazil and India.

*Gender Representations in HIV Campaigns in the U.S.*

In one of the first articles to address gender representations in HIV campaigns, Raheim (1996) asserts that media representations of HIV/AIDS can influence “(a)
perceived risk of infection, (b) knowledge of effective preventative measures and perceptions of responsibility for employing them, and (c) attitudes towards infected persons” (p. 402). This was the underlying argument used to highlight the need to examine media messages about HIV/AIDS and their possible impact on women and it remains relevant today as the need for further research into gender representations becomes even more apparent.

Raheim (1996) conducted a critical analysis of Phase III of the “America Responds to AIDS (ARTA)” campaign implemented by the Centers for Disease Control (CDC). This phase of ARTA specifically targeted women during a time when HIV/AIDS was being reconstructed as a women’s health issue in the United States. The analysis looked at six PSAs from one of the first campaigns targeting women. These PSAs were divided into two categories of messages referred to as the “Talk About AIDS” messages, designed to encourage communication about HIV between women, their friends and partners, and the “Don’t Let It Happen to You” messages that sought to inspire women to be proactive in protecting themselves against HIV (Raheim, 1996). The analysis concluded that while these messages were important at the time, they might have served to render the concerns of some women insignificant.

This analysis was particularly critical of the “Don’t Let it Happen to You” category of messages because they advanced the notion of women taking responsibility for protecting themselves without stating how this might be accomplished (Raheim, 1996). So while these initial messages represent an advance in the efforts to address HIV among women in the U.S. the representations of gender within these messages did not provide meaningful narratives that the women being targeted could emulate (Raheim,
1996). The study represents a vital initial step in the investigation of gender representations in HIV/AIDS campaign messages but is limited by the focus on a few PSAs and a lack of in-depth analysis. Furthermore, the author failed to integrate findings from preceding studies on the representation of women and HIV in popular discourse.

Some of the shortcomings identified in Raheim’s (1996) analysis were addressed through Myrick’s (1999) textual analysis of PSAs produced by the Centers for Disease Control and Prevention (CDC). Myrick (1999) analyzed a total of 47 AIDS PSAs in which there were representations of women, focusing on “the discursive strategies that alternately empower and disempower women, ultimately affecting their ability to respond to HIV” (p. 50). The analysis also identified representational strategies that served to characterize women in stereotypical ways such as “passive, threatening, hypersexual, responsible for their own victimization, and lacking in sexual agency, discipline and self-control” (Myrick, 1999, p. 50).

The analysis was divided between initial representations of women in AIDS PSAs from 1991 to 1992, and later representations during the year 1995. The initial representations had disempowering consequences due to their use of certain technical conventions. First, these PSAs used what Myrick (1999) refers to as the ‘male omniscient narrator’. Use of this type of narrator is considered especially disempowering for women because it locates knowledge, power and authority in the voice of the speaker whose maleness symbolizes the federal government - a male-dominated institution (Myrick, 1999). Secondly, the PSAs increased the visibility of women as people with inaccurate beliefs who should be assigned blame and responsibility for HIV, and as possibly infectious, deceptive, direct threats to men (Myrick, 1999). Finally, while a subset of
these PSAs aimed to contextualize HIV prevention messages, Myrick’s (1999) analysis revealed that the representation of women still placed primary responsibility of prevention on women.

In the second set of PSAs analyzed, the author finds a positive change in the use of the omniscient narrator. Although still male, the narrator provides less threatening messages, more pointed prevention information, and seems less intrusive, which, the author argues, “locates more power with women” (Myrick, 1999, p. 56). Conversely, the visibility and negative associations of women as HIV positive and potential transmitters of the virus continue throughout the second set of PSAs for the most part (Myrick, 1999). The author identifies two PSAs that did not continue the trend but provide more positive and empowering representations of the women made visible in these ads. Finally, the analysis reveals no change in the contextualization of the set of messages in the 1995 PSAs. Like the first set of messages from 1991 to 1992, the messages from 1995 still instructed women to protect themselves by engaging in “prevention activities that remain diametrically opposed to their experiences of power, control, and identity” (Myrick 1999, p. 60). Essentially, the advertisements did not take into consideration the imbalance of power that constitutes these sexual experiences, particularly for women (Myrick, 1999).

This study represents considerable advancement of the research on gender representation in HIV prevention PSAs by providing much needed analysis and valuable lessons for intervention planners, particularly concerning the disempowerment that comes with blaming a particular group for the spread of a disease.

A more recent study on representations of women in HIV prevention from the U.S. was conducted in 2003 in the form of a feminist rhetorical analysis of brochures
from several agencies (Charlesworth, 2003). The author identifies no specific publication dates but explains that the brochures were typical of the type of information being transmitted to individuals about HIV in the early 1990s (Charlesworth, 2003). The representations of women in the 45 brochures created three harmful identities for women by positioning them as transmitters of HIV, caregivers, and ‘flowerpots’ or potential mothers (Charlesworth, 2003).

Women as ‘transmitters’ was the most common theme in the brochures (Charlesworth, 2003). The author therefore argues that this focus on women as primary transmitters of HIV not only ignored how the women became HIV-positive (primarily through heterosexual contact) but also made it easier for readers to ignore this fact, thereby possibly increasing vulnerability to HIV infection among people who use the information from those brochures (Charlesworth, 2003). Apart from ignoring the role of heterosexual contact, the brochures Charlesworth (2003) found misinformed readers about the difference between men and women’s physical risk of HIV infection during unprotected sex. She found that:

…one-third of the brochures incorrectly claim that women can infect men with HIV just as easily as men can infect women. What all but two of these brochures fail to mention is that, in heterosexual contact, women are 8-17 times more likely to be infected with HIV by men than men are from women. (Charlesworth, 2003, p. 71)

Finally, Charlesworth (2003) found that 90% of the brochures claimed that women were the only means of mother-to-child transmission of HIV to their children. Only three of the brochures indicated that a man may infect a woman, who then could infect the child
and only two brochures identified other means of HIV transmission to children such as contact with blood or bodily fluids through blood transfusions or sharing a contaminated needle (Charlesworth, 2003).

The theme of women as caregivers was also evident, with 38 of the 45 brochures identifying women in the role of caregivers (Charlesworth, 2003). In this role, women are then encouraged to learn about HIV/AIDS not only to protect themselves but also to act as caregivers for their family, friends and patients (Charlesworth, 2003). The author made it clear that there were no representations of men as caregivers, whether in the words or pictures, which is particularly noteworthy since even in the brochures targeting women, there is no reference to how others may help to care for women who are HIV positive (Charlesworth, 2003).

Charlesworth’s (2003) final theme is women as ‘flowerpots’; a reference to their representation as pregnant women. There was almost exclusive focus on warning pregnant women of the danger of transmitting HIV to their children, bringing to light a focus on women in relation to others, where women are constantly being asked to consider the needs of men or their children, ahead of their own needs (Charlesworth, 2003). In light of these findings, Charlesworth (2003) asserts that the brochures replicated cultural ideology by ‘othering’ women, designating them as scapegoats, reducing them to reproductive and care giving roles and failing to show the role of heterosexual men in the spread of HIV.

The final study concerning HIV/AIDS prevention media messages in the U.S. is a dissertation in the form of a content analysis of 152 PSAs from the CDC and private foundations such as the National Association of People Living with AIDS (NAPWA) or
Kaiser (Carson, 2010). While the content analysis did not focus exclusively on gender representations in the PSAs, the results provide some useful information. The study found that women were portrayed as dominant figures in 46% of the HIV/AIDS PSAs, while 53% had men as dominant figures (Carson, 2010). The author suggests that these findings could mean that “women seem to be more specifically targeted with education and prevention messages” than with earlier advertisements (Carson 2010, p. 53). Her findings also confirm Charlesworth’s (2003) assertion that HIV prevention messages aimed at women represent them as caregivers or ‘flowerpots,’ focusing on the health of unborn children. On the one hand, Carson (2010) found that in PSAs for the period 2000-2005 women are shown as more knowledgeable than in previous PSAs created from 1987-1999 and more issues that affect women are discussed. On the other hand, there was a reduction in the number of women being portrayed as qualified or trustworthy, with the author surmising that this might be due to the fact that women in the 2000-2005 set of PSAs were presented “less as experts in HIV/AIDS PSAs than in previous years” (Carson 2010, p. 54).

**Gender Representations in HIV Campaigns in Low-income Countries**

In many countries around the world, including low-income countries, television PSAs constitute the most prominent source of HIV/AIDS information (LaCroix et al., 2014). Since PSAs form such a major part of the HIV prevention media landscape, we need better understanding of the messages they provide and their possible impact on HIV prevention efforts. The earliest and only international survey of HIV/AIDS PSAs that provides a descriptive analysis of the actual PSAs was conducted over a decade ago.
(Johnson, Flora & Rimal, 1997). A noteworthy finding from this study is the fact that women were typically portrayed as ‘window-dressing,’ adopting a passive role in the PSAs (Johnson, Flora & Rimal, 1997). Additionally:

In 35% of the PSAs, women left decision making up to men or avoided it; in 29%, they were presented as taking charge and making decisions. Women appeared as ignorant or neutral about HIV in 42% of the PSAs and knowledgeable in 32%.

(Johnson, Flora & Rimal 1997, p. 230)

Though this analysis focused on PSAs that were produced from 1987 to 1993, it is likely that campaigns still mirror the social and cultural norms that limit women’s role in HIV prevention.

A meta-review of HIV prevention campaigns in low-income countries (Bertrand et al., 2006) covered a mixture of television, radio and print media that underscored positive results for HIV/AIDS knowledge as well as condom use. However, since only eight of the 24 studies categorized data along gender lines, the authors chose not to incorporate that variable in their review and recommended that future research should consider disaggregation of results by gender (Bertrand et al., 2006). Disaggregated data means that the researcher analyzes the data by specific subgroups (Garrett, 2003), such as men and women or even further by different age groups of men and women. This kind of analysis allows for patterns, trends and other relevant information to be uncovered.

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While Myhre & Flora (2000) and Noar (2009) have conducted systematic reviews of HIV/AIDS mass communication campaigns, they have focused on reports published in peer-reviewed journals that significantly restricted the number of campaigns examined. In contrast, Johnson, Flora & Rimal (1997) examined over 300 television PSAs from around the world, providing a different perspective on gender representation in the ads.
In the Kenyan context of HIV prevention PSAs, Mbure’s (2007) textual analysis of posters provides a somewhat nuanced explication of the gender ideologies present in HIV/AIDS messages. The study found that the use of gender-based roles was a dominant artistic element that reflected certain hegemonic gender norms (Mbure, 2007). For instance, arguments used in the posters to promote condom use suggested that for women, that strategy is only appropriate outside the context of marriage. This could work against prevention efforts by fostering the belief that “protected sex within marriage is a sign of unfaithfulness” (Mbure, 2007, p.89). The study also found, however, that some messages reinforced dominant gender ideology while others countered it. Examples of reinforcing messages include those that failed to condemn men’s promiscuity, as well as others that blamed women for transmission, and still others that ignored female agency by portraying men as initiators of sexual activity. Counter-hegemonic examples include messages that acknowledge female sexuality and promote joint blame for HIV transmission, while encouraging joint responsibility for sexual health and encourage inter-generational dialogue (Mbure, 2007). The counter-hegemonic messages that highlighted shared blame and responsibility depart from the usual practice of blaming women for the spread of HIV (e.g. Myrick, 1999; Charlesworth, 2003).

Through a textual analysis of three Kenyan mass media HIV/AIDS campaigns and interviews with campaign planners, Mabachi’ (2008) discovered the tendency to promote negative gender representations, even when campaign planners have good intentions. Mabachi (2008) found that although interviewees were aware of the need to provide information for girls and women, they “did not focus much on the women in the target audiences” (p. 63). When campaigns did address women, the textual analysis
revealed that the PSAs tended to replicate certain prevailing gender norms in Kenyan society, especially different gender expectations (Mabachi, 2008). Although one campaign (*Nimechill*) did portray both girls and boys taking charge of their sexuality (counter to social and cultural norms), Mabachi (2008) asserts that the other two campaigns perpetuated representations of women and men in traditional gender roles: “men as providers and head of the household and women were more likely to be portrayed at home or in a supportive role” (p. 102).

Faria’s (2008) analysis of HIV/AIDS messages in Ghana focused on the representation of men and women in popular discourse as well as visual media such as billboards, stickers and banners. Though not completely focused on HIV prevention advertisements, this analysis provides key insights into gender representations in a developing country. Faria (2008) found that Ghanaian women were constantly portrayed as the ones who should initiate HIV protective behaviors while men were portrayed in more passive roles. Men were more commonly shown “receiving or responding to advice, refusals or demands from women” (Faria, 2008, p. 67). Through such assumptions of responsibility, Ghanaian women devolved into roles of caregiver, advocate and protector (Faria, 2008). The author asserts that these representations may be detrimental to HIV prevention efforts because they do not address the gender inequalities and power relations that define the context in which both genders are being asked to engage in HIV preventative behaviors (Faria, 2008).

Through a critical textual analysis of televised PSAs aired as part of the Brazilian HIV prevention campaign from 1994 to 2000, Meyer, Santos, Oliveira, & Wilhelms (2006) highlight two conflicting representations of men and women. These were
depictions of “shameless women” and men as “the responsible cheater” (Meyer et al., 2006, p. 4). They argue that these representations reproduce ideas of gender that serve to undermine the very prevention efforts they constitute (Meyer et al., 2006). In addition, the authors assert that by repeating the relationships and gendered sexual practices that the campaign aims to reduce, the PSAs “unquestioningly incorporate hegemonic representations both of femininity as well as masculinity” (Meyer et al., 2006, p. 23).

Khan’s (2014) textual analysis of televised HIV/AIDS campaigns from India (from 2002 to 2005) considered the ethical implications of the messages articulated in gender, class and sexual assumptions. Though the analysis did not focus exclusively on gender and sexual representations, Khan (2014) pointed out that only three of the 35 ads focused on women, and of those three ads only one encouraged safe sex negotiation with husbands, while advertisements aimed at heterosexual men focused overwhelmingly on the importance of condom use. However, there was no reference to homosexuality or injecting drugs as possible risk factors (Khan, 2014). Like Faria (2008), Khan (2013) argued that the way men and women are symbolically represented in ads targeting men could send an unintended message that men’s bodies are ‘pure’ while women’s bodies are ‘impure’ and the source of HIV infection (Khan, 2014). He also criticized the PSAs for implying that HIV/AIDS is a disease of the poor, with the attendant implication that middle class and elites do not need to be concerned about it (Khan, 2014). Based on these findings, Khan (2014) concludes that the HIV/AIDS messages were “far from emancipatory” because they reinforce existing power relations structured by gender, sexuality, class and education, which could “hamper the very goal of HIV prevention” (p. 265).
The above examples demonstrate that gender representations in current HIV PSAs may be lacking in gender sensitivity. Though gender is not the central focus of all the previously discussed studies, these examples provide some insight into the manner in which PSAs deal with gender. They also underscore the need for improvements in how men and women are portrayed in HIV PSAs, which is dependent on more research that assesses current gender representations.

**Gender and Identification in HIV Prevention Campaigns**

Audience identification\(^7\) with PSA characters is one area of concern in HIV prevention messages, especially in ads that utilize an entertainment-education approach. Hardly any of the literature on HIV prevention PSAs addressed the relationship between gender and identification and when identification is addressed, there is some confusion about the meaning and application of the concept (Moyer-Gusé, 2008). Despite the limited number of articles and the lack of clarity on conceptual definitions, there were some relevant insights into the role of gender and its interaction with identification in HIV prevention messages.

In a study addressing identification in HIV prevention entertainment-education, Salmon, Witte and Lee (2005) found that gender might be a predictor of attention to and engagement with entertainment-education programs. Previous studies did show that men, more than women, identified strongly with a male celebrity (Basil, 1996) and women exhibited a higher level of identification with a female celebrity (Brown, Basil & Bocarnea, 2003). These findings are in keeping with earlier research showing that people

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\(^7\) In the context of this study, identification refers to the concept that Moyer-Gusé (2008) classified as ‘wishful identification’, which occurs when an audience member wishes to be like a character portrayed in an advertisement or looks up to the character for attitudes, beliefs and behaviors that can be emulated.
are more likely to adopt behaviors being modeled by characters of the same gender (Bandura, 1986). Other scholars in media studies have focused on identification as a vital process in accomplishing media effects (Basil, 1996; Cohen, 2001; Cohen & Perse, 2003; Moyer-Gusé, 2008; Moyer-Gusé, Chung & Jain, 2011).

Additionally, in research on entertainment-education programming, Sood (2002) emphasized the role of audience involvement in promoting pro-social behaviors (such as helping, sharing and volunteering) and deemed identification a key part of that process. Although it is a complex concept, Sood (2002) defined audience involvement as “the degree to which audience members engage in reflection upon, and parasocial interaction with, certain media programs, thus resulting in overt behavior change” (p. 156). For both identification and involvement, the literature on HIV focused more on demographics, with several scholars finding that the gender of characters impacts audience attention to and engagement with the message (Geary et al., 2008; Mabachi, 2008; Noar, 2006).

More recently, Peirce & Bates (2012) found that an audience member’s identification with one character in a radio drama series addressing HIV/AIDS does not necessarily lead to reduction in risky behaviors. The authors suggest that in order to achieve behavior change, entertainment-education efforts must not only promote identification; they should promote identification “with particular characters” (Peirce & Bates, 2012, p. 7), but they do not address the impact of character and audience gender.

Sex, HIV/AIDS and the Development Industry

Another stream of literature relevant to this research is the information available concerning sex, sexuality and HIV/AIDS in the context of the development industry. In

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*Parasocial interaction was defined by Horton and Wohl (1956) as a perceived intimacy or friendship between a media character and an audience member.*
most societies, sex (and anything to do with sex) is a somewhat difficult topic to discuss. Although sexual and reproductive health issues (such as HIV/AIDS) have been addressed by various national and international agencies for decades, for the most part the public discourse about sex, sexuality and sexual pleasure has remained reticent. Scholars and practitioners have therefore asserted that despite the strides that have been made in addressing sexual and reproductive health, sex remains shrouded in silence, stigma and shame (Cornwall & Jolly, 2009; Cornwall, Correa & Jolly, 2008; Dixon-Mueller, 1993; Gupta, 2000; Higgins & Hirsch, 2007; Ingham, 2005; Jolly, 2007). Another element of the scholarly discussion regarding sex in regard to HIV/AIDS is what Jolly (2007) refers to as an ‘obsession with bad sex’ where pleasurable sex and safe sex are presented as being mutually exclusive (Philpott, Knerr & Boydell, 2006). The final issue to be addressed in this section is the overwhelmingly heteronormative paradigm within which the development industry, including those who are working to address HIV/AIDS, operates (Jolly, 2011; Kleitz, 2000; Lind, 2009a). The literature on these three issues is delineated in the following paragraphs.

As early as 1993, Ruth Dixon-Mueller raised questions about how the reproductive health field conceptualized sexuality. In a seminal article Dixon-Mueller (1993) contended that reproductive health professionals had adopted a narrow and sanitized definition of sexual behavior focusing on the risks of pregnancy and sexually transmitted diseases to the exclusion of almost everything else, including sexual enjoyment. Literature in the period prior to this germinal article focused on three main areas: contraceptive use, adolescent sexuality and non-marital pregnancy, and sexually transmitted diseases (Dixon-Mueller, 1993). She further argues that in treating sexual
intercourse as an act devoid of emotion, practitioners and researchers were doing men and women a disservice because they did not offer insights into the qualitative aspects of sexual relationships (Dixon-Mueller, 1993).

To replace earlier approaches, Dixon-Mueller (1993) proposed four dimensions of sexuality in an analytic framework to guide researchers and practitioners: sexual acts, sexual meanings, sexual partnerships, sexual drives and enjoyments (Dixon-Mueller, 1993). She explains that these four elements are intimately associated with sexual and reproductive health outcomes, especially when considered in relation to gender differences (Dixon-Mueller, 1993). Finally, the author outlined problematic limitations in prior definitions of sexuality, such as a tendency to focus on the number of sexual acts and partners as opposed to focusing on meanings that people ascribe to sexual acts as well as the power relations that ensue in sexual relationships (Dixon-Mueller, 1993). This article brought to the fore the need for more open dialogue about sex and sexuality in reproductive health at a time when HIV/AIDS was making it impossible to ignore a clear connection between sex, sexuality and health.

