THE EFFICACY OF TELEVISION ADVERTISING IN HEALTH COMMUNICATION I.E.C. CAMPAIGNS – A CASE STUDY OF THE 'TUME-CHILL' CAMPAIGN

By

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Declaration

I declare that this project entitled *The Efficacy of Television Advertising in Health Communication IEC Campaigns – A Case Study of the 'Tume-Chill' Campaign* is my original work and has not been submitted, either wholly or partially, to any other University or Examining Body for the award of any Degree.

Name   :   **Robi Koki Ochieng**

Signature   :   _____

Date   :   ____4/10/06____

This is to certify that this is a bonafide project work undertaken independently by Robi Koki Ochieng, under my guidance and supervision.

Name   :   **Mr. Patrick Maluki**

Signature   :   _____

Date   :   _____

Dedication

This Research Project is dedicated to my mother, Juliana Itumbi Kimeu, for giving me an education and material support through the thickest of times. To my father Paul Moherai O'motogori (deceased) for teaching me how to tough it out.

'Thus far the Lord has helped me'

Acknowledgement

Abstract

Information Education Communication (IEC) campaigns have been widely undertaken in the area of public health through the mass media including the radio, the dailies, television, leaflets and brochures, magazine posters and motivational talks. However establishing the effectiveness of such campaigns is difficult because the quality of IEC activities varies widely, because IEC activities rarely occur in a variation with the impact of IEC intervention being difficult to disaggregate from other programs element; because mass media campaigns differ widely among cultures that interpret messages in a wide variety of ways.

Personal communication has also been considerably used as IEC channel; Interpersonal communication is critical to the adoption and sustained practice of new behaviours. Face to face communication allows individuals to express their doubts and fears, receive feedback and reassurance and obtain vital information. Since sexuality and reproduction involves tense personal behaviours, personal contacts can help to address youths' individual concern and provide supportive environment.

Interpretation of communication events depends on individuals. In one sense of the word, then communication is synonymous with control: control of personal relationship, control of ones environment; hence communication is power, the more one knows about a phenomenon, the better it can be predicted and ones behaviour planned accordingly.

It is necessary to have a better understanding of the youth to influence their adoption and decision making process. This is possible only if their communication networks are understood and by increasing their awareness about existing phenomenon, through providing accurate information. The greatest challenge for the improvement of adoption of the message is changing the attitudes, to create new favourable attitudes. Special care should be given to developing positive image of the campaign.

While IEC Campaigns are often seen as a complex interaction between mass media and interpersonal influence, the principle goal of many campaigns is to increase discussion.

Communication research has shown that the mass media set the agenda for topics of discussion. Some beliefs, that the media influence opinion leaders who in turn through interpersonal communication persuade others to adopt opinion, attitude or practice. Thus increased sexuality behaviour discussion is an indirect effect of media campaign.

Increasing youth involvement in intervention information campaigns by creative initiatives that incorporate the unique circumstances of individuals, community and culture can be successful if the program combines accurate information, effective counseling and appropriate service delivery.

Looking at the behavioral effects of communication, rather than simply looking at the messages by themselves, contributes to acceptors, satisfaction with the campaign hence its effectiveness.

List of Abbreviations and Acronyms

AAPOR	America Association for Public Opinion Research
AED	Academy of Educational Development
AIDA	Attention, Interest, Desire and Action
AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral Treatment
CEDPA	Centre for Development & Population Activities
DRC	Democratic Republic of Congo
FBO	Faith Based Organizations
FRESH	Focusing Resources on Effective School Health
HIV	Human Immunodeficiency Virus
IEC	Information Education Commission
PATH	Programme for Appropriate Technology in Health
PCS	Population Commission Service
PLA'S	People Living with AIDS
PSI	Population Service International
SFH	Society for Family Health
SOMARC	Social Marketing for Change
SPSS	Statistical Package for Social Sciences
STD	Sexually Transmitted Diseases
STIS	Sexually Transmitted Infections
UNESCO	United Nations Educational, Scientific and Cultural Organizations
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VCT	Voluntary Counseling Centre
WHO	World Health Organizations

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CHAPTER ONE

1.1   Introduction

Human reproduction is one key to human survival and continued health. It is a sensitive and challenging area of public health which is also dependent on the individual's conscience, religious guidance, personal choice or family privacy. Issues of reproductive and sexual behaviour however do have public consequences especially due to population explosion.

Unlike today, due to loosened family ties, regulations of sexual and reproductive behaviour of individuals existed in the past within the family structure through the enforcement of traditions and laws, the social structure and norms. Nowadays there is a requirement for public efforts to help people realize the need to protect their reproductive health and control their fertility.

There are a variety of national and international programs that address issues like high fertility, reduced teenage pregnancies, promote safe motherhood, increase of child survival, curb spread of HIV and other STD's and the aversion of domestic violence against women and children. The challenge remains in designing, implementing and evaluating public health programs that address private behaviour[1].

Communication can be done through planned interventions of governmental, non-governmental organizations or even commercial enterprise. It can be used to initiate change, accelerate change that is already underway or reinforce change. Spreading of knowledge, values and norms can introduce new values or change the priorities of existing values. Communication helps in learning behaviour about other people and turning these into normative acceptable behaviour.

Modern communication media tends to make taboo topics legitimate for discussion. Radio and television tends to reduce the embarrassment of talking to friends or family about these

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[1] Phylis T.Piotrow et al, "Health Communication: Lessons from Family Planning and Reproductive Health".

issues. Therefore sending designed messages aimed at changing perceptions to positive behaviour through these media can bear rewarding consequences.

Efforts to have changes towards family planning in the previous decades were undertaken by the Population Communications Service in 1982, which was awarded by USAID to the John Hopkins University School of Public Health and may been accredited as being a readily accessible source of professional communication skills, funding support and technical assistance for these programs worldwide.

Population Communications Service (PCS) works in close partnerships with, various NGO's and commercial firms in over 50 countries. Some of these organizations include Academy of Educational Development (AED), Program for Appropriate Technology in Health (PATH), Save The Children, Center for Development and Population Activities (CEDPA) just to mention a few.

Population Communications Service (PCS) aimed at activities that could be applied in making informed individual choices in issues relating to change in personal behaviour. These changes have to be in favour of community norms and supportive of government policies that achieve their health goals. Changes towards Family Planning were due to the diffusion of new behaviour, ideas and technology.

Communication was to stimulate behaviour change through the mass media, community activities and inter- personal discussions. It was hoped that by introducing the community to new ideas and opportunities, what was unknown or taboo became familiar. From a social economic view, there was need to change circumstances that required communication for the adaptation of behaviour which in this case was to curb the outstretching of resource by a population explosion earlier foreseen.

Hence the creation of strong programs inclusive of mass media, community outreach and interpersonal communication were undertaken albeit the lack of coherent strategy which

Rogers (1973)[2] refers to as 'large volume of error' or 'If I produce lots of messages my responsibility is finished'.

According to Rogers, by generalizing his research on the diffusions of innovations theory, the mass media channels perform the knowledge function that can only be well utilized by interpersonal channels for an effective persuasive function.

Schramm (1972)[3], further accentuates this idea by observing that ten years of planning and experience had led to his concluding that public information can create a climate of knowledge and attitude that will make it easier for the field and clinical staff to recruit new acceptors.

This re-emphasizes the notion that the mass media may legitimize and stimulate discussion but not necessarily trigger behaviour change. Hence the impact of mass media on behaviour and attitude change is not clear but gives anecdotal evidence that is insufficient.

Behaviour change should not be viewed outside the box without looking at it as being a societal process that may influence an individual's decision making process. There is need to therefore identify and evaluate changes at the level of the individual, within couples, families, villages and a nation as a whole.

Though the mass media and multimedia channels tend towards increasing awareness and influencing community norms, provision of specific information which lead to the legitimization and cue towards actions that are intended, lead to expected individual behaviour. Attitudinal change may not necessarily do so.

The '*Tume-chill*' campaign is the Kenyan version of the sexual delay campaigns, that have been launched worldwide with the intent to curb the frequency of teenage sexual activity at this age, where their early sexual debut resulted from unwanted pregnancies which usually

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[2] Rogers E., and Shoemaker, F. (1973), *Communication of Innovations* New York: Free Press.
[3] Pitcher, Baker and Schramm (1972), Two Creative Traditions in English Poetry.

are terminated by abortion and hence trigger high mortality within this age group due to poor abortion and post abortion care.

With the responsibility that comes with pregnancies, teenagers are caught up in situations they are unprepared for and are forced to, especially the females, drop out of school. This compromises their social and economic status in their future lives and they are likely to suffer from other related problems that emanate from sexually transmitted diseases and the HIV/AIDS scourge.

This has not only infected but affected the youth in this population which has lead to financial, emotional and physical strain on the already voltaic family institution in one society. The delayed sexual debut campaigns are meant to be advisory tools that meet the knowledge and informational needs of teenagers toward changing their behaviour, attitude toward engaging in early sexual behaviour and the impact this has on their future lives.

There is need for these campaigns to be designed by communication specialist who will carefully integrate relevant communication theories; social marketing, tailored health care strategies that will provide complete meaning in the message designs to convince their target audiences on the need to change their ways.

The current status in Kenya is that most non-governmental organizations lean heavily toward utilizing already designed strategies form especially by the Western world, that may not fit within the Kenyan context and environment.

The implementing organization then, depends heavily on advertising agencies that lack communication perspective, and design incomplete messages that may misguide rather than advise their intended audience on the pertinent issues relating to their reproductive health.

From this study, there may emerge evidence that supports the need to ensure that such IEC integrated project management tools like focus group discussions and participation of the intended audiences in designing of relevant messages, in the selection of appropriate

medium and also in facilitating monitoring and evaluating process of the effective use of interpersonal communication in behavior and attitude change.

1.2   Statement of the Problem

This study intends to establish that even though communication through the mass media may encompass an element of entertainment, it is likely to capture the attention, interest and above all capture the emotions of an audience. This may not be an effective tool to send serious messages that intend to ensure attitude and behavior change in healthy lifestyles and human survival that hinges on reproductive health.

This study may actually establish the fact that in an effort to make 'learning the liveliest pleasure' (Aristotle), mass media and specifically television advertisements of dangerous lifestyles tend to trivialize these messages into slogans that may be used out of context or as components of jocular analogues.

These messages may degenerate into relegating pertinent issues to the periphery thus can have little or no attitudinal or behavior change impact on the intended audience. Hence the underlying question is; can television advertising which is intended to 'brand' products with the use of entertaining songs, drama and even comedy, be effective when it comes to branding an idea?

Is it appropriate to assume that social marketing through these advertisements has an impact as an effective prelude that triggers behavior and attitude change towards dangerous lifestyles that affect human reproductively and survival?

Do these messages suffer from what Karl Hovland, [4] in his study on the 'limited effects' of the media has on influencing behaviour change calls 'the sleeper effect' that hampers this intention?

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[4] Hovland C. I., Lumsdaine, A. A. and Sheffield, F. D. (1949), *Experiments in Mass Communication* Princeton: Princeton University Press.

With the breakdown of traditional social structures, is television a viable medium to pass sex education to adolescents?

Recently organizations like the PSI through the AIDSMARK wing have generated generic communications campaigns that encourage healthy lifestyles and behaviour while at the same time attempting to put across serious messages about specific risks related to dangerous living.

These campaigns aim to help motivate behaviour change, normalize and heighten the appeal towards beneficial health products.

Three areas that have been tackled in the recent generic campaigns include:
- The trusted partner problem in marriages.
- The discouraging of damaging relationships which are integrating messages about self esteem and responsibility towards ensuring HIV prevention.
- The attempt to normalize virginity for teenagers and advocate for monogamy for those sexually active.

Hence in Kenya the nemesis of what is popularly known as the *"Tume-chill"* campaign.

This I.E.C. campaign deals with what has been referred to as delayed sexual debut campaign which is specifically for Africa youth and aims at using powerful multimedia, regional campaigns on television, print, radio and interpersonal communications to convince those aged between 15-19 to delay and postpone sexual activity or refrain from sexual activity if already sexually active.

