

The use of culturally themed HIV messages and their implications for future behaviour change communication campaigns: the case of Botswana



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ABSTRACT

The 'ABC' approach promoted at the beginning of the HIV/AIDS epidemic in Botswana has failed to yield significant behaviour change. Formative research was conducted in urban, semi-urban and rural areas to explore how the use of sociocultural messages depicted in posters elicited people's response to HIV/AIDS-related behaviours. The research interrogated values and practices underpinning Tswana philosophy in relation to parent-child communication, voluntary counselling and testing, condom use and faithfulness. A total of 206 individuals aged 15 - 49 years were purposively interviewed. The results showed that this campaign was perceived as an activation of positive Batswana culture to modify harmful norms, values and social practices, drawing upon those cultural aspects favouring more positive behaviour. We conclude that behaviour change communication should promote links to cultural values and principles. This can be achieved by: communication in other languages in order to reach all groups in Botswana; providing opportunities for venturing into other ways of communicating HIV/AIDS messages to Batswana in light of literacy skills; and using communication media that is developed on the basis of cultural approaches and focuses on segmented population groups.

Keywords: culture, culturally themed messages, values, practices, risk-related behaviours.

RÉSUMÉ

L'approche 'ABC' qui a été promue au début de l'épidémie du VIH/SIDA au Botswana n'a pas réussi à rendre le changement de comportement souhaité. Une recherche formative a été menée dans des milieux urbain, semi-urbain et rural afin d'étudier comment l'emploi des messages socioculturels représentés sur des affiches a pu provoquer une réponse des gens par rapport aux comportements liés au VIH/SIDA. Cette recherche a interrogé les valeurs et les usages qui sont à la base de la philosophie 'tswana' notamment la communication parent-enfant, la consultation et le dépistage volontaires, l'utilisation du préservatif et la fidélité. Un total de 206 individus âgés de 15 à 49 ans ont été interviewés avec un but précis. Les résultats de cette étude ont montré que cette campagne était perçue comme une mise à pied d'une culture positive des 'Batswana' afin de modifier des normes, des valeurs et des usages sociaux nuisibles tout en puisant des aspects culturels qui favorisent davantage un comportement positif. Nous tirons une conclusion que la communication de changement de comportement doit encourager des liens des valeurs et des principes culturels. Ceci peut se réaliser par: communiquer en d'autres langues afin d'atteindre tous les groupes du Botswana; mettre à disposition des occasions de s'aventurer dans d'autres moyens de communiquer les messages du VIH/SIDA auprès des 'Batswana' concernant les habilités d'alphabétisation; et par la communication des médias développés sur des bases des approches et des points de focalisation sur des groupes de la population segmentés.

Mots clés: la culture, les messages à thèmes culturels, des valeurs, des usages, des comportements à risque.

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INTRODUCTION

Botswana has been applauded for its ability to retain aspects of cultural tradition based on principles and governance of respect, trust, cooperation and consultation. These principles have over the years strengthened communities and helped overcome many socio-economic and political challenges. However, it seems these strengths have not been taken into consideration in developing communication materials and messages advocating behaviour change in HIV/AIDS campaigns. According to Heald (2002) Botswana has failed in the model of intervention used in the educational effort, which she argues is heavily reliant on Western experiences and lacking the differing cultural definitions of the disease and the responses of people to educational campaigns. Hence HIV/AIDS cases continue to rise in the country with more than one-third of pregnant women in the 1.7 million population being infected with HIV, despite heavy exposures to HIV/AIDS messages (NACA, 2003). A recent national survey indicates that HIV prevalence among all Botswana is 17.1% (Republic of Botswana, 2005).