More recently, Cornwall and Jolly (2009) argue that the continued silence on sexuality in the development industry is fuelled by several misconceptions. Although the connection between gender, HIV/AIDS and sexuality should be obvious, Cornwall and Jolly (2009) explain that the linkages are not usually clearly articulated, so they remain implicit. Here, they explain some of the reasons for the continued confusion about sex and suppression of discussions of sexuality in the development industry:

Some see ‘sexuality’ as something that only concerns sexual minorities – and reason that development ought to be concerned about the majority of poor people,
not a barely visible minority. Others see ‘sexuality’ as about sex, and see sex as something private, embarrassing, outside the scope of development intervention. Other[s] still see ‘sexuality’ as being about something that’s positively frivolous when compared to the urgent problems like hunger or climate change. Few recognize the connections that exist between sexuality and all of development’s sectors, or the extent to which sexuality, like gender, affects much more of our lives than our sex lives. Nor is there enough recognition that these are issues that affect us all. (Cornwall & Jolly, 2009, p. 5-6)

These practitioners argue that while there might be little or no explicit mention of sexuality in the policies of development organizations, they do address sexual issues in unfortunate ways (Cornwall & Jolly, 2009).

‘Bad sex,’ HIV/AIDS and the (Im)possibility of Safe Sexual Pleasure

Despite official reluctance to speak plainly, the development industry has been addressing issues of sexuality for decades through programs focused on disease, violence and population control. Unfortunately, for the most part, these messages have emphasized the dangers of sex. The reasons why people engage in sex in the first place (pleasure and intimacy) have been ignored (Dixon-Mueller, 1993; Jolly, 2007). Cornwall & Jolly (2009) affirm that sex has been framed as a problem by “an industry driven by the search for technical fixes and magic bullets” (p. 6).

In a Working Paper entitled Why the development industry should get over its obsession with bad sex and start to think about pleasure Susie Jolly (2007) critiques the negative approach to sex. Development practitioners may unwittingly stereotype women
as victims of bad sex and men as perpetrators of bad sex, and ignore transgender people altogether (Jolly, 2007).

While acknowledging that there is some truth to the discourse on women who engage in coerced, unsafe sex due to violence, economic status or both, Jolly (2007) asserts that a focus on gender inequalities and the violent behavior of men as the only reasons behind unsafe sex obscures other reasons why women might engage in unsafe sex. This representation of ‘women as victims of bad sex’ limits the space for discussion of women’s pleasure, and results in dangerous unions between feminist efforts to protect women and conservative patriarchal forces that can result in reducing women’s agency\(^9\) (Jolly, 2007). The stereotypical portrayal of ‘men as perpetrators of bad sex’ is equally dangerous because it erases the experiences of the majority of men who are not sexual predators, while perpetuating silence about the sexual abuse of men (Jolly, 2007).

Another element of this ‘bad sex’ paradigm is the fact that people who do not fit within the expected male-female categories are essentially made invisible (Jolly, 2007). This erasure of transgender people from the development discourse about sex and sexuality means that development efforts do not support this group of people who are even more likely to face sexuality-related issues (Jolly, 2007).

Apart from outlining these stereotypes, Jolly (2007) advances the argument that by focusing on the downsides of sex, the development industry fails to realize that pleasure and danger are often intertwined. This absence of pleasure in sexual and reproductive health discourse was also highlighted by other scholars (e.g. Higgins &

\(^9\) Jolly (2007) cites examples such as an alliance between feminist anti-pornography activists US right-wing groups in the 1980s (Rubin, 2006); the ‘unholy alliance’ between the Bush administration and some feminist groups in the mobilization against prostitution and trafficking (Crago, 2003) and US neo-conservatives’ use of arguments about protecting women from exploitation to justify the invasion of Afghanistan and Iraq (Petchesky, 2005).
Hirsch, 2007; Hirst, 2013; Ingham, 2005; Philpott, Knerr, & Boydell, 2006; Philpott, Knerr, & Maher, 2006). Almost fifteen years after the publication of Dixon-Mueller’s (1993) article, Higgins & Hirsch (2007) provided an update on the progress that had been made connecting sexuality and the sexual and reproductive health field, while highlighting that there was still a ‘pleasure deficit’.

In light of the continued silence on the possibilities of pleasure within the context of sexual and reproductive health efforts such as HIV/AIDS prevention, Jolly (2007) asserts that one way to negotiate the overlapping pleasures and dangers of sexuality is to promote sexual pleasure and the pleasures of safer sex as means of engendering positive social and behavior change with regards to safer sexual practices. An alternate solution is to create messages that acknowledge the possibility of safe sexual pleasure.

**Heteronormativity and HIV/AIDS**

A few scholars have outlined the impact of heteronormativity on HIV/AIDS, particularly in low-income countries, where development agencies are involved in efforts to address the disease (Cornwall & Jolly, 2009; Cornwall, Correa & Jolly, 2008; Jolly, 2011; Kempadoo, 2009; Kleitz, 2000; Lind, 2009a, 2009b; Seale, 2009; Sharma, 2009; Tadele, 2011). Since it originated in Western scholarship, there have been discussions about whether or not the term is applicable to non-Western contexts, but Sharma (2009) proposes a broad definition that may be adapted to fit the needs of different transnational settings. She defines it as follows: “heteronormativity…refer(s) to those norms related to gender and sexuality which keep in place patriarchy and compulsory heterosexuality as well as other systems and ideologies related to power such as religious fundamentalism, casteism, the class system and so on” (Sharma, 2009, p. 53). This definition allows for
considerations of this concept in relation to various issues in the development industry, including HIV/AIDS. A less loaded definition of the term is provided by Tamale (2011) who sees it as “the socio-cultural system that assumes the existence of only two sexes/genders and views human sexual relations between a man and a woman as being natural and normal, with no other possibilities” (p. 640).

A common thread among the articles that consider the link between heteronormativity and HIV/AIDS is the continued privileging of this understanding of gender relations, despite increasing awareness of the importance of considering and supporting the needs of sexual minorities (Jolly, 2011; Pease, 2010). Another problematic aspect of heteronormative framing in HIV/AIDS work is the tendency to label groups that fall outside what is considered the norm (such as men who have sex with men and sex workers) as ‘most at risk populations’ (Jolly, 2011; Seale, 2009). Seale (2009) maintains that this type of framing obscures the risks faced by other groups or people (such as young women) in Sub-Saharan African contexts, thereby decelerating prevention efforts that could be targeted to that group. Some researchers and practitioners have therefore called for the use of ‘heteronormativity analysis’ in order to identify weaknesses in HIV/AIDS efforts, particularly in helping those involved in the response to understand where normative “assumptions fail to match realities, or reinforce realities of power structures and their effects” (Jolly, 2011, p. 27).

Kempadoo (2009) confirms the prevailing heteronormative paradigm that exists in the Caribbean. She found that studies addressing sexuality in the region tend to portray sexuality as “rigidly heterosexual and intolerant of sexual difference” (Kempadoo, 2009, p. 9). A vital aspect of male sexuality identified within this heteronormative arrangement
is promiscuity as an essential element of male sexuality which attests to men’s virility and sexual prowess (Kempadoo, 2009). Concerning (young) women, Kempadoo (2009) found that engaging in heterosexual sex was a necessary signifier of maturity as the literature highlights the pressure that young women face to bear children, thereby confirming their womanhood by proving that they are not a ‘mule’\(^{10}\). In the Caribbean context, despite efforts to critique representations of heterosexuality as the norm, the heteronormative paradigm still prevails, with heterosexuality being reinforced by various social institutions, including the education system, media, church and existing laws (Kempadoo, 2009).

The ‘Problem of Sex’ in the Caribbean

In a 2006 review of the literature concerning gender, sexuality and HIV/AIDS in the Caribbean, Kempadoo & Taitt (2006) highlighted several trends in studies that address HIV/AIDS programming. They found that gender was not being taken up as a significant factor in HIV/AIDS campaigns, except in reference to women and gay men (Kempadoo & Taitt, 2006). There was also blaming of risk groups such as sex workers, MSM and adolescents, which could result in other groups of people believing that they are not at risk for HIV (Kempadoo & Taitt, 2006). Furthermore, stigma and discrimination was still very prevalent, which results in a fear of the disease that promotes its spread (Kempadoo & Taitt, 2006). Finally, the authors found that sex was still being framed as a ‘problem’, in a similar vein to Jolly’s (2007) argument concerning ‘bad sex’, while sexual desire and pleasure were framed as heterosexual male pursuits (Kempadoo & Taitt, 2006). These trends were re-visited and confirmed by several of the

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\(^{10}\) The term ‘mule’ in this context is used to refer to a woman who is unable to bear children. Eggleston, Jackson & Hardee (1999) confirmed the use of this term in research with adolescent girls in Jamaica.
chapters in a more recent edited volume about sex, gender and HIV in the Caribbean (Roberts, Reddock, Douglas & Reid, 2009).

Kempadoo & Taitt (2006) refer to these trends regarding sexuality and HIV as the ‘problem of sex’ and highlight several elements that constitute this problem. They found that Caribbean studies dealing with HIV/AIDS were more likely to see sex as problematic. Furthermore, the transmission of HIV was often presented as resulting from “having the wrong kind of sex, often with the wrong kinds of people” (Kempadoo & Taitt, 2006, p. 24). This is supported by prior research from scholars such as Carr (2004) who explains that people’s attitude towards people living with HIV was dependent on their perceived sexual behavior; so a male homosexual or female sex worker would be viewed less favorably than a male heterosexual or female who is not a sex worker. Kempadoo & Taitt (2006) therefore contend that certain types of sexual activity are seen as ‘bad’ or ‘wrong’; examples being adolescent sexual activity, female promiscuity, prostitution and homosexuality.

Another element of this ‘problem of sex’ is that the societal anxiety about sexual behavior that is considered ‘dirty’11 removes focus from other culturally sanctioned sexual behaviors that drive the epidemic (Kempadoo & Taitt, 2006). Furthermore, the authors found that the literature on HIV/AIDS showed the use of a narrow expression of sexuality focusing on monogamous heterosexual relations. Although this representation of sexuality was being promoted in order to combat the HIV/AIDS epidemic, Kempadoo & Taitt (2006) contend that this narrow expression of Caribbean sexuality may be doing

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11 White & Carr (2005) explain that the term ‘dirty’ is “a Caribbean concept used to describe people who have participated in sexual behaviors such as sex with sex workers or homosexuals” (p. 350).
more to fuel the epidemic. The denunciation of problematic forms of Caribbean sexuality is further exacerbated by the fact that sex remains

…a powerfully emotive subject little talked about in open discussion or general conversation, hardly ever discussed between parents and their children or in the church. On the few occasions when the topic comes up, the tone of the conversation is moral and prescriptive. (Kempadoo & Taitt, 2006, p. 24)

This is especially true for young people’s and women’s sexuality. Young adults (especially girls), until the age of 18, are often denied sexual agency and rights, despite discreet and sometimes explicit knowledge of early sexual initiation, especially among boys (Kempadoo & Taitt, 2006). Since young people’s sexuality remains stigmatized, or frowned upon, the authors argue that this is detrimental to their sexual health, because they are forced to be discreet and secretive about sex for fear of social disapproval (Kempadoo & Taitt, 2006). Additionally, this puts adolescents who are sexually active in a weaker and more vulnerable position with regards to negotiating safe sex in the context sexual relations with adults (Kempadoo & Taitt, 2006).

Concerning the silence about Caribbean women’s sexuality that is evident in the literature, Kempadoo & Taitt (2006) surmise that this may just be a result of the “general difficulty of broaching the subject in Caribbean societies and communities, particularly for and by women” (p. 32). Apart from negating women’s experiences, this silence about sex also works in close association with representations of sex that erase the importance of issues such as pleasure, intimacy and emotion that are often the underlying reasons for engaging in sexual activity. This continued silence about sex ensures that it remains a taboo subject which is not being adequately addressed, resulting in negative impacts on
the effectiveness of HIV/AIDS campaigns, particularly for adolescents, young adults and women. Kempadoo & Taitt (2006) explain that there is a gap between what HIV/AIDS campaign planners and program developers believe is necessary to effect social and behavior change regarding sexual activity and what is allowed in the Caribbean due to the laws, religion and broader ideologies espoused in those societies.

HIV/AIDS Television PSA Message Features

In addition to critiquing the socio-cultural consequences of HIV/AIDS prevention advertisement messages, studies in the field of media and communication also generally tend to focus on evaluating the likely efficacy of PSA message features in reaching target audiences (Chang, 2004). With television advertisements increasingly being used as a primary tool in health communication campaigns, researchers and producers should aim to understand which message features can impact their effectiveness.

This line of inquiry into PSA message features has mainly employed content analytic methods to provide evaluations of different characteristics that may influence audience attention to and use of HIV ads. For example, DeJong, Wolf and Austin (2001) conducted a descriptive content analysis of 56 U.S. television AIDS advertisements produced and aired between 1987 and 1998. They focused on issues such as information exchange, behavior change skills, emphasis on self-efficacy and communication strategy (Dejong, Wolf & Austin, 2001). The study found that the HIV/AIDS television PSAs did not have features that would effectively engender behavior change (Dejong, Wolf & Austin, 2001). Indeed, the authors argued that those PSAs did not address several critical issues including: the needs of high risk groups, promotion of HIV testing, provision of motivational condom use messages, and incorporation of basic behavior change theory
(Dejong, Wolf & Austin, 2001). That and other similar studies (Brinson & Brown, 1997; Flora & Maibach, 1990) confirmed that most early HIV/AIDS media campaigns were failures (Palmgreen, Noar & Zimmerman, 2008).

Johnson, Flora and Rimal (1997) undertook a more comprehensive study that examined AIDS PSA message features based on theoretical principles from cognitively oriented research regarding audience processing of persuasive information. The collected and analyzed 317 advertisements from 33 countries produced during the period 1987 to 1993. Their descriptive content analysis was based on cognitive media effects theories, which assume that changes to attitude and behavior occur in a stepwise manner from audience attention, to comprehension, then yielding, and finally retention (Petty & Cacioppo, 1981). With no justification for their choice, the authors decided to address the latter three stages (comprehension, yielding and retention) while ignoring the first (attention).

In a more recent study, Chang (2004) applied a similar cognitively-oriented approach to analyze 29 PSAs produced and aired in Hong Kong from 1987 to 2001. He opted to include the first stage of attention because it is a crucial step in the audience’s processing of persuasive information (Chang, 2004). This is supported by prior research that characterizes attention as an entry point that can lead to persuasion (Chafee & Roser, 1986; Lang, 1990). Indeed, an audience member must first attend to the message before it can be further processed (Chang, 2004).

Both studies (Johnson, Flora & Rimal, 1997; Chang, 2004) point to low levels of effectiveness in the PSAs that were analyzed because they exhibited low verbal and visual explicitness, which does not facilitate comprehension of the message. They also
found an overwhelming focus on providing general information to a general audience, and a failure to provide specific knowledge and skills to support preventative behaviors such as condom use, thereby reducing the feasibility of the message and reducing the likelihood of audiences yielding to the PSAs (Johnson, Flora & Rimal, 1997; Chang, 2004).

Though this line of inquiry is quite relevant to HIV/AIDS media campaigns, there remains a lacuna of research addressing HIV PSA message features. The current review also suggests that gender (and to a lesser extent sexual) representations have played and continue to play an integral part in the HIV prevention discourse. In popular media and other forms of discourse, early representations of women ascribed to them the roles of victims and vectors, advancing stereotypical gender constructions that could prove detrimental to HIV/AIDS prevention efforts (Gupta, 2000). Analysis of gender representations in U.S. national HIV/AIDS campaigns also highlighted the disempowering effect of negative representations that assign blame and responsibility for HIV to women (Charlesworth, 2003; Myrick, 1999; Raheim, 1996). In low-income countries, gender representations in HIV prevention campaigns were found to reflect negative gender norms within their society which limit women’s role in HIV prevention efforts (Faria, 2008; Johnson, Flora & Rimal, 1997; Mabachi, 2008; Meyer et al., 2006; Mbure, 2007). Only one study gave evidence of gender representations that run counter to harmful norms in that society (Mbure, 2007). Messages of that nature included ads that spoke to shared responsibility in HIV prevention behaviors, as opposed to focusing on either gender (Mbure, 2007).
While there were a few articles that addressed the conceptual constructs of identification, involvement and similarity in relation to HIV prevention communication, they exemplified the confusion that Moyer-Gusé (2008) highlighted. Furthermore, the articles focused more on gender as a demographic variable, without providing much insight into how gender representations may impact audience members’ use of HIV prevention messages. Despite an exhaustive search, no articles were found that addressed sexual representation in relation to audience identification with characters in such messages.

Silence, stigma and taboo continue to be the buzzwords associated with sex in the literature, despite decades of efforts to address sexual and reproductive health issues. The literature reveals that when efforts do seek to address sex and sexuality, heteronormative frames continue to dominate, making it difficult to address some of the sexual norms that negatively impact HIV/AIDS communication efforts.

The results of this review highlight the need for more systematic research concerning gender and sexual representations in HIV prevention ads, especially in developing country contexts where women and men continue to be impacted in varying degrees by HIV/AIDS. In light of the gaps in the available literature concerning gender and sexual representations in HIV advertisements, we must consider the Jamaican HIV prevention media context, with a view to understanding how these representations may work with or against HIV prevention efforts. None of the studies found explicitly addressed the possible mediating effect of gender representations on audience members’ understanding and use of HIV prevention. This research therefore uses textual analysis of Jamaican HIV prevention television advertisements to get an understanding of the gender
and sexual representations to which audience members have been exposed as well as the message features employed in the PSAs.
CHAPTER 3: TOWARDS A THEORY AND PROCESS OF TEXTUAL ANALYSIS

The cultural studies theoretical approach sees culture as a significant means of grasping the social processes by which we make meaning of our lives. Societal forces have always been important in molding the mindset of people through various channels. The most significant and ubiquitous of these channels has become mass media. Scholars have asserted that modern people experience life through the prism of media (Altheide, 2002; Clarke, McLellan & Hoffman-Goetz, 2006).

Since media form such an important part of our everyday lives, I have been particularly interested in how we make sense of the information we receive via these channels, initially as an audience member, and now as a media studies scholar. The focus of my scholarly research has therefore been in media cultural studies, with particular emphasis on representations in popular media such as television shows and advertisements. As a communication and development scholar, I am also interested in how media and other forms of communication are being used to address development challenges, including health issues like HIV/AIDS. Through my introduction to the field of women’s, gender and sexuality studies, I am also committed to critiquing the systems of inequality that are structured on gender, race, class and sexuality, among other factors. These three fields of interest have come together to inform the current research, which is focused on media representations of gender and sexuality in Jamaican HIV television advertisements.

This chapter outlines the theoretical underpinnings that inform my research and provides a description of the methods utilized in collecting and analyzing the data. First, I outline the cultural studies approach to media analysis, with particular attention to
constructs such as culture and representations in media. This is followed by an explication of the gender perspectives that influence my analysis of the media texts. The final section outlines the textual analysis techniques that were employed in this study and concludes with a discussion of reflexivity about my own way of looking at the text.

Examination of the politics of media representations is a critical aspect of the work of cultural studies researchers. The term ‘politics’ is used here in reference to the distribution of power evident in the different forms of gender and sexual representations that are present in and absent from media texts. Delving into media representations of gender and sexuality requires considering culture and how it is being used in this research. Culture is a complex and multifaceted concept that has been the focus of social scientists for decades. According to Rose (2012) researchers who examine culture are usually “interested in the ways in which social life is constructed through the ideas that people have about it, and the practices that flow from those ideas” (p. 2).

