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Introduction

This project aims at measuring the reception of the KwaZulu-Natal Department of Education and Culture Life Skills Division’s JAE (Just About Education) HIV/AIDS Information Tour, analysing the performance of the show at KwaSanti Secondary School (Marianhill). The project intends to assess the effectiveness of the Information Tour in conveying knowledge and attitude change. We elicited the response of the learners of KwaSanti Secondary School to the campaign’s use of

a) Prominent figures  
b) Music  
c) Drama

The project discusses the employment of live mass information and or entertainment, based on a tradition of live mass political communication, in terms of broader principles of Entertainment Education (EE).

Our approach is based on a comparison between the JAE performance and the South African tradition of using mass meetings as a form of public communication during the anti-apartheid struggles of the 1980’s. Mass meetings became a preferred means to disseminate information to mobilize people against the common enemy, the National Party Government. Many post-apartheid institutions in South Africa today use similar tactics to inform and mobilise the public against health risks and disease (Tesfu, 2003). The project therefore endeavours to sharpen the definition of a broader question of: does the tradition of mass mobilisation, developed as a communicational form to oppose Apartheid, have comparable effectiveness as a health promotion strategy, specifically with regards to HIV/AIDS in modern South Africa?

Background

The concept of the JAE HIV/AIDS Information Tour emerged from the collaboration between the Director of NB Music Records, Noel Kok, his artist Jae, and the Minister of
Education and Culture of KwaZulu-Natal (KZN), the Hon. Mr Narend Singh. The campaign’s anchor was the inclusion of two of Jae’s chart hits, indicating that the broad strategic form of the tour could be subject to analysis in terms of Entertainment Education concepts. Jae is a prominent pop star in the South African music industry, with a number of chart hits and enormous popularity among the youth of South Africa. Since 2002, Jae has been performing her songs, spreading the message about HIV/AIDS, and promoting positive lifestyles at schools in Cape Town, Johannesburg and Durban. The tour visited all the KZN high schools that excelled in the grade twelve examinations in 2003, being performed at the top four schools in each of the twelve Provincial educational districts. As a role model Jae communicates with high school learners about HIV/AIDS, her celebrity status does not just arise from her as a pop star, but also from the fact that she is an AIDS activist in South Africa (appendix 29: 1-8).

The show’s organizers teamed up with commercial entertainment group ‘Break Entertainment’, who recruited actors Ian Robertson and Quincy Fynn to workshop a performance. Also recruited were popular radio disc jockeys Babalwa from East Coast Radio and Khatide Ngobe, popularly known as ‘Tshathugodo’, from Ukhozi FM. The tour strapline, JAE, stands for ‘Just About Education’ and plays on the artist’s name to attract the attention of a youth audience. The campaign was designed to educate learners about AIDS and communicate through song, dance, narration and drama, emphasizing the message that “HIV/AIDS is real! HIV/AIDS kills! HIV/AIDS can be avoided!” The production toured 46 schools around KZN in a month and a half and spread its message to 18 000 learners. There was a proposal at the time this research was in progress to expand the campaign throughout other provinces in South Africa, but no decision had been reached at the time of writing. On March 8, 2004, The Department of Education and Culture of KZN hosted an event at the Pietermaritzburg Show Grounds, for 7000 learners honouring the contribution of the JAE HIV/AIDS Information Tour.
**Theories**

**The Communication Design and Evaluation System (CODES)**

The Communication Design and Evaluation System (CODES) for developing and designing EE campaigns (Piotrow, Kincaid, Rimon, and Rinehart, 1997), was adapted to structure the research methodology for this project, and to clarify which of the reigning EE models were best suited for a reception analysis of the JAE performance. The model is made up of three stages: formative evaluation (pre-intervention), process evaluation (intervention), and impact evaluation (post-intervention) (Piotrow *et al*, 1997). A graphical representation of the CODES model as an evaluation process can be found in Appendix 26.

**Social Marketing Theory**

Social marketing theory, first proposed by Kotler and Zaltman in 1971, is defined as “the design, implementation, and control of programs calculated to influence the acceptability of social ideas and involving considerations of product, planning, pricing, communication, distribution and marketing research”(Piotrow *et al*, 1997: 19). The process of exchange is an important element in social marketing theory. Individuals, groups or organizations exchange resources for perceived benefits, such as looking or feeling better (Glanz and Rimer, 1995:33). Although not an explicit EE methodology, social marketing techniques are valuable in the identification of campaign audience segments, and in the identification of audience needs.

Social marketing methods can therefore be implemented at every step of the health campaign, being applied in six stages: “analysis, planning, development of plan elements, implementation, assessment of in-market effectiveness and feedback to the first stage” (Glanz and Rimer, 1995: 34). This suggests that constant research and evaluation needs to be conducted at every stage of a serious health campaign in order to ensure a successful programme.
Because social marketing practice is based on commercial marketing methods, emphasizing consumer responses (Glanz and Rimer, 1995:33), its use in health promotion shifts this focus onto the needs and wants of the target audience. The health campaign is therefore designed around the information gathered using these marketing techniques regarding the perceptions of the defined target audience (Glanz and Rimer, 1995:34). This ensures that the campaign’s design takes account of the needs and wants of the consumer or target audience, being specifically created to meet their demands.

Of the six stages of social marketing implementation, the present research examines a specific performance of the JAE tour in terms of how its reception reflects the effectiveness of its planning, development of plan elements, and implementation. We employ the Diffusion of Innovations theory of Everett Rogers (1962/1995) to analyse implementation through audience responses to the JAE performance; we assess the effectiveness of using overall mass-performance genre for health communication in terms of Albert Bandura’s Social Learning Theory.

**Diffusion of Innovations Theory**

The diffusion of innovation is “the process by which an innovation is communicated through certain channels over time among members of a social system” (Rogers, 1995:35), and the theory describes the elements that affect people’s means and thoughts as they go through the process of adopting a new idea or technology (Piotrow et al, 1997:22). The successful diffusion of ideas or information, whether produced spontaneously or as a result of planned actions, changes an audience’s beliefs. The diffusion of innovations theory arises from the observation that a new idea is not accepted immediately, but rather in a relatively slow process. Through a continuous process these beliefs could affect actions thus creating social change (Rogers, 1995:6). If the rewards are seen by others to be beneficent then the idea becomes more popular. This popularity may last for quite some time but eventually dwindles when other new technologies or behaviours are proposed (Baker, Thomas, Rogers & Everett, 1998:17).
Through using diffusion of innovations to assess the JAE play one can gauge the level of reinforcement the performance’s structure offered to aid in behaviour change. We focus on five central concepts:

1) the communication channel;
2) the innovation-decision process;
3) the accept-reject decision;

The first concept is that of the communication channel (Svenkerud & Singhal, 1998:195-196). Anti-apartheid mass meetings of the 1980’s have influenced the JAE performance is one of mass communication, which we theorise.

The second is that of the innovation-decision process (Rogers, 1995). This refers to a sequence of decision-making. The sequence starts with knowledge of an innovation, which then leads to the formation of an attitude towards it. The next step is the decision to reject or to embrace and, if the latter occurs, to implement the innovation. Lastly, the decision is confirmed if reinforcement is made by the target member (Rogers, 1995:161).

The third concept is that of the five perceptual attributes, which are relevant to the latter process. The first attribute is that of relative advantage, which refers to the benefits associated with an innovation. The second is compatibility. Here the innovation is judged according to how compatible it is with the experiences, values and needs of the target member. Complexity is the third attribute, which refers to the difficulty of understanding and application. The fourth is that of trialability which refers to the degree of experimentation available before adoption. The last attribute is that of observability. This is the extent to which the developments caused by the innovation can be seen (Svenkerud & Singhal, 1998:195-196).

The fourth concept is that of opinion leadership. Opinion leaders are people in society who are able to frequently influence others attitudes or overt conduct in a desirable way (Rogers, 1995:27). This relates closely to the fifth concept of homophily which concerns
the degree to which people see themselves as similar to someone else. This is an important attribute in the diffusion of messages as the more homophilous people are the more effective communication becomes (Svenkerud & Singhal, 1998:195-196).

**Social Cognitive (Learning) Theory**

The social cognitive theory is used to frame the role of learning through communication.

Bandura’s social cognitive (learning) theory (1977, 1986) is at the core of understanding the process of entertainment-education. Bandura proposes that audiences identify with characters in programs that are celebrities, attractive, use colloquial language, and are similar to them in age, status and race (Singhal and Rogers, 1999: 211). Audience members relate to characters that express their emotions, and allow the audience insight into their lives and actions (Piotrow et al 1997: 22). Bandura states that individuals learn by watching the behaviour of others (both positive and negative role models) in real life or on television (Bouman, 1999: 60). Audiences can then choose to copy the desired behaviour or discard it. Thus, Bandura (1977&1986) holds that the “behaviour of [role] models in the mass media also offers vicarious reinforcement to motivate audience members’ adoptions of the behaviour”(Piotrow et al, 1997: 22). “This vicarious learning usually is more effective and efficient than direct experiential learning” (Singhal and Rogers, 1999: 211).

Behaviour of individuals is determined as a result of expectancies, which are the beliefs about the results of an action according to rewards and punishments, and incentives, which encourages positive behaviour. There are also negative reinforcements that discourage harmful behaviour (Govender, ?: 6). Thus, the process of people watching and copying the behaviour of role models, and using self-efficacy, can result in behaviour change.

Social cognitive (learning) theory also includes ‘reciprocal determinism’, which is an interaction that occurs between three factors, firstly, personal determinants, such as
cognitive, affective and biological events (Bandura, 1994: 5). Secondly, it occurs through individual’s behaviour, which embodies self-efficacy, it is a related theory that is concerned with an individual’s belief that they can “control their own motivation, thought processes, emotional states and patterns of behaviour” (Bandura, 1994: 2). Self-efficacy is also a social construct. “Collective systems develop a sense of collective efficacy—a groups shared belief in its capability to attain goals and accomplish desired tasks” (Pjares, 2002: 5). And thirdly, environmental influences, for example economic conditions and socio-economic status, which affects behaviour by the way these factors “influence people’s aspirations, self-efficacy, beliefs, personal standards, emotional states and other self-regulatory influences” (Pjares, 2001: 2-3). Change in the environment and behaviour change, are long-term processes that take many years and many strategies for change to occur (Parker, Dalrymple and Durden, 1998).

**Methodology**

The research was conducted at KwaSanti Secondary School in Marianhill on the 10th of March 2004 when the JAE HIV/AIDS Information Tour performed at the school. This was followed by post-evaluation research on the 19th of April 2004.

In the formative evaluation stage a survey was distributed before the performance to twenty pupils of different ages and sexes which gauged the existing beliefs, values and knowledge of the learners regarding sexuality and AIDS (Piotrow et al, 1997).

In the process evaluation intervention stage we determined the audience’s response throughout the performance to certain characters and key moments of the show (Piotrow et al, 1997).

The impact evaluation/ post-intervention stage ensued directly after the performance, when a focus group was conducted. The focus group design followed the guidelines provided by Richard A. Kruger in “Developing Questions for Focus Groups” (1998). The focus group was conducted using the questional route as opposed to the topical route. Ten
pupils consisting of five girls and five boys (half of the previous survey group) were used in the focus group to evaluate possible knowledge and attitude change. We then used the longitudinal method for sampling our survey and focus groups of learners. This method “uses the same random sample of respondents repeatedly for each round” (Piotrow et al, 1997, 137).

A month later we returned to the school and conducted another focus group with the same ten learners to evaluate their recollection, knowledge and attitude change that was communicated in the JAE HIV/AIDS Information Tour. We also interviewed a number of educators to determine if there was a noticeable difference in the knowledge and attitude change of the learners, regarding HIV/AIDS after the performance.

We also interviewed the cast of the JAE HIV/AIDS play in order to gain insight into the inner workings of the production.

**Analysis using entertainment-education theory**

**Analysis using social marketing**

Research plays a crucial role in the social marketing theory in the gathering of information regarding the needs of the target audience in the design of the health campaign and at every stage of the health campaign (Glanz and Rimer, 1995:33). This ensures that at every step of the health campaign the needs of the target audience and the objectives of the health campaign are being met. However, the JAE performance did not conduct any research at any stage of the campaign. The actors’ workshoped the play and made decisions regarding themes. They already had a selected target audience of semi-rural high-school teenagers and thus created the style and dialogue of the performance to match their personal perceptions of what teenagers want. Perhaps, if more research were conducted the JAE performance would have had more information on how to further enhance the intervention. For example, it could have been established that teachers and learners wanted posters or booklets to further reflect on the message of the performance.
However, as a commercial technique involving a process of voluntary exchange the social marketing theory was used by the JAE performance. The Department of Education and Culture of KZN wanted a performance to reward the top schools. They also did not just want an entertainment performance but one that would educate as well, especially on the topical theme of HIV/AIDS. This way the Department of Education and Culture of KZN would look as if they are addressing the serious problem of HIV/AIDS and educating the learners. The JAE performance also made NB Music Records and Break Entertainment look good in relation to being concerned with social issues such as HIV/AIDS. Jae, as an artist, also benefited from the JAE production. Being involved in the production gave her image social prestige and showed a caring side of her personality. It also promoted her music and image to the learners that watched her thereby providing her with more publicity. The Department of Education and Culture of KZN, Break Entertainment, NB Music Records and Jae made these exchanges for their money, effort, time and talent.