BACKGROUND

Botswana's leadership has been instrumental in curbing and managing the negative effects of the epidemic in the country in the last decade. The president of the Republic of Botswana has since declared HIV/AIDS a national emergency and rallied all sectors to scale up responses to the epidemic. In addition, national documents such as the National Strategic Framework (2003 - 2009), the National Development Plan 9 and Vision 2016 (1997) all articulate the goals and strategies that underpin the national response to HIV/AIDS. Efforts in the fight against HIV/AIDS have also been demonstrated by the number of strategic partnerships that have been developed between the government and the international community. The Merck Company Foundation and the Bill and Melinda Gates Foundation are in partnership with the Government through the African Comprehensive HIV/AIDS Partnerships (ACHAP). ACHAP is a unique public-private partnership venture, which is committed to supporting Botswana's comprehensive HIV/AIDS response (www.achap.org). The public-private partnership is a first of its kind in Botswana's history of disease management. The Centers for Disease Control (CDC) has also been working

with the government of Botswana in the area of voluntary counselling and testing. United Nations agencies, particularly UNDP, UNAIDS, UNFPA and UNICEF, have demonstrated their contributions to fighting HIV/AIDS in Botswana.

Despite all efforts to fight HIV/AIDS in the country, the epidemic has proven to be too powerful for the national response mounted against it. Letamo (2003) argues that the continued rise in HIV prevalence in Botswana is an indication that efforts to reduce HIV infection are not effective. In particular he alludes to limited understanding of the cultural, economic and social barriers that impede the wide scale and consistent use of condoms for STI including HIV prevention in Botswana. In addition deliberations from the National HIV/AIDS/STI and other Related Infectious diseases Research Conference (NHASORC) held in Gaborone, Botswana from the 8 to 11 November 2003 (Botswana, 2003) further accentuate the need to study and understand the cultural contexts within which HIV-risky behaviours take place, in order to implement effective behaviour change communication interventions.

Already, studies show that the 'ABC' approach promoted at the beginning of the HIV/AIDS epidemic was not very effective, particularly in the context of Botswana's cultural and language diversity. Heald (2002) notes that HIV/AIDS was initially portrayed as a killer disease through messages such as 'AIDS Kills' on billboards. This reinforced negative perceptions about HIV/AIDS in the public domain, possibly contributing to increased stigma and discrimination. The 'ABC' approach was didactic, focusing on telling Botswana what to do, and not necessarily explaining how or why they should abstain from sex, stick to one sexual partner or use condoms. However, Shelton *et al.* (2004) show that in Uganda each component of the 'ABC' approach had an important role in HIV prevention, as is indicated by the estimated decline in prevalence of HIV in adults from about 15% to 5% during the past decade.

Reviews of HIV/AIDS communication campaigns indicate that mass media have been the primary method for disseminating HIV/AIDS prevention messages worldwide (Myhre & Flora, 2000). However, scholars have also argued that HIV/AIDS

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communication campaigns have not been based on community-wide intervention strategies and integration of theories or models (McCallum, 1995; Myhre & Flora, 2000). One important way of enhancing the effectiveness of communications is to design messages that are based on the target audience's values, needs and interests. McCallum (1995) and The National Cancer Institute (1990) argue that communication campaigns should take into consideration societal rules (what people say they ought to do), societal norms (what people say they do), and the reality (what people can actually do).

The findings of Rudd *et al.* (2004) show that in order for people to be involved in action steps for health issues, they must be informed. An understanding of the audience, and relevance of materials to their values, needs and interests can also be achieved through piloting and, where appropriate, careful revision of the draft materials (McCallum, 1995; Rudd *et al.*, 2004; The National Cancer Institute, 1990).

The current study sought to investigate how individuals reflect on their values (Setswana) and practices with images representing HIV/AIDS-related behaviours. In particular, the study interrogated values and practices underpinning Tswana philosophy in relation to parent-child communication, voluntary counselling and testing (VCT), condom use and faithfulness. This approach served to provoke discussion around various ways of using culturally mediated behaviour change communication (BCC) messages in Botswana's public health education programme. The overall goal was to go beyond the current practice of direct translation of health messages from English into Setswana without exploring the use of contexts and language communication to present learning contexts within non-English/Western cultural settings.

METHODS

In carrying out the study, key informant interviews, structured observations and focus group interviews were conducted in urban, peri-urban and rural areas in Botswana. Rapid assessment methods such as focus group discussion, key informant interviews, structured observations and participatory appraisals are increasingly being used in formative research studies. These methods provide rich, in-depth understanding of programme and policy effects, and permit greater opportunities for the involvement of local

communities (Porter & Prysor-Jones, 1997). Thus the above-mentioned interview types were used for this formative research study.