Culture, then is about ‘shared meanings’ (Hall, 1997). Instead of its earlier elitist conceptualization as embodying the ‘best that has been thought and said’ in a society, culture is being used in the manner outlined by Stuart Hall:

Culture, it is argued, is not so much a set of things - novels and paintings or TV programs and comics – as a process, a set of practices. Primarily, culture is concerned with the production and exchange of meanings – the ‘giving and taking of meaning’ – between members of a society or group… Thus, culture depends on its participants interpreting meaningfully what is happening around them, and ‘making sense’ of the world, in broadly similar ways… culture is about feelings, attachments and emotions as well as concepts and ideas. (Hall, 1997, p. 2)
This understanding of culture is closely bound up with the concept of representation. Since participants in a culture are the ones who attach meaning to things, people and events, Hall (1997) asserts that we attach meaning by how we represent them – “the words we use about them, the stories we tell about them, the images of them we produce, the emotions we associate with them, the ways we classify and conceptualize them, the emotions we attach to them” (p. 3).

Hall (1997) outlines three broad approaches or theories of representation: the reflexive, the intentional and the constructionist/constructivist approaches. According to the reflexive approach, meaning is based on the object as it exists in the world and is reflected, through language (Hall, 1997). The intentional approach is on the opposite end of the spectrum, holding that the speaker or author assigns meaning to things through the use of language. The constructivist approach balances the two prior approaches by acknowledging that “neither things in themselves nor the individual users of language can fix meaning in language. Things don’t mean: we construct meaning, using representational systems – concepts and signs” (Hall, 1997, p. 25).

Whether they take the form of images, sounds or signs, these constructed meanings, or representations, structure the way people behave on a day-to-day basis (Rose, 2012). Furthermore, this process of ‘meaning construction’ is directly impacted by the practice of interpretation, which Hall (1980) conceptualizes as the encoding/decoding model: that is, the processes by which we encode (put things into code) and decode (interpret) things in our culture.
Media Representations, Communication Campaigns and Textual Analysis

In contemporary Western societies, we are surrounded by various forms of media, particularly television, digital graphics, video, film and photography. The visual is therefore central to our way of life (Rose, 2012). Though ubiquitous, these media representations are not considered to be innocent, transparent windows through which we see our world (Rose, 2012). Instead, they are interpretations of the world that “display it in very particular ways; they represent it” (Rose, 2012, p. 2). Media consequently play a central role in how we make sense of the world. Though we have moved away from the ‘magic-bullet theory’ of media’s direct effects on audience members to a more nuanced understanding of how audience members interact with media, media cultural studies research highlights the complexity of the media reception process. There has been significant progress in the application of qualitative analysis aimed at understanding how the audience interprets media messages, especially since the epistemological shift starting in the 1980s, which called for less focus on media effects and more emphasis on qualitative audience reception analysis (Fiske, 1987; Mckee, 2003; Morley, 1993). This type of research is of particular importance in the health communication context.

Despite the overall shift in media and communication studies which ensures inclusion of more critical qualitative research, much of the research on media health campaigns such as television public service advertisements continues to employ quantitative methodologies to highlight the number of people impacted and the size of those effects (Kim, Park, Yoo & Shen, 2010). While this is understandable since those in the development industry must provide reports to justify the use of funds, there have been frequent reminders of the need to undertake more research that is focused on textual
analysis of public health media campaigns (Airhihenbuwa, 1995, 2007; de Souza, 2007; Lupton, 1994; Sastry & Dutta, 2011; Tulloch & Lupton, 1997; Khan, 2014). Moreover, the literature review for this research outlined the dearth of such research, highlighting the fact that textual analysis of public health advertising campaigns, such as the television advertisements used to address HIV in Jamaica, have been placed on the back burner, even by critical/cultural communication scholars.

While acknowledging the importance of quantitative media campaign evaluations, this study is based on the belief that media studies research should give greater consideration to how audience members make meaning of media campaign texts. Efforts to critically analyze such media texts provide information about how audience members might interpret public health intervention messages. As cultural agents, media help to disseminate meaning to the participants in that culture (Peirce, 2011). In order to understand the influence of televised health campaigns, research cannot only focus on surveys and other efforts to measure knowledge, attitudes and behavioral intentions. It is just as important to execute critical textual inquiry that can call attention to the norms, values and ideologies that are embedded in such media campaigns (Guttman, 2000; Khan, 2014; Tulloch & Lupton, 1997).

Considering Gender and Sexuality

Charlesworth (2003) highlights some general principles regarding feminist inquiry that are salient for this research. First, feminist scholarship “conceptualizes gender as a critical component of human life that serves as a lens or filter through which all other perceptions pass” (Charlesworth, 2003, p. 65). Second, feminist research about communication is focused on the construction of gender through communication (Foss &
Foss, 1988 as cited in Charlesworth, 2003). Additionally, Foss (1996) outlined three accepted principles on feminism including beliefs: that women are oppressed by patriarchy, that women and men have divergent experiences, and that women's perspectives are not usually incorporated into the wider culture. These principles help to guide feminist scholars who seek to examine gender representation in media messages such as television advertisements.

In the context of this dissertation, gender and sex are not seen as synonymous. Sex is considered to be a natural category based on biological difference. Gender is considered a social construction that draws on certain aspects of biological sex. Individuals are born male or female but over time they acquire a gender identity, that is, what it means to be male or female. According to Gupta (2002) gender refers to the shared expectations and norms within a society about appropriate female and male behavior, characteristics and roles. It is a socio-cultural construct that differentiates women from men and defines the ways in which women and men interact with one another (Gupta, 2000). Gender is also a culture-specific construct as there are significant differences in the rules governing what men and women can and cannot do in various cultures. However, the difference between men’s and women’s assigned roles, decision-making authority and access to productive resources is fairly consistent across cultures. While the extent of inequality varies in each culture, it almost always persists.

Where HIV and other reproductive health issues are concerned, gender is intimately linked to sexuality, which is considered to be a social construction of a biological drive. Sexuality is more than just sexual behavior; it is a multi-dimensional and dynamic concept. Like gender, it is governed by explicit and implicit rules imposed by
society. Failure to follow these rules can result in severe social sanctions, sometimes even leading to death (as is the case with homosexuals in Jamaica). Like gender, other issues such as age, socio-economic status and ethnicity can influence an individual’s sexuality. Both concepts speak to the central issue of power in our social relations. Scholars and development practitioners assert that power imbalances in gender relations, supported by gender norms in most societies, only serve to exacerbate the HIV pandemic (Gupta, 2000; Ratele, 2011; Rubin, 2006; Smuts, Reijer, & Dooms, 2015).

The concept of intersectionality is also important when considering gender and sexuality. Gender does not stand alone as an analytic category as it relates to inequality in society. Even in societies like Jamaica where the majority of the population is of African descent, issues of racial discrimination still exist. In addition, the intersection of gender, class and sexual practices are particularly important when considering HIV. These systems of differentiation do not act independently; they intersect and act together to reinforce the systematic inequalities that exist in the Jamaican context and increase some people’s vulnerability to HIV. Though I am cognizant of this concept and the need for such analysis, the nature of the data in this study precludes intersectional analysis.

The development industry has transitioned through two main perspectives on how gender should be understood and addressed: the initial Women in Development (WID) approach and the more recent Gender and Development (GAD) approach (Risby & Todd, 2012). My understanding and use of gender in this research is not seen as relating only to women, like the WID approach. Instead it is understood from the GAD approach, which does not focus only on women, but considers the social construction of gender and the assignment of specific responsibilities, roles, and expectations to women and men (Risby
The GAD approach that underscores this analysis also aims to understand the power dynamics that ensue between men and women, with the understanding that any effort to improve the lives of women requires a clear understanding of how their relationships impact their lives. Additionally, efforts to address health issues like HIV can only benefit from a consideration of the needs of women, and men and the inclusion of men in the development process. For instance, in the Jamaican context, research has shown that gender and social norms promote the custom of men having many partners and condone the practice of older men having adolescent partners (Chevannes, 1993; Figueroa et al., 2008; Darlington, Basta & Obregon, 2012). Additionally, women are subject to similar norms such as the ‘love and trust’ pattern in relationships which makes them more vulnerable to HIV due to lack of consistent condom use with their main partner (Figuero, 2014). Gender is therefore a critical concept to consider when looking at HIV because the gender and social norms that we are socialized to accept as normal have an impact on the sexual behavior of men and women.

In this study, sexuality is being considered not just in terms of sexual orientation in the manner that Western countries such as the United States see sexuality. Scholars in the Caribbean have highlighted the limited academic knowledge available about Caribbean sexuality and cautioned against applying Western culture-specific definitions (Kempaddo & Taitt, 2006). Given the prevailing heteronormative paradigm that exists in Jamaica, which limits sexual identities that do not fit within socially accepted norms (such as homosexuality), I am therefore using ‘sexuality’ in this research to refer to ‘sexual expressions’ which can be defined as:
…the way in which sexuality is practiced, and made visible through behaviors, activities and interactions between people, in relations, and in the ways in which desires are actualized… it is how sexuality is expressed that is under interrogation, not the way in which sexed bodies or sexualities are constituted or determined. (Kempadoo & Taitt, 2006, p. 7)

Additionally, I consider sexual representation in terms of the presence or absence of representations of sexual acts in the advertisements analyzed.

The intersection of gender, sexuality and HIV is of great consequence for both women and men. Like many other low-income countries, Jamaica faces many serious challenges, including crippling levels of debt and low or negative levels of economic growth. Many would argue that a focus on issues of gender and sexuality that impact HIV is a frivolous distraction from the ‘real’ issues, such as poverty (Gupta, 2000). However, efforts to address gender and sexual norms in relation to HIV serve not only to help in HIV prevention but can also have far-reaching impacts that could lead to long-term social change regarding the gender and sexual norms that currently persist.

Research Method

Though textual analysis has been increasingly applied in media studies, there are myriad ways of applying this method. McKee (2001) explains that although it is the central methodology of Cultural Studies it is “woefully under-investigated and still largely intuitive” (p. 2). He asserts - perhaps too sweepingly - that prior to his explication of the process, there was no:

…straightforward attempt to describe what textual analysis is, how it works, why it is done, what kinds of knowledge it produces, and how one might proceed in
the textual analysis of a text (the closest account is perhaps that of John Hartley (1992), who describes a 'forensic' approach to textual analysis in *The Politics of Pictures*, pp29-35). (McKee, 2001, p. 2)

In *Textual analysis: A beginner’s guide* McKee (2003) defines a text as anything from which we can make meaning. He further explains that “When we perform textual analysis on a text, we make an educated guess at some of the most likely interpretations that might be made of that text” (McKee, 2003, p. 1). In calling something a text, for example a television advertisement, we are signaling our intent to provide an analysis of the meaning of that thing. Much inquiry has been done with visual and audiovisual texts such as television programs, photographs, magazine advertisements, drawings and the like in an effort to understand the possible meanings of these texts (Frith, 1998; Emmison, Smith & Mayall, 2012; McKee, 2003). In essence, these types of studies seek to investigate the nature of the text through the use of artistic and literary critique in a systematic manner whereby the possible meanings are decoded, classified and elucidated (Frith, 1998).

Through textual analysis, my aim in this research is to assess the likely interpretation and effect of audiovisual materials such as television advertisements that seek to address HIV/AIDS. This is achieved by a careful consideration of the denotative (literal) and connotative (implied) elements of the text. In this manner of analyzing the text the intent is its deconstruction, with the ultimate aim of exposing “the social and political power structures in society that combine to produce the text” (Frith, 1998, p. 3). Although Frith (1998) makes this assertion in relation to commercial advertisements, it is applicable to HIV television advertisements for several reasons.
First, the intent of both types of advertisements is to influence audience members’ attitudes, beliefs and behavior. Secondly, Frith (1998) argues that commercial advertisements “are manifestations of an ideological discourse that structures social practices” (p. 131) and according to Johnny & Mitchell (2006) this argument is in keeping with the intent of HIV/AIDS media campaign messages. They go on to explain that like commercial advertisements, HIV/AIDS campaigns can be seen as “products of a new ideological discourse surrounding the commonly accepted social practices associated with HIV/AIDS” (Johnny & Mitchell, 2006, p. 759). Finally, this method of deconstructing and analyzing a text is applicable to HIV/AIDS campaign material such as television advertisements because both types of commercial present their persuasive messages in audiovisual format.

Textual analyses have been conducted in different ways by various scholars; however, for the purpose of this study the methodological framework is largely based on Frith’s (1998) method of analyzing advertisements. In Undressing the ad: Reading culture in advertising, Frith (1998) asserts that a critical reading of something as ordinary as a PSA can provide insights into the cultural and socio-political elements of society that work to reinforce inequalities among various groups. In the same manner as its application to commercial advertisements, a textual analysis of HIV/AIDS advertisements can allow researchers to unearth the expansive social and cultural implications of messages that seem to be simple and straightforward (Frith, 1998), especially in relation to the gender representations presented in the advertisements analyzed in this study.
One method of undressing the ad is by means of deconstructing it. According to Frith (1998), proponents of deconstruction (such as Barthes, 1972; Foucault, 1970; Lacan, 1968; Saussure, 1966) do not find the true sense of a text in its literal meaning, nor its inferred meaning, but rather in its unintentional meaning. In this method of analysis, the background elements of the advertisement are as important as the actual images and words of the advertisement because they create “the context without which there can be no meaning” (Frith, 1998, p. 4). It is therefore essential that a textual analyst investigates the cultural substance of an advertisement, by decoding its visual and verbal elements with a view to ascertaining the primary message(s) as well as the possible secondary socio-cultural messages embedded therein (Frith, 1998).

The two main elements of Frith’s (1998) method of interpreting advertisements are an analysis of its levels of meaning and an analysis of the social representations portrayed in the advertisement. Analyzing the levels of meaning is done in three stages by reading the surface meaning, the advertiser’s intended meaning and, the cultural or ideological meaning in a manner comparable to peeling an onion, as the advertisement is taken apart layer by layer (Frith, 1998). In addition to understanding the levels of meaning, the textual analyst must seek to comprehend the social or power relationships exhibited in the advertisement. This is done through an explanation of the story being depicted, along with a description of the relationships between the characters. In addition to Frith’s (1998) method, this study employs Stuart Hall’s (1980) concept of the oppositional reading and Gupta’s (2000) continuum of gender representations in HIV/AIDS program approaches (See Table 1). Finally, based on evidence from previous studies, this analysis includes an examination of key message features that should be
considered to ensure PSA effectiveness. These methods, which are further explained in the following section, allow for an interpretation of the denotative and connotative meaning of the advertisements.

Table 1

*Analytic Categories*

<table>
<thead>
<tr>
<th>Video Title: ____________________</th>
<th>Year of publication: _____</th>
<th>Length: ______</th>
</tr>
</thead>
<tbody>
<tr>
<td>General observations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surface meaning</td>
<td>Who are the people in this ad? What objects are present?</td>
<td></td>
</tr>
<tr>
<td>Intended meaning</td>
<td>What message is the creator trying to share with the audience?</td>
<td></td>
</tr>
<tr>
<td>Cultural/Ideological meaning</td>
<td>What are the cultural beliefs on which this ad is based? What are the ideological values expressed in this ad?</td>
<td></td>
</tr>
<tr>
<td>Preferred, negotiated, Oppositional reading</td>
<td>What are the possible alternative interpretations of this ad?</td>
<td>Dominant/preferred, negotiated and oppositional readings.</td>
</tr>
<tr>
<td>Narrative/Story</td>
<td>Is there a narrative that is associated with the images &amp; sounds in this ad? What story is being depicted? What emotions does the story evoke?</td>
<td></td>
</tr>
<tr>
<td>Social relationships</td>
<td>Who appears to have power/control in the story? How is power expressed? Does anyone have <em>power over</em> another? If a woman is substituted for a man, is the message the same? Would the message change? Does it ‘make sense’?</td>
<td></td>
</tr>
<tr>
<td>Identification</td>
<td>With whom is the viewer being asked to identify? Is it easy to identify with the character(s) being portrayed?</td>
<td></td>
</tr>
</tbody>
</table>
Table 1: continued

<table>
<thead>
<tr>
<th>Gender Representation</th>
<th>Are the representations:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Stereotypical</td>
</tr>
<tr>
<td></td>
<td>2. Neutral</td>
</tr>
<tr>
<td></td>
<td>3. Sensitive</td>
</tr>
<tr>
<td></td>
<td>4. Transformative</td>
</tr>
<tr>
<td></td>
<td>5. Empowering</td>
</tr>
</tbody>
</table>

PSA Message Features

<table>
<thead>
<tr>
<th>Attention</th>
<th>What features are used to attract the audience’s attention?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number of cuts, Use of Informative objects, Sound and color</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Comprehension</th>
<th>What features are used to increase the likelihood that the audience understands the message?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Type of information, Type of recommendation, Information load, Information explicitness</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Yielding and Retention</th>
<th>What features are used to ensure that the target audience is more likely to accept and use the message?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Source type, Target audience, Feasibility of recommendations, Type of appeal</td>
</tr>
</tbody>
</table>


Analysis Procedure

The texts analyzed in this study are eleven Jamaican HIV/AIDS television advertisements which were locally produced by the National HIV/STI Program (NHP) in
the Ministry of Health. Media campaigns form a major part of the Jamaican response to HIV/AIDS and television advertisements play a key role in these efforts. Television advertisements were chosen for analysis because they are an easily accessible form of advertisement for both literate and illiterate audiences through the use audio and visual features. Additionally, the audiovisual elements of television advertisements provide a rich tableau that allows for in-depth and multi-layered analysis with regard to the research questions of this study. The texts were accessed from the website of the National HIV/STI Program. The eleven ads range in length from a two and a half minute dancehall music video to 30-second advertisements. A close textual analysis of these videos was conducted in order to gain a better understanding of how audience members might make meaning of these texts.

In Exploring media culture Michael Real (1996) explains that “Texts employ specific forms and conventions to give shape and purpose to our media experience, and textual analysis explores those devices” (p. 119). The texts under analysis were approached with questions that help to foster an understanding of the socio-cultural and ideological messages that are embedded within Jamaican HIV/AIDS television advertisements. This analysis was guided by three research questions:

1. What are the different gender representations present in Jamaican HIV prevention television advertisements?

2. What are the social and cultural norms embedded within these representations in the advertisements?

3. What message features are employed in Jamaican HIV prevention television advertisements produced by the National HIV/STI Program?
The analysis unfolded in a three-step process. First, a basic reading of the text was done so that I might become familiar with the advertisements and record emerging themes. The basic reading involved watching each video several times and recording general observations, including the strategies and narrative devices being used as well as the different representations of men and women. This phase of the analysis also focused on the message features employed in the advertisements. Through analysis of this nature, the aim is to identify key PSA characteristics that influence the processes of attitudinal and behavior change, which is the ultimate goal of HIV advertisements (Johnson, Flora & Rimal, 1997; Chang, 2004).

This was followed by the second step of the process wherein the advertisements were examined using the eight analytic categories (surface meaning, intended meaning, cultural/ideological meaning, oppositional reading, narrative/story, social relationships, gender representation; and identification) which were applied as a means of understanding the representations in the advertisements (Please see Table 1 for the instrument that was used in the analysis). The third and final step entailed a synopsis of each advertisement, wherein the general observations and information based on the analytic categories were incorporated to provide answers to the research questions. In this manner, I was able to identify patterns and themes that are evident in the representations in the PSAs.

As mentioned in the previous section, the analytic framework for this study included eight categories. The first four categories allowed for an analysis of the levels of meaning in the text, while the latter four speak to the social relationships that are
portrayed in the text and the link between audience members and the text. The analytic categories used for the textual analysis are as follows:

Surface meaning: Frith (1998) explains that the surface meaning is an overall impression that an audience might get from a quick scan of the advertisement. She suggests that to record the surface meaning one can simply “list all the objects and people in the ad” (Frith 1998, p. 5). This kind of observation allows for the recording of general first impressions about the representations present in text under analysis.

Intended meaning: This is also referred to as the “preferred” (Hall, 1980) or expected meaning. It is essentially the message that the creator wants the audience member to get from the advertisement. In relation to HIV/AIDS communication campaigns, the messages may be about sexual behaviors, such as condom use.