The social marketing theory can also be applied to the JAE production in the context of the marketing mix. The marketing mix consists of the four P’s: product, price, place and promotion. The product is the JAE production with its use of song, dance, dialogue and role models. The product is also the message or the action that is being encouraged by the JAE production (Glanz and Rimer, 1995:35). The message of the production is abstinence, condom usage, getting rid of the stigma attached to HIV/AIDS, and the message that HIV/AIDS is a disease that you can live with.

Price is the second element of the marketing mix. Although the learners did not directly have to pay to watch the production there were other costs involved. The learners would have to pay their school fees in order to attend the school in which the production took place. Another cost involved is the intangible cost that is needed for the behaviour change. These include the fears of the actions and the consequences of adopting the behaviour that was advocated (Glanz and Rimer, 1995:35). Many learners would be afraid to say “no” to their partner in abstaining or asking their partner to use a condom. The fear would be that they would lose their partner and be left alone. Another price is
the actual cost of condoms if the learners need to buy them, or the stigma attached with going to a clinic to ask for free condoms. Price is also evident in the fear that surrounds the use of condoms. Many of the learners were afraid to use condoms because of the myths surrounding the condoms. Another cost is the fear of being stigmatised by the community if the learners are openly communicative regarding their HIV/AIDS status, or if learners are associated with people who are openly HIV positive.

The third element of the marketing mix is place. The JAE production performed wherever they could at the schools. Many of the schools did not have halls or stages and so the JAE production would perform wherever they could, such as open courtyards. The JAE cast members travelled to each of the schools in a mini-bus.

The fourth element of promotion was not really evident in the JAE production. Break Entertainment contacted the schools and informed them of the date and time of the production. There was no prior advertising or promotion to the learners of the school.

**Analysis using Diffusion of Innovations Theory**

In relation to the concept of the communication channel, the JAE performance used mass communication, which we theorise was influenced by the mass meetings of the 1980’s. When reflecting on how the mass communication was used it becomes apparent, in comparison to the plays being performed and work being done by other organisations and NGO’s, that research should have been conducted when choosing the best theoretical format for the JAE performance.

The performance was organised using one-way communication, as were the mass meetings. Thus, information was disseminated from the actors to the audience. The learners at KwaSanti were encouraged to chant phrases with the actors, but were not able to participate in any other way. Research has found that two-way communication is far more effective in disseminating information to an audience. “One of the main lessons learned over the last 25 years is that effective communication begins with the audience,
the client, or the consumer and continues over time as a process of mutual adjustment and convergence” (Pitrow et al, 1997:18).

Drama AIDS Education (DramAidE) “is a university based, independently donor funded, NGO,” situated at both the University of Zululand and the University of KZN, Durban campus, “that uses participatory drama and other methodologies for HIV/AIDS, life-skills and sexuality education” (DramAidE annual report, 2000/2001:2).

Participatory communication aims to, “liberate and emancipate people so they are enabled to meet their basic needs and strengthen democracy” (Tufte, 2001:27). Many varying and differing techniques are employed, such as dialogical communication and participatory plays. Mass and micro media can be used as well as work shopping at community level (Tufte, 2001:27-28). Projects such as “Mobilising Young Men to Care: Phase Two,” initiated by DramAidE, use participatory approaches and enable students to workshop their own plays, thus facilitating them to learn much in the process (DramAidE annual report, 2000/2001:10).

It thus becomes apparent that research within the field of entertainment education should have been conducted before the implementation of the performance. Claurainne Swales from ‘Break Entertainment’ stated in a telephone interview that this was the first performance that the company had presented that contributed to social awareness, and that no one in ‘Break Entertainment’ had any experience in the field of entertainment education. Furthermore, no evaluation had been carried out on the performance. If formative research had been conducted, which involves many elements such as needs assessments, in-depth interviews, focus groups and pre-testing; it may have become apparent that mass communication was not an effective dramatic form in relation to education. This is not only the responsibility of the companies that performed the play, but also that of the Department of Education and Culture of KZN who should ensure a high quality of education in all their funded performances.

Generally, dramatic performance as a channel of communication is useful in that it has
the ability to be performed in a wide variety of situations to people who may not have access to other mediums such as television and radio. As is well know “issues of information equity and access [have] certainly become political issues” (Berger, 2000:88). Performances such as this may be able to lessen the information divide between rural and urban South Africa to some extent. Furthermore, a performance is able to target a particular audience to some degree and to fit the message accordingly. In the JAE performance young celebrities and DJ’s were used and they spoke in English and Zulu. The English teacher at KwaSanti Secondary School, is quoted as saying that the learners “loved it”, and that the performance was “unique” in the youthful way that it was presented (appendix 3: 4).

When discussing the innovation decision process it is apparent that the learners of KwaSanti were knowledgeable about the subject of AIDS before the performance took place. When asked in the pre-performance questionnaire if they thought that condom use was important in reducing the risk of AIDS, 85% said ‘yes’ and 15% said ‘no’. When asked if they believed that being faithful to their partners was important the answer was unanimous, 100% said yes (appendix 27: question 12).

It can be seen from the focus group that many learners were persuaded by the performance about certain issues of stigma and sexual activity and have begun to implement them. When asked in the second focus group if the learners had discussed AIDS as a result of the play a learner answered that he and his partner had agreed to stop having sex with other people. He said, “so we spoke about it and we agreed that I should stop it, and he should stop his ways and be together” (appendix 2: 164-170)

Another learner stated:

I want to say that the play helped me as it improved my attitude towards people with AIDS. My aunt has a friend who was HIV positive, and she used to [come to] my house and pay my aunt and my family a visit. Before, I used to be scared of her … but now my attitude has changed very much because I’m now comfortable, you know with sharing the same equipment with her (appendix 2: 142-148)
Thus, some learners’ behaviour was affected in the month after the play. However, since
this is not a long-term study the learners’ future behaviour cannot be recorded. It is
probable that the learners’ behaviour would revert to its initial stage without
reinforcement. The English teacher at KwaSanti said in an interview that the school has
about one play/speaker a term. However, unlike the JAE play, which was “different using
music and dance” the children get bored of these plays or speakers (appendix 3: 34-35).

Reinforcement could take the form of other entertaining plays. The English teacher
stated that if a play were interesting the children would want to go further and read about
it (appendix 3: 46-48). It is doubtful that one speaker a term would be enough to
reinforce a message and thus the health department should organise for as many AIDS
plays as possible to tour schools in South Africa.

Educational materials could also be provided along with the play. The life skills educator
stated that they do not receive life skills manuals from the department of education and
thus have to use their own resources (appendix 4: 1-4). Therefore, educational materials
would be well received. Educators should also talk about the play in class, especially the
life skills educator. This was done at KwaSanti as stated in appendix 3 (23-26).

It is important that institutions other than the school provide AIDS messages. The more
reinforcement from other institutions and aspects of social life the more likely the
message will be accepted by the audience (Govender & Petersen, ?). In a telephone
interview with Claurainne Swales from “Break Entertainment” he stated that no
surrounding clinics had been contacted to view the play (appendix 8: 27-29). It is
important that these types of supporting institutions are involved in diffusing AIDS
messages in order to reinforce educational health communication.

The JAE performance was trying to bring across a message of AIDS awareness and a
message promoting the fight against stigma. In accordance with the five perceptual
attributes the relative advantage of the innovation is that if one follows safe sexual
practices one is at less likely to catch AIDS. Furthermore, as discussed above in the focus
group example, the performance has made the learners more aware that anyone can catch AIDS.

The message of the play is compatible with many learners’ experiences as many have friends and relatives with AIDS and have seen the devastating effects it has on them. A learner stated in the second focus group that he had a niece that went to stay in Johannesburg and that when she came back she was sick. “She didn’t want to stay at home because she was scared that you could see her, the way she looked” (appendix 2: 133-141). Although, the message is compatible with this aspect it may not be compatible with others. An example would be a point that came up in the second focus group that many people believe that condoms turn into maggots and thus will not use them. Myths like these and practices such as having many sexual partners (discussed in an example above) are highly incompatible with the message of the performance (appendix 2: 275-308).

There is also much complexity in accordance to the safety message when referring to issues such as gender and poverty, ethical and religious norms etcetera (see Yun, Govinder and Mody, 2001). An example of a gender myth would be that a young male in the second focus group stated that it is difficult for a woman to be raped (appendix 2: 331-349).

Trialability seems impossible in a sexual context as one either abstains from sex or wears a condom when having sex or one does not. When referring to observability of the performance it would be valuable for a learner to hear fellow learners and educators talking about and agreeing with the preventative messages and messages against stigma in the performance, as they have been doing at KwaSanti, as this is a way of diffusing the message into society.

Opinion leaders are seen as important in the distribution of messages in society. This would usually consist of someone from the community, but in the context of the performance the celebrities and the actors would constitute this role. A learner in the
second focus group said, “if something is done by celebrities it’s easy for everyone to be convinced that AIDS really kills” (appendix 3: 95-97). It is important to note that the play did include a Zulu actress and a Zulu DJ, who also acted as a translator in the play. Therefore, the performance included the audience’s first language and thus, “the codes of elasticity of usage were relevant” (Airhihenbuwa, Collins & Obregon, 2000:7).

Jae in her performances at schools since 2002 has aided in diffusing messages about healthy lifestyles in relation to AIDS (appendix 29: 4-5). Thus, Jae can be seen as a role model to learners as she is an AIDS activist and is a household name in the music industry. Although she may be seen as a role model to some, she is not well known to others as a pop star and an AIDS activist. Fifty percent of the learners at KwaSanti Secondary School who answered the first questionnaire did not know who Jae was (appendix 9). In order to become an ideal role model she could appear more in the public eye over a long period of time by participating in radio and television talk shows and performing in similar productions to the JAE/HIV AIDS Information Campaign.

Similarity is relevant to the concept of homophily. Not only did the learners identify with their own language, but with the youthful phrases and music that the actors and DJ’s used and the age group of the performers themselves. The English teacher said, “There was a lot of music and the language used was like, you know, a young language and everybody was able to understand it” (appendix 3: 7-8).

**Analysis using Social Cognitive (Learning) Theory**

Elements of Bandura’s social cognitive (learning) theory are evident in the JAE HIV/AIDS information performance, even though the cast did not actively incorporate the theory into workshopping the performance. The cast members of the JAE performance were generally very attractive, for example Khatide, as all the girls thought he was gorgeous. A learner from KwaSanti Secondary School that was interviewed said, “I love Khatide, he is just so sexy” (appendix 2: 83). The cast members were all young and in their twenties, and they were all of mixed race groups, for example the actor who plays
TK is white and the actor who plays the grandfather is black. They are also of different statuses, for example, the singer Jae, is a popular South African singer, whereas most of the other cast members are students from the University of KZN. Thus the children would be able to identify with specific cast members that they recognised as being similar to themselves, and they may have even thought about copying the behaviour that was modelled.

There were also many celebrities in the performance, such as DJ Babalwa, DJ Khathide and Jae, who acted out, and advocated the importance of abstaining from sex or otherwise using a condom to protect yourself from AIDS. This would have influenced many children to rethink their current behaviour. Eighty nine percent of the learners at KwaSanti Secondary School said that they remembered the performance to a greater extent as a result of the celebrities (appendix 17).

There were many instances of positive and negative behaviour reinforcements in the JAE performance; these might have motivated audience members to adopt or discard certain behaviour that was advocated or discouraged. An example of positive behaviour reinforcement was TK who was a positive role model for the learners and a firm favourite; a learner from KwaSanti Secondary School said “TK talks the truth about sex and AIDS”(appendix 2: 72). TK found out that he was HIV positive, and had contracted it from his mother. He eventually came to terms with the fact that he had HIV, he realised that he could live with it and still lead a healthy lifestyle. A learner said, “I liked TK as he accepted that he had HIV”(appendix 2: 73). Many members of the audience may have identified with his plight, as there are learners at KwaSanti Secondary School, who have AIDS, and there are also many whose family members and friends have AIDS, or have died from the disease.

An example of negative behaviour reinforcement was when Adrian and Nolene had unprotected sex because they loved and trusted each other. The narrator reinforced the message by telling the audience that this behaviour was wrong as they should have used a condom, and as a result of them not using a condom Adrian contracted the virus from
Nolene. The actions and consequences of Adrian and Nolene’s behaviour, might have acted as a deterrent to make the audience aware that they should avoid risky practices. Many learners said that the message that stood out for them most in regards to the play was to abstain from sex, or else use a condom (appendix 17). It could be argued that the JAE performance reinforced a negative stereotype as the women (Nolene) infected the man (Adrian). The notion that women spread STD’s reinforces a particular stereotype of women’s sexuality.

The JAE performance worked at the personal level by giving the audience information. 72% of the learners at KwaSanti Secondary School said that they learnt something new (appendix 17). It also encouraged them to engage with the AIDS messages emotionally, and self-reflect on the play, and as a result change their attitude, towards, for example, stigmatising people with AIDS. Thirty three percent of the learners said that they were “very much so” influenced by the performance to stop stigmatising people with AIDS (appendix 17). A learner from KwaSanti Secondary School said, “my cousin had HIV/AIDS, but after the play I wasn’t scared of her”(appendix 2: 152).