The study used a substantive frame which comprised the topic outline guide and the interview guide. The topic outline guide was designed to elicit answers to the research questions of the study, and it covered four main issues: reactions to the images; reactions to the proverb/text; taking the text and image together; and feelings and reactions to the text and images.

The interview guide aided in deciding whom to interview. Two distinct categories of potential respondents were identified. The first category consisted of people who were uniquely able to be informative because of their being community leaders in a selected community, such as chiefs and community-based organisation (CBO) leaders. The second category was of people who, taken together, would display a variety of reactions, and these were youth aged 15 - 24 and adults aged 25 - 49.

Discussants and respondents were selected to satisfy both categories. For each of the nine areas involved in the research, key informant interviews were held with one community leader, and one CBO leader; while for the key participant interviews, discussions were held with five randomly selected community members. For the focus groups, interviews were held with one youth group (15 - 24 years), one adult woman (25 - 49 years) and one adult man (25 - 49 years) group in all the nine areas in Botswana.

MATERIALS DEVELOPMENT

The study was conducted in two phases. The first phase was a pre-test of the draft image materials (Setswana proverbs and English text messages). An inventory of the traditional Setswana proverbs which conveyed values of compassion and shared responsibility in fighting HIV/AIDS were compiled by the University of Botswana, and selected proverbs were then juxtaposed with images depicting familiar but often discordant HIV risk-related practices. The draft materials were then commissioned to Alliance Media Botswana, who hired models and created the suggested photographic scenes of HIV/AIDS-related behaviours.

Following the development of the materials, an evaluation was done to inform the selection of proverbs with great potential to convey messages about

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compassion, parent-child communication, HIV testing and condom use. This evaluation was carried out by a group of four trained interviewers, with supervision from the research team from the University of Botswana. Twenty-seven key informant interviews and 23 focus group interviews was carried out at the nine sites (urban, peri-urban and rural areas). Participants' responses to the materials were captured, as well as how the materials might be further refined and developed to show values and practices that supported Botswana's fight against HIV/AIDS.

The materials were modified after the first pre-test, and were developed for the second phase of field testing with a modified set of materials comprising Setswana tested images only. This second phase of the study was formative research, which was conducted in Gaborone, Ramotswa and Molepolole over a period of 6 days. Some discussants and respondents were selected using purposive sampling whereas others were selected through snowball sampling. Purposive sampling is sampling that 'employs the judgment of an expert in selecting cases or it selects cases with a specific purpose in mind ... a researcher uses it to select unique cases that are especially informative' (Neuman, 1997, p. 206). It is generally used when a researcher wants to identify particular types of cases for in-depth interviews or focus group discussions. Its purpose is less to generalise to a larger population than it is to gain a deeper understanding of types (Neuman, 1997). On the other hand, snowball sampling is defined as a 'nonprobabilistic form of sampling in which persons initially chosen for the sample are used as informants to locate other persons having necessary characteristics making them eligible for the sample' (Bailey, 1994, p. 438). It is a sampling procedure that uses a process of chain referral, whereby each contact is asked to identify additional members of the target population, who are asked to name others, and so on (Singleton, Straits & Straits, 1993). It is a multi-stage technique which begins with one or a few people or cases and spreads out on the basis of links to the initial cases. Some discussants and respondents for both the focus group discussions and in-depth interviews were invited with the help of the key informants.

Different methods were used to identify respondents, because the goal was to locate as many respondents as possible. The purpose was less to generalise to a larger population than it was to gain a deeper understanding

of how people interpreted and comprehended the draft materials, what people liked and disliked about these materials, and how people were likely to react to and/or respond to these materials.

Following the formative research, the materials were modified based on the feedback from the field, and the final posters (text and message) printed and displayed at 109 bus-shelters throughout Botswana by Alliance Media Botswana.