On television this campaign has been relayed through advertisements or what they call TV spots using the health product social marketing approach whereby, health products like the condoms have been branded, for example, 'Trust' in Kenya, 'Chisango' in Malawi and 'Pante' in Haiti.

1.3   Objectives of the Study

This research intends to establish:

o   Whether television as a media channel is an effective tool for reproduction and sex education.

o   Whether television spot shots are sufficient and memorable enough to initiate, sustain and maintain issues on sexuality in the minds of the youth.

o   To find out if social marketing through media channels is bringing about behavioral change.

o   To find out how *"Tume Chill"* campaigns have effectively socialized the youth into changing attitude and behavioral patterns to delay their sexual debuts.

1.4   Justification

In the recent sexual delay debut campaign in Kenya, it can be said that the idea of virginity until the twenties has been branded in the "Tume-Chill" campaign. The question is, whether this is an effective tool to influence behaviour and attitude change towards sex as being a 'slogan' without supportive information that is likely to convince the target audience to change their attitude and behaviour.

The effect on the positioning of the television spots in programming albeit the fact that this campaign is a sponsor to the music show 'The Beat' known to play music videos that have all sorts of sexual overtones contrary to the core message on the television spot. Does sloganeering trivialize the serious message aimed at propagating delayed virginity or has it become a common 'jocular quip' at the expense of the problems and risks associated with teenage sex?

Does social marketing meet all the needs of the target audience and does this approach actually satisfy the growing need for a strategic approach to health communication? Does branding of 'ideas' work in the same way as that of products and finally Do these messages eventually suffer from the 'sleeper effect' thereby buried and forgotten once out of sight?

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This study shades light on the effective use of television as a tool for health care communication and education. It is intended to discuss extensively, that characteristic of television as used by viewers, the purposes and role of television bearing in mind the reason and place it has in the domestic set up of the home.

The study foregrounds the usefulness of health care communication and education in improving the lives of their audiences. The study discusses the importance of message positioning, content and impact of medium that relays the message. It will also highlight the importance of deep-rooted research on health matters, theories of communication and the integration of advertising and social marketing through television.

This study is a case study that is applicable or can be generalized in studying other information, education and communications campaigns on a wide scope of interests besides health like issues relating to good governance, poverty education, agriculture, development and conflict resolution.

This study recognizes the important place the society is in the information age; to have communications specialists engage in the designing, implementation, monitoring and evaluation of information, communication and education campaigns.

The information attained from this study can be utilized by the various groups for providing background information in various operations. Students of communication studies and journalists can use this as a source of reference material in their studies in news gathering processes. Communication practitioners in their bid to understand important components of IEC campaigns as integrated with project management skills. Libraries as a source of reference on issues related to health care, communication and the use of a variety of media channels. The public in understanding with what aim most IEC campaigns are designed for and hence influencing behaviour and attitude charge. Decision makers to understand the cause for, effects and impacts of IEC campaigns on societal behaviour and attitude changes. Research students and researchers who will use it to identify other research areas or develop different stand points on aspects related to IEC campaigns and teenagers as a forum to

discuss their sexual and reproductive health issues in a more effective and constructive manners and also as a teaching tool.

1.5 Hypothesis

o Television advertising is not an effective tool in health communication as television health campaigns trivialize the important aspects of health message,

o Social marketing tools in Health Communication need other supportive inter-personal communications channels for effective attitude and behavioural change,

o The *'Tume-Chil'* campaign popularized through sloganeering an awareness of the delayed sexual debut campaign had little impact on actual change in attitude and behaviour towards teenage sexuality.

1.6 Theoretical Framework

The Social Learning Theory as studied by Bandura suggests that a person learns behaviour and values that are desirable from television. These effects deal with perception, discrimination, reasoning and problem solving skills. This is imparted through pro-social behavioural skills as imparted through television mentoring. This in turn, suggests the probability of actions that tend towards expected attitudes and behavioural changes.

The Social Learning Theory suggests you learn behaviour and values with desirable effects from television and these are called pro-social effects. There are two types, the cognitive and the behavioural pro-social effects.

The cognitive pro-social effects deal with perception, discrimination reasoning and problem solving. The behaviour pro-social effects deals with doing socially accepted deeds like helping others, altruism, controlling aggressive impulse, delaying gratification persisting in a task , explaining feelings of self or others, resisting temptation, following and sympathize with someone.

Young people require exposure to pro-social cognitive effects because they learn from what they see on television information acquired from many programs on television have a wide range of activities leading from television call alignment formal schooling as noted on a study on the sesame street' series specially developed for the 3-5 year old bracket. Most skills acquired involve the retention of skills.

Pro-social behavioural skills are meant to horn the probability of action which is dependent on motor reproduction skills which is a more complex learning exercise children enact behaviours as observed from a mentor from television, children pick up behaviour from simple regular television Programmes.

1.7   Scope and Limitation of the Study

This study was restricted to the period the *"Tume chill"* sexual delay debut campaign was carried out approximately from January to December 2004. It was due to,

- Time constraint due to the location of relevant material and subsequent analysis
- Limited finances to identify material, purchase stationery, printing and distribution. These were financial problems that limit the study to the urban setting and specifically Nairobi.
- Too much information was generated on IEC campaigns, which took long to analysis and synthesize.

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CHAPTER TWO

2.1   Literature Review

This chapter analyses ranging debates that relate to this study. These include discussion of issues pertaining to audiences; critiques various aspects of Information, Education and Communication Campaigns and discusses the essence of designing appropriate messages and positioning of these messages.

It further analyses discussions on attitude formation, the role and use of media to carry out effective IEC campaigns. The use of television by adolescents is explored with aspects of Globalization being analyzed. It ends with a critical look at sex and Reproduction Education; examines recent studies on the sensitization of adolescents on benefits of abstinence and discusses various findings of PSI, other such IEC campaigns and discusses the impact assessment of these efforts.

Health Communication through advertising is not a new phenomenon. The most memorable of advertisements are those that warned of the peril of the HIV/AIDS scourge, long before it was declared a national disaster in Kenya.

Initially, there were bill-boards on roadsides and posters in clinic centers that depicted the beginnings of a promiscuous livelihood as eventually resulting in an emaciating death. The disease was then for those deemed as immoral and more so a punishment for despicable behavior.

The sing song 'ABC's' era in healthcare advertising came in next as an acronym; A- for abstinence, B-Be Faithful and if this cannot be, then there was the option of the C - use condoms if one should relish having multiple partners.

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This campaign was disseminated on bill boards, posters, print and broadcast stations. Towards the end of the 1990's, HIV/AIDS was declared a national disaster and as one of various preventative steps, there was a full fledged campaign to popularize the condom and especially so, the brand 'Trust' condom.

This campaign launched at a youth football tournament, has been succeeded by a variety of advertisements on the use of the condom that have been experimented through the use of seduction and the use of local and youthful celebrities, in a bid to convince the youth to make wise decisions about their reproductive and sexual health. No other health care advertising was given such conspicuous presence on all mass media channels exempt those on Malaria until recently.

Public Healthcare Advertising has taken a twist in its approach in dealing with issues that relate to supposedly 'dangerous' activities that could be core to the spread of not just sexually transmitted diseases, HIV/AIDS but also unwanted and especially teenage sex and pregnancies such as depicted in the "*Tume-Chill*" Campaign.

Advertising has gone further to deal with issues of stigmatization of People living with Aids (PLA's) and towards those affected with tuberculosis depicted in the "ART: (Antiretroviral Treatment) and 'TB INA TIBA' campaigns.

Further tackled in these advertisements are issues relating to irresponsible behaviour that are conduits to the spread of vices that affect human reproduction and sexuality. A guilt trip is envisaged by two youngsters who are supposedly watching video clips on the motions that are undergone during a drinking spree in the advertisement whose catch line is '*Unavyokunywa zaidi, ndivyo unavyoteleza zaidi.*' A similar guilt trip is taken by a girl who finds herself in a compromising situation with a gentleman that she has just met.

Broadcasting channels meet large audiences across the economic divide as print media products are purchased often by the few who can afford to and can be accessed by a few others through default. Hence the preference taken the youth may have for television as a media channel for its visual impact.

The youth and specifically the teenagers and young adults will purposefully use these channels to derive gratification of their intricate need. Only programming that meets these need will draw their attention and keep them glued to the screen.

The youth, like any other audience will use the television to unwind from the hassles of the day; to socialize or detach oneself from family and friends; to compare and identify with the situations and characters in soap operas and learn new things as they view.

The broadcasting channel hence requires special interest in techniques that address the attaining and maintaining of the audiences interest. For the youth, unusual camera angling and shot spots are likely to draw their attention. For them, short captivating episodes with characters of the same age group will interest them and it is from such channels that the youth learn lessons about life.

With the break down of the traditional social structure which had systems and criteria on the passage of rites from childhood to adulthood, the youth in modern world are groping in darkness and soliciting information about sexuality and reproduction from the media and their peers. The modern parent is materialistic and ill advised on parenting skills. They are basically brought up by domestic workers as the parents pursue their other interests.

Public health advertising can be appealing to the youth as they seek answers to life issues. The question is hence, what kind of information do they need and is it prudent to assume that other demographic and social factors may be underrated?

Does television tend to position individual members of the target audience towards a similar direction of thought and hence realizing similarly made decisions? Does public health communication presented as television spots have the intended impact on behaviour and attitude change in the youth on issues of reproductive and sex education? Last but not least, are communication experts a necessary tool in the decision making process aimed at customizing these messages to ensure the impact intended is attained? These are the questions this paper intends to answer.

The Uses and Gratifications Approach developed in the 1940's by Herta Herzog[5] and Paul Latzarsfeld and Paul Stanton [6], to study audiences and the media effects on them. It was actually a reaction to the 'positivist' methods and concepts and also a sort of rebellion towards basing theories only on fundamentally empirical research. The study was a response to 'The Hypodermic Needle" alias "The Magic Bullet" Theory that was advocated by the Frankfurt School whose views were that mass media had an immediate, direct and powerful influence on audiences' beliefs and behavior.

This conclusion derived evidence for the fast rise and popularization of the radio and television and emergence of persuasion industries like advertising and propaganda. Payne Fund studies in 1930's on impact of pictures on children and Hitler's monopolization of mass media due to the World War II to unite Germany under the Nazi Party.[7]

These researchers developed this approach with the aim of measuring the short term 'media effects' on people and thus establishing the role of the consumer as being active and purposeful unlike the previously held notion that the audience is 'passive' and 'used' by the media. This established that audiences use media to fulfill expectations that satisfy their needs or interests therefore are goal oriented in their use of media. Media consumers will decide how to use media and how it will affect them. They can choose the influence media has on them and choose the media alternatives as a means to an end.

Elihu Katz [8], formally outlined the approach in the study of communication by reversing the traditional questions 'What does media do to people' to 'What people do with the media'. He went further to provide a manifesto in which key terms that define the theory per se were derived:

'..... Less attention (should be paid) to what media can do to people and more to what people do with the media. Such an approach assumes that even the most potent of mass

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[5] Herta Herzog, (1942), *Uses and Gratifications*, , New York: Duell, Sloan, & Pearce.

[6] Buhle, Buhle and Stanton (1978); The Concise history of woman suffrage: Selections from the classic work of Stanton, (1944).

[7] http: //www.utwente.nl -'Communications Theories – *'Hypodermic needle Theory'* by Laatst Gewijzigd

[8] Elihu Katz; *International Summer Forum Media and Temporality – Contributors* in, "Journal of Chronic Diseases", 1959. University of Pennsylvania, USA.

content cannot ordinarily influence an individual who has no 'use' for it in the social and psychological context in which he lives. The 'uses' approach assumes that people's values, their interests, their associations, their social roles, are pre-potent and that people selectively 'fashion' what they see and hear to these interests....'