The JAE performance only worked superficially at the behaviour level, as this level involves teaching people and communities skills to improve their self and collective efficacy. The Jae performance was a mass meeting that reinforces the learners self esteem through reward. The JAE performance tried to motivate the learners as a group by asking them “Can we live with AIDS?” and the learners responded by shouting “Yes, we can”(appendix 17). The performance attempted to teach the learners the skill of encouraging people, such as your friends and family members; to live positively with AIDS. It taught the learners that it was very important to communicate with each other and support each other. The scene in which the grandfather pleaded with TK not to commit suicide was very effective and emotional, and it may have taught learners how to deal with situations similar to this.

The JAE performance could have drawn on participatory methods that DramAidE uses; for example, they could have done various versions of the scene where Nolene and
Adrian have unprotected sex. They could have invited members from the audience to participate and play the roles of the characters. This would have aided in teaching audience members skills to handle different situations, thus it would have improved the learners self efficacy.

The JAE performance did not include environmental influences, such as trying to change audience member’s attitude towards gender roles and dealing with power relations in relationships, and violence towards women. A teacher from KwaSanti secondary school felt that it would have been appropriate and effective if the JAE cast had dealt with sexual violence in the performance. She said “I think it would be good, because I suppose they can identify with it. “We’ve got quite a few cases of young girls being raped”(appendix 3: 59-60).

This entertainment-education intervention should have been “accompanied by an adequate infrastructure for providing services or it will not have strong effects in changing audience behaviour”(Singhal and Rogers, 1999:212). Although, the Department of Education and Culture funded the JAE production, the department did not work parallel with the launch of the JAE HIV/AIDS performance, as it did not provide material for the teachers and learners at the various schools, even after many teachers had requested that they be given material related to the play. This would have aided in having a powerful impact on the learners, and it would have helped the learners deal with the AIDS messages in greater depth. Thus as a result of having no materials to work with, 67% of the learners said that they had not done anything in school that relates to the play (appendix 9). The Department of Health should have worked alongside the Department of Education and Culture to ensure that there was easy access to clinics, free condoms and Anti Retroviral’s for the learners. The project manager of ‘Break Entertainment’ said that none of the local clinics had been informed about the play or were invited to watch the play (appendix 8: 27-29).

**The JAE Production: A Mass Meeting?**
The JAE production has many characteristics of the South African mass meetings of the 1980’s. Tesfagabir Tesfu (2003) noted that although campaign designers and managers had claimed great success for the mass entertainment launch of their EE campaign to raise awareness of Voluntary Counselling and Testing (VCT) services at the University of Durban-Westville, students had responded equally to below-the-line messages in posters and pamphlets. The launch of the UD-W campaign had many parallels with the JAE events, and the students’ response at UD-W suggests that the mass-meeting based strategy may not be fully appropriate in dealing with HIV and AIDS.

Mass meetings can be seen as a large gathering of people intended to stimulate enthusiasm, alert the audience to urgent issues and/or to mobilise people against a common enemy. This is what the JAE play was trying to do, mobilise the learners against the HIV/AIDS epidemic.

Mass meetings evolved and became popular in South Africa during Apartheid. The United Democratic Front (UDF) was formed in 1983 as a result of a tactical decision by the liberation movement to strengthen mass resistance in the country (Chikane, ?,1). It consisted of a coalition of organisations who were opposed to the new Tricameral constitution, which excluded blacks from parliament (?, 1991:1). UDF youth organisations, in order to mobilise membership participated in mass meetings, boycotts, stayaways, and sometimes used coercive tactics (?, 1991:2). By 1984 the UDF movement had grown exponentially to the point that the security police could not effectively monitor their activities. As a result mass meetings were held “every hour of every day throughout the country” (Chikane, ?:1).

The Congress of South African Trade Unions (COSATU) was formed in 1985 and was the largest union federation in South African history. When the new constitution was passed COSATU participated in joint political demonstrations along with the ANC (?, 1991:1-7). Thus, these organisations mobilised against their common enemy: the government. The broad nature of these actions influenced the political atmosphere of the time.
The mass meetings were guided by decades of resistance. Influenced by the Congress Youth League the ANC established a ‘Programme of Action’ in 1948, which, like the UDF, proposed the use of boycotts, strikes, stay-at-homes, civil disobedience and non-collaboration, aimed at the abolition of all ‘differential institutions’ (Saunders, 1994:364).

Many other boycotts were executed during the apartheid era. Bus boycotts were held in the townships of Evaton and Alexandra in the former province of the Transvaal in the mid 1950’s. These boycotts carried on for a number of years and were frequently violent as a result of fighting between protesters and non-protesters (Saunders, 1994:389-390).

One of the most famous South African uprising of the apartheid era is that of the Soweto revolt. As a result of the Bantu Education programme black schools were ordered to teach in Afrikaans. Furthermore, they received scant resources and an inferior education curriculum. Thus, on the 16 of June 1976 a massive student protest was formed. This march was to be a peaceful one. However, in the march and in the violence that ensued hundreds of people were killed (Saunders, 1994:444-448). These examples are but a few of the many boycotts, protests, and oppositional actions that took place during the time.

Thus, it can be seen that the long history of resistance in South Africa created a supportive environment, which influenced the social structure of the country over the decades. It is important to realise that similarly the AIDS environment needs support from as many institutions, organisations and groups within society as possible; the larger the opposition, the greater the impact.

Many health promotions, plays, and speakers in South Africa today still use mass meeting tactics in order to inform and mobilise the public against certain health risks (Tesfu, 2003). However, health risks and disease, especially AIDS, is not a physical enemy which one can oppose by means of political mobilization methods. Unlike politics, a disease like AIDS tends to act through the way people conduct their intimate affairs, and by virtue of this is a somewhat more private matter. Furthermore, the mass meeting generally deals with political knowledge and attitude change, and does not necessarily
address factors crucial to confronting HIV such as, “psychological relationship, cultural affective-arousal, [and] situational influences that surround and inform the context for human sexual behaviour” (Kelly & Kalichman, 1995:907). Therefore it is important that interpersonal communication is included in health promotion.

**Recommendations**

The JAE production did not look at any of the broader social contexts surrounding HIV/AIDS. Part of the reason for this is that the cast members wanted to focus on a simple message, as they were concerned that the message would be too complex for second language English speakers.

> Ja, we did not want to use very complex themes, although these themes are also very important. We were just worried, um, about the level of English in the schools we were going to visit. We thought it would be difficult to communicate complex themes to second language English speakers (appendix 6: 16-19).

However, research revealed that the broader social messages surrounding the activities around sexual and reproductive health needed to be explored. “Increasingly too, there is the need to broaden the front of action to incorporate and co-ordinate aspects such as child abuse, rape, sexual harassment, abortion and contraception, amongst others” (Tomaselli & Shepperson, 1997:1&3). Many of the learners felt that sexual violence needed to be incorporated more into the production (appendix 2: 332-337).

The Department of Education and Culture and the Department of Health should have co-ordinated with Break Entertainment and NB Music Records, to provide an integrated multi-faceted approach. Many of the teachers and learners felt that educational tools, such as posters or booklets, should have been distributed in order for further reflection after the performance (appendix 1: 204-206). Reinforcement could also take the form of other entertainment plays that could visit the school repeating the message. A learner from KwaSanti Secondary School said, “they could also come again. We need to be reminded more often. Once, twice a year is, like, never enough. Once a month or even once a term is better. We will not forget then” (appendix 1: 211-212). This would create a
‘supportive environment,’ which is one of the key five actions of health promotion (Tomaselli and Shepperson, 1997:3).

The once-off JAE performance was not sufficient to create an attitude and behaviour change. Behaviour change is known to occur over long periods of time and thus an ongoing, long-term campaign needed to be undertaken. Long-term support from various government departments is essential for the success of a strategy in creating behaviour change (Tomaselli and Shepperson, 1997:4).

Relating to the findings of the performance as a mass meeting, it is suggested that more institutions (large and small) should be involved. This would create a supportive environment, which would enable behaviour change. For example local churches could have been invited to view the play and use the message from the performance in their sermons and activities in order for reinforcement to occur. The second questionnaire shows that churches provide a substantial amount of information on HIV/AIDS (appendix 28: question 19).

Another example is that a few of the clinics in the local area should have been invited to watch the JAE performance; they could have spoken to the learners about HIV/AIDS, and maybe even distributed free condoms. They could have also done a demonstration regarding how to use condoms safely, as many learners don’t know how to use condoms properly, and they could have educated the learners about condoms and dispelled the many myths surrounding the use of condoms. They could have also highlighted the fact that the learners are always welcome to come to the clinics and discuss issues that they are worried about and need advice on. This would have aided in breaking down the barriers between the learners and the staff at the clinic, as many learners are scared to go to the clinic as they feel that the staff will look at them “funny” if they request condoms (appendix 2: 329).

As discussed above in accordance with mass meetings, mass communication such as the JAE performance has been found to be ineffective in educating people about a private
disease such as AIDS, as it relates to sexual activity and stigma. Thus, more interpersonal communication needs to take place, such as the participatory methods used by DramAidE.

The Department of Education and Culture should have either contracted professional communicators or used the professional communicators to act in a supervisory role to Break Entertainment in undertaking the information tour.

Those approached should be already active in the field of health communication and public service communication and show an understanding of the strategies outlined this proposal. Partnerships need to be developed between the communication agencies contracted and between them and the target audiences. These agencies should have a proven record (Tomaselli and Shepperson, 1997:3).

It is imperative that the campaign planners of the JAE HIV/AIDS performance needed to have conducted research at every stage of the health campaign. “Communication programs rarely succeed by accident. They succeed as a result of a systematic planning and implementation process” (Piotrow et al, 1997:30). Thus Break Entertainment should have used a systematic process to develop their strategic communication program. They should have used a process such as CODES, which would have guided them in designing, implementing and evaluating the impact of their programme. By using evaluation it would have enhanced the likelihood of achieving a successful program as the campaign planners would have had to state the goals and objectives of the campaign. After which it is straightforward to “create programs to meet these objectives and develop instruments to measure them” (Valente, 2001: 106). Thus evaluation is very important as it “provides information relevant for planning future activities” (Valente, 2001:107). For example, if they had followed the CODES model and conducted pre-intervention research, the JAE cast members would have known to include a HIV positive person in the performance.

Um, maybe they can, like, use someone that is HIV positive to come and speak to us during the play. Then it can be, um, more real for all of us and it is good to see someone who is open about talking about it. Maybe then people will be less scared about talking about AIDS (appendix 1:213-216).

A learner in the focus group also suggested that the HIV positive person should be young
or a famous personality (appendix 1: 217-218). Research of other entertainment-education theories and dramatic forms would have guided the creation of the JAE production. For example, research into DramAidE, a successful health organisation, would have revealed the importance and success rate of participatory drama for education purposes.

If the JAE production had conducted formative evaluation they would have been able to see the direction in which they needed to progress and rectify any future problems. Research conducted during the intervention could have corrected further problems and summative evaluation would give insight into improvement for further productions.

**Conclusion**

While the JAE HIV/AIDS performance did show some success in creating awareness and behaviour change, the impact could have been improved. This would have been accomplished through research and collaboration with the Department of Education and Culture and the Department of Health. Partnerships also needed to have been developed between all the collaborators and the target audience. Research would have revealed that the mass meeting formula was unsuccessful in creating behavioural change for HIV/AIDS and that other interactive education methodologies would have been more effective.
References

Primary Sources

Focus Groups

Learners, Kwasanti Secondary School

a) 10 March 2004, Focus group
b) 15 April 2004, Focus group

Interviews

Teachers, Kwasanti Secondary School

a) 15 April 2004, Personal interview

JAE Cast members, Kwasanti Secondary School

a) 10 March 2004, Personal interview
b) 29 March 2004, Telephonic interview
c) 23 July 2004, Telephonic interview

Questionnaires

Learners, Kwasanti Secondary School

a) 10 March 2004
b) 15 April 2004

Photographs

Learners and JAE Cast members, Kwasanti Secondary School and Pietermaritzburg

a) 8 March 2004
b) 10 March 2004
Secondary Sources

Thesis, Journal articles and Books


**Internet Sources**


Appendix 1

**First focus group transcription at KwaSanti Secondary School**

L: Learner
I: Interviewer

I: What did you think of the performance?
L1: Very good. I liked the play a lot.
L2: I really enjoyed the play, especially the singing.
L3: It was very good. I liked having the famous people here in our school.
I: What did you think the main message was?
L1: The message was about Aids. It was saying, like, if your friend suddenly has aids that he is not different. That he is the same as he was. The same as everyone but he is sick.
L2: Ja, you must not treat your friends differently if they have Aids. They are still the same friend as before when they got the disease.
L3: The play also had a message that you must not have sex when you are still young. You must wait until you are older.
L2: Ja, you must abstain from sex. The message was you must abstain.
L4: And if you do have sex you must wear a condom.
I: What do you think of the message ‘Can you live with Aids’ and the response ‘yes we can’?
L1: It was good because it gave the message that, um, you can live with Aids.
L2: By making us say it we will remember it. We believe it more when we all say it.
I: Do you get annoyed with the constant Aids message?
L1: Ja, a little bit cause, um, it is everywhere you go and everything you do.
L2: Ja, but it is important because it reminds us about Aids. If it is everywhere then we can not just forget.
I: How likely do you think you can get Aids?
L1: No, no.
L2: Ja, you can get Aids. Anyone can get Aids. You don’t know when you will get it or with who so you must, um, be careful, um, all the time. It is just like Adrian with Nolene.
He did not know that he could get Aids from her because she only had one boyfriend before.