ANALYSIS OF DATA

Data coding

While the general issues that were of interest to the paper were determined prior to the analysis, the specific nature of the categories and themes to be explored was not determined beforehand. Rather, the categories were induced from the data. Coding was performed by reviewing a set of field notes, which were transcribed and synthesised, and then dissected them meaningfully, while keeping the relations between parts intact. These codes are tags or labels for assigning units of meaning to the descriptive information compiled during analysis (Miles & Huberman, 1994). Out of the coding, excerpt files, which basically are collections from many discussion groups and interviews dealing with the same issue (e.g. reactions to the images), were formed. The coding of the material in an excerpt file constituted a statement of what we believed the material communicated. This selective coding or theoretical coding involved the identification of the core category or story on which the analysis focused (Ezzy, 2002). For instance, one section dealt with all concepts and categories that were addressing 'reactions to the proverbs/text', whereas another section dealt with all concepts and categories that were addressing 'feelings and reactions'.

Integration was done in two stages: a first stage of bringing together material into coherent scenes, called local integration; and a second stage in which scenes are linked into a coherent story, called inclusive integration (Weiss, 1994). Local integration brought coherence and meaning to excerpt file materials and their coding. That is, through local integration, our observations and understandings were organised and integrated in each section of the paper. Local integration is achieved by simply summarising the excerpt file and its codings. This is done by first

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summarising the main line of the materials: what most respondents say; then turning to the material that does not fit in the main line, the variants, and summarising them. Where there were many variants, the definition of what constituted the main line would then be construed to be unsatisfactory and would warrant that we moved to a more inclusive formulation. Inclusive integration knitted into a single coherent story the otherwise isolated areas of analysis that resulted from local integration. Inclusive integration entailed developing a framework that included all the analyses we wanted to report, moving logically from one area to the next and leading to some general conclusions. That is, materials that dealt with the same issue were brought together no matter where the material originally appeared in the interview transcripts, and the material was then organised into a story of that issue.

Issue-focused analysis

An issue-focused approach was adopted in analysing the qualitative data. This is an approach that describes what has been learned from all informants about a particular issue. Four processes involved in producing an issue-focused analysis of interview materials were: coding, sorting, local integration and inclusive integration techniques (Weiss, 1994). An analysis whose aim is issue-focused concerns itself with what could be learned about specific issues (or events or processes) from any and all respondents. An issue-focused description moves from discussion of issues within one area to discussion of issues within another, with each area logically connected to the others. Excerpts are presented using the 'preservationist approach' (Weiss,

1994, p. 192); that is, material is presented in the original speech so as to reproduce the words on tape as accurately as possible. Verbatim vernacular words, with English translations in parenthesis, are inserted in places for emphasis. Since the focus group discussions and in-depth interviews are not representative, terms like 'a few', 'some' or 'many' are employed to give impressionistic views in situations where to state proportions would be meaningless.

RESULTS

Formative research was conducted in nine sites in Botswana and a total of 206 individuals in the age range 15 - 49 years were interviewed. Data from the study were analysed according to participants' reactions to the themes, which were encoded in the images representing HIV/AIDS-related behaviours, and pasted on the panels of the poster. The themes identified were: compassion and parent-child communication; VCT; condom use; and faithfulness. This section discusses participants' reactions and responses to the culturally themed messages and their implications for behaviour change communication campaigns in Botswana.

Proverbs used to invoke compassion and parent child communication (Pictures 1 - 4)

Respondents reacted well to the proverb in picture 1, as it evoked sentiments of care and compassion. Most of the respondents felt that the image and text gave a cautious warning that they too were vulnerable to HIV, and an HIV-positive life would mean challenges in the future.



Picture 1: *O se tshege yo oleng mareledi a sale pele* (One should not laugh at someone who has problems as they may also fall in the same trap) – Setswana proverb invoking compassion.

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Picture 2: *Susu ilela suswana, gore suswana a tle a go ilele* (Adults should behave in an exemplary way as young people can learn from them).



Pictures 3 and 4: *Bothhale jwa phala bo tswa phalaneng* (Adults can learn from young people).