Cultural or ideological meaning: Frith (1998) explains that this meaning often relies on the “cultural knowledge and background of the reader” (p.5) since audience members make sense of the message in relation to their culture. The ideological meaning seeks to understand the underlying values that are expressed in the text. While some cultural beliefs and ideological values are easily apprehended by looking at the text, Frith warns that there are “more subtle ideological values expressed in ads” (1998, p. 5). An example of this is the use of stereotypes that allow for easy apprehension of the intended message, but may also serve to reinforce and maintain harmful socio-cultural norms. This is especially vital in regard to characterization of men and women in HIV/AIDS advertisements, because stereotypical representations can help to perpetuate harmful gender norms and sexual behaviors that are incongruent with the messages being disseminated.
Preferred, negotiated and, oppositional reading: In Stuart Hall's encoding/decoding model (1980), he explained that an audience member can understand the intended or preferred meaning of a text but decide to reject this reading in favor of an alternative reading. Each viewer may take away different meanings from the same text, based on their life experiences, cultural background and subject positions (Johnny & Smith, 2006). An examination of the text with a view to providing different readings allowed for an understanding of how different audiences and audience members might apprehend and use the messages. Additionally, it highlighted areas where the text has unintended messages that can replicate and sustain representations that run counter to the intended message.

Narrative/Story: Through an examination of the story being depicted, it is possible to get an understanding of the power relations that are at play. Frith (1998) suggests describing the characters, props and color schemes, explaining what these props signify and addressing how “they might support certain hierarchical relationships” (p.9). As it relates to HIV/AIDS advertisements, this element of the analysis is essential in understanding the types of stories that are being told about HIV through these advertisements and how gender and sexuality are portrayed in these stories.

Social relationships: Another tool to analyze the power relations being portrayed in advertisements is to describe the relationships between characters by “exchanging the key players in the ad” (Frith 1998, p 10). According to Frith (1998), analysis of this nature exposes the underlying social structures that often go undetected in media texts such as the advertisements that were analyzed in this study. By reversing the roles of men and women, for example, we can assess whether the message would be the same, whether it
would ‘make sense’. A similar semiotic technique is the commutation test (Fiske, 1990; Chandler, 2007). Imagining what would happen if different gender and sexual roles were assigned is essential in understanding representations as it allows for an examination of stereotypes that could be perpetuated by the text.

Identification: In the context of this study, identification refers to the concept that Moyer-Gusé (2008) classified as ‘wishful identification’, which occurs when an audience member would like to be like a character portrayed in advertisement or looks up to the character for attitudes, beliefs and behavior that can be emulated. This concept is vital to this analysis of gender representation and understanding how audience members identify with characters in the advertisements; several scholars have proposed that gender might be a predictor of audience engagement with characters and use of messages (Bandura 1986; Basil, 1996; Peirce 2011; Peirce & Bates, 2012; Moyer-Gusé, 2008; Moyer-Gusé, Chung, & Jain, 2011; Brown, Basil & Bocarnea 2003; Salmon, Witte & Lee, 2005).

Gender Representation: In her plenary address to the XIIIth International AIDS Conference, Geeta Rao Gupta (2000) outlined a continuum of approaches in addressing gender, sexuality and HIV/AIDS. These approaches run from damaging/stereotypical to empowering. Chong & Kvasny (2007) applied this continuum in a review of the literature looking at the social construction of gender and sexuality in HIV/AIDS discourses. In this continuum, Gupta (2000) highlights 5 categories of social constructions concerning gender, sexuality and HIV: stereotypical, neutral, sensitive, transformational and empowering. A stereotypical representation of men and women is considered the most damaging while an empowering representation is considered most beneficial in HIV/AIDS discourse. Applying this continuum to the advertisements allowed for a
categorization of the advertisements in accordance with the way that men and women are represented. Since advertisements form a part of the HIV/AIDS discourse, this analysis contributes to our understanding of how these representations reflect and seek to change the gender relations that exist in Jamaican society, especially in relation to this disease.

**Analysis of PSA Message Features**

In addition to the eight constructs outlined above, this study also analyzed the message features employed in the advertisements, focusing on four critical processes that have been linked to attitude and behavior change prompted by television messages: attention, comprehension, yielding and retention (Johnson, Flora & Rimal, 1997; Chang, 2004). The message features were analyzed based on the following descriptions.

***Attention***

In order to identify message features that the producer used to attract the audience’s attention, each PSA was assessed for the presence or absence of certain structural features that have been found in previous studies to increase viewers’ attention: number of cuts, use of informative objects, sound and color (Chang, 2004; Henderson, Weeks & Hollingworth, 1999; Loftus & Mackworth, 1978; Lang, Bolls, Potter & Kawahara, 1999; Morgan, Palmgreen, Stephenson, Hoyle & Lorch, 2003). Previous studies addressing HIV PSA message features (Chang, 2004; Johnson, Flora & Rimal, 1997) have not focused on sound and color, although these elements can affect audience attention to the message (Morgan et al., 2003; Moore, Stammerjohan & Coulter, 2005).

***Comprehension***

Information quantity and quality are important aspects of comprehension processes (Anderson, 2005; Chang, 2004) because audience members are more likely to
understand and accept messages that are easily understood (Chang 2004; Johnson, Flora & Rimal, 1997). This part of the analysis focused on message characteristics that increase the likelihood that the audience understands the message, including the type of information, type of recommendation, information load and information explicitness. Information type was divided into 6 categories based on an initial analysis of the advertisements: (a) condom use, (b) HIV test, (c) limit the number of sexual partners, (d) mother to child transmission, (e) living with HIV, and (f) unrelated information. Previous studies found that general and unrelated information were most frequently used (Chang, 2004; Johnson, Flora & Rimal, 1997).

The presence or absence of a recommendation was first assessed and then the type of recommendation was assessed based on two categories: vague and specific. An example of a specific recommendation would be “Use a condom every time” while a vague recommendation might give general advice such as “Be responsible”. Prior studies found that producers seem hesitant to provide specific recommendations (Chang, 2004; Johnson, Flora & Rimal, 1997). For example in a descriptive analysis of HIV PSAs from around the world Johnson, Flora and Rimal (1997) found that 25% of HIV PSAs did not provide a recommendation, while 39% urged viewers to seek more information, and 30% gave general advice such as “Be careful”. Of the 29 advertisements produced by the Hong Kong government and analyzed by Chang (2004), four did not provide a recommendation and eight made general recommendations such as “Take precautions” (that accounts for 41% of the PSAs in that study). Chang’s (2004) analysis also revealed that although most of the PSAs in his study showed the phone number for a hotline, the ads did not urge viewers to call the number to seek more information.
The analysis of information load addresses the quantity of information provided in each message. Too many categories of information can result in overload (Anderson, 2005; Chang, 2004; Toffler, 1970). Ads were categorized as follows: high information load (3 or more categories), medium information load (2 categories), and low information load (1 category). Older HIV PSAs tend to have high or medium information load as evinced by Johnson, Flora and Rimal (1997) who found that 40% of their sample had medium information load while 49% had high information load. Chang (2004) confirmed this tendency, finding that twelve and nine of the 29 PSAs had high and medium information load respectively.

As in all forms of communication, vague PSA messages are more likely to be misinterpreted. Since HIV PSAs seek to transmit important information to target audiences, this study evaluates the visual and verbal explicitness of the PSA messages based on the definitions provided by Johnson, Flora and Rimal (1997). Explicitness was defined in both verbal and visual terms by how sex was mentioned or displayed in each advertisement. PSAs with exposed male or female genitals or showing intimate acts such as kissing or caressing were categorized as having high visual explicitness; those with some nudity were classified as moderately explicit; and those which had fully clothed characters who were not engaging in any intimate acts had low visual explicitness. Verbal explicitness was also examined in a similar manner: if the word ‘sex’ was mentioned, the ad was deemed highly explicit; if there was an indirect allusion to sex, it ranked as moderately explicit; if no hint was made to sex, the PSA was classified as having low verbal explicitness.

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12 In this context, information overload is being used in the manner of Alvin Toffler in *Future Shock* (1970) to refer to the difficulty in processing and using a message if there is too much competing information.
Yielding and Retention

According to Johnson, Flora and Rimal (1997) a viewer’s decision to yield to a PSA's recommendations depends on the source type and the feasibility of recommendations. The categories for source type were expert and proximal (non-expert). Expert sources included medical professionals, celebrities and government officials; such sources are perceived as being more credible due to their status in society (Chang, 2004). Proximal sources include unknown actors playing the part of family members and friends; such sources represent characters that viewers are more likely to identify with, thus increasing the likelihood of producing a modeling effect (Atkin & Rice, 2012; Bandura, 1986; Chang, 2004). The source gender was also assessed vis-à-vis the target audience of the PSA, which was determined by the primary character’s gender and demographics (Johnson, Flora & Rimal, 1997). As it regards feasibility of the recommendations, this study also considered whether or not the PSAs give the audience relevant knowledge that will help them to yield to the recommendations being offered (Chang, 2004). The analysis included an assessment of whether relevant skills and knowledge were provided so as to ensure that viewers were able to execute the recommended action or practice. For example, if the advertisement recommends that the viewer gets tested for HIV, does it also explain where this can be done? Also, if the advertisement recommends that the viewer use a condom, does it also explain how to correctly use a condom?

Retention of PSA messages is dependent on the type of appeal that is used: rational or emotional (Johnson, Flora & Rimal, 1997). This is essential to consider for HIV PSAs because they tend to be marketed to a general audience so viewers are more
likely to have low issue involvement (Brinson & Brown, 1997; Chang, 2004; Flora & Maibach, 1990, Johnson, Flora & Rimal, 1997). Emotional appeals tend to enhance audience retention of the message (Brinson & Brown, 1997; Flora & Maibach, 1990), especially among viewers of mass marketed HIV prevention ads, who are not likely to be highly involved with the message (Flora & Maibach, 1990; Johnson, Flora & Rimal, 1997; Chang, 2004). The ads were categorized as either having a rational appeal (factual PSA that does not tell a story, characters look into the camera as if addressing the audience directly) or an emotional appeal (dramatized ad which tells a story and the characters look at each other, not the camera) or both.

Scope of the Study

Given the research questions for this study, textual analysis is a logical methodological choice as it allows for a deep exploration of the ideological, cultural and often hegemonic foundations that are embedded in and bolstered by audiovisual materials such as the HIV advertisements being analyzed. While audiovisual texts like advertisements usually seek to disseminate a clear message, research has shown that they may also promote hidden meanings that exist beneath the surface (Frith 1998, Johnny 2003; Johnny & Smith, 2006). Indeed, Giroux (1988) argues that the underlying beliefs and norms upon which audiovisual texts are based bring to light the "political, social and cultural forms of subordination that create inequities among different groups" (p. 165). As this study is concerned with the gender and sexual representations that are produced in Jamaican HIV television advertisements, textual analysis, as a methodological approach, allows for the kind of in-depth investigation of the text that will help to unearth the fundamental sociopolitical and cultural assumptions that form the foundation on which
these advertisements were created. Additionally, textual analysis points to the possible manner in which these subtle underlying beliefs and cultural values operate vis-a-vis the stated aims of the media campaign.

While there are many ways in which a textual analysis can be conducted, the method employed in this study is an attempt to understand the possible interpretation(s) of the text by the people for whom it is intended. The aim of this analysis is not to provide the ‘correct’ interpretation or the ‘truth’ about the culture in which the text was created. In fact, McKee (2003) explains that no approach can convey the ‘truth’ about a culture because “different cultures make sense of the world in very different ways” (McKee, 2003, p. 4). I go further to argue that even within a society that shares similar social norms and cultural beliefs, people will make sense of things differently, based on their social, economic, political and religious circumstances, among other things. It is therefore essential to understand that this study does not seek to provide the only true and correct interpretation of the advertisements being analyzed because “no single representation of reality can be the only true one, or the only accurate one, or the only one that reflects reality” (McKee, 2003, p. 10-11).

With the dearth of information available on sexual and gender representation in HIV advertisements and their possible impact on audience understanding and use of the messages being disseminated, one might advocate the use of a method that allows for audience input, such as interviews, focus groups or surveys. However, a textual analysis is well suited for the research questions being asked in this study as this method allows for a multifaceted investigation of the overarching social, cultural and ideological values that underlie audiovisual texts such as HIV prevention television advertisements. A basic
undergirding principle that guides this study is the belief that advertisements manipulate “symbols to create meaning…and the values expressed in advertising mirror the dominant ideological themes” (Frith, 1998, p. 13). Textual analysis provides a uniquely suited method for examining the possible expression of such themes in Jamaican HIV prevention television advertisements, especially as it relates to the characterization of men and women, as well as the social-cultural norms underlying these advertisements.

Reflexivity and the Role of the Researcher

Rose (2012) outlines three criteria for a critical visual methodology, which are fundamental for this research. Although this research engaged with audiovisual material, I believe the criteria outlined are not only applicable to visual material, but those that include audio as well. Rose (2012) explains that a critical approach to visual culture: “takes images seriously …thinks about the social conditions and effects of visual objects [and] considers your own way of looking at images” (p. 16-17). As a researcher, my interest in how we make sense of media messages was piqued during my undergraduate studies at the Caribbean Institute of Media and Communication (CARIMAC) where students were introduced to all aspects of media. We were encouraged to critically engage with media content that we consume on a daily basis, so as to improve media content that we would eventually produce. So, Rose’s (2012) admonition to take images (and other media products) seriously had been instilled in me from an early stage in my research career. Since media undoubtedly impact the way we make sense of the world, I believe that we must seriously and critically examine media content, with a view to understanding its influence in all aspects of life.
The second criterion outlined by Rose (2012) coincides with my research interest in media use for communication and development. Media techniques have always been such an integral part of development efforts, so my interest in this area has centered on how we can harness and use media resources to promote impactful and long lasting social and behavior change. While working in the field of communication for development in the Caribbean prior to starting graduate school, I had the opportunity to see how media projects can positively impact the social conditions of people’s lives. This interest in analyzing the social conditions and effects of media is imperative for critical textual analysis because “cultural practices like visual representations depend on and produce social inclusions and exclusions, and a critical account needs to address both practices and their cultural meanings and effects” (Rose, 2012, p. 17).

A consideration of “your own way of looking at images” entails the final criterion from Rose (2012). This speaks directly to the issue of reflexivity when undertaking research of this nature. Lindlof and Taylor (2011) define reflexivity as “the process of engaging in mutual recognition of, and adaptation with, others – [which] enables the researcher to manage the twisting, turning road of qualitative research” (p. 72). Since our interpretation of media is influenced by our history, geography, culture and social scripts, among other things, as a textual analyst, I must be cognizant of the subjective nature of research. Because the researcher is the instrument in textual analytic research, I must acknowledge my role and my way of looking at the text within the research context. This entails a careful consideration of my role in constructing data as well as understanding of the salience of writing, not only as a device in my methodological toolkit but also “as one
means by which humans use symbols to inform and influence their audiences” (Lindlof & Taylor, 2011, p. 284-285).

My identity as the researcher is important to the research: it not only influenced my topic choice, but also my analysis and interpretation of the data. As a Jamaican studying in the United States, I am aware of my place as being both an insider and outsider to the Jamaican culture. As an insider to the Jamaican culture, I am able to understand the language used in the advertisements and catch certain nuances that might have been missed by someone who is not a part of the culture. As an outsider, having lived in the United States since 2008, I am also cognizant of the fact that the Jamaican culture continues to evolve in my absence. Though I worked in the field of communication for development and understand some of the issues with which producers grapple when creating the advertisements that were analyzed, I am also keenly aware of the fact that my critique of these ads may be construed as coming from an outsider, especially since I did not work directly with the Ministry of Health or the National HIV/STI program.

On the one hand, my outsider status may be seen as a disadvantage since I am not privy to the information and discussions that went into the production process. On the other hand, it may be considered a plus, because had I been involved in that process, it would be much harder to provide a balanced critique of the advertisements. At the heart of it, this research was based on some basic premises that I hold as a researcher. First, the people who made the advertisements are operating under the assumption that media narratives can engender social and behavior change, and in this case, sexual behavior in particular. Given this initial premise, producers of the ads seek to contextualize the
information that they provide with regards to relations between men and women. My analysis was therefore focused on the strategies, themes and stereotypes evident in the representations in the text, as they provide clues to the socio-cultural norms and ideologies that are embedded within the ads, whether intentionally, or otherwise. This was informed by my knowledge of the Jamaican culture, my interest in media, communication for development, women and gender studies as well as my experiences which influence my positionality. Undoubtedly, who I am has shaped how I see the world, including the analysis of these ads. At the same time, throughout the research process I remained cognizant of how my knowledge and experiences may influence my reading of the text and have shared this with you, so that you may take it into consideration while you read this research.

So as to put in context the research theory and method of this study, this chapter outlined the cultural studies approach to media analysis as well as the gender theory that influence my analysis of the text. An explication of the textual analysis procedures employed in this study was also provided. Finally, a reflective piece outlined some issues that influence my way of looking at the text. The following chapter outlines the results of the analysis.
CHAPTER 4: FINDINGS

In the Caribbean, sexuality seems to be something that men have and are free to explore, while women are expected to relate to it only defensively…women’s sexuality is still policed by social and gender conventions in ways that do not seem to constrain the behavior of men. (Lewis, 2003, p. 7.)

Chapter Focus

This chapter provides a textual analysis of television advertisements from the National HIV/STI Program (NHP) campaigns during the period 1999 to 2012. Specifically, it examines eleven television advertisements that have been disseminated in Jamaica and presented on the NHP website. The first section of the chapter provides a thematic outline of the different gender representations present in these television advertisements. The second section presents the social and cultural norms embedded within these representations in the advertisements. The third section outlines an analysis of the advertisements’ characteristics that influence message efficacy in a cognitive paradigm with a view to understanding the features employed to reach the target audience of the advertisements.

Gender Representations

The NHP has developed and disseminated several major media campaigns aimed at HIV/AIDS prevention, knowledge and behavior change. According to the NHP (2012), current media campaigns are designed with the aim of positioning salient HIV issues in the public consciousness, including the provision of information to address gender specific risk behaviors and cultural norms that underlie risky sexual practices. This is consistent with the Prime Minister and Opposition Leader’s signing of a Declaration of
Commitment to eliminate stigma, discrimination and gender inequality affecting the HIV response in Jamaica, a document dating from April 29, 2011. While the emphasis on the impact of stigma and discrimination was unsurprising, acknowledgement of the possible impact of gender inequality on Jamaica’s HIV/AIDS response efforts speaks to the pressing need for analysis of gender representations in previous and current public service advertisements.

For the purposes of this study, the author analyzed gender representations on a continuum ranging from stereotypical to empowering based on the five categories of social constructions concerning gender, sexuality and HIV outlined by Gupta (2000): stereotypical, neutral, sensitive, transformative and empowering. Chong & Kvasny (2007) also applied this continuum in a review of the literature looking at the social construction of gender and sexuality in HIV/AIDS discourses. The gender representations found in the advertisements run the gamut from stereotypical to empowering, but there was a clear evolution from more stereotypical gender representations in older advertisements, to more transformative and empowering representations in more recent ads. Each video employs different types of representation, so they are not mutually exclusive. Gupta (2000) argues that in order to effectively tackle gender and sexuality in the context of HIV/AIDS prevention and care, interventions should aim to reduce the possibility of reinforcing damaging sexual and gender stereotypes. Since the underlying gender and sexual norms of a culture are either intentionally or unintentionally embedded within texts such as advertisements, much can be learned from the gender representations in the campaign materials that were analyzed.
Stereotypical Representations

In the context of this research, stereotypes are generalizations about people and social groups. While stereotypes are both necessary and useful (Dyer, 2013; Lippman, 1956) they also have limitations and ideological implications, because stereotypes are “highly charged with the feelings that are attached to them” (Lippmann, 1956, p. 96). Although stereotypes are associated with negative representations of certain groups of people, Dyer (2000) argues that it is not the stereotypes that are inherently wrong or bad, but the people who control and define them, as well as the interests they serve. Producers of advertisements utilize stereotypes as a type of short cut that serves to provide “a very simple, striking, easily-grasped form of representation” (Dyer, 2013, p. 246) which allows audience members to quickly comprehend the meaning of messages being shared via media channels. These seemingly simplistic representations are imbued with complex information and connotations (Dyer, 2013) and audience members’ understanding of such representations implies knowledge of the complex social structures within which the stereotypes are created (Perkins, 1979).