I: What have you learnt from the performance?

L1: Nolene had only slept with one person but she had Aids. Even if you, like, sleep with just one guy you can still get the disease. And then you sleep with some one else and he trusts you, like Adrian did, and you infect him, even though he has slept with many other girls and did not get Aids from them. It only takes one partner to give you Aids. That’s why you must abstain from sex like the play said and if you do have sex you must wear a condom.

L2: The play also said that you can live with Aids. That just because you have the disease it does not mean you must, like, just give up and die. Ja, instead you must be braver and carry on cause you are still young and have a life to live, even with the disease. And also, your friends should accept the fact that you have Aids cause you are still the same. You should not be embarrassed to tell them that you have the disease.

L3: Ja, but it is hard in our community to tell everyone that you are sick with Aids. If you tell them nobody will want to talk to you or touch you. Everything will change. They will all make fun of you and call you names.

L4: Ja, it’s true.

I: Do you have this problem at school?

L1: Ja, there are some kids here who everyone knows they have Aids but the other kids are not nice to them. People make fun of them and say things to them. That is why you can’t tell. It is better to not tell that you have Aids and live and die with the secret. If you are going to say it is better to only tell your family. They will look after you.

L2: Ja, it is much better that way.

L3: My aunt has Aids. I was a bit scared of her. After the watching the play I do not think I will be so afraid. The play says that you can live with Aids. That there is nothing wrong with you just because you are sick with the disease. I have now heard the play and am going to try to remember it with my aunt. She is still the same person even if she has Aids.

L4: There is a lady who visits my house who has Aids. I used to get scared to use her cup and now I will not be scared to even touch her. I learnt that it is alright to be friends with
someone that has Aids. That you should not treat them differently.
I: What character did you identify with the most?
L1: Adrian.
L2: Ja, Adrian.
L3: Adrian.
L4: Nolene was also very cool.
L5: Adrian.
L6: I liked Adrian.
I: Did you identify with the characters?
L1: Ja, with Adrian. He spoke like us. The words were the same. When he said ‘my chocolate…’ I loved it. He speaks like the other boys.
L2: Ja.
I: What was your favourite part of the performance?
L1: When Jae sang ‘Missing you.’ I liked that a lot.
L2: I liked all the singing. Especially when Jae and Adrian were singing together, you know that song, that song when they fell in love and could be together. I liked that a lot.
I: What else did you think of the music?
L2: The songs were all sung very well. It made you want to sing and dance with the other people in the people.
L1: I liked the music. When I hear the music on the radio I will now think of the play.
L3: Yes.
I: Can you remember all the songs that were sung?
L1: Yes.
L2: Ja, the first song was the song that is always on the radio. That song ‘Where is the love.’
L3: By the black eyed peas. It’s one of my favourite’s now.
L2: Then there is the other song, um, that song that Adrian and Jae sang, um, the love song. After that there was ‘Missing you’ that Jae sang at the end of the play. I have also heard that song on the radio before.
L4: Ja, me to.
L5: When they both sang together it was very nice.
I: Why do you think the songs were sung? Do you know the meaning behind the songs?
L1: The song, um, ‘Missing you’ was for all the people who died from Aids.
L2: Ja, it is sung to remember the people who have died of Aids.
I: When you hear the song on the radio what will you think of?
L2: I will think of the play and Jae singing it here today. I will think of all the people who have died from the disease of Aids.
L1: Ja, we will now think of the people who have died from Aids in our lives and miss them like the song says.
I: The play did not only have music. There was also the characters performance and dialogues. What did you think of that?
L1: I don’t know. I think that the talking was not enough. There was more in the music. I remember more from the music.
L2: Ja, for me too. When they sang I felt the message of the play and will remember it. The message is in the song cause, um, the play was not enough. It needed the music.
L3: Ja, I will remember the music and then remember the play and what they said about Aids.
I: What did you think of the DJ’s?
L1: The DJ’s were very cool. I liked Khatide more because he, um, spoke isiZulu.
L2: Yeah, I also liked that. He spoke our language.
I: Did you know the DJ’s already?
L1: No, not both of them.
L2: I knew Khatide from Umkhosi FM.
L3: Which station is Babalwa from?
I: She is on East Coast Radio at 9pm.
L3: I’m going to listen to her tonight.
L1: Ja, I liked the way she talked. She had a very good accent.
L2: I have heard her on before.
I: And had you already heard of Jae before today? Did you know who she was?
L1: I did not recognize her name but when I heard the song ‘Missing you’ I knew who she was.
L2: Ja, um when I heard ‘Missing you’ I knew she was a famous singer because I have
heard the song on the radio before, lots of times. I just did not know it was her.
I: What did you think about Jae and the DJ’s talking to you about Aids?
L1: It was good. We felt special that they were here, in our school.
L2: Ja, I wanted to hear what they said.
L3: Our teachers and parents, um, talk to us about Aids but when they speak it is different. They are like us. They are young and have the same problems as us.
L4: Yeah, when they, like, talk we listen because they know. They know what it is to be young and they are also celebrities. They are doing what we want to do. They are, like, the people that we want to be.
L2: Ja, ja, they are special and when they came here today, um, like, they made us feel more special. Like we were important.
I: Do you talk about Aids with other people and if you do who are they?
L1: I talk to my mom about Aids but it is not the same as when they talk about Aids in the play. With parents they are more secretive. You can not talk about everything.
L2: Ja, you feel embarrassed asking questions to your parents or teachers. You do not know what they will, um, think when you ask these questions.
L3: Yeah, it was different in the play. They were more open. We listened because they are celebrities and because they are young and like us. They know what we suffer and face. Our parents do not. We can not just talk about Aids to them.
L4: I also talk about Aids to my friends. But with them you do not know what is true and not. With Jae and the others you know what they saying is true. You can believe them.
L5: Ja, I talk about Aids with my friends. It is a big thing for us. We are all scared of, um, Aids and a boy lying to us, when he is like, a Casanova, a player, with lots of girlfriends. And then we sleep with him and get Aids.
I: Do you talk to your boyfriends or girlfriends about Aids?
L1: Ja, I talk with my girlfriend. We are both scared of Aids.
L2: I don’t have a boyfriend.
L3: I had a boyfriend for three days so we did not talk about Aids yet.
L4: Oooh, I have a boyfriend.
L5: I also have a boyfriend.
I: Girls, would you ask your partner to wear a condom?
L1: Yes.
L2: Ja, I would but it is difficult sometimes. Sometimes the men, they will not use the condom. You try to tell them to but they do not like it. They say if you want to use the condom you are like a slut because you must have many other boyfriends and that is why you want them to use a condom.
L3: Ja, ja.
I: Do you talk about Aids in life skills lessons?
L1: We did. We only have life skills till Grade 10. It was four times a week.
I: What did you learn in the lessons?
L1: About Aids, community, ubuntu and building friendships.
I: Have you watched other plays about Aids?
L1: Ja.
L2: Ja, I have. There have been other plays at our school.
L3: I have also watched plays at the church.
I: How was the Jae play compared to the other plays you have watched?
L3: It is very good because at the church play it is very boring. You do not listen because it is not fun to watch. With the Jae play you wanted to, um, listen to everything and remember because it was fun and exciting to watch the celebrities. It is also very embarrassing at the church to watch the play because all the, um, elders are there. Here at school it is different. We are with all our friends so it is not very much embarrassing.
L1: Ja, the play is very good to other plays we have seen at school because of the celebrities. The other plays did not really, like, have any real celebrities.
I: Would you tell anyone about the play?
L1: Ja.
L2: Ja, ja.
L3: I would go home and tell my mother and family. I will tell them about the music and the songs that they sang and about the celebrities I saw here.
L4: I will tell everyone about the very good play and what celebrities I saw and, like, all the important things they told about Aids.
I: Do you think you will follow the message of the play?
L1: Yeah, I will try.
L2: Ja, ja.
L3: Ja.

I: Did you learn a lot from the play or was it stuff that you already knew?
L1: Ja, we knew a lot already that was in the play.
L2: Ja, I knew most of it. I did learn somethings but it was just reminding me about things. In case, I, um, forgot the things the play just reminded.
L3: The play just helped me remember of all the things I knew about Aids.

I: Do you think the other learners in school will change?
L1: I don’t know.
L2: Ja.
L3: Do you think so?
L2: Ja, they will change. They will remember the play.
L3: I don’t think they will change. They know all the stuff about Aids but they still the same. They still, like, believe what they want to. People will still say things to people with Aids. They will make fun of them.

I: Did you understand the character in red in the play?
L1: Ja, she was the virus.
L2: She was Aids.
L3: In the play she follows the people who get Aids. She moved from Nolene to Adrian when he got Aids.

I: Do you think that the play should have had more isiZulu?
L1: No, it did not need more Zulu. It was alright like it was.
L2: Yeah, we understood the English but it was still nice to hear Khatide speak Zulu.

I: How do you think the play could be better so that you remember the message?
L1: The play needed posters or something to remind us. The posters could be put on the walls so when they leave we still think of what they said.
L2: Ja, but you know that the posters will just be torn off the wall and taken home.
L1: They could put the posters in plastic or something. There could also be papers to give us to take home. So we can show our families and put on our wall. That will remind us.
L3: They could also come again. We need to be reminded more often. Once, twice a year is, like, never enough. Once a month or even once a term is better. We will not forget
then.
L4: Um, maybe they can, like, use someone that is HIV positive to come and speak to us during the play. Then it can be, um, more real for all of us and it is good to see someone who is open about talking about it. Maybe then people will be less scared about talking about AIDS.
L5: Ja, especially if it was a young person like us or even, um, someone famous who has AIDS.
Appendix 2

Second focus group with learners from KwaSanti Secondary School

L: Learner
I: Interviewer

I: How much of the play do you remember? So you remember watching the play?
L: Yes, we remember a lot.
I: Do you remember what songs were sung in the play?
L: Yes, we remember ‘Missing You’, and the one with TK that goes “what’s wrong with the world mamma”.
I: Yes, that one by the Black Eyed Peas.
L: Ja.
I: So you remember that? And have you heard either the Black Eyed Peas, or the song ‘Missing You’ on the radio lately.
L: Yes, a lot.
I: And when you hear it, what does it make you think of? Does it make you
L: It makes me remember the play, and seeing the celebrities.
I: What were the messages behind the song? Do you remember what the messages were?
L: (Silence)
I: No, Um.
L: Whatever you do, someone out there is ready to help you, like somebody is thinking of you. Wherever you are, and whatever you do, whatever situation you are in somebody is thinking of you.
I: And what song is that from?
L: It’s from ‘Missing You’.
I: And does anyone else have another thing, or do they think ‘Missing You’ was, or?
L: I think it was ‘Missing You’.
I: Do you know when they sung the song ‘Missing You’. Do you remember?
L: There’s this song that they sang, it was with TK and Jae. It’s just that I don’t remember
it clearly, but I think it was based upon the other two. But, like together that they must stick on each other, whatever happens?

I: OK, and the first song the one that the Black Eyed Peas sang, do you remember that one?

L: Um, yes I will tell you. It’s “and you practice what you preach, and if you tell me all the things. Father, father, help us”.

I: Do you remember the words of the song?

L1: I don’t remember parts.

L2: I remember the beat.

I: Because the actually changed the words of the song. They changed them and put an AIDS message in it. Did you hear the AIDS message at all in the song? Or did you remember? Did you think that they changed the words, or not really?

L: Nah.

I: No, did it sound like it usually does?

L: They changed the words?

I: You heard them change the words?

L1: Ja.

L2: I also heard it a bit.

I: OK, and um, do you remember what the main message of the play was?

L1: Ja.

L2: Yes, you shouldn’t discriminate against people.

I: OK, so don’t discriminate against people.

L: Yes.

I: And do you remember what the chanting was? Remember they made you chant stuff. Do you remember what it was?

L: Silence

I: Do you remember they would make you chant stuff, you would say something with them. Do you remember what the main message they were telling you to repeat with them was?