The initial study in the 1940's was based on ways in which the audience used various media and genres such as classical radio music, radio soap operas and daily newspapers. One research was designed to study the relationship between daytime radio soaps and the audience and what gratification was obtained from their listener-ship. This was a simple and straightforward wish to learn more about how media holds and involves the audience on the basis of the appeal for a popular radio program establishing the connection between the attraction to kind of media content and features to that of a personality trait and one's social circumstances.

In his study 'What Missing the Newspaper Means?' Berelson[9] noted that newspapers were used for relaxation, entertainment, information and to be socially accepted. When asked what they missed most about the newspaper, they said an alternative source of news.[10]

Laswell [11], assigned four functional interpretations of the media for both the society and individual on a macro-sociological level being surveillance, correlation, entertainment and for cultural transmission. [12]

Blumler[13] identified the four primary uses of media as being a diversion and thus escapism from routine and problems. Media is also used to enhance or withdraw from personal

[9] Berelson, B., & Steiner, G (1949), Human Behavior: An Inventory of Scientific Findings. W. Norton ... McClure, C. R. Baker Book House.
[10] Severin and Tankard, *The Interpersonal Communication Book.* (6th ed. "Communication Theory," in Severin and Tankard, Communication Theories, 4th edition, 1997, New York: Harper Collins.
[11] Lasswell H. (1948), "The Structure and Function of Communication in Society", in L. Bryson (ed) *The Communication of Ideas.* New york. Harper.
[12] Katz Blumler, Guveritch (1985), 'Reaching Out: A Future for Gratification Research.
[13] Blumler, J. G ... McQuail, D. (Ed.). (1972). Sociology of mass communications. Middlesex, England: Penguin Books.

relationships. Katz, Gurevitch, Haas [14] found that individuals use mass media to connect and disconnect themselves from others and developed a list of 35 needs which they put in three categories: cognitive, affective, personal, social and for tension release. Weiss fits these into four categories: time filling, relaxation or diversion, social and personal needs.

Some of the social uses that were identified by researchers are;

- Environmental – to provide background noise, companionship and entertainment.

- Regulative – to punctuate time activity and talk patterns

- Relational – to facilitate conversation, show common ground, relay others experiences and sets the agenda for discussion.

- Avoidance and affiliation – for physical or verbal contact or neglect, family solidarity, relaxation, conflict reduction and relationship maintenance

- Social learning – for decision making , behavior modeling , problem solving, value transmission, schooling

- Competence and dominance – for role – play, reinforcement, substitutes, role portrayal, intellectual validation and authority exercise.

Diffusions and the Innovations Theory of Communication is attributed to the theoretical framework designed by Everett Rogers[15] as outlined in his book 'Diffusion of Innovations. He purports that diffusion is a special type of communication that is concerned with the spread of messages perceived as new ideas.

Messages are communicated from opinion leaders to the rest of the population through various communication channels defined as 'the means by which messages get from one individual to another' This message is eventually consumed by the entire population which is referred to as the 'tipping point' where the trend is said to catch fire.

No matter what the idea, it can easily spread through a social system through the domino effect.

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[14] Katz, E., Gurevitch, M. and Haas, H. (1973), "On the Use of Mass Media for Important Things". *American Sociological Review* 38: 164-81.
[15] Rogers E. M. (1962), *The Diffusion of Innovations*. Glencoe, III: Free Press.

Original diffusions research was done in 1903 by a French sociologist Gabriel Tarde[16] who plotted the original 'S-shaped diffusion curve, new innovations may diffuse rapidly creating a steep curve while the slow ones create a gradual slope.

According to Rogers, diffusion has four key issues. It is a process by which an innovation is communicated through certain channels over time among the members of social system. The Diffusion of Innovation Theory traces a given practice and time through specific channels of communications within a social structure. These are:

- The Innovation- decision process which refers to the mental process one undergoes to pass first knowledge of the innovation to forming an attitude towards the innovation. There is final step process.

- Knowledge – in this stage one is aware of an innovation and understands it's functioning.

- Persuasion – the formation of a favorable or unfavorable attitude toward the innovation.

- Decision – the individual undergoes activities that lead to a choice to adopt or reject the Innovation. This is an uncertain period.

- Implementation – there is a behavior change as one puts he innovation to use and this may lead to re- innovation as the individual adopted reduces mistakes and moulds the innovation into an appropriate form.

- Confirmation – involves evaluating the results of an innovation can be discontinued even after adoption.

The passing on of knowledge in this case depends on a number of factors. People rarely adopt innovations they do not understand and are quite indecisive or uncertain with what choice to make. They will adopt what they can use and question certain aspects of the innovation.

The Agenda-Setting Hypothesis was a sign of dissatisfaction with the Limited Effects Model that rose in 1950's – 1960's, to try and rediscover the power of media. It was an attempt to

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[16]Tarde, Gabriel (1903), *The Laws of Imitation.* Gloucester, Mass., P. Smith, 1962.

rediscover the power of media based on the people's perception unlike previous studies that focused on media effect on attribute.

The assumption was that the mass media tends to set the agenda for each political campaign that influences salient attitudes towards the political issues that have been raised.

The study done by McCombs and Shaw[17] used two research methods being content analysis and surveying to studying issues and not persons. The first study was done in Capital Hill during the 1968 presidential election campaigns. The select 100 undecided or swaying voters who were open and susceptible to campaign information with specific reference to the exposure of five newspapers, tow news magazines and two Television Network broadcast over 3 weeks.

The answers to what the respondents considered as being the major problems of the country was coded into fifteen categories that represented issues grouped into 'minor' and 'major' issues. This helped them identify the emphasis given to some of these issues and there after ranked them based on the attention given to these issues by the media.

They found out that there was a correlation on 967 between major emphasized by the media and the voters' perception on the issue. They also found strong evidence that the correlation of the minor issues was even higher.

They also found out that the respondents agreed more on all the issues in the news than to those, which related to a preferred party as a control variable linked to loyalty to party affiliations.

They further found out that those respondents who described issues in highly affective terms were incapable, of acquiring more information about issues of high personal importance.

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[17]Holland McCombs (1968), Communication *and Democracy.*

Like Lippman[18] in his article 'public Opinion' where he propagated the construction's views of world, McComb and Shaw[19] presented that the media has its own reality unlike what Lippman referred to as being that the media creates one picture of the world. McComb and Shaw in the attempt to differentiate the two forms of reality highlighted that constructed reality supercedes objective omnipotent reality.

Mass media teaches us to accept attitudes and beliefs that could be benefited to us and to others sex role and ethnic stereotypes can lead to negative expectations and self images among stereo typed groups, in conclusion children learn useful pro-social content of television programs which they can generalize to other learning situations

Attitudes can be defined as likes and dislikes; inclination and predisposition or the mental or neural state of readiness as organized by ones experiences. Gordon W. Allport[20] highlights that attitudes direct and have a dynamic influence or one's response towards objects and situations that are related to the object.

All our responses to objects are in line with what we believe, how we feel and what we know about the object concerned. Attitude affects the cognitive component that deals with knowledge and beliefs; the affective that deals with emotions and the conotive or behavior component.

An emerging belief directs response towards an object based on whether it is associated with pleasant events that concur with our dreams and aspirations. An attitude is an idea or belief charged with the emotional disposition of a person to act in a certain way towards persons, things, situations and issues.

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[18] Lippman, W. (1922), *Public Opinion* New York: Harcourt Brace.
[19] McCombs, M. E. and Shaw, D. L. (1972), "The Agenda-Setting Function of the Press", *Public Opinion Quarterly* 36: 176-87.
[20] Gordon W. Allport (1950), "The Nature of Personality": Selected Papers. Addison Wesley Perseus Publishing.

Attitudes display what people think and feel about an object hence defining how they react to it. Correct behavior is determined by what we individual would like to do and under what circumstances and consequences anticipated.

Attitude is dependent on social norms, peer expectations, established habits, expected consequences and other situational factors that determine one's behavior. Attitudes normally facilitate causes of behaviour but would change due to social pressure hence is a good predictor of behaviour.

Some attitudes are salient as they focus on and correspond with real life stimulated situations. Attitude is used to enable the individual to control the environment by helping in categorizing specific orientations to help deal with a situation.

Attitudes offer personal strategies, be they informal and empirical will be based on ones directed on ones direct experiences and communications. Attitude helps reduce anxiety and aims at acquiring working knowledge.

Human beings tend to maximize success and minimize failures in our interactions with the world. Only favourable attitudes are towards objects will help facilitate perceived success. The positive and negative effects depend on the value of the object. In order to feel accepted and appreciated one is likely to adopt attitudes from peers and authority figures.

People do not like unpleasant truths so they develop behaviour as their defense mechanism which is brought out as projections or rationalization. They desire emotional gratification when their attitude is appropriate to personal values and self-concept. Attitudes provide an opportunity to express and materialize basic values which bear immense pressure in the attempt to actualizing oneself.

Attitudes help people understand their world; adjust to it; express their fundamental values and protects their self esteem.

Attitude is formed after childhood and it has both the cognitive and affective component. It can be defined as one's response to the world as perceived by the individual and every time there is change in the environment; one develops a new strategy as an adaptive orientation. Attitudes help one respond to the needs and are not static despite the fact that they resist change.

In order to ensure successful attitude change, there is need seek systematic understanding of attitudes which are ingrained in the psychological structure that is composed of a set of cognitions of how the individual views his world. New information is always likely to cause Disequilibrium or psychological discomfort. There must be efforts to alter the existing structure to ensure change in attitude.

The cognitive component of attitude can be changed by new, reliable and cogent information towards an object. The tendency will be that the affective and behavioural component will align itself to the altered cognitive component that leads to change.

Attitude can also be changed by analyzing the functions which the particular attitude fulfils. If the attitude serves a knowledge function, then there is need to provide further knowledge to effect change. If the attitude is about the individuals' basic values, these are difficult to change because they perform the ego defensive function and deal with one's self concept.

2.3   How Behaviour Change Approaches Assist in Effective Communication

Communication and information leads to attitude change. It involves a source, a message, a channel and an audience. An audience has to attend, comprehend, yield, retain and act positively to the given communication.

The Yale Approach as advocated by Hovland, Janis and Kelly[21] in their book 'Communication and Persuasion' further outline the importance of source credibility in

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[21] Hovland, Irving L. Janis, and Harold Kelly (1953), *Communication and Persuasion*, Stanford: Stanford University Press.

terms of expertise and trustworthiness. The 'sleeper effect' aspect bridges the gap between the high and low credibility sources of message acceptance.

Other factors to be considered are those of selective exposure and perception that only focuses on what supports one's attitude. The repetition of a message may lead to active participation of the target group hence availing a supportive environment for attitude change.

Kurt Lewin[22] initially developed the Group Dynamic Approach that intimated that an individual is a social being who intimately depends on others for knowledge to make decisions about his attitudes and actions, Zimbardo[23] argued that people change attitude, beliefs and perceptions based on the discrepancy there is between their attitude or behaviour with that of the social norms. People change to gain acceptance, approval and recognition.

The Social Learning Theory that human beings learn through observations from an informative function of modeling looks at one's behaviour and situational components. There is correspondence in ones behaviour to events that happens in one's life and the environment in which they operate. A person's behaviour change is deemed as a form of learning.

People learn from an experience which was consequent to their behaviour; through observation and media exposure. Behaviour can be influenced by the use of reinforcement or incentives.

Lastly the Cognitive Dissonance Theory is reinforced by cognitive forces that are intra-personal. Festinger et al[24] argued that the discrepancies or inconsistencies within one's mind may cause psychological tension or discomfort. For attitude change to occur, the individual needs to reduce or eliminate this discomfort.

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[22] Kurt Lewin (1966), *Principles of topological psychology* translated by Fritz Heider, New York McGraw-Hill Book Company.
[23] Philip Zimbardo, Floyd Leon Ruch 1977, *Psychology and Life*. Stanford University Press.
[24] Festinger et. al (1957), A Theory of Cognitive Dissonance. Minneapolis: University of Minnesota Press.

In order to facilitate change in an individual, it is imperative to understand the individual's cognitive elements that can be manipulated to facilitate behaviour change.