Producers of the HIV advertisements analyzed in this study utilized some level of stereotypical gender representations in seven of the eleven advertisements. The following sections outline the themes associated with gender representations in response to the first research question of this study: What are the different gender representations present in Jamaican HIV prevention television advertisements? Stereotypical representations of men and women will first be examined, followed by an explication of neutral, sensitive, transformative and empowering representations.
The advertisements revealed three main stereotypical representations of Jamaican men: being promiscuous (having multiple female sexual partners) as an essential element of masculine sexuality; men as perpetrators of bad sex in the form of unprotected sex (Jolly, 2007); and men as initiators of sexual activity. These types of representation were evident in seven of the eleven advertisements. The theme of men as initiators of sexual activity was evident in four of the eleven ads, namely *Just use it* (NHP, circa 1999); *Pinch, leave an inch and roll* (NHP, 2008c); *Smart, sexy, wise* (NHP, 2009); and *Big man noh ride widout condom* (NHP, circa 2011). The advertisement entitled *Just use it* (NHP, 1999) provides a good example of the stereotypical representations of men as promiscuous and the perpetrators of bad sex.

This ad features an unidentified man clad in black in front of a black screen. The tone is somber, as initially shown through the set-up of the video, and later underscored by the haunting monologue of the protagonist. There is only one character – a sturdy male figure seated on a chair, his face hidden by shadows (Figure 1). The first few words of his speech, “You see me rude boy” speaks to the intended audience of this text. A rude boy14 in Jamaica is akin to a gangster in American culture. Moreover, Jamaican Creole is used throughout the monologue as opposed to most of the other ads wherein English is used, which makes the ad more likely to reach the targeted audience. The figure also used the words ‘rubbers’ and ‘boots’ to refer to condoms, just as a rude boy would. By

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13 ‘Circa’ is being used here because the National HIV/STI Program website does not provide a publication date for the advertisement. Roshane Reid, a Behavior Change Communication Officer with the National HIV/STI Program, Ministry of Health and Environment, Jamaica confirmed via personal communication that *Just use it* (NHP, 1999) was produced and disseminated prior to 2003 and the date for *Big man noh ride widout condom* (NHP, circa 2011) is based on references to the ad in the *Gleaner* (Andrade, 2012).

14 A ‘rude boy’ can be defined as a Jamaican gangster or a young man who may be un- or under-employed and can be seen on the street. The term ‘rude’ is used because of their non-conformist attitude especially towards authority figures. The term ‘rude boy’ was in popular use until the late 1990s.
referring specifically to this group (rude boys) and using the parlance he calls their attention to a message that they might have otherwise ignored.

Figure 1. Screenshot of Just use it (NHP, 1999).

The intended meaning of the advertisement is not only to promote condom use, but to ensure that the target audience understands the importance of using a condom every time. This is evident when, in concluding the monologue, the former rude boy appeals to fellow rude boys not to take any chances, adding: “You must use your boots [condoms] every time!” Consistent condom use among rude boys is the purpose of the text, which the narrator reinforces by saying: “Just use it, every time”.

These forthright surface and intended meanings are laced with subtler underlying cultural and ideological meanings as expressed in the stereotypical representation of the protagonist as a perpetrator of bad sex (not using a condom all the time) and as promiscuous (having many women). After getting the intended audience’s attention the
speaker explains that he was just like them: “I was a big heavy man.” While literally appropriate to his height and weight, ‘big man’ denotes an “older boy or man who has some social standing, disposable income, or outward trappings of wealth” (Kempadoo, 2004, p. 49). His assertion of being a ‘big man’ is supported by the status symbols he mentions: “I had lots of clothes and hot cars. I had a woman on every street!” These are some of the things that separate the ‘big men’ from the ‘little boys’.

In his next statement, “I never knew a thing like this could happen to me,” he confronts the belief that rude boys consider themselves immune to HIV. As a rude boy, he then shatters that myth by admitting that “a thing like” that did happen to him. He admits that although he used a condom some times, he was not consistent. This is in keeping with the story of the irresponsible ‘gyallis’ (a man who has many women) which is a common theme in Jamaican music and culture; this ad also depicts that story through the words of the main character. The story evokes a feeling of sadness for his circumstances, because the images and tone of the video are serious and depressing. The deep masculine voice and haunting tone of the protagonist is a good strategy as it elicits an emotional response that gets the audience involved with the character and increases the likelihood of them attending to the message.

Coupled with the belief that ‘real men’ have multiple sexual partners is the value that is placed on male strength and dominance in relationships with women. Socio-cultural taboos on expressions of tenderness insist that Jamaican men adopt hard masculinities, expressed through symbolic and actual dominance in sexual relations (Chevannes, 1999; Plummer & Simpson, 2007). One of the most common tools used to discourage subordinate forms of masculinity (such as being gentle and faithful) is the
threat of being labeled a homosexual (Plummer & Simpson, 2007). Plummer (2011) further asserts that in order to comply with Caribbean norms of manliness young men are “almost require[d to engage in] sexual behavior that is associated with HIV risk” (p. 144).

As a result of the social pressures that result from a constant policing of masculinity Jamaican men are encouraged to prove their prowess with women from an early age by having many partners and being dominant in those relationships (Anderson, 2012). A good example of the stereotypical representation of men as the initiators of sexual activity can be seen in Big man noh ride widout condom (NHP, 2011), which is shot in the form of a dancehall music video with Konshens, a popular Jamaican musician. The lyrics of the ad encourage the male target audience to: “Put you an inna di air if a yuh call di shots wid yuh sex life. Yuh in charge a dat! (Put your hands in the air if you are in control of your sex life. You are in charge of that!).” While the underlying message of using a condom is commendable, this assumption that men are in charge of sexual relationships is highlighted throughout the song by a chorus used at the beginning and after each of the two verses and the bridge; the music reinforces this stereotypical representation of men among the target audience.

Stereotypical gender representations are not limited to men in these advertisements. Seiter (1986) explains that stereotypical representations of women usually highlight their relationships with men and family. Just as men are presented as cultural stereotypes, women are presented in some ads as symbolic representations of femininity by showing them as caregivers and flowerpots (pregnant women), which was apparent in three of the eleven advertisements. The ad entitled Babymother (NHP, 2006)
provides a good example of the ‘women as flowerpots’ and ‘women as caregivers’ stereotypes.

In the advertisement are two women: one who is already a mother and the other who is pregnant (Figure 2). The intended meaning of this ad is the promotion of HIV testing among expectant mothers in order to prevent mother-to-child transmission. The emphasis on mothers as vessels for their children is consistent with the intended message of the advertisement. Essentially, the creator of the message is telling the audience: If a woman did not see the need to get tested for HIV before getting pregnant, the responsibility of ensuring the health and well-being of her child should be sufficient to push her to get tested. Though this belief is changing, in Jamaican culture, bearing a child is considered an essential element of womanhood (Kempadoo & Taitt, 2006). This ideological value of putting the wellbeing of a child first is evident in this ad, highlighting the aforementioned themes.

Figure 2. Screenshot of Babymother (NHP, 2006).
While the producers’ decision to portray women as flowerpots and caregivers might be justified in an advertisement promoting HIV testing among expectant mothers, that is not necessarily the case for other advertisements. However, this type of stereotypical representation was also evident in other advertisements such as *Smart, sexy, wise* (NHP, 2009). The second scene of the advertisement shows a woman who is sitting in her bed typing on her computer (Figure 3). The shot shifts to her fingers (with a wedding band) typing on the computer and a picture of her family (a woman, man and girl child). Her partner comes into the bedroom, climbs into bed and kisses her on her cheek. She pushes the computer out of the way, smiles at her partner, reaches to the side of the bed and picks up a condom. The image freezes with her and her partner smiling while the words ‘smart woman’ appear on the bottom left of the screen.

*Figure 3. Screenshots of Smart, sexy, wise* (NHP, 2009).

This scene is an example of the stereotypical representation of women as caregivers. Before she is shown reaching for a condom, the camera zooms in on a picture of the family, including a child, showing that the woman is a mother and caregiver. While the idea of the strong independent Jamaican woman is the basis of the entire ad, that section of the ad focuses on the woman’s role as caregiver, based on a negotiated reading
of the ad (Hall, 1980). This might have been done in an effort to highlight the need for different types of women (including women in long term relationships) to protect themselves from HIV. It is a salient and necessary representation considering the “love and trust” paradigm explained by Figueroa (2014). In addition to depicting the woman as being responsible for initiating condom use, this type of representation also highlights the need for a woman to protect herself, not only for her health but also to ensure that she can continue taking care of her family.

**Gender Neutrality**

Advertisements classified as gender-neutral fit the criterion of targeting a general population rather than any one sex. In addition, this type of representation makes no “distinction between the needs of women or men” (Gupta, 2000, p. 5). Two of the eleven advertisements were classified as neutral as they seemed to target both men and women: *Get it, carry it, use it* (NHP, 2007) and *Take your meds* (NHP, 2012b). Since gender-neutral ads seek to address a general audience, they run the risk of ignoring the needs of a specific group. Indeed, Chong & Kvasny (2006) assert that HIV/AIDS discourse that treats gender as neutral is possibly harmful since it ignores the unique risks faced by women, especially bearing in mind that the default assumptions underneath such discourse are often more applicable for men than for women. Though this is not always the result, at the heart of condom promotion efforts is a belief that if people are made aware of the importance of condom use in HIV/AIDS prevention, and condoms are made readily available, people will use them (Chong & Kvasny, 2006). Unfortunately, in many

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15 According to Figueroa (2014) the “love and trust” paradigm is an important element of Caribbean culture with regards to how females conduct relationships. A common female sexual practice is the expectation that if you are in a relationship with a man who is your main partner, there is an understanding that a woman does not have to use a condom with him because she “trusts him” to either be faithful to her or use a condom with any “outside” woman (Figueroa, 2014, p. 162).
contexts, including Jamaica, this kind of appeal might be more applicable to one gender than the other\textsuperscript{16}, people of one socio-economic status more than another, and depend on the type of relationship. However, the gender-neutral ads mentioned above seem to balance these needs in such a way as to reach men and women, as well as different age groups.

\textit{Get it, carry it, use it} (NHP, 2007) is the first example of how this is done. The ad is comprised of three scenes, starting with a young man (early to mid-20s) getting ready to go out who picks up a condom and puts it in his pocket after he says: ‘Yeah man, a me dat, di sweet boy, di girls’ dem sugar, but mi nah reach pon no scene unless mi condom plug in’ (Yeah man, that’s me, the sweet boy, the girls’ sugar, but I will not go out to party without a condom in my pocket). The second scene shows a man on a motorcycle pulling up in front of a house to pick up a young lady dressed in pink. She climbs onto the back of the motorcycle, pulls out a condom from her partner’s pocket and puts it back in, as if checking to ensure that he has one. In the final scene, a group of three young men are shown dancing in the street, while two young women dressed in red blouses sit on a wall watching them and laughing. The young man in the white t-shirt seems to be smiling/flirting with the young woman in the red and black shirt sitting on the wall (See Figure 4).

This ad utilizes eight young people of both genders to ensure that audience members know the ad is for young men and women. The man in the first scene and the

\begin{footnote}
\textsuperscript{16} The most recent knowledge, attitude and behavior (KAB) survey conducted in Jamaica (Hope Caribbean, 2012) outlines that self-reported condom use at last sex (with main partner) was consistently higher among men (p. 29, table 25); condom use at last sex in multiple partnerships was also consistently higher among men (p. 30, table 28); access to condoms, while high for both genders, was slightly higher among men than women (94.9\% versus 90.4\%); females were also more likely to say their partner provided condoms - 27.6\% compared to .7\% males (page 33, table 32).
\end{footnote}
couple in the second scene seem to be in their early to mid-twenties. The three boys and two girls in the final scene seem to be younger, in their late teens, and the intended message is to get, carry and use a condom because having sex without a condom is an unnecessary risk.

Figure 4. Screenshot of Get it, carry it, use it (NHP, 2007).

Throughout the advertisement there are no overt stereotypical representations of men and women. Instead, the producers provide characters with which both men and women can identify, either because they are similar to the characters portrayed or because audience members want to be like the characters. In support of this gender neutral approach, the producers employ a message of shared responsibility as evinced by the second scene of the advertisement. When the female passenger on the bike removes a condom from the male partner’s pocket and puts it back in his pocket, her doing so might seem to suggest that the man has control in this context. However, both of them share this responsibility of ensuring that they get, carry and use a condom. In this ad, whoever
is advocating condom use seems to have control. Nobody is portrayed as having power over another. If a woman is substituted for a man or vice-versa, the message is the same and it would still make sense.

Another example of gender neutrality is found in *Take your meds* (NHP, 2012b). This advertisement promotes the importance of taking your medication the way the doctor orders, not only for HIV, but all chronic diseases. The underlying message to both men and women is that HIV is just like any other chronic illness. To make this explicit the doctor groups HIV along with other common chronic illnesses like diabetes and high blood pressure in an obvious effort to normalize the disease. The use of a doctor as an authority figure is in keeping with the high cultural capital accorded doctors in Jamaican society, where doctors enjoy a high level of respect. The older age of the stern doctor (See Figure 5) makes him more credible. The audience might have dismissed a younger or female physician (though they are growing in numbers).

*Figure 5. Screenshot of Take your meds* (NHP, 2012b).
The other characters in the ad include a male farmer, a female vendor in the market and a young mother with her daughter. With balanced representation from both genders and the portrayal of men and women from different socio-economic and age groups, this gender neutral ad is effective at appealing to many groups of people. The viewer is being asked to identify with the patients, especially the final patient who always takes her medicine as the doctor orders. Since this general message is widely applicable the use of a gender neutral approach works.

*Gender Sensitive Approaches*

Recognition of the dissimilar needs of individual men and women is central to gender sensitive approaches that address the needs of each gender. The two ads entitled *Be in the know* (NHP, 2008a, 2008b) are good examples of this type of approach; they explicitly target each gender in male and female versions. In the male version of the ad there is one male character who shields his identity by hiding his features in black. He appears against a stark white background. No objects are present. In the female version appear two women whose identities are similarly protected. Both ads urge viewers is to ‘be in the know’ by getting tested for HIV. Disguising the identities of the performers acknowledges the possible fear of stigma and discrimination that might result from people thinking that they are HIV positive.

In the male version of the ad, no blatant cultural beliefs are highlighted, but in the female version there is a reference to implicitly male promiscuity; one of the female characters asks her friend “are you sure that your partner hasn’t cheated on you?” The ad starts with both women facing each other in profile. The woman on the left poses two
vital questions to her friend and through her, to women in the audience as well: “How much do you know about your partner?” and “Can you swear for your partner?”

In Jamaican culture where some men do have multiple partners, these are valid questions. Since ‘love and trust’ are supposed to prevail for women in a committed relationship (Figueroa, 2014), these questions reflect sensitivity towards a delicate issue. Women, the ad indicates, have to be responsible for their partners’ actions as well as their own. The narrator warns: “if you have doubts about your or your partner’s HIV status then be in the know, get tested.” By contrast, in the male version of the ad no mention is made of the man’s possible sexual partner(s).

Instead, the male version foregrounds the statement that an HIV test could be the most important test that men will ever take. The direct nature of the message makes it hard to come up with an oppositional reading. However, an oppositional reading of the female version could argue that a woman in a long term relationship might be lulled into a false sense of security; if she does not have doubts about her or her partner’s HIV status, she might not think she needs testing.

These two ads, both “gender sensitive,” highlight differences in how men and women are portrayed, in order to best reach each gender. In the male version a strong young man takes control of his life by getting tested for HIV so that he can “Be in the know.” Instead of using a narrator as in the male version, the creators employ a conversational strategy between friends in the female version. The friend on the left is the more knowledgeable (Figure 6) and she initiates the conversation; when the friend on the right gives a knee-jerk, defensive answer to the second question she just folds her hands across her chest. The female ad makes use of the alleged greater familiarity of female
conversations. A friend can help her friend achieve control. This friendly conversation among women was also evident in Babymother (NHP, 2006). These distinctive representations allude to the idea of differences in masculine versus feminine forms of communication: men can be told something directly and objectively, but with women there has to be more of an intimate connection with the person sharing the message.

![Be In The Know - Female (2008)](image)

*Figure 6. Screenshot of Be in the know – female (NHP, 2008a).*

The male version suggests that males should accept responsibility for themselves, essentially saying “Be in the know,” get yourself tested; you know where to go to get tested, you know what to do. There is no hint of infidelity on the part of his partner, just an assertion that everyone should be aware of danger. On the other hand, the producers of the female ad do base their warning on the likelihood of promiscuity in partners, essentially saying: “You do not know if your partner has been unfaithful, so that is why you should get tested.” In light of the fact that it is more socially acceptable for Jamaican men to cheat (Chevannes, 1994) it is understandable for the woman to be straight forward with her friend about knowing the infidelity status of her partner. But since Jamaican
women are expected to remain virtuous, the male version of the ad understandably makes no mention of infidelity on the woman’s part as if it does not cross the man’s mind that the woman could be cheating.

*Transformative Representations*

HIV/AIDS discourses of the transformative type aim to change gender roles and relations to ensure more gender-equitable relationships (Gupta, 2000). The main emphasis is a different conceptualization of gender norms at the personal, community and societal levels (Gupta, 2000; Chong & Kvasny, 2007). Transformative approaches to HIV prevention provide positive role models and representations that seek to transform harmful gender and cultural norms. Instead of supporting and glorifying harmful stereotypes, counter-narratives are provided which encourage men and women to consider different conceptualizations of what men and women can do within the context of sexual relationships. Gender-transformative approaches seek to challenge limited definitions of masculinity that encourage sexual risk-taking (Fleming, Lee & Dworkin, 2014). Instead, men are represented as more empathetic, reasonable and responsible and women are characterized as having agency in sexual relations. There is evidence that HIV prevention efforts of a gender-transformative nature can increase protective sexual behavior and reduce the incidence of HIV, among other benefits (Dworkin, Treves-Kagan & Lippman, 2013). Four of the advertisements took a transformative approach to gender representation: *Big man noh ride widout condom* (NHP, 2011), *Smart, sexy, wise* (NHP, 2009), and both versions of *Stick to one partner* (NHP, 2010a, 2010b).

The ad entitled *Big man noh ride widout condom* (NHP, 2011), by Jamaican musician Konshens in the form of a dancehall music video, opens with the artist clad in
black and wearing black shades sitting in what appears to be the stands of a small stadium. The ad seeks to transform gender roles and norms by giving the ‘big man’ image used in *Just use it* (NHP, 1999) a new meaning. Instead of presenting a man who has many women and engages in unprotected sex, the ad offers one who is selective; not a womanizer – though he may like women and engage in sex – but one looking for commitment. According to this advertisement, a *real* ‘big man’ will always use a condom, get tested for HIV and choose his partners carefully. This representation of men is transformative because it offers an alternative model: rather than assuming that the ideal Jamaican male is promiscuous, the ad holds up a figure who understands women and treats them appropriately. For example, the artist advises men that they should “decide when and how a girl climbs your chart.” More to the point, it seeks to make condom use attractive by claiming that condoms are the new ‘swag’.

Though it is potentially transformative, the use of a dancehall musician to promote safe sex and committed relationships may be critiqued as a poor choice, given the actual behavior of male dancehall stars. Images of sex, violence, and violent sex – or what Cooper (2005) calls ‘vigorous sex’ - permeate dancehall culture where promiscuity and male sexual dominance are essential elements. Viewers of the ad who are familiar with the dancehall culture that promotes multiple partners may be skeptical of this message coming from a dancehall musician.