L: Could you please put it in a much clear way, because I’m trying to answer it, but I just don’t seem to understand it?
I: When they stood up and shouted something, then they wanted people to shout it with them. Everyone said it together. Do you remember what they said?
L1: Ja, Ja, Ja.
L2: They said we must shout out the name of the school, KwaSanti. And then this guy who was the DJ, said it was Ashanti, hey? And Adrian’s grandfather asked something about AIDS, and he asked it very loudly so that we could respond, and then we responded.
L3: I think that someone, I don’t exactly remember who it was, asked us if we were going to fight against AIDS, and we were supposed to say “yes”, and we all said “yes”.
I: Um, do you remember any other message besides from the discrimination one, like what else do you remember most about the play?
L: The other message, I think, was that if you say that you don’t want to do something, then don’t let anyone tell you anything else to persuade you.
I: OK, um, do you remember the characters?
L: Yes.
I: Who was your favourite?
L1: I like TK, as he talks the truth about sex and AIDS.
L2: Ja, I liked TK as he accepted that he had HIV.
L3: The grandfather.
L4: Adrian.
L5: Ja, Adrian.
L6: Actually, all the characters were my favourite. I liked all the characters.
I: Did you talk about the play to anyone else after you saw it?
L1: Yes.
L2: Oh, I did as soon as I got home. I just spoke about it, I told my parents about it and children, and my friends, that today I met JAE, DJ Khatide, Babalwa. You see, many people.
L3: I love Khatide, he is just so sexy.
I: Ok, and what did you talk about with them. Did you tell them I just met these people? Or did you say what the message of the play was?
L1: I was talking to my family and I told them that I met celebrities, and I told them that
the play was very good, but it was a bit sad, but it was educational.
I: OK.
L2: Also I spoke with my friends, I said that even though you think that AIDS doesn’t exist, it does exist because you see those celebrities were coming here to expose the disease. So we must be aware that it is here, and we must try to avoid getting it.
I: Did the celebrities talking to you make a big difference in learning?
L: Yes, they made a big difference because if something is acted out by people who are celebrities, you seem to understand it much better than the person next to you. Because you see that AIDS is a real deadly virus, because even celebrities talk about it, so that is why it is easy for us to understand it because it is performed by celebrities. And if something is done by celebrities it’s easy for everyone to be convinced that AIDS really kills. Even though the majority of us knows that AIDS kills, but maybe two percent don’t believe that AIDS kills. So by the celebrities acting out here on the stage, maybe they got the message that it does kill.
I: And did you discuss the play with the teachers as well?
L1: No, not at all.
L2: Yes.
L3: Yes, we did.
I: You discussed it?
L: Yes, the teacher asked if you want not to get AIDS you must abstain. And he said to us that we shouldn’t have many boyfriends and girlfriends, as it is not safe.
I: What does the teacher teach you?
L: They teach us to not even try, because we are young.
I: But was it a drama teacher, or a life skills teacher?
L1: He was just talking.
L2: It was the mathematics teacher.
I: And the life skills teacher, did she talk to you about it? No.
L1: We don’t have a life skills teacher.
L2: That’s for the younger children.
I: Oh, OK.
L: Yes, the younger children discuss things like that.
I: The last time I was here, you said that people at the school discriminate against people with AIDS. Do you think that the attitude has changed in anyway since the play has been here, or has it stayed the same?
L1: If one child stood up and confessed that he or she had HIV/ AIDS, most of the children would take a very big step back.
L2: They wouldn’t.
L3: I agree.
L4: It’s not as easy as we talk. We may say that we would stop discriminating people with HIV/AIDS, but when that person is here it changes it to another thing. It changes it you know. We do have family members; I had a family member who was HIV positive. I loved her to bits before she had HIV/AIDS. After some time when she revealed that she had HIV/AIDS, I started looking at her in another way. I was scared at even getting close to her because it gets very weird knowing that you are living with a person with that disease, you just don’t know what to do. Even when she touches you, you think that you are going to contract that disease immediately and you just get scared. It’s like you are seeing a dead person, or something, you see.
L5: I also had a relative, and she was like my niece. She went to Joburg, I don’t know, like for a couple of years. Then when she returned she was so sick. She didn’t want to stay at home because she was scared that you could see her, the way she looked, because she was so big, in a sense that you could even make jokes about her that she looked like an elephant. So after she returned, she was so thin, and you could see that she was HIV positive, but she said that she was suffering from TB. After months she told us that she was HIV positive, but I didn’t have a problem with her. It’s just that she didn’t want anyone to come close to her, and I didn’t mind her you know. I kind of spoke to her and tried to comfort her, but she didn’t want it, like she was trying to avoid me.
L6: I want to say that the play helped me as it improved my attitude towards people with AIDS. My aunt has a friend who was HIV positive, and she used to my house and pay my aunt and my family a visit. Before, I used to be scared of her and feel pity for her all the time, like when she talks that maybe something bad happened to her you know, and I feel very pity even if it wasn’t that bad. But now my attitude has changed very much because I’m now comfortable, you know, with sharing the same equipment with her, like a glass,
knife, or something, so my attitude has changed. The drama was a good help.

I: And has anyone else had a change of attitude themselves, maybe not in school, but themselves.

L7: Yes, my cousin had HIV/AIDS, but after the play I wasn’t scared of her. I tried to feed her because she was sick with AIDS, before I had never done that. After the play it helped me realise that I love and mustn’t be scared of a person with AIDS, and you must help them because they can’t help themselves.

I: All right, that is good. Um, have you discussed AIDS at all now that you have had a bit of an attitude change, but have you discussed it more with say your friends, or with your boyfriend or girlfriend.

L1: Yes.

L2: Yes.

I: With who?

L1: Yes, Ja, Ja. I discussed it with my friend that HIV is something like a dot, a black dot that. Even though you are fine and you are a person with HIV, a normal person, but you are stigmatised, no matter what.

L2: I also discussed with my boyfriend.

L3: No, it’s kind of like I said to my boyfriend, don’t fall in love with other men. So I was, like, I don’t do this now but I must stop doing this, and I told him that I don’t do this. And I asked him what he thinks, and he said it’s not easy with HIV, and if I’m still doing these things I’m going to infect him when I have it, I’m going to infect him and he’s going to be sick for my sins. So we spoke about it and we agreed that I should stop it, and he should stop his ways and be together.

L4: You know one thing that I understand about AIDS is that HIV/AIDS is like death. Everybody is like waiting for death, but when death strikes everybody just doesn’t come to terms with the infected, he or she is going to die; that’s what is happening with AIDS. We know that AIDS is there but it is hard to come to terms with that it is going to reach us and it is going to kill us. It is something that, it’s just more like death, it’s the same, I think that they are very good partners, because they are a very deep wound that cannot be healed, because if you live with HIV/AIDS you have a very deep wound that will take time to heal. It wouldn’t even take time, you would die with that wound you see, death
would release you from that wound, because AIDS is something that you live with and you know that one day I am going to die. Before dying I am going to suffer and the world is going to see me suffer.

I: But now, did you get that message from the play, or?

L4: No, I didn’t get it from the play, I got it from hospital you see. I usually go and visit people in the hospital to see the realities of what AIDS makes, you see. If you could go into the hospital and see what AIDS does you’d even throw up, you wouldn’t like your food for two days because it reveals its true colours, you see. AIDS is not just like TB, TB I understand as you rise again, you cough and cough, but you can be cured you see. But HIV/AIDS, a person gets thinner, thinner and thinner that person doesn’t want to eat, he has sores, disgusting sores. Not like sores, but disgusting sores that ooze things that you don’t know; it’s so gross and everything is not nice. You even cry if you are a person that is emotional. You cry.

I: Because the main message of the play, what they were trying to say as well is that you can live with AIDS. Now, did you get that? Is that an attitude that you had that you can live with it, or is it definitely that AIDS equals death, that you can’t live with it? Not that it cannot be cured, but that you can still enjoy life.

L1: Ja.

L2: Ja, you can enjoy life but there is a limit. When you have AIDS your life has been limited somehow. You can be happy but once you are alone, you think, “eish, I am still going to die, I am still going to suffer”. I can live with AIDS, if I were to be given AIDS I could live with AIDS. But I wouldn’t want to face the fact that I am going to suffer and people are going to see me suffer.

L3: It’s like if you have AIDS it’s like that’s the end. And sometimes people are scared of you. Once someone knows you’ve got AIDS, that’s it.

L4: It’s would be like your whole world is HIV/AIDS.

L5: But if you can and you can be open to your community, you should teach your community about HIV/AIDS.

L6: But, what I could tell you is that people are not the same. Maybe in your community or society, the people will appreciate it, but to my community people won’t appreciate me. The same thing happened to Nguhladene, she was stoned to death because she
confessed that she had HIV/AIDS. People react in a very different way.
L7: Ja, maybe.
I: Is there anything about AIDS that you are not still sure about?
L1: No.
I: Do you think that you have had enough education?
L1: I want information. But, it will still help if you can keep reminding me about the facts of AIDS.
L2: You see what I want to know is that if I had HIV/AIDS and my boyfriend had HIV/AIDS. No, OK I didn’t have HIV/AIDS, but my boyfriend who I’ve never slept with him, he confesses that he has HIV/AIDS. But he wants to marry me. How do those people have sex? I just want to know.
I: You must use a condom.
L2: So, using a condom.
I: Ja.
L2: Are you sure.
I: No, as condoms aren’t one hundred percent.
L2: Yes, that is what I want to know because condoms aren’t one hundred percent.
I: Yes.
L2: I’m putting my life at risk sleeping with that person.
I: Yes you are.
L3: I have got a question about AIDS. My cousin, we think has got AIDS. She has got all the symptoms. Her boyfriend once told one of our family members before they were going out that he had AIDS, and was diagnosed three years back. He is now going out with my cousin. The boy, he is healthy and strong, but my cousin she is dying, you can see that she is dying. She moved from size 48 to size 28. What I want to know is that they are having sexual intercourse, even though they don’t condomise. Her boyfriend gets medication, but he doesn’t give his medication to her, I think he’s cruel. But what I want to know is it possible that the guy can be stronger and the girl can be weaker because the guy is having medication treatment.
I: I think the medication will help, but then it just depends on the person, how bad they get it and how quickly, because some people can go for years and years without getting
sick. Also women are physiologically more susceptible to getting AIDS, they get it much
easier than guys get AIDS. I’m sure that he does have AIDS, but he can live for about ten
or eleven years before he starts getting sick.
L3: I just hope that my cousin reaches the end of this year. She is in a bad condition. But
they only started going out last year April.
I: It depends on a healthy diet, and if they are taking AIDS drugs, and that will help you
live longer.
L4: I think that my cousin also gave up hope at the first time that she got sick.
L3: My cousin knows that her boyfriend has got AIDS.
L4: Not really.
L3: Ja, she knows but then she keeps on sleeping with him and she doesn’t want to break
their relationship. They break up today and two days later they have made up and are
having sex. You know it is such a disgrace.
I: Shame.
L5: Maybe he is her only hope.
I: Ja, have you guys seen any other plays?
L: Yes.
I: Or was it just the JAE one?
L: Yes, Ja.
I: Any AIDS plays.
L: Yes, in my community
I: What did they teach you?
L2: To help other people with HIV, so if you see other people with HIV don’t chase away
him or her. Just give more help than before. So it makes more help than to ignore.
I: Did it help at all?
L2: Yes.
I: Do you think that the community play or the JAE play helped more?
L2: The JAE play gave more information.
I: Oh, gave more information, ok. How did the JAE play give more information?
L2: Ok, it give myself information because the boy that talk to his father, his grandfather,
they didn’t tell her, him his mother was HIV long ago but all the people hide the truth so
he had the play with JAE come with the truth, ya.
I: And the other community play did they use songs or was it just a play?
L2: Just a play
L1: May I ask this, maybe you have this proof of the myth that a condom mainly consists of insects?
L3: Maggots.
L1: That a condom has maggots?
L3: No, that is not true
L1: That’s not true?
I: Has what?
L1: That a condom has maggots.
I: Oh, my goodness. No, no, no.
L3: There’s this superstition that if you, like, take a condom and put it in boiling water it will just spread into maggots, you know, maggots those little worms.
I: Yes
L1: Ja and if you put it into the sun.
L3: Ja.
I: No.
L3: They say that’s why the, the maggots disease won’t be, uh, prevented if you wear a condom. I tried it but the condom stayed the condom.
I: Yes, it would.
L4: You know what some of the people they say now, ok, let’s don’t use a condom because there is plenty diseases in the condom.
L3: Yes, yes.
L4: Ja, serious.
I: Because of what?
L4: Because there is lots of diseases on the condom that you get.
L5: Ja, because of transmitted disease.
L4: Yes.
L5: If you use a condom. Maybe let’s say a girl is sort of a bitch, she sleeps with another man…
L1: A slut.
L5: Ja, a slut. Ja, you know she sleeps with another man who has STD’s. So now, you know, she is sleeping with her boyfriend, so when he is taking off the condom, he has now slept with her, he will get the infection from his hands and when he touches his penis, he’ll like, get it. So condoms are not safe.
L4: Ja, they not safe.
I: Ja, they are though. They are much safer than not.
L5: Oh. But I should say people will still say no. You should rather get a straight person. Some people are sex addicts.
L4: Straightened for what?
L5: No, there is somethings you have to understand, that we are not all the same, we live on one earth but we are not the same. Some people can’t live without sex. If you go out there and meet some people you find that they are sex addicts, people that can’t live without having sex.
L4: Oooo, I know of that.
L1: People can live without sex. When you were growing up were you doing it? No.
L4: Hormones, just hormones.
L1: So now you say you have to do it?
L4: Hormones. You can’t live without sex. You can’t.
L3: It’s just your opinion.
L4: You can’t.
L3: You can.
L4: You can’t.
L1: Um, I know this is a bit off topic but I am scared of going to the clinic to get condoms.
L2: Ja, because they might, look at us funny, or something.
I: They definitely wouldn’t look at you funny.
L1: Oh.
I: Ok, one more question. Do you think if sexual violence was put in the play that it would be appropriate and effective? Sexual violence like rape? Against sexual violence, saying that people must not do it? Do you think it would come across in the play?
L1: Yes
L2: Yes
L3: Yes, because it would make us understand it.
I: Do you think that it is a big message that needs to be put across?
L1: Yes.
L2: Yes, cause it wasn’t in the play.
L3: Ja, but you know its difficult. It’s not easy to rape someone.
L1: To what?
L3: To, to rape someone.
I: You think it’s easy.
L3: No, no, no.
L1: Why you saying it is not easy?
L3: You can’t just rape someone…
L1: It’s because you have never been raped
L4: Ja.
L3: You can always scream and stop someone.
L5: No.
L1: It’s because you’re not a women. When someone comes to rape they not going to tell you, hey, am here to rape you.
L4: Ja, ja.
L1: They make sure that there is nobody around or very few people around, so it is very easy to rape.
L4: What if that person has a gun? In the movies if a person points a gun at you, hands up, don’t move, do something and because the person is pointing the gun at you and you know that your life is at risk, you also do whatever he tells because if you don’t do it you’re dead.
I: So do you think you learnt anything from it or was it that you knew it but it was just reminding you?
L1: Ja.
L2: Ja.
L3: Ja, I knew a lot of the things but I also learnt. The thing that was exposed mostly was
the gay thing. I hate that people think that AIDS came with gays.
I: Do you think that the JAE play had a strong message against the gay myth and that you mustn’t discriminate against gays?
L3: Ja, there was a strong message. It was strong.
I: And do you think that it changed the attitudes of the people at school towards gays?
L1: Yes.
L2: Yes.
L3: Yes, it did.
I: How did the attitudes change?
L1: They kind of, like, don’t…
L2: Excuse me but can I tell you the problem. It’s not like we hated them. We didn’t hate them but it’s that they flirt too much. And the boys don’t like it, the people that flirt with them, cause “these girls” they flirt with them and the boys don’t like it.
L1: No no, ja.
L2: They just point at a guy and say ‘ooooh, you’re beautiful.’
L1: No, no.
I: In which ways have the attitude of the school got better since the play?
L1: They have stopped harassing us at the school because I am gay.
L2: No, no. Nobody harassed you? Who harassed you?
L1: Yes, yes, yes. They say you came up with AIDS.
L3: No, no.
L1: Ja.
L2: Who?
L1: No, I can’t say. I have my information.
I: So do you think that you learnt anything from the play?
L1: We knew things already but we also learnt.
L2: Most of the things we knew.
I: What did you learn that you didn’t know?
L1: I didn’t know, not exactly, but I wasn’t sure that if I, like, am having my partner and I’m faithful to my partner and if he looks faithful to me. And if, ok then, I know the guy, ok let’s say we break up, I break up with my partner and stay single for a few years and
when I meet another guy, ok let’s say that he’s a playboy, you know he sleeps with every
girl, like with what happened with Adrian and Nolene and Nolene was doubting Adriane,
she thought that Adrian had AIDS but only to find out that she was the one that had
infected Adrian from just one partner.
L2: Ja.
I: And did you understand the character in red in the play? Do you remember who she
was? She was quite big and dressed all in red with signs on her?
L1: Oh, ja she was the virus.
L2: Ja, she was AIDS.
I: Ok, everyone that’s it. Thank you very much for all of your help.
Appendix 3