2.4 Strategies That Can Change Attitudes

Change comes with a lot of turbulence before it is adapted. The following strategies may help facilitate positive change. Release people from prior commitment by uncovering hidden agendas and opportunities that are important to one like stability. Make the individual understand the change, the method and system of how change will work.

Provide new information to support the change or the need for change is necessary. Communication about change initiatives should be done prior to implementation. Fear should be used positively if framed correctly which results in throwing fear out. Fear creates urgency and change gaps. Fear is an indication that the present path is not the best. Outline the benefits of change other than threaten with the consequences and circumstances. Resolution of dissonance will translate to positive change. People believe their behaviour works and tend to protect faulty behaviour with attitude. There is need for them to understand the conflict between their attitude and behaviour.

Influential people to an individual like friends or peers whose opinion the individual appreciate are likely to facilitate positive and quick change. Leadership should be given to those whose attitude is considered to be deviant as this leads to positive change. Resistance is energy that tends to challenge attitudes and opposition and there is need to harness this to propel change forward.

Compassion should be built through having a good rapport, a peaceful atmosphere even with those in opposition to avoid fueling negative emotions. Understanding the opposing force and their reason for resistance may remove barriers towards attitude change. Empathy creates opening for new information and influences change. It is important to recognize that people are different and that resistance may be a positive thing - it may cause change unconsciously. Dialogue gives space to disclose assumptions, mental modes, and beliefs,

amalgamates and changes action. This leads to motivational forces that may lead to lasting and continuous change.

2.5 Effective Health Campaign Strategies

For the content of any messages to meet the communications objectives, Royal D. Colle[25], in his article "Decision-making on Content for Messages" has specified the use of the 'Step Four Approach' that comprises of the four 'S's' issues of 'Substance', 'Style', 'Sequence' and 'Psychology'.

Accordingly, 'Substance' highlights the need to identify information to help a person or a group to understand, know something or learn to do something. This involves planning and designing of logical schedule for delivering systematically orchestrated messages through various channels to reach various audiences. It is proposed that the plan should have thematically organized points that are motivational in nature and that are also appropriate to advocate particular behaviour or attitude changes.

'Style' looks into the form of the messages and the plan for the number of messages needed to be produced within a given time and space. There is need to study audience preferences before undertaking the actual campaign.

'Sequence' touches on the need to realize that if communication objectives based on change in attitudes and behaviour are to be attained, the designer must be knowledgeable in and understand beliefs, attitudes, practices and knowledge the target audience have with regards to this information.

The intervention, though looking at the cognitive aspect, may have to deal with issues about how inter-group relations affect behaviour and attitudes. Pursuing information, motivation and action approaches could also be useful and so are studies that relate to the use of inductive and deductive approaches to gain information about the audience.

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[25] Royal D. Colle and Raul Roman, Closing the Digital Divide : Transforming Regional Economies and Communities with Information. Publisher: Westport, Conn. Praeger, 2003

'Psychological' aspects deal with how the message recipient perceives the source of the message and the medium. Issues of safety and competence, credibility of the spokespersons as testimonial givers should be taken into consideration. The decisions to give one-sided or multiple sides of an issue are important when putting the audience into consideration. Most messages should reinforce a population's beliefs, values and lifestyle.

Use of fear, emotional, logical or consent appeals need to be utilized carefully for effective behavioral and attitude change. The overall objective of information campaigns should hinge on the core fact that content planning involves the considering the need to gain and hold the attention of the target population.

To ensure this, it is mandatory to have not just an exercise to diagnose the situational analysis, but also to hold a systematic observations analysis in selecting appropriate content for effective change. Likewise, inter-related strategic decision-making is required to satisfy the needs of the varied psychological disposition within the target population.

Using a sample from the target population can help in understanding the relevant content through the participatory approach. This is further enhanced by giving identity to the expected behaviour or product considering they relates to the needs of the population.

It is thus important to understand the effects of information campaigns ranging from the purpose of creating simple awareness and knowledge, to understanding existing beliefs and salient priorities of the target population. Keen examination of the interests, motivation, attitudes, values, actions and habitual patterns of behaviour as depicted by the audience can be quite informative.

The new Anti-Retroviral Treatment (ART) campaigns talk of healthy living before and after discovering one's HIV status. A specific example of an advertisement is that of a gentleman called Joseph whose image as a very sick HIV patient is contrasted to that of him after using

2.6   Anti-Retroviral Treatment and Clinical Counseling

Whereas the advertisement is meant to help in de-stigmatizing victims inflicted by the disease, it sends another message that it is now alright to have extra-marital sex because even when infected there are drugs that can sustain life longer hence more productivity in life….life will go on as normal. This is a clear indication that a double message is being perceived by the audience, hence a possible distortion of information which is not effective for change in behaviour and attitude.

Most of these campaigns tend to tackle different topics by giving the same approach of dissemination without considering the fact that some topics are more difficult to teach than others just like it is to change different behaviours and attitudes. Most topics selected are dealt with in general without targeting a specific and realistic selection of content within the topic that is likely to realize small changes that have significant social effects. Rarely do planners adopt realistic non-grandiose criteria in designing their information campaigns.

One of the "Tume-Chill" adverts depicts a string of girls in hot pursuit of a star boy at their school. According the secondary school children I teach, the whole scene is unrealistic first and foremost because of the setting that does not allow for open displays of affection as show on this television advertisement.

Another bone of contention is the fact that, The kind of children used in shooting these adverts are those considered as being from the urban upper or middle class background hence those especially from the lower class or east end of urban areas feel these adverts do not address them thus there is no need to take heed of the messages in them. This clearly depicts how narrow the scope is of those targeted by these communication campaigns is. What happens to those who feel left out and what of those in the rural areas?

Not only are most information campaigns poorly conceived but they are also inadequately pre-tested and funded. This is escalated by insufficient frequency of presentation through undesirable channels and time slots rarely used by the target audiences.

Most campaigns are conducted by inappropriate source presenters, using the wrong message appeals and have unattractive stylistic quality. One should question just how many people have access to television let alone the channels that carry those advertisements. Radio especially in Kenya has a wide scope of audiences and could be more appropriate to reach diverse audiences than television.

The campaign designers rarely or are inadequately equipped with appropriate skills to be able to effectively dissect the communication process into the source, message, channel. They know little about the receivers they target as audiences. Little do they recognize that some channels and sources may work with a specific age group and flop with others.

In Kenya, it is in the past four years that specialists in Information, Education and Communications have been trained albeit the time constraints to extensively teach the course efficiently. Most people in the communication industry are basically trained in business and marketing related areas that ignore the importance of message positioning and holistic thinking processes that are needed to captive various audiences effectively.

Unfortunately so, designers tend to use a different background based on their personal intuition for their intended audience who have specific needs and tastes that may not conform to that of the designers. Pre-testing the material using sample receivers, as earlier stated, reveals the receivers recognition of the utility of the information given and provide useful lessons they can use to change their attitudes and behaviour. Research on aspects like prior knowledge, patterns of beliefs, level of salience, value systems and capacity for learning from the information should be undertaken before implementing the campaign.

It should be remembered that receivers are independent entities who can create their own effects far from those intended by the communication. The communication should ensure that the message is attended to, comprehended and used by the audience. Ineffective campaigns are ignored because audiences misunderstand the content; reject the applicability to self; challenge claims with counter-arguments or even derogate the source. Lack of contact with the message or specifically exposing it to inattentive persons may lead to them ignoring it for seeing no gain in knowledge meant to change their behaviour.

Most messages are rarely sufficiently neither packaged nor repeated thus minimizing audience contact with the stimuli of change in the message. They lack 'consummatory' gratification or instrumental utility to justify the time and effort used to process the campaigns. Many traditional campaigns are dull, didactic, and have complex modes of representation albeit the fact that gratification is gained from entertaining and interesting values in the message.

Rarely do these messages explicitly show how to utilize the information in helping to reduce or solve existing problems at the cognitive, affective or behavioural level. A clear example is the 'Pamoja Tuangamize Ukimwi' which is a monotone slogan with a multitude of a bored cast can surely pass for a lullaby or as a replica of a campaign with the similar intent of thwarting malaria by eradicating mosquito breeding environments.

A careful selection of the source will depend on the campaign situation. If keenly thought out, technical or complex messages are better passed on by expert sources. It is also effective to use trustworthy sources from problem centers to persuade audiences to change their attitude and behaviour. Those with similar background or have been in similar situations will effectively be used to pass on messages. Celebrity or highly attractive models can be used with audiences that have low_involvement with elements of the message while a simple straightforward and exciting spokesman may attract attention to the message content or be ignored all together.

Information campaigns are rarely successful if transmitted on one channel only. Most media vehicles appeal to narrower and homogeneous sub-groups therefore the designer must put into consideration the demographic composition of audiences who use the medium. Television and Radio are good for stylistically entertaining messages that evoke excitement, are novel, dramatic, humorous and less difficult to understand.

The print medium on the other hand is good for detailed, lengthy and technical material. It is recommendable that versions of relevant messages in varied styles be disseminated through various channels for better reach and exposure.

All the above comprise of physical barriers that can be easily changed to benefit target audience. Though there can be said to exist a breakdown of and inadequate facilities for communication worldwide which are aggravated by political, commercial and economic restrictions, public knowledge is more specifically affected by human psychological characteristics. These tend to determine the nature and amount of information that corresponds to the needs, behaviour and attitudes of audiences and also how they absorb information they are exposure to.

In the article "Some Reasons Why Information Campaigns Fail" by Herbert H. Hymen and Paul B. Sheatsley[26] of the National Opinion Center, highlights the following as being psychological barriers that inhibit effective campaigns. These facts are due to: 'the chronic "know-nothings"; People who seek information congenial to their prior attitudes; People interpret the same information differently and information does not necessarily change attitudes

The Chronic 'Know-Nothings' are people assumed as being equal targets of an information campaign. Some people are totally ignorant of some events because of lack of broad distribution of the information. Even with their exposure to their messages, they tend to still exhibit little knowledge of the events. It is argued that the uninformed, no matter the nature of information may be, hardly understand much.

There are those who tend to be unaware most of the time never know much and it is unfortunate that they tend to be the majority of the target population. They may hence not access the information nor is the information channeled to them.

Campaigns designers ignore the fact that levels of knowledge are affected by the motivation to learn and assimilate knowledge. Most campaigns are packed with information that is not of public interest. Measuring their effects through opinion polls just tests knowledge or ignorance, but not the desired changes in attitude or behaviour.

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[26] Herbert H., and Paul Sheatsley 1956, *A Common Destiny: Blacks and American Society* (1989). Nat' Academies Press.

Most people are apathetic to generalized information and those interested look for prestige in knowing. Only those exposed will be interested in information while disinterested persons are apathetic. Rarely do campaigners hold scientific surveys to determine who their audiences are, why they are disinterested and what approach can best attract their interest.

Most people who seek Information are congenial to prior attitudes. Many information campaigns present facts that do not coincide with the attitudes of given individuals. According to Lazerfeld [27] et al, in his studies documented in the "People's Choice", people choose politic information according to their own choices, biases and tastes.

They tend to use selective exposure by paying attention to what conforms to their attitudes. Sometimes with prior exposure to information that is different could influence the audience into understanding and thus enhancing the willingness to participate in the discussions.

People interpret the same information differently. It should be recognized that exposure is not equal to uniform interpretation and retention of material. There should be correspondence between public exposure to information and the amount of material distributed. Barlett F.C. in his book "Remembering"[28] demonstrates how a person's perception and memory of material is distorted by his wishes, motives and attitudes people selectively discount information they are exposed to in light of prior knowledge. Information could be slanted to be congenial with attitudes or interpreted according to prior attitudes.

It should be realized that information does not necessarily change attitudes. Informed people react differently to problems than the uninformed. This does not affect their attitude or conducts even if they are exposed to something equally. Once one is exposed to information, it is likely that they change their views differently based on a prior attitude.