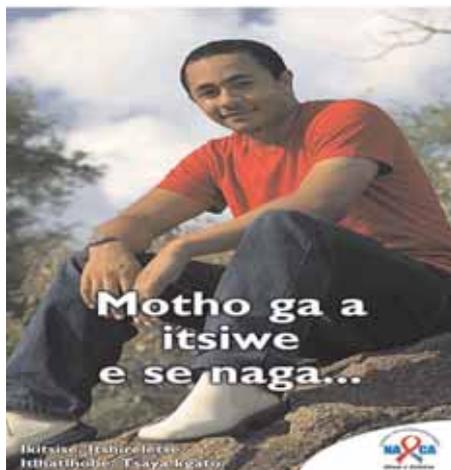
Responses to the proverb in picture 2 varied. While some of the participants articulated the importance of adults as mentors of youth on issues of HIV/AIDS and related behaviours, there were some who cautioned against parents/adults who do not behave in exemplary ways. Issues of adults tempting young people into sexual relationships were highlighted as a challenge to intergenerational respect.

This was the only poster that an overwhelming majority of discussants and respondents did not endorse. The poster was construed to be incongruent with the text and prevailing cultural practice. There was an outright negative reaction to the picture, with discussants and respondents perceiving it as ambiguous and illogical. It was suggested that the proverb be linked with an alternative matching picture. Some suggested that the proverb 'Tlhako ya morago e gata fa ya pele e gatileng teng' translation be used in lieu of 'Susu ilela suswana, gore suswana a tle a go ilele' as it would emphasise the need for parental or adult role modelling.

Many of the respondents liked the message of the proverb in pictures 3 and 4 and felt that it was relevant for showing that adults can be receptive to education from young people. They also recommended it for promoting the idea of parent-child communication on sensitive subjects such as human sexuality.

Regarding the implications of proverbs to promote compassion and parent-child communication, the messages from the above-mentioned proverbs (pictures

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Picture 5 and 6: *O se bone tholwana borethe teng ga yone go a baba; Motho ga a itsiwe e se naga* (You cannot judge a book by its cover) – proverbs invoking caution in partner selection and advocating HIV testing.

1 - 4) had deep resonances with experiences that the respondents had in their families and environments, and in particular the tensions surrounding communication between adults and young people. Interviewees felt strongly about the need to address issues of adults' role as mentor of young people and how they teach messages on care and compassion for a caring society, especially in the era of HIV/AIDS. Most of the participants felt the messages bridged the gap between their beliefs and behaviours and commended the medium for communicating messages within familiar cultural contexts.

Proverbs used to promote HIV testing (Pictures 5 - 7)

Most of the respondents comprehended the linkage between the text and message on HIV testing in pictures 5 and 6, and deemed the initiative to be timely and informative. They said it gave good advice and encouraged people not to be deceived by the looks of individuals, and end up in risky sexual relationships.

The image for the proverb in picture 7 was regarded as a practice that does not happen too often, but the text and the image were understood to encourage parents to be responsible for their children's sexual health. People commended the fact that this image showed that parents cared about their children's health and the image sent positive messages about discussing sexuality, something which is not commonly done in Botswana cultures (Taylor, Mookodi & Ntshebe, 2004).

Regarding the implications of the proverbs promoting HIV testing, findings indicated that promoting HIV testing in culturally appropriate ways can help address



Picture 7: *Mmangwana o tshwara thipa ka fa bogaleng* (Women or mothers will always sacrifice to protect their children) – Setswana proverb promoting testing.

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Pictures 8 and 9: *Kgetsi ya tsie e kgonwa ke go tshwaraganelwa* (Many hands make light work) – Proverb promoting male and female condom use.

stigma and discrimination, and can also enable members of the society to act on their values in a way that helps prevent HIV infections.

A proverb used to promote condom use (Pictures 8 and 9)

Most of the respondents were able to link condom use to responsible behaviour in a sexual relationship, and were in agreement that it should be a shared responsibility. However, the respondents acknowledged that it was still difficult for women openly to initiate condom use in relationships, thus it was hard to ascertain if what was in the picture does happen in real

life. Further, the participants echoed the need to market the female condom with the hope that this would empower women to negotiate safer sex in sexual relationships.