Interview with English Teacher from KwaSanti Secondary School

Interviewer (I)
English Teacher (E)

I: Um, so did you watch the JAE play?
I: What did you think about it?
E: I thought it was interesting, because for a moment you see it was unique. We know people talk about HIV/AIDS a lot, so whenever you hear someone is going to come for a play you don’t go wow! Ok, get it? And also they were able to capture our attention, as in it was young. There was a lot of music and the language used was like, you know, a young language and everybody was able to understand it. And somehow they kept on involving the audience as in asking them questions; you know what I mean?
I: Ja, that was good. Do you think that it’s taught them a lot?
E: I think so, a lot. Also judging from their reactions, remember after the play they were asking them questions where they gave out prizes and they were able to answer most questions.
I: Ja. Do you find that the children already knew most of the stuff, that it was just like reinforcing what they already knew?
E: I would say reinforce, ja, what they already knew.
I: Ja, OK. Do you think that the messages in the play about the stigma related to AIDS and the importance of having respect for others was brought across?
E: It was brought across because you see judging from the audience’s reaction, ja. You could tell that they felt sorry for the guy who was rejected because you know all that, which is typical of living in our society. That’s why most of the people do not want to come out at all.
I: Do you think that the children talked about the play amongst themselves?
E: Oh yes, they did. And also to us their teachers. They were very impressed.
I: Oh, good good, because I was going to ask you.
E: We still talk about it now and then.
I: So you think that they remembered it quite well?
E: I don’t think one would forget it.
I: Ja, oh good.
E: They loved it. They really, that’s why remember I told you that they are so used to
them they are getting bored whenever they are called up for an AIDS plays. But this one
was unique.
I: So what do the other plays usually do?
E: It’s the same thing, like teaching them to abstain and all. The manner in which these
one’s (the JAE play) taught them was different using music or dance, you know?
I: Ja, do the others just do like a play?
E: Ja, like in a formal way like a teacher coming to class.
I: Like a speaker?
E: Ja.
I: OK, so those are much more boring. And do those plays back up their messages with
material that they give to you?
E: Hardly any. It’s more like what they think.
I: So they don’t leave any readings?
E: No.
I: Do you think that if they gave that material to you that it would help a lot?
E: It would, but you see what the problem, what happens with, what I noticed with our
students is that they are very lazy to read. But you see with this one they’ve got to like
something first for them to have that feeling of going further and reading it all.
I: And then they’d probably be interested to read?
E: Ja.
I: OK, and um do you have a library or somewhere that you could leave the material so
that they could read it?
E: Yes, we do.
I: A library?
E: Yes.
I: OK, and do you think that if the play dealt with, I know that they didn’t deal with it, sexual violence, because it’s quite a thing in South Africa today. Do you think that it would have been appropriate? Do you think that it would have been effective?
E: I think so because I suppose they can identify with, we’ve got quite a few cases of young girls being raped and all here.
I: At the school?
E: No, not at the school, outside.
I: Really? Shame.
E: So it’s very relevant.
I: So do you think it would have been brought across in the play well? Do you think that they could have done it in a way that wouldn’t cause hurt?
E: You’re referring to the same cast?
I: Ja, that cast.
E: Ja, they could. Judging from what they’ve given us on HIV/AIDS I think they would. I think it would be appropriate without those feelings of hatred and all.
I: Ja. Well thank-you very much.
E: OK, it’s a pleasure.
Appendix 4

Interview with the Life Skills Teacher from KwaSanti Secondary School

Interviewer (I)
Life Skills Teacher (L)

I: So, um, do you receive any Life Skills manuals?
L: Not yet, not yet.
I: OK. And, but I’ve heard that you use your own resources.
L: Yes, I do.
I: OK, thank-you.
L: Thank-you.
I: Thank you
Appendix 5

Interview about AIDS Training with teacher from KwaSanti Secondary School

Interviewer (I)
Teacher (T)

I: I was just wondering if the teachers receive any AIDS training from the Department of Education or?
T: What do you mean like workshops?
I: Ja.
T: Ja.
I: Do they?
T: Ja.
I: OK, so.
T: Not that much, but lately.
I: One a year or something?
T: Ja, once a year.
I: All right.
T: There are workshops from time to time. At the present moment there are workshops being conducted by the department. OBE workshops.
I: Oh. The outbased education.
T: Ja, outbased.
I: OK, and that includes AIDS training?
T: No, not specifically.
I: Oh. Is Aids included in it at all?
T: Ja, but it’s included in it.
I: So it’s not included specifically?
T: Not specifically AIDS.
I: OK.

Appendix 6

Focus group with JAE performance cast members

I: Interviewer
Q: Quincy
Ia: Ian
K: Khatide

I: How did the play come about?
Q: Well I received a call from Chlorainne at Break Entertainment who wanted to outsource actors. Chlorainne already knew Ian and I and so contacted us first. From there we gathered other actors, mainly using acting students from the University of Natal.
I: And, um, how did the play develop?
Q: We developed the play through workshopping. There was never a final script which we had to learn from. All the actors would come together and try different scenes with different characters and things happened from there. We would take and use the good things from the workshop in order to use in the performance. If someone else improvised something better or funnier we would then use that.
Ia: The performance developed from two or three days of workshop and improvisation in which everyone contributed and worked together.
I: How did you decide on the themes or the, um, messages of the performance?
Q: Firstly we chose simple main themes. The main themes were about Aids and not just sleeping around.
Ja, we did not want to use very complex themes, although these themes are also very important. We were just worried, um, about the level of English in the schools we were going to visit. We thought it would be difficult to communicate complex themes to second language English speakers.
Q: Yes, so we just focused the performance on a few basic themes that we thought were important to Aids awareness.
I: Ok. And what do you think the more complex themes were?
Q: The complex themes would be, um, the ideas around gays and Aids or about sexual violence. We did briefly touch on the gay issue. For instance, TK says when he discovers that he has Aids that all his friends are now going to think that he was gay. It’s just a brief mention but we felt that we could not develop the theme further. We wanted to keep the play and its message as simple as possible.
I: What techniques do you use in the performance? For example is it just a musical?
Ja: No, no, not at all. We use song, dance and dialogue all in the play. All three of these factors are combined together to make the performance. We also have narration from Jae and the DJ’s.
I: What DJ’s do you use and what do they do?
Q: We use Babalwa from East Coast Radio and Khatide from Umkhosi FM. Here, this is Khatide.
K: Hello.
I: Hi. Khatide what is your role in the performance?
K: Um, I just talk to the students before the performance. I get them excited and the energy levels up. I also introduce the performance and briefly discuss the main message that will be discussed. At the end of the show I also ask questions and give out prizes sometimes. When I talk I speak in isiZulu which is often the first language for many of the students. I think it is good to repeat the message of the play in isiZulu to make sure they fully understand it.
I: Yes.
Q: Ja, Khatide is very popular at the schools we go to. The girls just love him. He is always mobbed.
I: Are you serious, ha ha?
K: Ja, ja sometimes it can be quite bad. The girls just jump on the stage and start trying to touch you. It’s also like that for Clive.
Ja: Yeah, the one time Clive got mobbed so badly that he was even scratched.
Q: Those girls just go crazy. They tear off our microphones even. We have had to already replace a few damaged microphones.
I: My word. So how has it been received so far?
Ia: It has been very popular. As we have said we get quite a good reaction from the crowd.

Q: It has been very popular. We see this from the crowd’s reaction, not only just when they mob us after the show. They react, um, even during the show. Of course, we did include a few, um, gimmicks, almost, to try and get a reaction from them.

I: What, um, gimmicks do you use?

Q: When Nolene and Adrian kiss and hug for the first time. The crowd just loves that and always scream. Or when Nolene gives Adrian bat and refuses to go out with him the girls definitely enjoy that. We know if we use or say certain things that the crowd will react.

Ia: Yeah, we also try to get us much reaction and emotion from the crowd as possible. For example, I the last song we get the audience to stand up and dance. They usually all stand up and rush to the stage.

I: Has every performance been the same?

Ia: No, no, not at all. Because the play is not scripted and it was workshopped each time we perform it is different.

Q: Ja, sometimes we throw in a different line just to throw the other person off and see how they react. It gets boring sometimes so we change things a little to make it more exciting.

Ia: Sometimes we even change characters to make it more exciting and different for us.

I: Yes.

Q: Ja but the essence of the show always stays the same. The main message is always there.

Ia: It is important that we, um, stay excited in order to make the audience excited and get the energy levels to where they should be.

I: What does Jae stand for?

Q: Jae is the singer that is in the performance with us.

I: Oh that Jae.

Q: Ja, she sings the popular song that is on the radio ‘Missing you.’

I: Oh, ok.

K: A lot of people often don’t realize who she is until they hear the song. Once they recognize the song they know that Jae is a big South African entertainer. That is why
when I introduce the performance I sing a little of the song ‘Missing you.’ Once the students have heard the song they get very excited because they recognize who Jae is and that she is a popular singer.

Ia: But Jae also stands for the campaign that we are doing in association with the Department of Education. JAE stands for Just About Education.

I: What role did the Department of Education play in the development of the play?

Q: I do not know all the details. That you will have to ask Chlorainne. He is the one that dealt with them. As far as I know the Department of Education contacted Break Entertainment to, um, conduct a performance to the schools who had done well at last years matric exams. I don’t really know how it came about though.

I: How do you decide what schools to go to?

Q: The Department of Education told us to go to the schools that had done while in their exams. The KZN schools are divided into ten, no, no, wait its twelve districts and we went to the top four schools of each district.

I: Um, how many schools have you already been to?

Ia: Well, we are right at the very end of the campaign now. We only have two or three more schools left.

I: What have the teachers said about the campaign so far?

Q: It has been very well received. A lot of teachers come after the show and say that they enjoyed it and they could see that the learners had enjoyed it and learnt from it. Sometimes they ask me if I have any books or pamphlets to help them teach the Aids issue in the classroom.

I: So the Department of Education has not supplied you with any additional pamphlets or books?

Q: No, nothing. We just perform the show and leave the school. We don’t have anything to leave behind. It is a pity because a lot of the teachers want something to assist them in teaching.
Appendix 7

Transcription of interview with Claurainne Swales

Interviewer (I)
Claurainne (C)

I: So was the performance funded by NB Music Records only or um was it also funded by the education department?
C: Ja, it was funded by the department of education, the life skills division.
I: Oh OK. So why did NB music productions want to do an AIDS play?
C: Well, we were approached by Noel Kock from NB Music Records who wanted to produce an AIDS play, so we sourced out the actors. Ja, and I know Quincy and Ian so I asked them to do it.
I: Um, this may sound stupid, but could you please tell me what all the names of the cast are?
C: Well, to tell you the truth I can’t tell you everyone’s full names. But what I can remember, um, are Quincy Fynn, Ian Robinson, Antoinette, Atlesha, Klint, Babalwa, Khathide.
I: Oh OK. Um, so I was wondering what the specific issues were that you wanted to address.
C: Uh, well, the important issues. Ja, the group thought the important issues that we should look at were ignorance and stigma. We thought it was important to South African’s.
I: Ja, I agree. But what exactly did you want to achieve from the play? Like in terms of knowledge or change.
C: Ja, so we wanted to try change of behaviour and change their attitude. And importantly to create awareness of AIDS.
I: Do you know if any comments have like come from like the teachers?
C: Well, most of the teachers I’ve spoken to were grateful because it helps with their life
skills curriculum. Lots say that the children are more receptive when watching the play than when they are in the classes learning life skills. But, there have been a few complaints because we don’t have any materials to give them. Ja, like pamphlets, booklets and short stories.