Giving information can change attitude towards something but this may have differential effects. Those with prior knowledge may have had different attitudes so it is advisable to ensure continuous flow of information that may change attitude. A large group is likely to

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[27] Lazarsfeld, P. F. Berelson, B. and Gaudet, H (1944) *The People's Choice*. New York: Duell, Sloan and Pearce.
[28] McGraw-Hill Book Company,

approve what is favourable but those with hostile and suspicious attitudes will not be changed by the information.

Designers' information campaign material should not rely on increased information but learn to spread information effectively. They should recognize both the physical and psychological barriers to be attended to in order to work out ways to overcome them. Scientific knowledge should be the basis for qualitative distribution of information. They should determine how many people are reached by the information, and use surveys to measure public interest in the message.

This will help them obtain accurate knowledge of problems likely to be encountered in the message design process. Not only will attitudes be defined but factors affecting public opinion that are determined by prior attitudes. Surveys are likely to reveal the extent of information reaching the public and the extent to which attitudes can and have been changed.

Revelations on the information needed to change attitudes effectively and aspects to be stressed upon in order to reach the unexposed and unsympathetic groups will be attained. It is against this background that elements that encompass strategic communication were built upon.

To ensure effective communication for behaviour and attitudinal change, there is need to incorporate conceptual models in behaviour science like those on social learning, persuasion theory and social marketing to attain realistic objectives.

It is important to factor in at all levels of the project planning, implementation and evaluation process the involvement and participation of intended audiences through focus group discussions, pre-testing, sample survey, interactive counseling approaches, exit interviews and using participatory mass communications formats.

Behaviour change should not be viewed outside the box without looking at it as being a societal process that may influence an individual's decision making process. There is need to

thus identify and evaluate changes at the level of the individual, within couples, families, villages and a nation as a whole.

Though the mass media and multimedia channels tends towards increasing awareness and influence community norms, provision of specific information will lead to the legitimization and cue towards actions that will lead to expected individual behaviour and attitudinal change.

Communication that encompasses an element of entertainment through mass media and at community level is likely to capture the attention, interest and above all the emotions of an audience making 'learning the liveliest pleasure' according to Aristotle[29]. Hence the need to combine health messages within entertaining songs, drama and even comedy.

2.7   Audience Participation

The practice of communication is through dialogue where all participation encodes by creating and sharing information and decoding as perceived and interpreted. D. Lawrence Kincard,[30] came up with the convergence model of communication that defines communication as a process in which participants create and share information with one another in order to reach a mutual understanding.

Rogers and Kincard[31] further outline that mutual understanding is the foundation to mutual agreement hence the process is dynamic because of the availability of feedback and hence adaptive behaviour. Due to the convergence of ideas and the behaviour of the participants, the distinction between the sender and receiver vanishes and thus can perform either role.

Therefore designers of campaign programs tend to send out whatever message that makes sense or is appealing to them hence the likelihood to attain limited and an unexpected impact on their audiences. Effective communication begins with the audience and continues over time towards the process of mutual adjustment and convergence comes to pass.

[29]Aristotle on Poetics by Aristotle. Loeb ... Guidebooks.
[30]Kincard, (1979), Guide to History & Genealogy: Family History. McGraw-Hill.
[31] Rogers and Kincard (1981), Our Haug's in America. Benton County, at Rogers, Arkansas.

In health communication, there has been increased focus on the audience as individuals, as clients, customers inclusive of the exchange between the provider and the clients. Various theories have been the basis of this focus in order to facilitate, hopefully, possible attitude and behaviour change. These theories attempt to explain the process individuals go through as they exchange information, interpret and react to different messages.

Carl Hovland's views the communication process as being hierarchical ranging from the cognitive to the affective needs of the audience. Attitudes that lead to likes and dislikes tend to influence change towards the desired behaviour or action. (Hovland, Lumdain, Sheffield[32].

In Palda[33], marketing and advertising initially recognized the four changes in an individual being Attention, Interest, Desire and Action (AIDA) has been expanded to further include Impact and Attitude as important components of change.

Another theory heavily relied upon is Everetts Rogers Diffusions of Innovations Theory that is the evolving model. This theory acknowledges the existences of five stages that revolve around Knowledge, Persuasion, Decision, Implementation, and Confirmation[34].

Also commonly referred to is the 12 step input-output communication and persuasion process McGuire (1989)[35] and the psychotherapy model which has the five stages : Personal change, Pre-contemplation, Contemplation, Preparation, Action and maintenance of new behaviour Prochaska, Dimente & Norcross[36], commonly used to overcome drug and alcohol addiction.

Of relevance too are the bahaviour change models that advocate that there are different stimuli for behaviour change which are gradual, step-by step processes, social comparison

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[32] Hovland, C I., Lumsdaine, A.A. and Sheffield, f.D. (1949); *Experiments in Mass Communication.* Princeton: Princeton University Press.
[33] Kristian S. Palda (1966), Policy and Canada's Competitiveness. The Fraser Institute, California, U.S.A
[34] Everett M. Rogers (1995) *Diffussions of Innovations* , 4th Ed.: Books: Free Press.
[35] Charles R McGuire (1989), The Legal Environment of Business. Publisher: Columbus, Ohio : Merrill
[36] Prochaska, J.O., & Norcross, J.C ... Salonen, J.T. & Prochaska, J.O. (1992), *Myth of the Fall and Walker Percy's Last gentleman.* New York : P. Lang, 1992

and influence theories that play into social interaction influences behaviour change Festinger[37]. In this model, behaviour change is stimulated by communications networks that are the source of new ideas.

2.8   Audience Composition

Audience viewed as a mass or an aggregate hence the view that mass media is social activity that overlaps various social groups. Particular social groups are bound by specific mass medium like local communities, political parties and religion faith. Other people are conscious members of fan groups that like a particular mediums, show, genre or performers/authors and enjoy a degree of interaction with the above.

However the use of mass medium is not necessary a group bound activity. Other important considerations are based on different criteria like: sociability of media use; narrative controls or systematic social evaluation of media content and use and media use for personal and social life. Audience composition based on demographic factors may facilitate the structuring of media use activities within social interpersonal relationships.

George Lewis[38] outlines that music preferences are made by specific audiences.

"The central fact is that we audiences pretty much listen to and enjoy the same music that is listened to by other people we like or with whom we identify.

Media content is used for identification; to provides and support sub-cultural identities especially youth sub-cultures that are based on class and ethnicity. Media can be deemed as a stylist maker for establishing group boundaries. Media usability dependent on salient social factors and cultural expression and performance.

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[37] Festinger Leon (1954), *Research Methods* in Keywords. Mills, Judson Hardback.
[38] George Lewis Levine (1992), *Constructions of the Self.* New Brunswick, N.J.: Rutgers University Press.

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2.9   Social Marketing Theory and Practice

Kotter & Zaltman[39] define social marketing as the designing, implementation and control of programs calculated to influence the acceptability of social ideas and involve considerations of the product, planning, pricing, communication, distribution and marketing research .It focuses on influencing consumers' behavior in terms of the product, price, place and promotion.

Promotion hereby referring to a specific product or even practice while the price means the psychological cost of adopting a practice that could previously be frowned upon. The place could be the channel, commercial or otherwise used to reach the intended clientele and the promotion may refer to the point of purchase, any form of advertising and even community entertainment events.

Social marketing is basically applying commercial marketing technologies to analyse, plan execute and evaluate programs designed to influence voluntary behaviour of the target audiences in order to improve their personal welfare and that of society Anderson [40] Social marketing has been used by the PSI (population Services International) and Social Marketing for Change (SOMARC) program of the Futures Group social marketing organization to sell condoms especially to men due to the AIDS scum.

Social marketing helps bring discipline and focus to the communication component of these programs. Hence emphasizes is laid on carrying out audience research, audience segmentation into identified markets. This helps in establishing the market niche for specific methods that are reinforced by addressing the concerns and unmet needs of the audience.

Social marketers use professional skills utilized in the commercial communications industry like in advertising agencies, marketing research firms and public relations firms to propagate health communication. Though social marketing may not meet everyone's needs, it is

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[39] Gerald Zaltman. Boston, John P. **Kotter** (1971) What Leaders Really Do. American Management Association
[40] John R. Anderson (1995), *Rules of the Mind.* Lawrence Erlbaum Associates, Inc

believed that it may satisfy the growing need for a strategic approach to health communication.

2.10   Literature on Health Based Communication

Health based communications focuses on health publicity that is tailored to meet individualized communication characteristics of audiences. Tailored communication is intended for specific persons based on their unique characteristics Kreuter, Strecter & Glassman.[41]

In the 20's communication focused on the unique needs of the individual was more effective than the use of generic campaigns. Back then, the initial role of health publicity was to disseminate information about health in general, about threat of diseases, help in understanding health issues and causes of diseases Patterson & Roberts.[42]

These campaigns were used dispel popular myths by giving facts and guidelines for appropriate action. It was believed increase of knowledge would lead to positive changes in health behaviour. Then, information was passed through the formal education settings where certain behaviour trends were recommended to students which lead to minimal effect on behaviour change because the messages were misunderstood, easily forgotten or deemed as not being applicable.

Kreuter [43], outlines that it was in the 50's where this approach was discarded for messages were misinterpreted basically due to the cultural values and beliefs of the targeted population. This paved way for the community health campaigns that dealt with issues relating to health promotion and disease prevention.

For the health educators, with the view that community participation was a catalyst to change, there was a need to understand their values and needs as a community. Hence the

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[41] Jones , Dijkstra and de Vries , Kreuter et al. , Rimer and Glassman (1999), Speaking of Health: Assessing Health Communication Strategies for Diverse Populations (2002) Nat' Academies Press
[42]

[43] Matthew Kreuter, David Farrell, Laura Brennan, Barbara K, "HEALTH PROMOTION" in Journal of Environmental Health, Vol. 63, 2001. Raised Barn Press

use of the interactive and assessment based approach in health education and communication.

With the setting of objectives and identification of the right audience, a means to relay the timely health messages was sort through the mass media that would reach large audiences. Mass media campaigns were dominantly dispersed through the television despite the large audiences that the radio and the newspapers reached.

Advantages of mass media campaigns were that due to its reach, there was the likelihood that there would be significant changes or reduction of diseases based on messages designed and controlled by campaign message designers. The television especially would give high visibility to health issues in the fickle publics' eye and maintain them in the public agenda Atkins and Wallack [44].

Rogers [45] saw the role of mass media channels as performing the knowledge function for it was basically one way communication that left out the more effective persuasive channels found in interpersonal channels that availed the chance for interactivity. The use of the mass media gave evidence that it legitimized and stimulated discussions over health issues but clearly was insufficient in triggering expected behaviour change.

Other limitations include not only costly production and air-time but also the need to produce high quality productions to have the intended effect. Hence the use of sporadic public service announcements aired at odd hours that were filled with local promotional pieces, not health promotional issues Dessart[46].

Mass media campaigns degenerated into generic informational provision slots that did not cater for the characteristics of the intended audiences; disregarded demographics, psychological and psychosocial characteristics of individual individuals and hence the reason

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[44]Atkins, Charles; Wallack, Lawrence, Mass Communication and Public Health : Complexities and Conflicts The Associated Press Style Book and Libel Manual
[45] Rogers, E. and Shoemaker, F. (1973), *Communication of Innovations*. New York: Free Press.
[46] Dessart, Donald J (1990), Reshaping School Mathematics: A Philosophy and Framework for Curriculum (1990) Nat' Academies Press

why these messages were ignored by these audiences who preferred information that tended to be personally applicable Skinner [47] , Kreuter [48].

Generic mass media campaigns gave anecdotal evidence due to the over emphasize on audience awareness with the assumption that this will lead to persuasion and adoption. Besides there being little evidence of coherent communication planning and strategic design to achieve specific objectives, lack of multimedia communications campaigns that integrated other components such as service delivery was clear.

Every person in the audience received these messages due to lack of segmentation and systematic pre-testing of message with members of intended audiences. There was need for more targeted communication.