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17 In Jamaican dancehall culture 'swag' refers to personal style (which may include but is not limited to being on trend), personality, confidence, and/or any combination of the three that results in a person's ability to stand out and command attention. It may also make reference to a person's talent, or ability such as their athletic prowess. The term originated as a part of hip hop culture and was added to the dancehall vocabulary as a descriptor. 'Swag,' as it is understood in the dancehall, does not pre-suppose or depend on status, though possessing swag and the attention it garners may eventually lead to an increase in status for the person (C. Moore, personal communication, February 9, 2015).
Another ad that employed a transformative approach is *Smart, sexy, wise* (NHP, 2009) which targets females and encourages them to buy, carry and use condoms. Because many single mothers have to work hard to raise a family on their own, Jamaican women have a reputation for being assertive and independent, but this is not typically the case in relationships, where many women leave the decision to use a condom up to the man, especially if they love or trust him (Figueroa, 2014; Hope Caribbean, 2012). Scenes of women buying condoms and the catchy song which plays throughout the ad remind them that the choice should be theirs.

By depicting the narrative of strong Jamaican women, the creators of the advertisement seek to transform female viewers’ ideas about buying, carrying and using condoms. That narrative is evident from the first scene where the woman’s agency is highlighted by showing her as the driver. Although Jamaican female drivers are considered to be safer drivers than men due to the lower rates of accidents (Frater, 2013b), they are still in the minority and are considered to be very brave, especially to drive in a busy metropolis like Kingston (where this ad is set). This strength and independence makes it easy for the target audience to identify with the characters, either because the viewer sees herself in the female characters, or because the viewer wishes to be like one of the female characters.

Another transformative element of this advertisement is the social relationships that are depicted. In contrast to most of the other advertisements where both men and women are portrayed, the women appear to have control in this narrative – which is evident when seen from the perspective of a negotiated reading of the text (Hall, 1980). In both sections – one in a car, one in a bedroom - where there is a man, the woman
seems to have control over the use of a condom. Power is expressed through the representation of the woman as the driver (with a male passenger), as well as the woman on the bed getting the condom before progressing any further with her partner. Despite earlier stereotypical representations of the women as caregivers, a negotiated reading of these scenes suggests that the women do have control. They are not depicted as having power over the men; instead they are shown as having power over their own bodies, a subtext that, while subtle, is significant. The final characteristic of this ad contributing to its transformative nature is the fact that it shows some sensual acts. For example, in the second scene of the ad a man is shown kissing the woman’s ear while they are lying in bed. The ad seeks to reach a sexually active target audience by providing representations that promote the possibility of sexual pleasure with condoms.

Though it begins with stereotypical portrayals of men and women, Stick to one partner – bar scene (NHP, 2010a) is transformative because those initial portrayals are juxtaposed with safer behaviors that the ad promotes. In this 45 second ad, a middle aged male is shown in three different situations with three different women. Each situation deals with an excuse that the man may offer to his actual live-in partner such as ‘working late’; ‘meeting a client’; and ‘boys’ night out’. In the final scene, the protagonist makes the decision to go home to his partner, instead of going off with the woman that he had just met at the bar. The message is reinforced by a male announcer who advises viewers to act responsibly, while the words “stick to one partner” appear on screen. When he turns down the advances of the lady at the bar, his male friend comments that he is becoming ‘soft’. Despite this negative comment, he decides to go home to Michelle – a transformative representation of men which counters the stereotype of male promiscuity.
The video does not specify whether or not he is married to Michelle. He does not wear a wedding band and he says he is going home to Michelle, instead of saying that he is going home to his wife. Michelle could be his girlfriend, fiancé, wife or common-law partner. This might be a deliberate move on the part of the producers of the advertisement to ensure that it is appealing to a wider audience of men. While marriage is considered important in Jamaica, many couples live together before getting married and some decide to live together in what is called a common-law relationship, defined as “a single man or woman who has cohabited with a single woman or a single man for at least five years as if they were husband and wife” (McGregor, 2009). By not putting a label on the nature of the relationship, it is conceivable that the aim is to get more men to accept this transformative message, whether they are married, have a girlfriend or fiancé or are living in a common-law relationship.

Like the previous two advertisements discussed, this one provides representations of sexuality that speak to the possibility of pleasure, within the context of safe sex. While the advertisement does not show anything explicit, it alludes to the sexual nature of the relationship between the man and the three women through the physical contact that they share. In the first interaction, he whispers to the lady in a suggestive manner; in the second interaction, the couple can be seen walking hand-in-hand down the stairs; and in the final interaction, the young lady caresses his shoulder and chest in a sensual manner. These references to sexual interactions could help the target audience consider the possibility of a different type of masculinity; one that allows for sexual pleasure with fewer partners.
The second version of *Stick to one partner – basketball scene* (NHP, 2010b), which is apparently directed at young men between 18 and 21, opens with a group of four young men playing basketball. After the game ends, the protagonist finds twelve messages from twelve different women on his phone. At first he is shown smiling broadly, but the smile melts from his face as he sees a picture of his friend Jevauhn who also had multiple sexual partners, but is now HIV positive. In an evident attempt to invoke fear, the ad closes with the protagonist deleting all the messages from the women and denouncing promiscuity by saying: “The whole heap a partner ting no work out. More partners, more risk! A better me stick to one partner” (Having multiple partners does not work. More partners, more risk! It’s better for me to stick to one partner). Though rooted in an appeal to anxiety, the choice to stick to one partner would not necessarily be an easy one to make as it could result in the main character being seen as less of a man. His promiscuity confers a high level of social status; among his friends, he would be seen as an example of virile masculinity. However, his decision to make this change provides a different conceptualization of gender norms at the personal level, especially norms of Jamaican masculinity.

One might question whether or not this type of fear appeal is likely to convince an audience of the need to change. However, the goal might not be to immediately convince the audience that they have to act in the same way as the protagonist. It is more useful to think of this representation as showing male viewers a different portrayal of Jamaican masculinity, which plants a seed that could open the minds of the target audience to other ways of being a man. It would be particularly appealing to the younger male being targeted by this ad because he might not be set in the cultural norm of promiscuity. The
underlying assumption is that younger men would therefore be more open to considering fewer sexual partners as a viable choice; if not now, maybe in the future when this standard of masculinity has been normalized.

**Empowering Representations**

In order to be classified as empowering, an HIV/AIDS message must aim to empower or free women and men from the effects of harmful gender norms. Empowerment is a crucial concept in the field of international development (Grabe, 2011). Though its main initial focus was on equitable distribution of material resources to the benefit of women who had previously been left out of economic development efforts, the concept is also applicable to improving individual strengths and a sense of personal control (Cattaneo & Chapman 2010; Zimmerman, 1995). Gender has been identified as a key dimension of HIV prevention and there have been calls for more empowering approaches. As it concerns HIV prevention campaigns, the most relevant of these efforts to empower women include education, access to economic and health resources, and ensuring that they have the knowledge and skills needed to use a condom. In empowering media representations, women and men are depicted as knowledgeable and/or willing to make the changes needed to prevent HIV. Such representations also highlight the agency of women in negotiating condom use.

Only one of the eleven advertisements fits the category of empowering: *Pinch, leave an inch and roll* (NHP, 2008c). In this 45 second ad, a young couple is shown making out on a bed in a dimly lit room. The couple appear to be teenagers, younger than 20. After professing their love for each other and mentioning that they have waited a long time, they continue to make out, but Charlene gently pushes the protagonist back and
asks if he has a condom. On Charlene’s insistence, they stop making out and the young man leaves the room in search of a condom. He goes to the living room to get one from his friend Peter who is making out with another woman. Peter, annoyed by the interruption, quickly pulls a condom from his pocket and gives it to the young man. Upon receiving the condom, he scratches his head with a confused expression on his face. He returns to Peter who then gets up off the couch so they can talk ‘privately’. The young man explains to Peter that he does not know how to use a condom. Peter advises him to relax because he (Peter) is an expert; he then shows him how to use a condom by saying that all he needs to do is: “Pinch, leave an inch and roll.” Peter demonstrates while speaking. The young man repeats the words and actions twice before heading back to the bedroom smiling confidently. In the final seconds of the ad the message is reinforced by a graphic representation of the recommended actions (see Figure 7).

The assumption here is that young men are unfamiliar with condoms, and the message makes clear how unthreatening they are. Using them is easy. The advertisement might not have been designed with the aim of highlighting the roles of young men and women in condom use, but it does so anyway. An additional, if unintended message, is that young women need to insist on condom use during sexual intercourse, as indicated by the actions of Charlene. Though the ad is more empowering for men, based on a negotiated reading of the text (Hall, 1980), female viewers may also find it empowering as Charlene shows that they can have a more active role in negotiating safe sex and can share in the decision to use protection usually left to men.

Another part of the message centers on the role of older men in teaching younger men how to correctly use a condom. Despite the widely held view that men should be
more knowledgeable about sex than women, the protagonist admits that he does not know how to use a condom. By asking for help, Charlene’s partner combats the myth of male sexual sophistication. These elements of the ad combine to provide an empowering message to both men and women, although the main target audience is men.

This ad is somewhat unusual in that it captures very young characters prepared to learn about safer sexual practices. The setting of the PSA also adds to its novelty with Charlene and the protagonist shown on a bed in a dimly lit bedroom. *Pinch, leave an inch and roll* (NHP, 2008c) is one of only three advertisements that show people in a bedroom, the actual location where condom use is usually discussed and actually takes place. Of the three ads that show a bedroom setting, this is the only one in which the characters engage in kissing and caressing. This use of positive sexual representations in a realistic setting is a commendable and likely effective strategy to reach the target audience. Despite criticism from some members of the public for its explicit nature and alleged attempt to promote sexual relations among young people (Dick, 2009; Campbell,
2009; Reid, 2009), this kind of positive sexual representation not only portrays humans as sexually attractive but also appeals to a young, sexually active population, who might not have otherwise learned how to correctly use a condom.

Social and Cultural Norms

A community’s beliefs about gender and sexuality are inextricably linked with their social and cultural norms. These traditional rules that regulate the behavior of different groups in a society (Bicchieri & Mercier, 2014) motivate people to act in certain ways, especially regarding gender, which are explicitly and implicitly policed in most societies. Our performance of masculinity and femininity is based on the widely shared norms and expectations within society about appropriate male and female roles, behavior and characteristics. It is also important to remember that gender is intimately linked to sexuality, which some consider a social construction of a biological drive. The social and cultural norms embedded in these eleven advertisements center on prevalent concepts of Jamaican masculinity. These include: multiple partners as an essential element of Jamaican manhood, especially for the ‘rude boy’ and the ‘big, heavy man’; male dominance and expectations of superior sexual knowledge in men (Chevannes, 1993; Anderson, 2012); and male irresponsibility (Chevannes, 1993, p. 34; Jolly 2007). These norms align with the aforementioned representations as well as the extant literature on Jamaican masculinity.

*Man Fi Have Nuff Gyal (A Man Should Have Many Women)*

Multiple sexual partnerships among men is the most common socio-cultural norm associated with gender and sexuality in the advertisements examined. Seven of the eleven advertisements make reference to this behavior, whether explicitly or implicitly. The
representations of promiscuous men not only speak to how commonplace the practice is, but also highlight the belief that the behavior is an essential element of Jamaican manhood, especially for some sub-sections of the male population such as the ‘rude boy’ and the ‘big, heavy man’. Examples of this behavioral norm include references in Big man noh ride widout condom (NHP, 2011) where the singers explain: “Dem seh man fi have nuff gyal in a bungle” (It is said that a man should have many women). This norm is also explicitly confirmed by references in other advertisements, such as Just use it (NHP, 1999), where the protagonist explains his prowess with women on every street as proof of his status as a ‘big man’; and both versions of the ad entitled Stick to one partner (NHP, 2010a, 2010b) in which the men are shown with several women.

While these representations may initially be critiqued for reinforcing harmful cultural norms, they might alternatively be seen as a means of undermining these norms of Jamaican masculinity. For instance, by showing the consequences of promiscuity and providing different conceptualizations of Jamaican masculinity, the creators are giving men in the audience role models they can emulate in making better choices regarding sex and ultimately their health.

Man in Charge (Male Dominance)

Coupled with the norm of male promiscuity is the value that is placed on male strength and dominance in relationships with women. Konshens also speaks to this belief in the chorus of Big man noh ride widout condom (NHP, 2011) where he encourages men to “Put you an inna di air if a yuh call di shots wid yuh sex life. Yuh in charge a dat!” (Put your hands in the air if you call the shots in your sex life. You are in charge of that!).

While the underlying message of using a condom is commendable, this norm of male
dominance in sexual relationships is highlighted throughout the song as the chorus is used at the beginning and after each of the two verses and the bridge, serving to reinforce this belief among the target audience.

This norm is also expressed through the view that men should be more knowledgeable about sex and condom use. The norm of expected male sexual knowledge is evident in the ad entitled *Pinch, leave an inch and roll* (NHP, 2008c) where the young male protagonist is taught how to correctly use a condom. Though the norm is highlighted in these representations, one must consider the context of the message. After all, to suggest that men do not know how to use a condom is risky, so the solution is to make the protagonist young. In so doing, the creator of the message can reach the primary target audience - young men who do not know how to use a condom but might not be willing to admit it – as well as older men.

**Male Irresponsibility**

Contemporary research about gender and sexuality in Jamaica highlights a penchant for irresponsible sexual behavior among men that is rooted in socio-cultural norms and values about ‘normal’ sexual behavior (Chevannes, 1993; Chevannes, 2001; Gupta, 2002; Kempadoo & Taitt, 2006; Figueroa, 2009; Figueroa, 2014). This theme of sexual irresponsibility is evident in the representations in these advertisements. Expected and sometimes encouraged behaviors of men that increase their HIV risk include being macho, early sexual initiation, having multiple sexual partners, having many children and being dominant in sexual relations (Anderson, 2012; Figueroa, 2014). While the advertisements sought to combat some of these behaviors and promote condom use, the underlying norm of male irresponsibility was evident in the cultural and ideological
meaning of the ads. For instance, in the two advertisements entitled *Stick to one partner* (NHP, 2010a, 2010b), after displaying the irresponsible behavior of having multiple partners, the narrator closes by exhorting male viewers to ‘Act responsibly’ by sticking to one partner.

An analysis of the lyrics in *Big man noh ride widout condom* (NHP, 2011) highlights some of the irresponsible behaviors that the song aims to prevent. While encouraging men to use a condom, the chorus of the song also reinforces the belief that dominance should be interpreted as a wise choice (See Table 2). In a culture where dominance is already an essential element of a fragile masculinity, this message of being in charge of your sex life could be misconstrued as meaning that the man should express his power over women, as opposed to his power over his choices to use a condom and reduce his number of sexual partners. At the same time, the underlying message seeks to redefine dominance as a different kind of control – one in which men are responsible for the decisions in their sex life and make those decisions carefully.

### Table 2

*Lyrics of Big Man Noh Ride Widout Condom* (NHP, 2011)

<table>
<thead>
<tr>
<th>Jamaican Patios</th>
<th>English translation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chorus</td>
<td>Chorus</td>
</tr>
<tr>
<td>Put you an inna di air if yuh call di shots wid yuh sex life. Yuh in charge a dat!</td>
<td>Put your hand in the air if you call the shots in your sex life. You’re in charge of that!</td>
</tr>
<tr>
<td>Real big man noh ride widout condom!</td>
<td>A real ‘big man’ does not have sex without a condom! Real men don’t have sex without a condom</td>
</tr>
<tr>
<td>Real man no ride widout condom.</td>
<td>Put your hand in the air if you call the shots in your sex life. You’re in charge of that!</td>
</tr>
<tr>
<td>Put you an inna di air if yuh call di shots wid yuh sex life. Yuh in charge a dat!</td>
<td>Grew a man noh ride widout condom!</td>
</tr>
<tr>
<td>Real big man noh ride widout condom!</td>
<td>A real ‘big man’ does not have sex without a condom! Real men don’t have sex without a condom</td>
</tr>
<tr>
<td>Real man no ride widout condom.</td>
<td>Put your hand in the air if you call the shots in your sex life. You’re in charge of that!</td>
</tr>
</tbody>
</table>
Table 2: continued
Verse 1
Eeny meeny miney mo, tic tac toe, some
man a play game wid dem condom flow
One, two, skip a few, yes fi Marsha, no fi
Sue.

Yuh no wah wear boots, den yuh a live
loose, Mi sing deh one yah fi all a di yutes
Fly dah one high like a flag
Right now condom a di new swag

Chorus

Verse 2
Dem seh man fi have nuff gal in a bungle
But trailer-load a gal mek yuh stumble
Unprotected sex, nuff’bill when yuh flex
But yuh get more when yuh have less
More! Time fi set up yuh life
More! Time fi selec yuh wife
More! Time fi achieve yuh goal
Mi a talk from mi heart and soul

Chorus

Bridge
Dis a di real worl talk, di big man walk
Decide when and how a girl climb yuh chart
Set di record straight before di music start
A your life, yuh better play your part
Condom. Check! HIV test. Check!
Less girl pon di chart. Yes, check!
Condom. Check! HIV test. Check!
Less girl pon di chart. Yes, check!

Chorus

Verse 1
Eeny meeny miney mo, tic tact toe, some
men are playing games with their condom
flow. One, two, skip a few, yes for
Marsha, no for Sue. If you’re not wearing
condoms, you’re living loose. I’m singing
this one for all of the young men. Fly this
one high like a flag. Right now condom is
the new swag

Chorus

Verse 2
They say a man should have many women
But many women can make you stumble
Unprotected sex, many bills when you go
out
But you get more when you have less
More! Time to organize your life
More! Time to select your wife
More! Time to achieve your goals
I’m talking from my heart and soul

Chorus

Bridge
This is the real world talk, the big man
walk. Decide when and how you have sex
with a girl. Set the record straight before
the music starts. It’s your life, you need to
Check! Fewer women. Yes, check!
Condom. Check! HIV test. Check!
Fewer women. Yes, check!

The bridge is in the form of a conversation, reminiscent of a serious talk that a
younger man might have with a mentor. It reinforces the need to act responsibly by
reminding young men that it is their life and they need to play their part in protecting
themselves from HIV by using a condom, getting an HIV test and having fewer sexual
partners. Although the song does not explicitly say that the targeted behaviors are irresponsible, it implies that certain behaviors are more responsible. The ad also reinforces this notion of responsible versus irresponsible actions by closing with a red, white and yellow logo that encourages viewers to ‘Act responsibly’ (Figure 8). This is also an interesting example because it trades almost exclusively on selfishness – it defines responsibility in wholly male terms – protect yourself, with no reference to the man’s partner.

Figure 8. Screenshot of the end of Big Man noh ride widout condom (NHP, 2011).

The norm of male irresponsibility is also evident in ads aimed at females. For example, in the female version of the ads entitled Be in the know (NHP, 2008a) a woman raises doubts about the behavior of her friend’s partner, pointing to his possible irresponsible behavior. The use of text on the screen draws attention to the issue at hand - while the female who is answering the questions pauses to think about her response to a
question about her partner’s faithfulness, the camera zooms in to focus on her and a big red question mark appears near to her ear, alluding to the fact that she might have questions about her partner (See Figure 9). After this, the narrator appeals to her, and the audience through her: “If you have doubts about you or your partner’s HIV status then be in the know! Get tested!” Though aimed at women, the underlying reason for getting tested is the irresponsible behavior of men.

Figure 9. Screenshot of Be in the know – female (NHP, 2008a).

Norms and Beliefs about Jamaican Women

The norm of female assertiveness (Chevannes, 1993) is evident in four advertisements that either have women as the main or secondary target audience; however, this initial representation is often followed by a more passive role. The ‘love and trust’ norm among females (Figueroa, 2014, p. 162) is also evident in three of the eleven advertisements.
Female Assertiveness

In the Jamaican context, Chevannes (1993) explains that although male dominance is a salient socio-cultural norm, men’s “assertion of dominance takes place within the context of female assertiveness” (p. 9). The 2010 Jamaica Survey of Living Conditions (JSLC) prepared by the Planning Institute of Jamaica (PIOJ) outlines that 47% of Jamaican households are headed by women. In these ‘matrifocal’ families men may engage in visiting relationships and are considered marginal, but necessary for procreation and economic support of their offspring (Chevannes, 1993; Kempadoo & Taitt, 2006; Smith, 1996). This independence of Jamaican women has been documented in the literature and is seen as the reason behind the cultural norm of female assertiveness (Chevannes, 1993; Kempadoo & Taitt, 2006; PIOJ, 2010; Smith, 1996). It is further exemplified by the advice given to many young women to ensure that they own their bed so that a man cannot tell you to get off that bed. Instead, you can tell him to get off your bed (Ford-Smith, 1986 as cited by Chevannes, 1993).