I: So, well, do you have any plans to run the play in the future?
C: Ja, there has been talk of taking the play to other provinces as they think that the performance is very good, but we are still discussing it with the education department. Hopefully we will be able to.

I: Ja hopefully. So, from one of your answers I guess that you don’t include pamphlets or materials to reinforce the message?
C: No, we give out timetables. They have a picture of JAE on them and a message from the minister and director of life skills. But that’s about all.

I: Oh, I never knew that.
C: Ja.

I: I was wondering how JAE and the DJ’s got involved in the play?
C: So Ja, the radio DJ’s were approached by NB Music because of their celebrity status and because people listen to them and the get through to the youth.

I: Oh OK. Well, do you think that you reach your audience and that the performance was effective?
C: Ja, definitely. The children seem receptive; they listen and are drawn to what the cast has to say. Ja, like a teacher also said that the children are more receptive and drawn to the DJ’s and the cast.

I: Right. And when was the play workshoped?
C: Lets see. Um, it would have been between the first of February and the 12.

I: OK, and how where the specific schools chosen?
C: They were chosen by the department because of their good matric pass rate. If they got a hundred per cent pass rate or had a significant increase they were chosen. The department had a database and they chose the top ones. There are 12 districts in KZN and they chose four schools from each.
Appendix 8

Summary of Phone Interview with Claurainne Swales (I)

Interviewer (I)
Claurainne (C)

I: What is Break Entertainment?
C: We mainly do promotions. It is an events company.
I: Is it 46 or 48 schools?
C: 46
I: Did the actors get paid?
C: They do. But I’m not sure how they get paid.
I: Did the funding from the department of education affect the message of the performance in terms of what the department wanted to bring across?
C: The department of education sports and culture wanted to bring across AIDS awareness in general. Break Entertainment sourced the actors and they workshoped the play and the specific messages they thought were important. For example stigma.
I: Do you have experience in the field of health communication and public service communication?
C: No.
I: Does anyone in Break Entertainment have experience in this field?
C: No.
I: Is anyone at Break Entertainment trained in offering formal and informal research to evaluate the effectiveness of the campaign?
C: Not formally trained, no.
I: Did you perform any sort of pre-testing or evaluation on the play?
C: No.
I: Do you always get this type of work?
C: It is the first AIDS play and the first health play we have done. It is the first performance we have done to contribute to social awareness.
Summary of Phone Interview (2)

I: Do you know if any local clinics were contacted about the play or invited to come and watch the play?

C: No, not at all.
Appendix 9

First Questionnaire for KwaSanti Secondary School

<table>
<thead>
<tr>
<th>Question 1: Do you know who JAE is?</th>
<th>Total</th>
<th>Percentage</th>
</tr>
</thead>
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<td></td>
</tr>
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<table>
<thead>
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<th>Question 2: Do you know who Babalwa from East Coast Radio is?</th>
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</tr>
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<tr>
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<table>
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<th>Total</th>
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<table>
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<td>No</td>
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Other Group

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**Question 5: How do you get AIDS?**

**Focus Group**

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<td>From coughing</td>
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</tr>
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<td>From saliva</td>
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<td>From blood</td>
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<th>No</th>
</tr>
</thead>
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<td>From sex</td>
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<td>1</td>
</tr>
<tr>
<td>From coughing</td>
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<td>0</td>
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<tr>
<td>From saliva</td>
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<td>From blood</td>
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All

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<tr>
<td>From coughing</td>
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<td>0</td>
</tr>
<tr>
<td>From saliva</td>
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<tr>
<td>From blood</td>
<td>15</td>
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**Question 7: Do you know anyone who is infected with HIV/AIDS?**

**Focus Group**

<table>
<thead>
<tr>
<th></th>
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<td>16</td>
<td>4</td>
</tr>
<tr>
<td>80%</td>
<td>80%</td>
<td>20%</td>
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Other Group

<table>
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</thead>
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<td>3</td>
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<tr>
<td>70%</td>
<td>70%</td>
<td>30%</td>
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</table>

**Question 8: Where have you heard about HIV/AIDS?**

**Focus Group**

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
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<td>The media</td>
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</tr>
<tr>
<td>School</td>
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</tr>
<tr>
<td>Friends</td>
<td>4</td>
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</tr>
<tr>
<td>Family</td>
<td>5</td>
<td>0</td>
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</table>
AIDS plays 6 60%
Church 5 50%
Other 4 40%

Other Group
The media 4 40%
School 7 70%
Friends 2 20%
Family 2 20%
AIDS plays 3 30%
Church 2 20%
Other 3 30%

All
The media 9 45%
School 13 65%
Friends 6 30%
Family 7 35%
AIDS plays 9 45%
Church 7 35%
Other 7 35%

Question 9: Do you talk about HIV/AIDS?
Focus Group
Yes 10 100%
No 0 0%

Other Group
Yes 9 90%
No 1 10%

All
Yes 19 95%
No 1 5%

Question 10: If the answer is yes to question 9, whom do you discuss HIV/AIDS with?
Focus Group
Friends 8 80%
Family 4 40%
Teachers 3 30%
Nurses and doctors at the clinic 1 10%
Priests/ religious workers 0 0%
Other 2 20%

Other Group
Friends 6 60%
Family 2 20%
Teachers 3 30%
Nurses and doctors at the clinic 3 30%
<table>
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<tr>
<th>Category</th>
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<th>Percentage</th>
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<tbody>
<tr>
<td>Priests/ religious workers</td>
<td>2</td>
<td>0</td>
<td>20%</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>0</td>
<td>30%</td>
</tr>
<tr>
<td><strong>All</strong></td>
<td>14</td>
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<tr>
<td>Friends</td>
<td>6</td>
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</tr>
<tr>
<td>Family</td>
<td>4</td>
<td>0</td>
<td>20%</td>
</tr>
<tr>
<td>Teachers</td>
<td>2</td>
<td>0</td>
<td>10%</td>
</tr>
<tr>
<td>Nurses and doctors at the clinic</td>
<td>5</td>
<td>0</td>
<td>25%</td>
</tr>
<tr>
<td>Priests/ religious workers</td>
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<tr>
<td>Other</td>
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**Question 11: Do you believe in abstinence?**

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<th>Group</th>
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<th>Percentage</th>
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<tbody>
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<td>0</td>
<td>100%</td>
</tr>
<tr>
<td>Other Group</td>
<td>8</td>
<td>2</td>
<td>80%</td>
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<tr>
<td><strong>All</strong></td>
<td>18</td>
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**Question 12: Do you believe that condom use is important in reducing the risk of AIDS?**

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<th>Yes</th>
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<th>Percentage</th>
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<tbody>
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<td>Focus Group</td>
<td>7</td>
<td>3</td>
<td>70%</td>
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<td>Other Group</td>
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<tr>
<td><strong>All</strong></td>
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**Question 13: Do you believe that being faithful to your partner is important?**

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<th>Percentage</th>
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<tr>
<td>Other Group</td>
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<td>0</td>
<td>100%</td>
</tr>
<tr>
<td><strong>All</strong></td>
<td>20</td>
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<td>100%</td>
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</table>
**Question 14: If you had/have a partner would you ask them to have an AIDS test?**

<table>
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<tr>
<th>Group</th>
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<th>%</th>
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<tbody>
<tr>
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<td>90%</td>
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<td>0</td>
<td>100%</td>
</tr>
<tr>
<td><strong>All</strong></td>
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<td>1</td>
<td>95%</td>
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**Question 15: Would your partner approve of having an AIDS test?**

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<td><strong>Other Group</strong></td>
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<td>70%</td>
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<tr>
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**Question 16: Do you think that sleeping with a virgin cures AIDS?**

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<td>100%</td>
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<tr>
<td><strong>Other Group</strong></td>
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<td>90%</td>
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<tr>
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**Question 17: Do you think that sangoma’s can cure AIDS?**

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<td>100%</td>
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<tr>
<td><strong>Other Group</strong></td>
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<td></td>
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<tr>
<td>Question 18: Do you think that it is OK to have more than one partner?</td>
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<tr>
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<td>9</td>
<td>10</td>
<td>19</td>
</tr>
<tr>
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<td><strong>100%</strong></td>
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**Question 19: Do your friends encourage you to sleep with your partner?**

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**Question 20: Does your partner encourage you to have sex with him/her?**

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</thead>
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Yes 10 100%
No 0 0%

All Yes 20 100%
No 0 0%

Yes 19 95%
No 1 5%

Yes 10 100%
No 0 0%

All Yes 20 100%
No 0 0%

Yes 6 30%
No 14 70%
Appendix 10

Question 1: Do you know who JAE is?

- Yes: 35%
- No: 65%

Appendix 11

Question 2: Do you know who Babalwa from East Coast Radio is?

- Yes: 50%
- No: 50%
Appendix 12

Question 3: Do you know who Khatide Ngobe, popularly known as 'Tshathugodo', from Ukhozi FM is?

35% Yes
65% No

Appendix 13

Appendix 14
Question 11: Do you believe in abstinence?

Yes: 90%  
No: 10%

Question 12: Do you think that condom use is important in reducing the risk of AIDS?

Yes: 85%  
No: 15%
Appendix 16

Question 13: Do you believe that being faithful to your partner is important?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>All</td>
<td>18</td>
<td>0</td>
</tr>
<tr>
<td>Focus Group</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Other Group</td>
<td>10</td>
<td>0</td>
</tr>
</tbody>
</table>

Appendix 17

Second Questionnaire for KwaSanti Secondary School

<table>
<thead>
<tr>
<th>Question 1 : Do you remember the JAE HIV/AIDS play?</th>
<th>Total</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>8</td>
<td>100%</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Other Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>10</td>
<td>100%</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>All</td>
<td>18</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 2: How much of the play do you remember?</th>
<th>Total</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A lot</td>
<td>4</td>
<td>50%</td>
</tr>
<tr>
<td>Quite a bit</td>
<td>4</td>
<td>50%</td>
</tr>
<tr>
<td>Not very much</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Nothing</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Other Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A lot</td>
<td>7</td>
<td>70%</td>
</tr>
<tr>
<td>Quite a bit</td>
<td>2</td>
<td>20%</td>
</tr>
<tr>
<td>Not very much</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>Nothing</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>
### Question 4: On a scale of 1 to 5, with 1 being the highest and 5 being the lowest, how much did you enjoy the JAE HIV/AIDS play?

#### Focus Group

<table>
<thead>
<tr>
<th>Rating</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>4</td>
<td>50%</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>13%</td>
</tr>
<tr>
<td>3</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>4</td>
<td>2</td>
<td>25%</td>
</tr>
<tr>
<td>5</td>
<td>1</td>
<td>13%</td>
</tr>
</tbody>
</table>

#### Other Group

<table>
<thead>
<tr>
<th>Rating</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>50%</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>20%</td>
</tr>
<tr>
<td>3</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>4</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>5</td>
<td>2</td>
<td>20%</td>
</tr>
</tbody>
</table>

#### All

<table>
<thead>
<tr>
<th>Rating</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>9</td>
<td>50%</td>
</tr>
<tr>
<td>2</td>
<td>3</td>
<td>17%</td>
</tr>
<tr>
<td>3</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>17%</td>
</tr>
<tr>
<td>5</td>
<td>3</td>
<td>17%</td>
</tr>
</tbody>
</table>

### Question 5: Rate the characters from the play from your favourite to your least favourite. Write 1 next to your favourite character, 2 next to your second favourite character and so on.

#### Focus Group

<table>
<thead>
<tr>
<th>Character</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tk</td>
<td>18</td>
<td>23%</td>
</tr>
<tr>
<td>Nolene</td>
<td>23</td>
<td>29%</td>
</tr>
<tr>
<td>Adrian</td>
<td>19</td>
<td>24%</td>
</tr>
<tr>
<td>Grandfather</td>
<td>20</td>
<td>25%</td>
</tr>
<tr>
<td>Invalid Answer</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

#### Other Group

<table>
<thead>
<tr>
<th>Character</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tk</td>
<td>10</td>
<td>16%</td>
</tr>
<tr>
<td>Nolene</td>
<td>16</td>
<td>25%</td>
</tr>
<tr>
<td>Adrian</td>
<td>18</td>
<td>28%</td>
</tr>
<tr>
<td>Grandfather</td>
<td>16</td>
<td>25%</td>
</tr>
<tr>
<td>Invalid Answer</td>
<td>4</td>
<td>6%</td>
</tr>
</tbody>
</table>

#### All
Question 6: Who was your favourite DJ?

Focus Group
- Babalwa: 4 (50%)
- Khatide: 3 (38%)
- Both: 1 (13%)

Other Group
- Babalwa: 8 (80%)
- Khatide: 2 (20%)
- Both: 0 (0%)

All
- Babalwa: 12 (67%)
- Khatide: 5 (28%)
- Both: 1 (6%)

Question 7: Did you enjoy JAE's songs? Rate how much you enjoyed them on the scale of 1 to 5, with 1 being the highest and 5 being the lowest.