2.11 Literature on Impact of Television Advertising on Behaviour and Attitude Change in Audiences

Television advertising is a tool of learning without involvement. Advertising operates in a situation of low involvement, where attitude change is not the first criteria of effect but is followed by a gradual change in perception and probably some behavioural choices.

Mass media exposes audiences to many campaigns of co-ordinated messages that in the past were equated to persuasion. Recent studies prove that media content has limited power towards behaviour change.

According to Krugman,[49] television advertising has limited impact on attitude change because we are rarely convinced by television advertising to get conceited with or persuaded to do something. Also, most of the television advertising content is trivial and even at times silly.

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[47] Ada M Skinner, Eleanor L Skinner (1990), *A Very Little Child's Book of Stories New York: Children's Classics*.
[48] Matthew Kreuter, David Farrell, Laura Brennan, Barbara K (2001), "Health Promotion" in *Journal of Environmental Health*, Vol. 63, The Questia Online Library.
[49] Paul Krugman, *'The Great Unraveling: Losing Our Way* in the New Century' Books:

Advertising is aimed at accelerating the growing demand of or redeem the retard the falling demand of a product. It also encourages price rigidity but at the same time increase quality and choice of products.

During the World War II, there was increased barrage of advertising message and most commercials were irritating. However studies on advertising penetration, show that the public "hold in memory' what are a large number of television campaign themes and correctly related to brands. This is an expensive venture to ensure retention of these bits of information and hence the need to recognize the success of the overall effort. For some products, the sharpness of brand differentiation is slipping hence the similarity in advertising themes and appeals.

What is clearly lacking is the required 'evaluation' of TV advertising as a significant body of research, in relation to its effects on attitude change and hence the conversion to the purchase of a behaviour or a change. The economic impact of TV advertising is however substantial and documented. It messages are being reached by the public hence the conclusion that advertising works but not knowing why?

Herbert Zielske[50] in 'Remembering and Forgetting of Advertising' demonstrates that advertising will be quickly forgotten if not continuously exposed to the audience. There is need for constant reinforcement and not advertising content is reached as meaningless nonsense material.

Ebbinghan[51] draws a distinction between learning of sense and nonsense, by identifying the greater effects of order of presentation of stimuli on the reaching of nonsense material. What is remembered is because of the primacy and recent exposure to a certain message.

Carl Hovland[52] in the study of persuasion found that the effects of primacy and recency are greater when dealing with material that has fewer egos – involvement. He wrote:

[50] Zielske, H. J. (1959), *Results for OP History & Theory* McGraw-Hill Book Company, New York
[51]
[52] Carl Iver Hovland (1957), *The Order of Presentation in Persuasion*. New Haven, Published for the Institute of Human Relations Yale University Press.

"Order of presentation is a more significant factor in influencing opinions for subjects with relatively weak desires for understanding, than for those with high cognitive needs."

A paper during the AAPOR [53] meetings revealed that most advertising messages are easily forgotten especially those that are in a very brief series. There is basically lack of involvement on the part of the audience. Television advertising is a form of learning without involvement or 'un-anchored learning.

Hyam Maccoby and Leon Festinger[54] are reported to have learnt more about a television advertisement from listening to the voice – over alone while watching a different chip, other than when they watched the complimenting work together. Apparently the distraction of watching something unrelated to the audio message lowered whatever resistance there might have been to the message.

The argument is that even if we are bombard by many television messages that does not mean we are persuaded to change by overcoming a resistance attitude. Trivia helps in repeated learning that is repeatedly forgotten. It can lead to 'over-learning' most information out of the short-term memory systems and into the long term ones.

This also permits a significant alteration in the structure of one's perspective of a brand or product, but may fall short of persuading towards actual behaviour and attitude change. Exposure to new or repeated messages may just give modernity to the primary role in the organisation of the percept.

It can be said that the model of the influence process of television advertising is incomplete because there needs to be changes in behaviour that will enable the attitude changes. It is difficult to prove how a viewer of television can go from perceptual impact directly to behavioral impact unless the 'full perceptual impact is delayed'.

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[53](AAPOR) (1962), Association for Public Opinion Research *International Social Science Journal in Public Opinion Quarterly* Princeton University Press.
[54] Hyam Maccoby & Leon Festinger *When Prophecy Fails* www.nap.edu/books.

Sociologists talk of the 'sleeper effect' which psychologists call 'latent learning'. It is behaviour that influences the buying of a product or an idea but not an intervention point. 'Change of attitude' is what can be changed by an intervention which will eventually lead to the emergent response; aspect of a previously changed perception.

With low involvement patterns as seen in television advertising, the processes of communication impact undergoes gradual shifts in perceptual structure, aided by repetition, activated by behaviour choice situations, and followed at some point by attitude change. Television, with high involvement is normally more classic, dramatic and has more conflict of ideas at the level of making a conscious opinion and attitude which then precedes changes in overt behaviour.

Effectiveness of mass media is based primarily on the need for 'consistency' of a given campaign, be they commercial or non-commercial. Talent and research should be sensitive to audience involvement. We need also to understand that verbal and overt behaviour is always consistent provided that, one is not exposed to premature and narrowly concerned rules which must precede, where, when and how it must be measured.

2.12   Literature on the 'Tume-Chill' Campaign

PSI/Kenya's "*Nime-chill*" campaign seeks to delay teen's sexual debut by changing social norm and reducing peer pressure.

This campaign was launched in September 2004 on Television, Radio, Billboards, Print and Posters. It also had advertisements slots on 'The Beat' on Nation TV – a top rated music video program. PSI Kenya embarked on sponsoring youth events and in the process gave away T-Shirts with motto "*Young, beautiful and chilling*" or "*handsome, intelligent and chilling*".

 The other objective of the campaign was to stigmatize irresponsible early sex among youth and making abstinence appear tool.

The "*Nime-chill*" youth abstinence campaign according to the organization has become so popular that the word 'chilling' has been incorporated in every day speaking and 'culture'

Reports indicate that half the surveyed youth who have been exposed to the campaign believe in their own ability to abstain than those ignorant of the campaign.

The cartoon logo of a yellow hand giving a 'V' sign or peace sign was used to brand the campaign and the phrase "*Nime-chill*" is now a recognizable 'slogan'.

In a recent survey conducted by PSI 85% of the target group (10 – 15) recognized, the logo and 64% understood that "*Nime-chill*" stood for abstinence from pre-marital sex.

A recent evaluation of the Campaign revealed that 42% of youth have heard or seen the campaign of at least one media channel and 44% on three or more channels. The latter are said to have strongly agreed with the statement "I will abstain from sex until marriage" was aimed at creating behaviour change.

A major multi-media campaign was designed with the help of FBOS with the aim of reducing HIV/AIDS and improving reproductive health. PSI/SFN using 30 focus groups of both sexually active and abstainers found that Abstaining was an admirable lifestyle but impractical hence they prefer to use a condom. Virginity was highly rated by girls. Both boys and believed that they were lured into sex by each other. Girls were provocative and boys' coerced, bullied and even raped girls. Many had misconceptions that abstinence was regarded unhealthy and were unaware of the consequences of early sexual debut. Peer pressure, pornography or even films with mild sexual content influenced the youth into engaging in sex. Love was alimented by sex. The first sexual encounter for females was unexciting and lead to regrets hence insufficient empowerment to resist further sexual activities

Because of this an assertion by PSI claims that the chill campaign was strongly and statistically related to positive beliefs and attitudes towards abstinence from pre-marital sex.

So catching is the phrase *'chill'* that politicians and influential leaders have taken photographs with youths raising the logo sign and others have been put on popular music and sports stars vehicles. So have chill bumper stickers been designed and sold for a profit. During the campaign articles on the nation daily newspapers and weekly discussion were held about the aspect of chilling.

The role of the campaign was aimed at being empowering, hopeful, optimistic and future-oriented through inspirational but realistic role models.

On May 24, 2004 PSI and Society for Family Health (SFH) launched an abstinence campaign with the help of Faith – Based Organizations (FBOs) to examine youth attitudes towards sex.

The delaying teenage sexual debut has been found to be an effective strategy in slowing the spread of HIV/AIDS epidemic in sub-Saharan Africa.

The findings proved that it was not easy for the youth to abstain and hence the intervention.

PSI was the first organization to use social marketing against the AIDS pandemic through advocating for abstinence, mutual fidelity, correct and consistent use of the condom, counseling and testing.

The first project in 1988 was started in the Democratic Republic of Congo (DRC). The AVERT model has been frequently used and it's believed PSI impact has prevented 790,000 HIV infections and another 1.4 million infections averted.

The abstinence and delay of sexual relations are targeted to sexually inactive youth. Mutual fidelity and/or condom use for those sexually active and in stable relationship is limited. The condom is also promoted to high-risk groups like commercial sex workers and migrant workers.

The VCT is for everyone at risk to know their status and understand how to line with it.

Society for family health is PSI's largest program in Africa which is basically the only NGO is doing national mass media campaigns that promote the ABCs.

CHAPTER THREE

3.1   Research Methodology

An Experimental design was the units of analysis was randomly assigned to experimental and control groups and the independent variable introduced only to the former group.

This was a strong logical model that allowed for pre-testing and post-testing and in the process allowed for comparison to the results from the control group. This design allowed, not only the manipulation of the independent variable, but also to determine the time sequence and controlled internal validity through randomization.

Specifically the Solomon Four Group Design was used for advocating for the sensitization of the sample by pre-testing and providing to them information that led to severe reactions to the same situation in the post-testing stage.

This design propagated the comparison of two experimental groups: the one that had been pre-tested was compared and studied with an additional control group to display the fact that there were independent effects on experimental groups and the control groups that had not been pre-tested.

This showed whether the independent variable has had an effect on the results even to the groups that were not previously pre-tested so that they could be generalized to those attained from the pre-tested group that was exposed to the variable.

3.2 Description of the Population

The target audience was limited to teenagers between the ages of 15 to 17 to whom the sexual delay debut campaign was targeted at.

3.3   Sampling Strategies

Multi-phase sampling technique was used, where the purpose of sampling changed at each phase. In the first stage, purposive sampling was used where by the geographical location of the target population was hand picked.

In this study, four mixed day schools that are of semi-middle/high class status in Nairobi were selected. The approached schools included; Consolata Secondary School Westlands, Makini School-Karen, Riara School. Ngong Road, and St Hannah's Secondary School on Ngong Road.

Since the experimental research design was used, stratified random sampling technique was applied to determine which individuals would fill- in the questionnaire and those that would participate in the focus group discussion as a control group.

Lastly ,snow balling sampling technique was used to identify important persons who actively participated in the designing of IEC campaigns at the PSI Kenya, and the advertising agent they utilized to design the television spots for the "Tume–Chill" campaign and an opinion of seasonal secondary school teachers on their assessment of the campaign.

3.4   Data Collection Methods

For the experimental group, a questionnaire addressing the specific objectives research questions and hypothesis of the study was administered. It integrated, structured or close-ended questions with a variety of alternative answers for the individuals to make a choice.

Structured or open ended questionnaires, where the respondent was free to write responses in his own words, with space provided indicating the answers fully were used. This was backed by contingency or follow up and some matrix questions to simplify the respondent task and of which some matrix questions may needed the same set of responses.

The questionnaires were pre-tested at Arya Girls' and Boys School for modification before facial activity. Focus group discussion interview guide with both unstructured and structured questions was also used following an interview schedule with an already identified team of eight students in each of the schools. Tape recording facilities were used to help collect an unconscious selection of data, which allowed for play backs while analyzing the data.

Other means to collect data were obtained through observation during the document analysis process.

3.5   Data Coding

The SPSS package was used for data coding of the data collected from the questionnaires . Will the charts envisaged, the data generated brief observations on each aspect as measured per question. With these observations, issues raised at the Focus Group Discussion were isolated thematically and compared to observations that were previously collected from the questionnaires. This helped generate analysis of the data at the end of chapter four.