Regarding implications of proverbs promoting condom use, participants regarded condom use as one of the important measures to curb the spread of STIs including HIV. Hence, BCC campaigns should continue advocating condom use for both males and females, to prevent and reduce the risk of transmission of STIs. Lack of knowledge about the female condom and its low levels of usage call for addressing gender inequalities in sexual relationships. Lastly, it was evident from the responses that more research is needed to explain and understand determinants associated with condom use and non-use, as these differ from one society to another and between the different groups in a society.

Culturally themed messages used to promote faithfulness (Pictures 10 and 11)

There was instant recognition from picture 10 that the man with a flashy car seemed to be promiscuous (*matlho-matlho*). Promiscuous behaviour was reported to be common in communities, and was blamed for fuelling the spread of HIV/AIDS. Girls and women were also blamed for allowing men to entice them with material possessions such as cars, cash and cell phones (the 3Cs). Even though people understood that sticking to one partner was safe, there were concerns that the pictures portrayed men in a negative way, which suggested that men were promiscuous. Some of the men did not like pictures 10 and 11.

The text and images on the above-mentioned theme evoked the need to interrogate issues of masculinity and femininity in Botswana and their influence on sexual decision making, responsibilities and partner interaction in relationships. BCC campaigns need to address the missing link between societal rules (what people say they ought to do), norms (what people say they do) and the reality (what people actually do). Even though the pictures offended the sensibilities of many respondents, there was a suggestion that multiple sexual partnerships were not directly expressions of dominant masculine practices. Rather, they reflected how both men and women behave in sexual relationships and get exposed to higher risk of HIV infection.

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Pictures 10 and 11: *Go babalesegile go dirisana le moratiwa a le mongwe fela* (It is safe to have one sexual partner) – Setswana phrase promoting fidelity in a relationship.

DISCUSSION

The formative study sought to explore how the use of behaviour change communication messages developed in Setswana using local cultural contexts affected people's response to HIV/AIDS. This was achieved by gaining an understanding of how people interpret and comprehend culturally themed posters, what people liked and disliked about the materials, as well as how people were likely to react to and/or respond to these materials once in public spaces. The first three sections of the substantive frame dealt with the issue of how people interpreted and comprehended messages, and the last section titled 'feelings and reactions' covered the issues of what people liked and disliked about the materials, as well as how the greater public was likely to react to, and/or respond to these once visibly posted in public locations.

Many discussants and respondents commended the project initiative as a potentially effective and innovative socio-culturally-based public health communication system. They appreciated its use of

Setswana and deemed it a much better strategy than the previous campaigns of ABC (Heald, 2002), and recommended that these posters should not be confined to bus shelters, but also located in other places where even those who did not use public transport could view them (Walker, Reid & Cornell, 2004).

Further suggestions were made regarding the '*Kgetsi ya tsie...*' poster. Some discussants and respondents were completely unaware that the two separate hands exchanging condoms in the poster were that of a male and a female in the two posters. The proposal was that a male and female face should also appear on the poster, to enhance comprehension. In addition, the female condom should be clearly marked as a female condom to market it positively and promote it for women.

Of all the posters tested, only one was disapproved of by the respondents, and this was the poster '*Susu ilela suswana, gore suswana a tle a go ilele*'. Most of the

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discussants and respondents complained of the incongruence between the text and prevailing cultural practice. The respondents cautioned against elders who do not always behave in exemplary ways.

Non-Setswana speaking communities such as Basarwa and Bazeduru were not always able to understand and/or read the printed text. Difficulties in reading the printed text were also common among illiterate members of communities.

The current study shows that effective communication campaigns can be achieved if communication messages are based on target audience values, needs and interests. The study has demonstrated that BCC media which promote links to cultural values and principles has the potential to be persuasive to members of the public and to encourage them to adopt health-seeking behaviours for HIV prevention, care and support. The responses were largely positive regarding the use of culturally themed communication approaches. People were appreciative of the government of Botswana's initiative to tackle public health BCC from this approach, noting that it enabled them to reflect on their own values and consider what precautions they should take in their lives to help fight HIV/AIDS.