Focus Group
- 1: 4 (50%)
- 2: 1 (13%)
- 3: 1 (13%)
- 4: 0 (0%)
- 5: 2 (25%)

Other Group
- 1: 7 (70%)
- 2: 3 (30%)
- 3: 0 (0%)
- 4: 0 (0%)
- 5: 0 (0%)

All
- 1: 11 (61%)
- 2: 4 (22%)
- 3: 1 (6%)
- 4: 0 (0%)
- 5: 2 (11%)

Question 9: Do you think that you remembered the play to a greater extent as a result of the celebrities in the play?

Focus Group
- Yes: 7 (88%)
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Question 10</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you learn anything new from the play or did you already know everything you were taught?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Focus Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes, I learnt something new</td>
<td>3</td>
<td>5</td>
<td>38%</td>
</tr>
<tr>
<td>No, I did not learn anything new</td>
<td>5</td>
<td>3</td>
<td>63%</td>
</tr>
<tr>
<td>Other Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes, I learnt something new</td>
<td>10</td>
<td>0</td>
<td>100%</td>
</tr>
<tr>
<td>No, I did not learn anything new</td>
<td>0</td>
<td>10</td>
<td>0%</td>
</tr>
<tr>
<td>All</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes, I learnt something new</td>
<td>13</td>
<td>5</td>
<td>72%</td>
</tr>
<tr>
<td>No, I did not learn anything new</td>
<td>5</td>
<td>8</td>
<td>28%</td>
</tr>
<tr>
<td><strong>Question 11</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did the play tell you how to avoid contracting AIDS?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Focus Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>0</td>
<td>8</td>
<td>0%</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>8</td>
<td>100%</td>
</tr>
<tr>
<td>Other Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>4</td>
<td>6</td>
<td>40%</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>6</td>
<td>60%</td>
</tr>
<tr>
<td>Other Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>4</td>
<td>14</td>
<td>22%</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>14</td>
<td>78%</td>
</tr>
<tr>
<td><strong>Question 13</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did the play teach you that people with AIDS could look healthy?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Focus Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>4</td>
<td>4</td>
<td>50%</td>
</tr>
<tr>
<td>No</td>
<td>4</td>
<td>4</td>
<td>50%</td>
</tr>
<tr>
<td>Other Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>6</td>
<td>4</td>
<td>60%</td>
</tr>
<tr>
<td>No</td>
<td>4</td>
<td>4</td>
<td>40%</td>
</tr>
<tr>
<td><strong>All</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Yes 10 56%
No 8 44%

**Question 15: Do you think that pupils were influenced by the play to stop stigmatising other pupils and people with AIDS?**

**Focus Group**
- Very much so 3 38%
- To some degree 4 50%
- Absolutely not 1 13%

**Other Group**
- Very much so 3 30%
- To some degree 4 40%
- Absolutely not 3 30%

**All**
- Very much so 6 33%
- To some degree 8 44%
- Absolutely not 4 22%

**Question 16: Rate to what extent you think that the play made you think about people with AIDS in a more positive light with 1 being the highest and 5 being the lowest.**

**Focus Group**
- 1 4 50%
- 2 1 13%
- 3 3 38%
- 4 0 0%
- 5 0 0%
- Invalid Answer 0 0%

**Other Group**
- 1 6 60%
- 2 1 10%
- 3 1 10%
- 4 1 10%
- 5 0 0%
- Invalid Answer 1 10%

**All**
- 1 10 56%
- 2 2 11%
- 3 4 22%
- 4 1 6%
- 5 0 0%
- Invalid Answer 1 6%

**Question 17: What phrases did the actors make you chant?**

**Focus Group**
<table>
<thead>
<tr>
<th>Response</th>
<th>Focus Group</th>
<th>Other Group</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS is scary</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Can we live with AIDS? Yes we can</td>
<td>4 (44%)</td>
<td>6 (50%)</td>
<td>10 (48%)</td>
</tr>
<tr>
<td>Protect yourself from AIDS</td>
<td>3 (33%)</td>
<td>1 (8%)</td>
<td>4 (19%)</td>
</tr>
<tr>
<td>AIDS kills</td>
<td>2 (22%)</td>
<td>5 (42%)</td>
<td>7 (33%)</td>
</tr>
</tbody>
</table>

**Question 18: Did you get irritated with the AIDS message?**

<table>
<thead>
<tr>
<th>Response</th>
<th>Focus Group</th>
<th>Other Group</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>3 (38%)</td>
<td>6 (60%)</td>
<td>9 (50%)</td>
</tr>
<tr>
<td>No</td>
<td>5 (63%)</td>
<td>4 (40%)</td>
<td>9 (50%)</td>
</tr>
</tbody>
</table>

**Question 19: Who have you discussed the play with?**

<table>
<thead>
<tr>
<th>Group</th>
<th>Focus Group</th>
<th>Other Group</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends</td>
<td>8 (36%)</td>
<td>10 (67%)</td>
<td>18 (52%)</td>
</tr>
<tr>
<td>Family</td>
<td>5 (23%)</td>
<td>3 (20%)</td>
<td>8 (25%)</td>
</tr>
<tr>
<td>Teachers</td>
<td>3 (14%)</td>
<td>1 (7%)</td>
<td>4 (12%)</td>
</tr>
<tr>
<td>Church</td>
<td>2 (9%)</td>
<td>0 (0%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Nurses</td>
<td>2 (9%)</td>
<td>0 (0%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Doctors</td>
<td>1 (5%)</td>
<td>1 (7%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Other</td>
<td>1 (5%)</td>
<td>0 (0%)</td>
<td>1 (3%)</td>
</tr>
</tbody>
</table>
Friends 18 49%
Family 8 22%
Teachers 4 11%
Church 2 5%
Nurses 2 5%
Doctors 2 5%
Other 1 3%

Question 20: Have you done anything in school that relates to the play?
Focus Group
Yes 2 25%
No 6 75%

Other
Yes 4 40%
No 6 60%

All
Yes 6 33%
No 12 67%

Appendix 18

Question 2: How much of the play do you remember?

- A lot 50%
- Quite a bit 45%
- Not very much 5%
- Nothing 0%

Appendix 19
Question 4: On a scale of 1 to 5, with 1 being the highest and 5 being the lowest, how much did you enjoy the JAE HIV/AIDS play?

Appendix 20

Question 6: Who was your favourite DJ?

Appendix 21
Question 9: Do you think that you remembered the play to a greater extent as a result of the celebrities in the play?

- Yes: 89%
- No: 11%

Appendix 22

Question 10: Did you learn anything new from the play or did you already know everything you were taught?

- Yes, I learnt something new: 28%
- No, I did not learn anything new: 72%
Question 16: Rate to what extent you think that the play made you think about people with AIDS in a more positive light, with 1 being the highest and 5 the lowest.

![Pie chart showing the distribution of responses with 55% for 1, 22% for 2, 11% for 3, 6% for 4, and 6% for 5.](image)

Appendix 24

Question 19: Who have you discussed the play with?

![Pie chart showing the distribution of discussions with 49% for Friends, 22% for Family, 11% for Teachers, 5% for Church, 5% for Nurses, 5% for Doctors, 5% for Other, and 3% for Invalid Answer.](image)
Appendix 25

Question 20: Have you done anything in school that relates to the play?

- Yes: 67%
- No: 33%

Appendix 26

Appendix 27
First Questionnaire

**HIV/AIDS Questionnaire At KwaSanti Secondary School**

In the following questionnaire please tick the correct answers and fill in the blank spaces

1. Do you know who Jae is?
   a) Yes
   b) No

2. Do you know who Babalwa from East Coast Radio is?
   a) Yes
   b) No

3. Do you know who Khatide Ngobe, popularly known as ‘Tshathugodo’, from Ukhozi FM is?
   a) Yes
   b) No

4. Do you know what Aids is?
   a) Yes
   b) No

5. How do you get Aids?
   a) From sex
   b) From coughing
   c) From saliva
   d) From blood

6. Name two way of protecting yourself from HIV/AIDS
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

7. Do you know anyone who is infected with HIV/AIDS?
   a) Yes
   b) No

8. Where have you heard about HIV/AIDS?
   a) The media
   b) School
   c) Friends
   d) Family
   e) AIDS plays
f) Church
  g) Other

9. Do you talk about HIV/AIDS?
   a) Yes
   b) No

10. If the answer is yes to Question 9, whom do you discuss HIV/AIDS with?
    a) Friends
    b) Family
    c) Teachers
    d) Nurses and doctors at the clinic
    e) Priests
    f) Other

11. Do you believe in abstinence?
    a) Yes
    b) No

12. Do you believe that condom use is important in reducing the risk of AIDS?
    a) Yes
    b) No

13. Do you believe that being faithful to your partner is important?
    a) Yes
    b) No

14. If you had/have a partner would you ask them to have an AIDS test?
    a) Yes
    b) No

15. Would your partner approve of having an AIDS test?
    a) Yes
    b) No

16. Do you think that sleeping with a virgin cures AIDS?
    a) Yes
    b) No

17. Do you think that sangoma’s can cure AIDS?
    a) Yes
    b) No

18. Do you think that it is OK to have more than one partner?
    a) Yes
    b) No
19. Do your friends encourage you to sleep with your partner?
   a) Yes
   b) No

20. Does your partner encourage you to have sex with him/her?
   a) Yes
   b) No

21. How would your friendship be affected if one of your friends were infected with HIV/AIDS?
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   _____

22. What is your opinion of the statement HIV/AIDS kills?
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
Appendix 28
Second Questionnaire for KwaSanti Secondary School

Please tick next to your answers. If there are a range of answers to choose from multiple ticks are allowed.

Age: …………..
Sex: …………..

1. Do you remember the JAE HIV/AIDS play?
   Yes ______
   No ______

2. How much of the play do you remember?
   A lot _____
   Quite a bit _____
   Not very much ______
   Nothing _____

3. What messages stood out most for you about the play?
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   ___

4. On a scale of 1 to 5, with 1 being the highest and 5 being the lowest, how much did you enjoy the JAE HIV/AIDS play?
   1  2  3  4  5

5. a) Rate the characters from the play from you favourite to your least favourite.
Write 1 next to your favourite character, 2 next to your second favourite character and so on.

TK _____
Noleen _____
Adrian ______
Grandfather ______

b) Why did you like your favourite character and why did you not like your least favourite character?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

6. Who was your favourite DJ and why?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

7. Did you enjoy JAE’s songs? Rate how much you enjoyed them on the scale of 1 to 5 with 1 being the highest and 5 being the lowest.
1 2 3 4 5

8. What messages did Jae’s songs have in them?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

9. Do you think that you remembered the play to a greater extent as a result of the celebrities in the play?
Yes ______
No ______

10. a) Did you learn anything from the play or did you already know everything you were taught?
Yes, I learnt something new ______
No, I did not learn anything new ______

b) If your last answer was yes what did you learn?

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

11. a) Did the play tell you how to avoid contracting AIDS?
   Yes ______
   No ______

   b) If your last answer was yes what did it tell you?
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________

12. Did the play say that only ‘abnormal people’ could catch AIDS?
   Yes ______
   No ______

13. a) Did the play teach you that people with AIDS could look healthy?
   Yes _____
   No ______

   b) Who in the play had AIDS but looked healthy?
   __________________________________________________________________

14. a) Do you think that you could ever catch AIDS?
   Yes _____
   No _____

   b) Please explain your answer.
15. Do you think that pupils were influenced by the play to stop stigmatising other pupils and people with AIDS?
   Very much so _____
   To some degree ____
   Absolutely not _____

16. Rate to what extent you think that the play made you think about people with AIDS in a more positive light with 1 being the highest and 5 being the lowest.
   1  2  3  4  5

17. What phrases did the actors make you chant?
   AIDS is scary ______
   Can we live with AIDS? Yes we can ______
   Protect yourself from AIDS ______
   AIDS kills ______

18. Did you get irritated with the AIDS message in the play?
   Yes ___
   No ___
   Why?
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
19. a) Who have you discussed the play with?
   Friends _____
   Family _____
   Teachers ______
   Church ______
   Nurses ______
   Doctors ______
   Other ______

   b) What did you discuss?
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

20. a) Have you done anything in school that relates to the play?
   Yes _____
   No _____

   b) What did you do?
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

Appendix 29

Summary of telephone interview with the Director of NB Music Records

I: Interviewer
N: Noel Kok  (Director of NB Music Records)
I: Has Jae done any other AIDS plays or activities in the past?
N: Yes, yes she has.
I: What sort of things has she done?
N: Well, since 2002 she has been doing performances in schools in Cape Town, Joburg, and Durban. She promotes a positive life style in an AIDS context.
I: What does she do in these performances?
N: They are very similar to the JAE play except that she is on her own and there is no drama. She sings and then speaks in between the singing.
I: I don’t know if you know if Babalwa or Khatide have done anything to do with AIDS in the past?
N: No, I don’t think that they have done anything formally on their own. Their radio stations might have but this is their first formal AIDS project. We also sourced the actors, rappers and dancers according to our development plan where we include local talent.
I: Thanks a lot, you’ve been very helpful.
N: It’s a pleasure.