CHAPTER FOUR

4.1 Data Presentation and Analysis

This chapter contains data obtained from a case study on the "Tume-chill" campaign. Four mixed day schools that are of semi-middle/high class status were selected for this research. They included Consolata Secondary Westlands, Makini School-Karen, Riara School and Ngong Road and St. Hannah Secondary school on Ngong Road. Below are the results of the analysed data output.
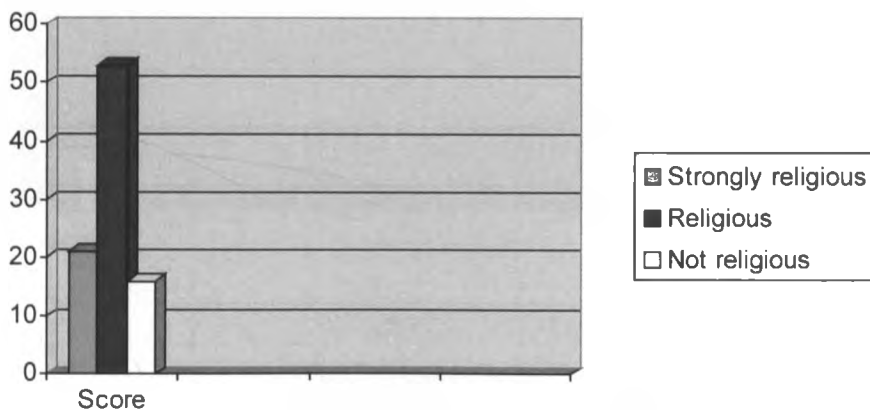
SECTION C: Religious Affiliation

1. Religious Influence in Media Consumption

Table 1

| No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Strongly religious	21	9	12	21
2.	Religious	53	23	30	53
3.	Not religious	16	14	2	16

Figure 1

Observation

21% of the students interviewed are strongly religious. Majority students, up to 53% come from family units with religious setting. Only 16% claim to be non believers. Gender disaggregated prevalence data demonstrates that the female adolescents, compared to the male, strongly identify with a set spiritual background. It means that the family unit has a set mutual spiritual and emotional closeness, a factor that is characterized of youths who differ in sexuality (Grant, 1988).

2. Religious Affiliation of Respondents

Table 2

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Christian	59	28	31	59
2.	Muslim	16	9	7	16
3.	Non-believer	7	7	Nil	7
4.	Other (Specify) Hindu, Thai etc.	18	10	8	18

Figure 2
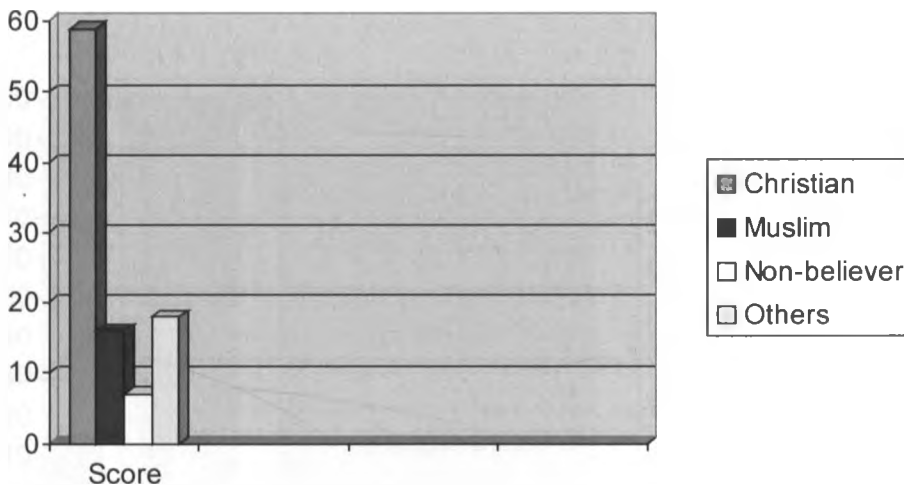
Observation

Majority of the students interviewed are Christians representing 59% of the sample population. Muslims represent 16%, while the Hindus and Thai represent 18%.

Determinants of risk taking behavior in adolescents include developmental characteristics biological and physiological uniqueness, individual attributes, and the influence of the environment (Grant, 1988). Youths who are religious and attend church regularly are more likely to abstain (Grant, 1988). Young people with a sense of self esteem and are religious will less likely be involved in sexual experimentation (Grant 1988) and Youri (1993).

3.   Social Economic Determinants on Communication

Table 3

No.	Item	Total Sample	Boys %	Girls %	Cumulative %
1.	Electricity	100	50	50	100
2.	Radio	79	34	45	79
3.	T. V	98	46	52	98
4.	Telephone	93	50	43	93
5.	Computer	36	24	12	36

Figure 3
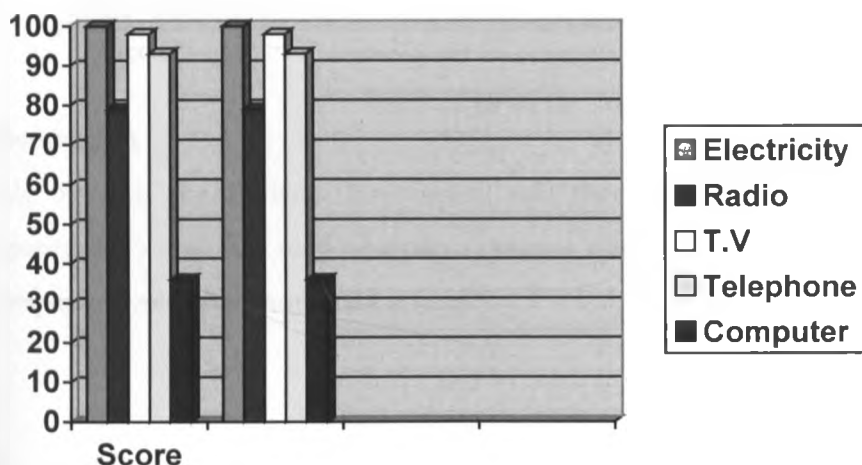
Observation

All respondents, 100%, have got electricity in their homes, 98% have or can access television while 93% have telephones. Radios can be found in 79% of the respondents households and

50

36% have computers. Adolescents are increasingly being seen as an important economic factor and have been identified as a target group for aggressive advertising. However, lack of information and barriers in communication, because of socio-economical determinants limit the parents from providing an enabling environment for relevant information.

SECTION D: Access to Media

4. Media Exposure of Respondents

Table 4

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Everyday	39	22	17	39
2.	At least once a week	41	22	19	41
3.	Less than once a week	14	6	8	14
4.	Not at All	1	1	Nil	1

Figure 4
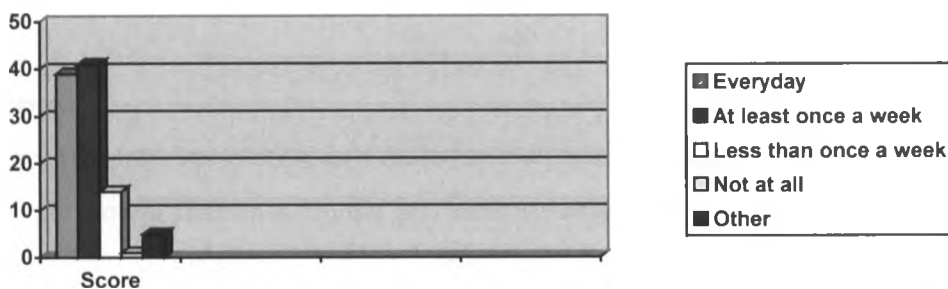
Observation

Only 39% of the students interviewed said they could access newspapers daily, while majority, 41% said they read newspapers once a week. 14% of the respondents could access newspapers only after more than a week.

5. Media Channel Preferences

Radio

Table 5

No.	Item	Scores	Boys %	Girls %	Cumulative %
1	Everyday	56	25	31	56
2.	At least once a week	23	14	9	23
3.	Less than once a week	18	13	5	18
4.	Not at all	3	2	1	3

Figure 5
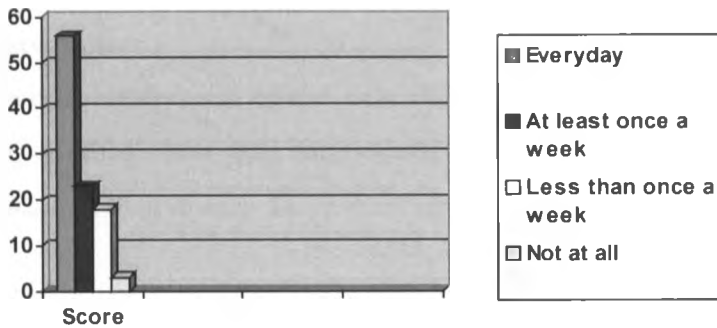
Observation

Majority students, up to 56%, had radios in their home that they could listen to every day. It was worth noting that only 3% did not listen to radio. 23% listened to radio at least once a week and 18% less than once a week respectively.

6. Television

Table 6

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Everyday	61	32	29	61
2.	At least once a week	23	10	13	23
3.	Less than once a week	16	6	10	16
4.	Not at all	Nil			

Figure 6

Observation

An overall observation of the data shows that on the majority, boys have more access to television than most girls interviewed. Cumulatively upto 61% of the respondents have television in their homes. More than half of those who do are boys.

7.   Preferences of News Topics by Respondents
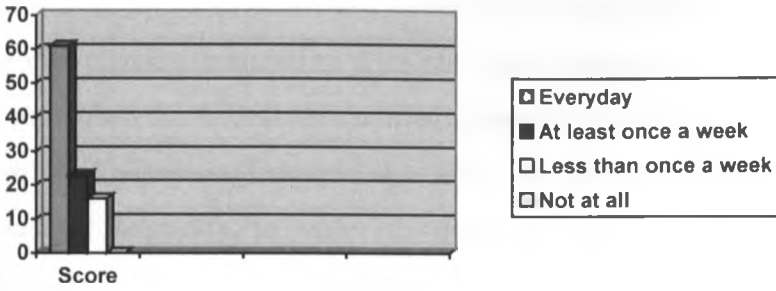
Table 7

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Entertainment	63	40	23	63
2.	Sports	17	11	6	17
3.	Education	11	3	8	11
4.	Health matters	4	1	4	4
5.	Development matters	5	2	3	5
6.	Other (Specify)	Nil			

Figure 7
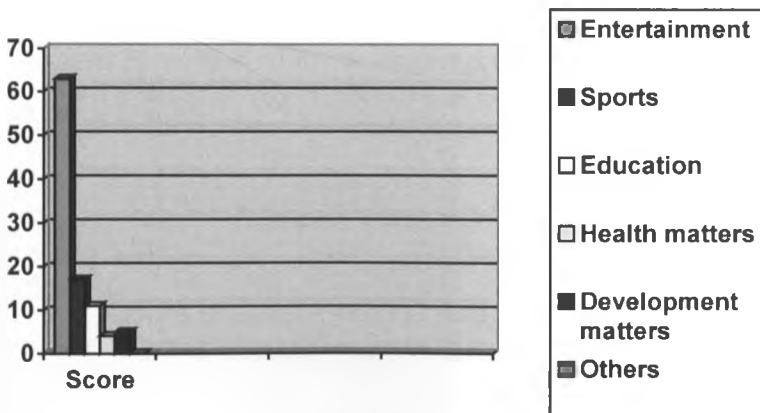
Observation

Most of the respondents aver that many programmes on television were entertainment, representing up to 63%. Health issues were only a mere 4%. It is important to observe here that physical maturation does not imply sufficient cognitive maturity to understand and anticipate the undesirable consequences of sex such as early pregnancy, and sexually transmitted diseases (Grant 1988). There is need to understand the evolving nature of adolescent sexuality in order to develop programmes that can make them more responsible. The media has often portrayed lifestyles which are at variance with social values but which nevertheless have a tremendous impact on the adolescents (Muhich (1973), Grant (1988).