In theory, this assertiveness should extend to sexual relations and insistence on condom use, but women in long-term relationships often choose to forego condom use (Figueroa, 2014). For instance, Darlington et al. (2012) found that young women in cross-generational relationships usually leave condom use decisions up to the man because he is older and more experienced. This is the case even when they have knowledge of the man’s promiscuity (Darlington et al., 2012). Participants in the study also highlighted that condom use is not a rational decision, especially in the heat of the moment (Darlington et al., 2012). Representations of female assertiveness and insistence
Examples of the norm of female assertiveness can be found in *Smart, sexy, wise* (NHP, 2009), which targets women, and in *Pinch leave an inch and roll* (NHP, 2008c) where the primary target audience is young men. In *Smart, sexy, wise* (NHP, 2009) the values of female independence and assertiveness are highlighted, with women shown purchasing and insisting on condom use. The aim to increase women’s purchasing and use of condoms is consistent with research showing that women are more likely (27.6% compared to .7% males) to say that their partner provided the condom (Hope Caribbean, 2012, p. 33).

That female assertiveness can be tempered by a more passive role after initial boldness is evinced by Charlene in *Pinch, leave an inch and roll* (NHP, 2008c). In that advertisement, Charlene insists on using a condom, but after that is not seen again. Although she successfully negotiates for condom use, it is her male partner who gets the condom and learns how to correctly use it. Since the ad is primarily targeted at young men, this portrayal is understandable, but it also speaks to the fact that many women find it hard to negotiate condom use and even when they do, the final decision and actual use of the condom is still left up to the man (Darlington et al., 2012; Hope Caribbean, 2012).

*Love and Trust*

The extant literature highlights a tendency for research on HIV/AIDS to be silent about concepts of love, sexual desire and sexual passion (Cornwall and Jolly, 2009; Dixon-Mueller, 1993; Kempadoo & Taitt, 2006). Sex within the context of HIV/AIDS is overwhelmingly focused on what Jolly (2007) refers to as an ‘obsession with bad sex’
wherein pleasurable sex and safe sex are presented as being mutually exclusive (Philpott, Knerr & Boydell, 2006). The significance of emotions that accompany sexual expressions, such as feelings of love, trust and intimacy, is being recognized by researchers (Jolly, 2007). For example, Kempadoo and Taitt (2006) explain that notions of love and intimacy can foreclose the idea of using protection against infection. Indeed they insist that:

For most women and men, familiarity and intimacy with the sexual partner, or love, is reason enough not to feel at risk. Even in sex work relations, for example, while it is generally accepted that with clients condoms are necessary, with a lover, wife, husband, this is considered inappropriate. (Kempadoo & Taitt, 2006, p.18)

More recently, Figueroa (2014) confirmed the existence of a “love and trust” standard in the Caribbean, particularly among females in long-term relationships. Based on this cultural norm, there is an understanding and expectation that a woman does not have to use a condom with her main partner as an expression of her trust (Figueroa, 2014). Younger women who engage in cross-generational relationships also confirmed the tendency to leave decisions about condom use up to their older male partners, not only out of fear, but also out of trust (Darlington et al., 2012). This ‘love and trust’ theme is evident in three of the eleven advertisements.

In Pinch, leave an inch and roll (NHP, 2008c) there are initial expressions of love that lead up to the young couple making out. It is of note that while both Charlene and her partner express their love for each other, the young man seems ready to progress to unprotected sex on the basis of that love, but Charlene is not. She says “I love you,
but…do you have a condom?” This representation provides a counter-narrative to the aforementioned norm in an effort to combat the belief that if you love and trust someone it means you do not need to use a condom. This theme is also evident in the second scene of *Smart, sexy, wise* (NHP, 2009) where the wife can be seen giving the husband the condom. Instead of succumbing to the belief that there is no need for condom use with her main partner, she makes the smart decision to insist on condom use. The lyrics of the song also subtly address this concept of love and trust:

- I’m smart and sexy
- I got my condom right here with me
- I’m a queen, I’m a star, I’m a woman
- Smart, sexy and wise
- Full of ambition
- Got to be protected
- No doubt about it
- Got my condom
- I don’t leave home without it
- Mi start and mi sexy
- Use my wisdom
- Mi no want HIV
- So mi use my condom
- You check fi mi
- But mi check fi miself
- Buy mi condom
This is especially clear when the singer exclaims: “you check fi me, mi check fi myself” (you love me, I love myself). That line of the song encourages women to ‘check fi’ (love) themselves and make the smart choice of using a condom, even with a main partner. Another subtle reference to this norm can be found in the female version of Be in the know (NHP, 2008a). When the woman asks her friend “How much do you know about your partner?” and she replies with a vehement “Everything!”’, this can be read as an expression of her love and trust in that partner. Although she has faith in her partner, the friend highlights the need for women to consider a different love and trust norm; one which allows self-protection through HIV testing and condom use.

PSA Message Characteristics

This section of the chapter outlines findings that give an overview of the message features employed in the advertisements. Through this type of analysis the aim is to identify key message features that can contribute to the processes that impact attitudinal and behavior change (Johnson, Flora & Rimal, 1997; Chang, 2004).

Attention

The number of cuts or pacing (Lang, Bolls, Potter & Kawahara, 1999) is significant because this structural feature of television advertisements has been shown to elicit increased number of orienting responses from audience members. According to Lang (1990), the orienting response is an automatic involuntary response produced by changes in the environment. Based on this definition, Lang (1990) further argued that a television advertisement with more cuts is more likely to gain and keep a viewer’s
attention. However, Chang (2004) explains that there should be no more than one cut per second (that is, 30 cuts in a 30-second ad) in order to reduce the likelihood of disorienting viewers. The eleven advertisements analyzed had numbers of cuts ranging from two cuts in a 56-second advertisement to 32 cuts in a two and a half minute advertisement. The majority of the ads (seven of the eleven) were medium paced (seven to 14 cuts per 30 seconds). There was one ad with 15 or more cuts per 30 seconds (fast-paced) and three ads with six or fewer cuts per 30 seconds (slow-paced).

Defined as objects that are incompatible with the context in which they are being viewed (Chang, 2004), informative objects are useful features of public service advertisements because they are conspicuous, resulting in increased attention from viewers (Chang, 2004; Henderson, Weeks & Hollingworth, 1999; Loftus & Mackworth, 1978). Only four of the eleven advertisements utilized informative objects, which include a book, brightly colored animated words and penile models used to illustrate how to correctly put on a condom. Three of the four objects were prominently displayed, helping to draw the audience’s attention to the message being shared. For example, in one of the advertisements, brightly colored animated words were placed strategically throughout the advertisement to emphasize the message being promoted by the announcer who also repeated the words while they were being moved across the screen (Figure 10).

Research has confirmed that message features such as sound and the use of color are clearly linked to greater attention to the message (Morgan, Palmgreen, Stephenson, Hoyle & Lorch, 2003). Previous studies on HIV PSA message elements (Chang, 2004; Johnson, Flora & Rimal, 1997) have neglected to assess the possible impact of these two features. This study chose to include color and sound in order to provide a broader
overview of the elements that might impact audience attention to the message, which is ultimately linked to message effectiveness. Ads with more audio elements, such as background music or sound saturation are more appealing than those with just a person talking throughout (Morgan et al., 2003). Warm colors (such as red) are more likely to elicit attention than neutral colors (white, black, grey) and cool colors (such as blue, purple, green) (Moore, Stammerjohan & Coulter, 2005).

Figure 10: Screenshots of Get it, carry it, use it (NHP, 2007).

The most common audio category was the least likely one to get and keep audience member’s attention: talking (monologue or dialogue) without background music or sound. Four of the eleven advertisements had no background music or sound; there was just one person (or more) talking throughout the ad. There were three ads with background music or sound; however, two of the three ads only used music at the beginning or end, while the majority of each ad had someone talking. For instance, in Babymother (NHP, 2006), the first two seconds of the ad has upbeat reggae music which fades quickly to be replaced by a conversation between a pregnant woman and one who is already a mother. This conversation lasts 57 seconds and is followed by the same upbeat music in the background, while a male announcer tells the audience where to get
more information about HIV testing, which lasts for about 10 seconds. Two advertisements had sound saturation, where there was background noise throughout the advertisement, such as the hum of conversation and glasses clinking in a restaurant. Two ads utilized music throughout, as they were presented in the form of music videos.

Three ads utilized warm colors throughout, another three had neutral colors (the ads were done in black and white), and two used cool colors. The other three ads had a mixture of warm, cool and neutral colors.

*Comprehension*

The type of information provided in the ads was divided into six categories: (a) condom use, (b) number of sexual partners, (c) HIV test, (d) mother-to-child transmission, (e) living with HIV/AIDS, (f) unrelated information (See Table 3).

<table>
<thead>
<tr>
<th>Number of References to Each Type of Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of information</td>
</tr>
<tr>
<td>Condom use</td>
</tr>
<tr>
<td>HIV test</td>
</tr>
<tr>
<td>Number of sexual partners</td>
</tr>
<tr>
<td>Mother to child transmission</td>
</tr>
<tr>
<td>Living with HIV</td>
</tr>
<tr>
<td>Unrelated information</td>
</tr>
</tbody>
</table>

Condom use and HIV testing information showed up most frequently, with five references each. This was followed by information regarding the number of sexual
partners, of which there were four references, but only three of the four touched on limiting the number of sexual partners. There was one reference each for the topics of mother to child transmission, living with HIV/AIDS and unrelated information.

Unlike previous analyses of HIV PSA message features (Chang, 2004; Johnson, Flora & Rimal, 1997), these advertisements all provided at least one recommendation. There were specific recommendations in all eleven ads: condom use was the most common recommendation being featured in five ads, followed by the recommendation to get tested for HIV in four ads, and reduction of the number of sexual partners was recommended in three advertisements. Despite these specific recommendations, the vague recommendation to “act responsibly” was also verbally present in two advertisements along with a logo that bears the same information which was also present at the end of an additional three advertisements (a total of five ads had the recommendation). The verbal recommendation to act responsibly came after specific recommendations such as in Stick to one partner – bar scene (NHP, 2010a) where the protagonist turns down the advances of a woman at the bar. The following conversation ensues:

Friend: My friend, you’re getting soft!

Protagonist: She can go on. More partners, more risk. I’m going home to Michelle.

Announcer: Act responsibly, a Message from the National HIV/STI Program.

(NHP, 2010a)

While the announcer is speaking, the ad cuts to a red, white and yellow logo bearing the words ‘act responsibly’ which fills the screen and then shrinks to fit below the larger
words ‘Stick to one partner’ (See Figure 11). The advice to act responsibly is used in a similar manner at the end of Take your meds (NHP, 2012b) after the doctor ends the advertisement by sternly advising viewers to ‘Take your meds’. However, the logo is also featured at the end of three other advertisements with information about condom use for women and reducing the number of partners for men, with no verbal reference to the advice. Finally, four of the older advertisements also advise audience members to call the HIV/STD helpline, either verbally and with words on the screen or with words on the screen alone.

Figure 11. Screenshot of Stick to one partner – bar scene (NHP, 2010a).

Seven of the eleven PSAs had low information load (only one category of information) while the other four advertisements were split equally between moderate (two categories) and high (three or more categories) information load. Big man noh ride widout condom (NHP, 2011) exemplifies high information load as it had information
about condom use, HIV tests and limiting the number of sexual partners. This was also the case with the oldest PSA in the set – *Just use it* (NHP, 1999).

Explicitness was defined in both verbal and visual terms by how sex was mentioned or displayed in each ad. PSAs with exposed male or female genitals or showing intimate acts such as kissing or caressing were categorized as having high visual explicitness; those with some nudity were classified as moderately explicit; and those which had fully clothed characters who were not engaging in any intimate acts had low visual explicitness. Only two ads were categorized as having high visual explicitness, while one was moderate and the remaining eight were low. The two highly explicit ads showed couples engaging in intimate acts such as kissing and caressing, but did not show male or female genitals (except in the form of a penile model used at the end of one ad to demonstrate how to correctly put on a condom).

Verbal explicitness was also examined in a similar manner: if the word ‘sex’ was mentioned, the ad was deemed highly explicit; if there was an indirect allusion to sex, it ranked as moderately explicit; if no hint was made to sex, the PSA was classified as having low verbal explicitness. Again, only two PSAs had high verbal explicitness; five of them were moderate, while the remaining four had low verbal explicitness. An example of high verbal explicitness can be found in *Big man noh ride widout condom* (NHP, 2011) as the chorus of the song has the following lyrics:

> Put your hand in the air if you call the shots in your sex life.
> You’re in charge of that! A real ‘big man’ does not have sex without a condom!
> Real men don’t have sex without a condom
> Put your hand in the air if you call the shots in your sex life.
You’re in charge of that! A real ‘big man’ does not have sex without a condom!
Real men don’t have sex without a condom. (NHP, 2011)

Though the PSAs with moderate verbal explicitness did not use the word ‘sex’ the following monologue from Just use it (NHP, 1999) exemplifies the type of allusions:

Big man: Yuh si mi rude bwoy, mi wuz a big evvy man. Nuff ‘at clothes an ‘at cyar. Mi did ‘ave ooman pon every ends, a jus mi dat. Bredren, mi neva know seh a ting like dis cudda reach mi. Den, mi go do a medical fi get a work an di blood tes come back seh mi ave HIV. Truth is, mi did use mi rubbers sometime, but more time mi tek a chance and jus go tru and dis time mi get ketch, jus so. Trus mi my yute, yuh cyaa tek no chance. Yuh haffi use yuh boots every time!

Narrator. Just use it. Every time. A message from the National HIV/STD Program.

English translation

Big man: You see me rude boy, I was a big respectable man. I had plenty hot clothes and hot cars. I had a woman on every block, that’s just how I was. Man, I didn’t know something like this could happen to me. Then, I had to do a medical checkup in order to get a job and the blood test showed that I was HIV positive. The truth is, I did use a condom sometimes, but most of the time, I took the chance and did it without a condom, and this time I got caught, just like that. Trust me, you can’t take chances. You have to use a condom every time!

Narrator: Just use it. Every time. A message from the National HIV/STD Program. (NHP, 1999)
Yielding

The categories for sources were expert and proximal (non-expert). Expert sources included medical professionals, celebrities and government officials. Proximal sources included unknown actors playing the part of family members and friends. The ads utilized more proximal than expert sources. Only two of the ads used expert sources: one doctor and one celebrity. The gender of sources was also considered: seven of the ads used male sources, one used both males and females and three utilized female sources. Although previous research has found heavy reliance on anonymous male narrators, even for ads targeting women (Chang, 2004; Johnson, Flora & Rimal, 1997; Myrick, 1999), the PSAs analyzed in this study employed both male and female voices for narration and voice-overs at the end of the ads. Female narrators or announcers were mainly used in ads with female characters or characters of both genders while male narrators were used in ads with male characters, except in Babymother (NHP, 2006) which is one of the older ads addressing mother-to-child transmission of HIV.

Each PSA’s target audience was determined by the gender of the primary character, the demographic characteristics and the type of situation portrayed in the ad. Six of the ads targeted men, while three targeted women and two targeted a general audience of both men and women. Eight of the eleven ads explicitly targeted a heterosexual audience. There were no overt references to suggest that the other three ads were targeting homosexuals, but the female version of Be in the know (NHP, 2008a) used the term ‘partner’ which leaves open the possibility that the woman has a male or female partner. All of the ads targeting men were clearly targeting heterosexuals, except for the
male version of *Be in the know* (NHP, 2008b) which has a general target audience of adult males.

All of the advertisements provided specific recommendations, most of which were deemed feasible because the ads also provided the relevant knowledge or skills needed to carry out the recommended actions. The majority of the ads (five) recommended using a condom, which is a specific and feasible course of action that adults can take to prevent HIV. *Pinch leave an inch and roll* (NHP, 2008c) goes even further by providing instructions on how to use a condom while *Just use it* (NHP, 1999) and *Big man noh ride widout condom* (NHP, 2011) highlight the need to use a condom every time. The recommendation to get tested for HIV was given in four ads, two of which were deemed feasible because they provided the phone number for the HIV/STI helpline where audience members can get more information about where to get tested. This is exemplified by the voice-over at the end of *Babymother* (NHP, 2006):

> Announcer: For more information on the HIV test for expectant mothers, go to your nearest clinic or call the AIDS/STD helpline: 1888-991-4444. (NHP, 2006)

This is a feasible recommendation since most communities (even rural ones) have small clinics where community members can go to get help for minor health issues, as well as information about where they can get tested for HIV. The feasible recommendation to limit the number of sexual partners was provided in three advertisements, two of which specifically suggest that it is better to “stick to one partner”. The female version of *Be in the know* (NHP, 2008s) was not classified as feasible because unlike the male version, no information is provided on where to get tested or where to get more information.
Retention

The ads were sorted according to whether they used a rational appeal (a factual PSA does not tell a story, characters look into the camera as if addressing the audience directly) or an emotional appeal (a dramatized ad which tells a story and the characters look at each other, not the camera) or both. Emotional appeals tend to enhance audience retention of the message (Brinson & Brown, 1997; Flora & Maibach, 1990), especially among viewers of mass marketed HIV prevention ads, who are not likely to be highly involved with the message (Flora & Maibach, 1990; Johnson, Flora & Rimal, 1997; Chang, 2004). Eight of the ads utilized an emotional appeal, while one used a rational appeal and two used both. The ads that employed emotional appeals were dramatized stories in which the main characters showed support for the actions being recommended to audience members. Some stories were also told in the form of music as exemplified in Smart, sexy, wise (NHP, 2009) which employs an upbeat reggae format. The song provides background music throughout the 30-second ad while three snapshots of women’s lives are portrayed.

Be in the know – male (NHP, 2008b) is the ad that utilizes a rational appeal. It shows a man looking into the camera, but he is obscured by darkening his features while a male narrator provides the following information:

Narrator: Just a few things you need to know. Know your HIV status (displayed on the left side of the screen). Know where to go for help (the following words are displayed screen right - the clinic, private lab, doctor’s office). Know that an HIV test could be the most important test you will ever take (know that an HIV test is important – shown on the screen). Call the AIDS/STI helpline at 1-888-
Summary of Findings

With regard to the different gender representations present in Jamaican HIV prevention television advertisements, four main themes were outlined. Each advertisement utilized different types of representation ranging from stereotypical to empowering, so they are not mutually exclusive. Stereotypical representations of men include those that showed men with multiple female sexual partners as an essential element of masculine sexuality; men as perpetrators of bad sex (Jolly 2007); and men as initiators of sexual activity. These types of representation were evident in seven of the eleven advertisements. Stereotypical representations of women included the dominant stereotypes of ‘women as caregivers’ and ‘women as flowerpots’ (Charlesworth, 2003) which were present in three of the eleven advertisements.

Two of the eleven advertisements were classified as gender-neutral as they targeted both men and women. No overt stereotypical representations of men and women were used in these types of ads and there is a message of shared responsibility for both genders in preventing HIV. Another two ads were deemed to be gender-sensitive representations, with different versions targeting men and women. Transformative and empowering gender representations were found in four of the advertisements which sought to counteract stereotypical behaviors by providing representations that run counter to the dominant gender ideologies, particularly for men.

The second section of the chapter outlined the social and cultural norms embedded within these representations in the advertisements. The cultural norms
regarding Jamaican male behavior in the context of HIV align with some stereotypical representations and include: multiple partners as an essential element of Jamaican manhood, especially for the ‘rude boy’ and the ‘big, heavy man’; male dominance and expectations of superior sexual knowledge in men; and male irresponsibility. These norms align with the aforementioned representations as well as the extant literature on Jamaican masculinity. Norms associated with women in Jamaican culture include the norm of female assertiveness, which was found in four advertisements targeting women. The ‘love and trust’ norm among females was also highlighted.