Given their presentation in Setswana, the posters also encouraged participants to interrogate their values regarding practices such as compassion, parent-child communication, VCT, condom use and fidelity in relationships. However, even though the approach encouraged the participants to interrogate their values regarding practices, there were instances where the audience members expressed discomfort, especially when the practices depicted tended to conflict with their traditional values in the associated proverb. The tensions were observed with mixed groups (male and female) and are suggestive of the need to capitalise on issues of fidelity, parent-child communication and sexuality in promoting safe sex and HIV prevention. This expression of discomfort is also regarded as an opportunity for further research on behaviour change and how audience members could reflect on their values and HIV risk behaviours.

The findings of the study also have implications for BCC approaches that are non-prescriptive and can harness the linkages between traditional values and social practice, in order to address the cultural setting in which HIV risk behaviour takes place. Using

culturally themed communication approaches can also provide an opportunity to promote responsible and compassionate behaviour within communities. Strong support expressed for culturally based communication approaches points to the need to introduce programmes that are based on socioculturally understood contexts. Contexts within which HIV risky behaviour take place, such as decisions regarding condom use, partner reduction and HIV testing, need to be interrogated through publicly generated discourses, and these posters presented one such avenue. This nascent culturally themed behaviour change campaign unearthed the fact that antagonistic beliefs and values often coexist with positive knowledge, and generate attitudes towards behaviour change that could account for the maintenance of an old practice or the abandonment of a new behaviour. These antagonistic beliefs and values have the potential to undermine the belief in the efficacy of the solution proposed or result in a negative trade-off in the costs and benefits associated with the adoption of the new behaviour (Wouters & Simonetti, 2001). These are revelations that the ABC approach, hitherto taken as a panacea for behaviour change communication, could not reveal.

This kind of study in Botswana is valuable as it raised some important observations for future research, namely that culturally mediated communication should take into account the diversity of audiences, particularly with regard to lack of literacy in traditional segments of the population and linguistically diverse populations. The study also raised the question of the blind spots in BCC media regarding subtle ethnic and other differences influenced by stereotypes about cultures in Botswana.

Further research would clarify whether people responded to the messages once they were publicised; and if individuals were provided with the 'right' information, would they display desired behaviour. More research is also needed to determine the target population characteristics and their relevance to the health behaviour to be changed. Perhaps even greater integration of theories and models needs to be explored for underpinning the effectiveness of HIV/AIDS communication campaigns in Botswana. Finally the study recommends an evaluation of the posters which have been displayed at the 109 bus shelters throughout Botswana.

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Limitations of the study

Time constraints for data collection meant that balancing the age composition of the discussants was not well adhered to. Thus adequate numbers in the lower and upper age limits of youth and adult discussants were very difficult to achieve. There was a gross miscalculation of the length of each interview: whereas it took a minimum of two hours to interview each key informant in the community, it took a minimum of three hours for focus group discussion. This resulted in interviewee fatigue, which had to be circumvented by limiting the number of probes for repeat designs like *Kegetsi ya tsie...*, *Bothale jwa phala...* and *Go babalesegile...*. This was due to very noticeable irritation among some discussants and respondents that 'we are repeating the same thing over and over again'.

Due to the difficulty of locating youth and obtaining their parental consent, for Ramotswa and Gaborone two youth groups were targeted at community junior secondary schools; while in Molepolole, the District HIV/AIDS Coordinator was instrumental in locating out- of-school youth for interviews. Two attempts to interview the community home-based care leader in Molepolole were futile, and this was the only CBO in the village.

The study did not measure how individuals process information that contributes to appropriate behaviour change, but rather how they interpreted and comprehended culturally themed HIV/AIDS messages. The idea was to evoke traditional, commonly held values with images representing HIV/AIDS-related behaviours, to foster respondents' assessment of any perceived gaps between their beliefs and their behaviours. The findings of the study can not be generalised to the whole population as this was a pilot survey. Nevertheless, the data collected are expected to form the baseline of HIV/AIDS communication strategies which take into consideration the challenges of social values, needs and interests.

Lastly, despite the above-mentioned constraints the data are believed to be of good quality because the interviewers were trained using interview guidelines and participated in pre-field investigations prior to carrying out the study.

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