The third section of this chapter provided an overview of the characteristics of the advertisements that influence message efficacy in a cognitive paradigm. The characteristics included the number of cuts, use of informative objects, audio, lighting, amount and type of information, explicitness, sources, target audience, specificity and feasibility of recommendations and the type of appeal employed. The following chapter provides a discussion of these findings with regard to HIV prevention messages in Jamaica and outlines implications for HIV prevention message design.
CHAPTER 5: CONCLUSION AND RECOMMENDATIONS

The primary aims of this study were to explore the gender representations in Jamaican HIV television advertisements, as well as the underlying cultural norms that support these representations, and the message features employed to reach target audiences. These research aims evolved from media constructivist and critical feminist theoretical arguments which maintain that media constructions of men and women influence how audience members make sense of the information they receive. Since media form such an important part of our daily lives, and constitute a major strategy in HIV prevention efforts, this study was approached from a media cultural studies perspective with particular emphasis on the gender representations and the socio-cultural context in which these representations would be received.

This chapter concludes the study with a critical discussion of the key findings, limitations, and contributions of the study to the field of critical media studies. The chapter also outlines implications for campaign design practice and future research.

Discussion

The first research question sought to explore the gender representations present in Jamaican HIV PSAs. The PSAs were analyzed using Gupta’s (2000) continuum of social constructions concerning gender, sexuality and HIV; ranging from stereotypical to empowering. Results from the study indicate five types of gender representations in the PSAs: stereotypical, neutral, sensitive, transformative and empowering. A key finding of this study is that there was a progression from more stereotypical representations of men and women in the older PSAs to transformative and empowering representations in more recent advertisements. Previous research also found this type of transition in HIV PSAs
This finding suggests that producers of the advertisements are aware of the need to replace stereotypical representations with portrayals that have the power to engender changes in attitude and behavior. When producers of HIV PSAs utilize stereotypical representations of men (such as promiscuity) and of women (such as the caregiver role), they run the risk of reinforcing behaviors that can undermine HIV prevention efforts. The progression to increasingly transformative and empowering representations in these PSAs therefore bodes well for HIV prevention efforts in Jamaica.

The second research question examined socio-cultural norms underlying the PSA representations of men and women. Similar to the findings from previous research, this study identified three overarching norms related to Jamaican masculinity: promiscuity as an essential element of manhood; male dominance and expectations of superior sexual knowledge in men (Chevannes, 1993; Anderson, 2012); and male irresponsibility (Chevannes, 1993; Jolly 2007). These norms align with the aforementioned representations of men as well as the extant literature on Jamaican masculinity. This finding has implications for HIV/AIDS prevention media messages because continued perpetuation of such stereotypical portrayals of Jamaican men could work against the aims of such campaigns. The producers of the advertisements are by no means supporting these cultural norms, but creators of HIV/AIDS PSAs should consider the unintended messages that can be taken from such portrayals. This is particularly salient when ads do not provide counter-narratives or models to replace the possible harmful norms that are portrayed.

Two norms of Jamaican womanhood were also evident in these advertisements: love and trust, as well as female assertiveness. The former theme was evident in three
advertisements, all of which highlight the woman’s love and trust of her partner, while juxtaposing it against the possibility of his promiscuity. Female assertiveness is evident in ads targeting both men and women, but is tempered by a more passive role in ads targeting men. The portrayal of assertive women who buy, carry and use condoms is an encouraging finding of this research, which runs counter to previous research highlighting the negative representation of women (Faria, 2008; Johnson, Flora & Rimal, 1997; Khan, 2014; Mabachi, 2008; Meyer et al., 2006; Mbure, 2007). At the same time, there are issues of concern regarding the contradictory representations of women as the ones who should initiate condom use discussions and as passive bystanders. This is exemplified in the portrayal of Charlene in *Pinch, leave an inch and roll* (NHP, 2008c).

Although the ad targets adolescent young men, it places the responsibility of ensuring condom use on the female. Additionally, whether an intended or unintended message, the ad shows a woman insisting on condom use but does not show her learning how to ‘pinch, leave and inch and roll’; only the young man is taught how to do this. This implies that Charlene does not need to know how to put on a condom. Such representations can inadvertently reinforce the cultural expectation that men should have more sexual knowledge than women. From a message design and production standpoint it is clear that producers must present clear, simple messages with low information load in each advertisement. The production team has to be realistic and balance this aspect of message creation to ensure that the target audience does not suffer from information overload.

The third research question explored the features utilized in Jamaican HIV PSAs, focusing on features that are likely to result in the audience’s attention, comprehension,
yielding and retention of the messages. With regard to attention, this study found that the majority of the ads (seven of the eleven) utilized an appropriate number of cuts to gain the audience’s attention, but underutilized informative objects (only four ads used such objects). Additionally, the most common audio category was the least likely to get and keep audience members’ attention: talking (monologue or dialogue) without background music or sound. Since television advertisements usually have an audience with low levels of involvement, HIV PSAs should ideally use more eye-catching features and sound saturation, which is more appealing to audience members. Apart from using moderate pacing, the lack of attention grabbing elements confirms findings from previous research on national HIV PSAs in Hong Kong (Chang, 2004).

Unlike earlier research, this study found that the information load, type of information and recommendations were of the type likely to facilitate comprehension of the message. For example, Johnson, Flora & Rimal (1997) found that in PSAs from around the world, “the relatively high information load, vague information, innocuous recommendations, and inexplicit presentations make comprehension problematic” (p. 231). Chang (2004) found that PSAs from Hong Kong were sufficiently explicit verbally, but not visually. By contrast, the PSAs examined in this dissertation had relevant information, specific recommendations, and appropriate information load. There was however, room for improvement in the verbal and visual explicitness, with the majority of the PSAs categorized as low on visual explicitness (eight of the eleven) and only two ads categorized as high in verbal explicitness.

This study found that the ads made greater use of more proximal sources (nine versus the use of two expert sources) which can encourage affinity between the audience
and the sources thereby increasing the likelihood of audience members yielding to the message. Positive representations of proximal sources can lead to audience members adopting the modeled behavior (Bandura, 1986) so this is an encouraging finding. However, the aforementioned stereotypical representations, particularly of men, could result in audience members modeling the wrong behavior, which would work to undermine the goals of prevention efforts. This seemed particularly likely in the bar scene version of *Stick to one partner* (NHP, 2008a) targeting older men. The first 20 seconds of this 45 second PSA are used to show the promiscuous behavior of the protagonist, who eventually decides to stick to one partner. Taken as a whole the message seems clear, but given audience member’s possible low involvement with such messages, dedicating almost half of the ad to showing the promiscuous behavior that the ad is trying to combat can result in the target audience getting the wrong message: that the PSA supports promiscuity.

Yielding was also facilitated by the provision of feasible recommendations in nine of the eleven advertisements. The provision of feasible recommendations in a majority of the ads bodes well for their effectiveness, which is a definite improvement when compared with the findings of previous similar studies. Chang (2004) found that only two of 29 ads provided feasible recommendations, prompting a call for the provision of more behavioral guidelines and negotiation strategies. In the current study, condom use was the most specific and feasible course of action recommended, with one ad – *Pinch leave an inch and roll* (NHP, 2008c) – going further to stipulate how to use a condom and other ads highlighting the need to use a condom every time.
Eight of the eleven PSAs utilized an emotional appeal, which is more likely to facilitate audience retention of the message. However producers must be cautious of using negative emotional appeals, such as those that invoke fear, shame or guilt, as they can be futile (Bastien, 2011; Brennan & Binney, 2010; Muthusamy, Levine & Weber, 2009). For example, Muthusamy, Levine and Weber (2009) found that the use of a fear appeal to persuade people who are already fearful of HIV/AIDS is likely ineffective.

Subtleties and Absences

Overwhelmingly heterosexual representations were present throughout all the advertisements, with none of them making any overt references to other possible sexual orientations, such as bisexuals and homosexuals. Despite the fact that there are only heterosexual couples featured in the advertisements, some of the more recent ads use the generic term ‘partner’, which could be a subtle choice allowing for messages to appeal to couples who do not fit within the dominant heteronormative HIV/AIDS discourse. Producers of HIV prevention messages must be extremely careful in the creation of these advertisements because homosexuality is still stigmatized in Jamaica (Human Rights Watch, 2014; White & Carr, 2005). Anal sex is illegal and male cross-dressers as well as openly gay men have been the targets of abuse. While the NHP uses other methods to reach men who have sex with men (MSM), none of the advertisements was aimed at targeting this group because there would be widespread public outcry against such representations on national television. In fact, an advertisement in support of LGBT Jamaicans was produced in 2011 by Jamaica AIDS Support, but all of the local television stations refused to air it, so it has been shared on YouTube.
The under-representation and exclusion of homosexuals from media campaigns are an example of symbolic annihilation (Gross, 1991; Tuchman, 1978). This process of symbolic annihilation results in the perpetuation of social inequality, particularly for marginalized groups such as men who have sex with men (MSM), who already face high levels of stigma and discrimination in Jamaica (Andrinopoulos, Figueroa, Kerrigan, & Ellen, 2011; Figueroa, 2014; White & Carr, 2005). The absence of this group from HIV advertisements not only has negative implications for how they negotiate their gender and sexual identity, but it also negatively impacts prevention efforts overall. Since the HIV infection rate for MSM in Jamaica in 2012 was 38% (UNAIDS, 2012), there is an urgent need to address this group and the glaring absence of representations that would reach MSM is cause for concern.

Another notable absence is the lack of reference to women who have multiple sexual partners. The NHP reports that “females account for the majority of cases in the 10 – 29 years age groups” (2014, p. 24). Additionally, four times as many young women have been reported with AIDS as young men in the 15 - 19 age group (NHP, 2014). This is in keeping with a continuing trend of an increase in the number of HIV and AIDS cases in Jamaican women: prior to 1995 37% of AIDS cases were among women and by 2012, women accounted for 46% of HIV and AIDS cases (NHP, 2014). This sustained increase in the number of cases among women has been attributed to “exposure through their MSM or other high risk male partners” (NHP 2014, p. 24), which is a continuation of the propensity to view men as the perpetrators of bad sex and women as the victims of bad sex (Jolly 2007).
Research has highlighted the fact that women do engage in multiple sexual partnerships, with money and feelings of independence being the main motivators (Chevannes, 1999; Kempadoo & Taitt, 2006; Wood, 2007; Darlington et al., 2012). This increase in the number and percentage of women with HIV could therefore be at least partially attributable to women having multiple partners, and engaging in other high risk behaviors such as unprotected sex. The absence of television messages targeting women with multiple sexual partners could be doing women a disservice, as it is based on cultural norms and beliefs about gender and sexuality that discount the possibility of female promiscuity.

Limitations

This analysis is not without its limitations. The main limitation is that the sample did not include all advertisements produced by the National HIV/STI Program, only those produced and aired between 1999 and 2012, and available on the program’s website. This time frame and sample population excludes PSAs produced prior to 1999 and after 2012, since they were not available. Analysis of all PSAs produced by the National HIV/STI Program would have provided a more complete picture of the gender representations and message features. Another limitation is that this study did not analyze other televised programs about HIV such as drama series, which would also contribute to our understanding of gender portrayal in HIV/AIDS messages.

As it concerns the message features, the focus on individual categorization of each element of the PSAs may be considered a limitation. Though it is important to identify specific characteristics that can contribute to the cognitive processes that enhance attention, comprehension, yielding and retention of the message, the researcher
recognizes that these processes do not work independently. For example, message features that are likely to result in lower attention will also impact the subsequent categories, but this study does not focus on the possible cumulative impact of such message features. It is therefore vital to point out that my assessment of the message features does not necessarily convey the PSA’s possibility to engender behavior change in the viewer as the effects of messages may be different in real world settings (such as viewing context).

Contributions to Critical Media Studies

In this dissertation I employed textual analysis to examine three aspects of Jamaican HIV PSA messages: the gender representations presented, the socio-cultural norms underlying those representations, and the message features employed in the ads. From a cultural studies and feminist perspective, through deconstruction and analysis of the ads, this dissertation provides an examination of the politics of media representation at play in televised Jamaican HIV/AIDS messages. While much of the previous research on HIV PSAs has employed quantitative methodologies to assess and report the number of people impacted and the size of those effects (Kim, Park, Yoo & Shen, 2010), this study placed emphasis on critical analysis of the ads. This is in response to the gap apparent in the extant literature, despite calls from scholars and health communication practitioners for more research focused on textual analysis of public health media campaigns. This study found that the gender representations in the PSAs range from stereotypical to empowering, with a clear progression from stereotypical gender representations in older advertisements, to transformative and empowering representations in more recent ads. This is important because in order to effectively tackle
gender and sexuality in HIV/AIDS prevention, media and communications campaigns should aim to reduce the possibility of reinforcing damaging sexual and gender stereotypes (Gupta, 2000).

Textual analysis is a highly neglected tool in health communication research regarding HIV (Khan, 2014), so this research employed that method to assess the meanings behind the messages, thereby providing valuable insights on media use in HIV behavior change communication. Since the underlying gender and sexual norms of a culture are either intentionally or unintentionally embedded within texts such as advertisements, much can be learned from the gender representations in the campaign materials that were analyzed. This study found several social and cultural norms embedded in the advertisements which center on prevalent concepts of Jamaican masculinity and femininity. These include: multiple sexual partners, male dominance and irresponsibility as well as female assertiveness, love and trust. The findings of this study therefore improve our understanding of how social and cultural norms are shared in HIV/AIDS messages, even those that seek to be transformative. Finally, by examining HIV message features, this dissertation also outlined the current state of message design and production, with a view to understanding how it may be improved.

Implications for Practice

The findings of this analysis have applied implications as it outlines the continued use of stereotypical gender representations, even when the intervention attempts to be gender sensitive, transformative and empowering. Producers of HIV messages must be cognizant of the fact that the gender representations shared through PSAs can have unintended consequences. An essential part of addressing gender in health
communication campaigns is considering the gender inequalities and stereotypes that exist within a society, with a view to ensuring that campaign materials do not reproduce or reinforce such stereotypes (Zaman & Underwood, 2003). Pre-production research should be conducted among the target audience to ascertain relevant gender and cultural norms and how best to address them. As previously mentioned, the National HIV/STI Program began gender mainstreaming because they are aware that harmful gender norms are crucial factors impacting Jamaica’s HIV epidemic (NHP, 2012a). Gender mainstreaming efforts included training of staff on gender analysis skills to help them identify and address gender dynamics in HIV intervention programming. This training should also be extended to outside consultants who are hired to produce television advertisements and all other forms of communication materials.

Targeted media messages should also be prepared to reach the LGBT community in Jamaica. Before this can be done, more formative research is needed to fully understand the nature and magnitude of the HIV epidemic in this group. In the South African context, Lane et al. (2011) explain that the absence of HIV data and the continued criminalization of homosexuality “may reinforce each other, keeping the full extent of the HIV epidemic among MSM from being addressed” (p. 626). This holds true for Jamaica: although the most recent HIV/AIDS knowledge attitude and behavior survey found that 25% percent of males had same sex intercourse (Hope Caribbean, 2012), there is little data and no public media campaign addressing this group. The fact that only 25% percent of men reported engaging in same sex intercourse speaks to the negative attitude to male homosexuality that pervades Jamaican society. Reticence on the part of private individuals, politicians, and health officials to publicly address HIV in the LGBT
community is an ironic but understandable reality: Jamaica’s vibrant gay population is an open secret, yet the country has been named one of the most homophobic in the Caribbean region and the world. Innovative media and communication strategies, including the use of technology and social media, are therefore needed to reach this vulnerable population, as well as the general public, to prompt a reduction in stigma and discrimination, which is a driver for the spread of HIV among Jamaican LBGT people.

Finally, based on the findings of this and previous research (Hope Caribbean, 2012), it is evident that the HIV communication plan and media campaign materials need to be redesigned. In 2008, only one third of the population reported knowledge of HIV media messages; by 2012, this had increased to approximately half of the population (Hope Caribbean, 2012). Although media messages have increasingly had a positive impact on behavior, the HIV KAB study found that 50% of the media-using population misinterpreted campaign messages (Hope Caribbean, 2012). An overhaul of television PSAs and supporting media campaign materials should be approached from a perspective that sees media and communication as cultural representations of HIV that have significant influence in shaping perceptions of the disease (Johnson, Flora & Rimal, 1997). The current batch of PSAs focuses on increasing knowledge with the intent of fostering changes in attitudes and behavior. This is laudable, but it highlights a focus on the gaps in knowledge while researchers have suggested that campaign planners should instead be asking and answering the question: “How do we want the public to think about HIV?” (Johnson, Flora & Rimal, 1997, p. 232). The authors argue that such an approach would involve addressing gender representation, portrayal of sexual partners relating to each other, and media construction of the disease (Johnson, Flora & Rimal, 1997).
approach would also facilitate the creation of PSAs with more positive representations of sexuality that focus on the reasons why people engage in unprotected sex, such as love and trust. In fact, the Jamaica HIV KAB survey (Hope Caribbean, 2012) found that 46.9% of respondents did not use a condom the last ten times they had sex due to ‘love or trust of partner’ so ads need to address this idea that insistence on condom is a sign that you do not love or trust your partner. Media campaign planners could therefore try to re-brand safe sex, especially condom use, as a sign of love.

Future Research

This study is an initial step in understanding and addressing the gender representations, cultural norms and message features in Jamaican HIV television advertisements. Future studies can broaden this understanding by researching different forms of HIV media campaign materials including posters, brochures, radio PSAs, longer television content such as short and long form drama series and entertainment-education programs. Additionally, research should be done with Jamaican media producers to understand how they view gender, socio-cultural norms and how they address them in the PSAs. Those findings could then be compared with what is actually portrayed in the ads that they produce.

Audience research is also needed to understand how the audience decodes televised HIV PSA messages. That type of research would also allow for intersectional analysis, which was not possible for this study. Since audience members can either assume the dominant/hegemonic position (accept the preferred reading), the negotiated position or the oppositional position (Hall, 1980), it is essential to conduct research on audience members who consume televised HIV/AIDS messages to fully grasp viewers’
comprehension of the current gender representations, socio-cultural norms and messages features. Producers would undoubtedly benefit from a better understanding of audience members’ negotiated and oppositional readings of these texts. Information of that nature would allow campaign planners to create messages that take such readings into consideration when preparing television content.

Though textual analysis provides one possible interpretation of the text, McKee (2003) explains that “texts are interpreted in different ways by members of varying sense-making communities” (p. 69). The producers of Jamaican HIV PSAs cannot fully account for every factor that will influence how audience members engage with the media product, but they should monitor audience reception of media messages. This will ensure continued improvement in the quality and likelihood of the audience understanding, accepting and using future HIV messages.

Future research could also employ similar critical cultural analysis to HIV/AIDS messages in other Caribbean countries as well as resource poor settings in other regions of the world that rely on media as key tools in combating this disease. The recall studies and other quantitative research are necessary, especially in a development context that is focused on showing results, but that should not be the only type of research. The underlying gender and sexual representations, as well as the socio-cultural norms in HIV prevention media messages should be analyzed in different contexts to better understand if gender inequalities may be perpetuated by well-meaning ad campaigns. If there is no critical analysis of these portrayals, there can be no movement towards providing more transformative and empowering representations, which are needed to effectively combat this disease. This study could be replicated in other Caribbean countries, which would
also allow for comparative analysis of the different gender representations and cultural norms evident in HIV television ad campaigns.

Finally, scholars should seek to understand the insider/outsider phenomenon I articulated in this study. There are advantages and disadvantages that come with being both an insider and outsider to the culture one is studying. It would be particularly useful to gain perspective from researchers who experience this phenomenon as well as their study participants (in the case of research with human subjects). Considering the insider/outsider phenomenon in research reflexivity and positionality will undoubtedly add to current knowledge regarding qualitative research.
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