8.   Preference of TV Channels

Table 8

No.	Item	Scores	Boys %	Girls %	Cumulative %
1.	K .B. C	7	3	4	7
2.	KTN	13	7	6	13
3.	Citizen	6	1	5	6
4.	Family TV	1	Nil	1	1
5.	Metro TV	16	10	6	16
6.	East Africa	18	9	9	18
7.	TV Africa/STV	3	1	2	3
8.	MNET/DSTV	21	12	9	21
9.	Nation TV	15	8	7	15

Figure 8

Score
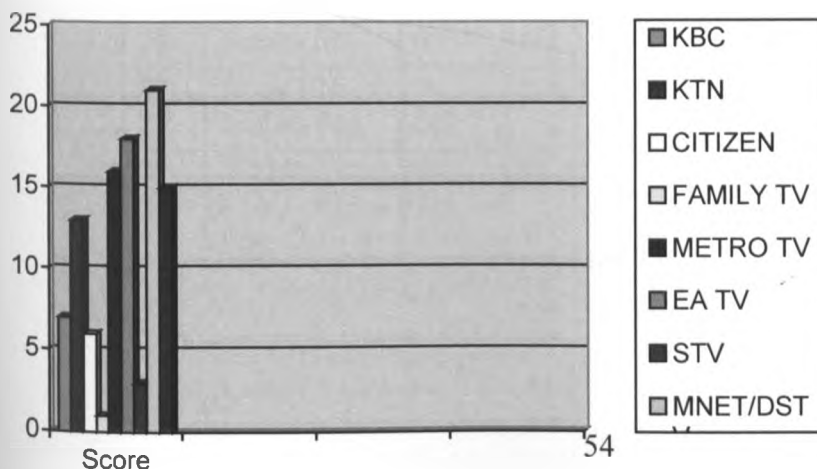
Observation

The most watched television channels are Nation and KTN, each having 14% and 13% audience respectively. MNET/DSTV is the most watched international channel, having an audience of 21% followed by East Africa with an audience of 18% of the sample population.

9.   Preferences of Radio Channels

Table 9

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Capital FM	15	6	9	15
2.	Kiss FM	21	8	13	21
3.	KBC English	3	1	2	3
4.	KBC Kiswahili	Nil			
5.	KBC Regional	Nil			
6.	Easy FM	15	7	8	15
7.	BBC	Nil			
8.	Waumini FM	8	3	5	8
9.	Family FM	2	Nil	2	2
10.	Metro FM	16	6	10	16
12.	Citizen FM	5	2	3	5
13.	Kameme FM	Nil			
14.	Radio Tumaini	3	3	3	3
15.	Coro FM	Nil			
16.	Classic 105 FM	5	2	3	5
17.	Ramogi FM	Nil			
18.	Voice of America	Nil			
20.	Baraka FM	3	Nil	3	3
21.	Hope FM	4	1	3	4
22.	Inooro FM	Nil			
23.	Y FM	3	1	2	3
24.	East Africa FM	Nil			

Figure 9
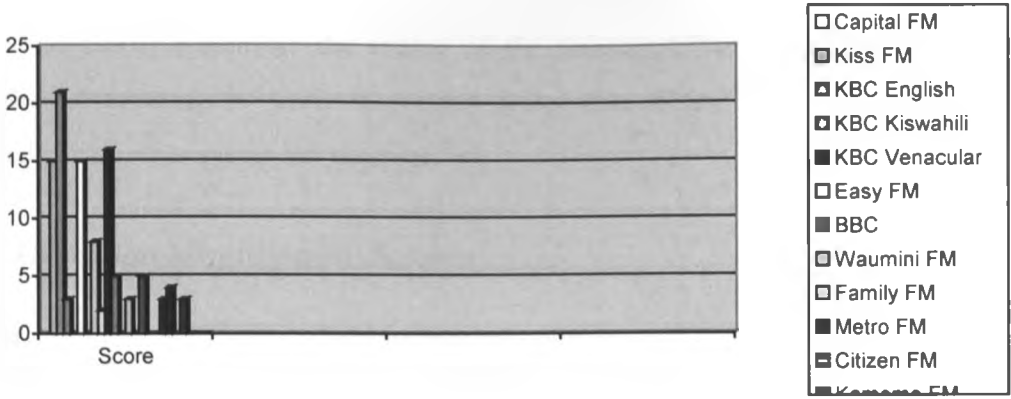
SECTION E: Abstinence

10.   Frequency of Sex Abstinence Messages in the Media

Table 10

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Yes	87	37	40	87
2.	No	13	9	4	13

Figure 10

56
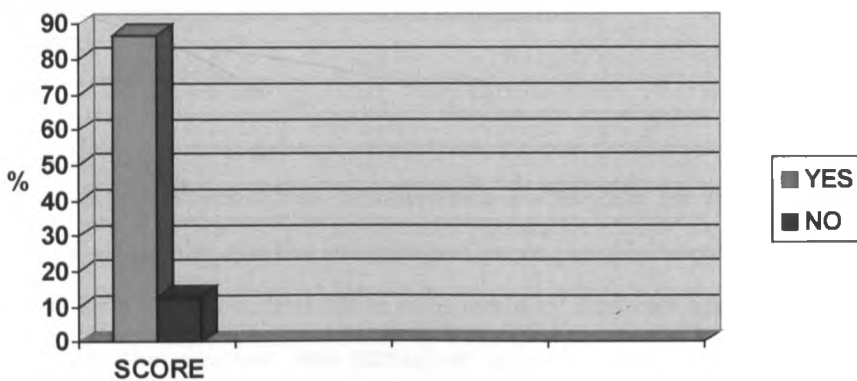
Observation

Most of the respondents,

87%, could clearly remember the source of the message.13% needed further probing to recall the advertisements. Girls responded faster than boys, a sign that their memory remained clearer after seeing the message.

11.   Campaign Advertisement Sources

Table 11

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Radio	11	2	9	11
2.	TV	73	39	34	73
3.	Billboards	4	3	1	4
4.	Paper / Leaflet / Sticker	2	2	Nil	2
5.	Church / Mosque/ Pastor	10	2	8	10
6.	Workshop / Seminar	Nil	-	-	
7.	Other (Specify)	Nil	-	-	

Figure 11
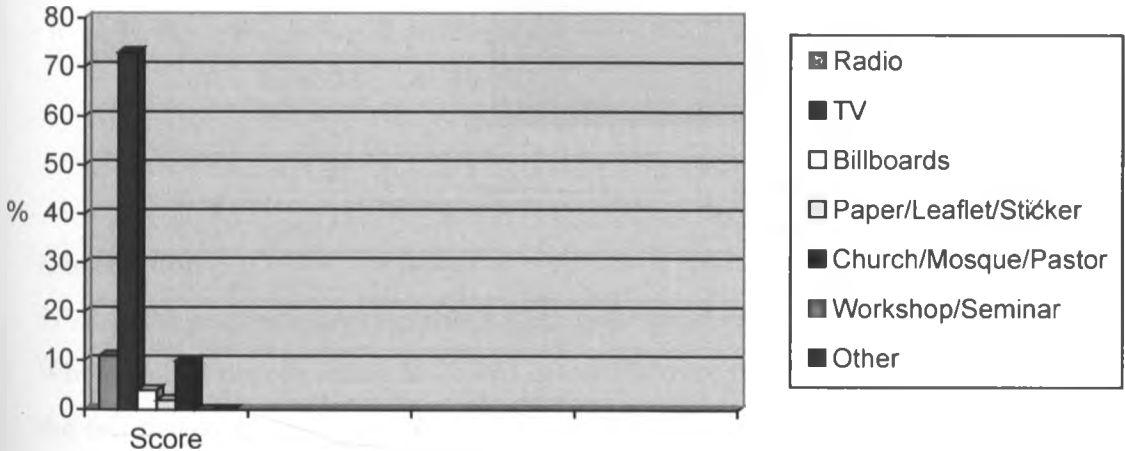
Observation

The source most remembered was the television accounting for 73%, a majority being boys registering 39% of having got the information from the television. This could be attributed to notion that girls at homes had more responsibility and had minimum time to watch the television. While the opinion was mixed at school environment gender inequality was

recognized on the number of boys audience to the television as compared with girl audience to the same, and in contrast, number of girl audience to the radio.

12. Awareness of 'Tume-Chill' Slogan

Table 12

No	Item	Score	Boys %	Girls %	Cumulative%
1.	Chill/Nimechill	97	42	53	97
2.	DK / Can't remember	3	3	1	3

Figure 12
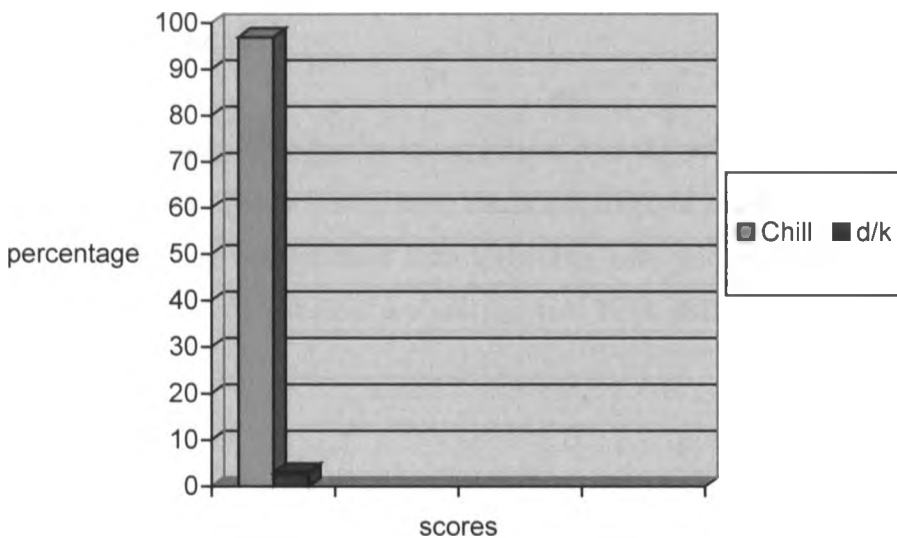
Observation

97% of the respondents were able to link or connect to the slogan "Nimechill" or "Chill". When probed the remaining 3% could eventually trace the phrase. This may be attributed to the fact that many young people receive mixed messages about their sexuality from different sources in the community and most often from their peers.

13.   Level of Memory of Abstinence Message in Media

Table 13

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Yes	98	48	50	98
2.	No	2	2	Nil	2

1) A girl in classroom, making some drawing on paper, sharpens a pencil and shouts... "Chill" and other pupils echo the same.

2) A group of schoolboys and girls. One boy is in sunglasses and the other is reading a book while seated on the floor. The boy in glasses confronts the one reading and tells him he is a fool for not having relationships with girls. The one reading advises his colleague to avoid teenage sex. At the end we see the two boys shaking hands and agreeing not to have early sex.

Figure 13
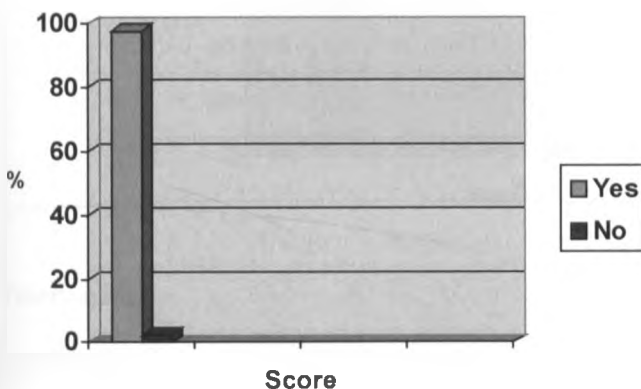
Observation

Up to 98% of the student remembered the caption conversation and related it to abstinence. Majority of the girls 50% of the entire population could clearly visualize the whole set up. 2% of the respondent, a representation of boys could not remember until probed.

14.   Sources of Abstinence Messages

Table 14

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Radio	1	Nil	1	1
2.	TV	99	58	41	99
3.	Newsprint	Nil	-	-	Nil
4.	Poster / Leaflet / Sticker	Nil	-		Nil
5.	Other (Specify)	Nil	-	-	Nil
6.	Don't know	Nil	-	-	Nil

Figure 14
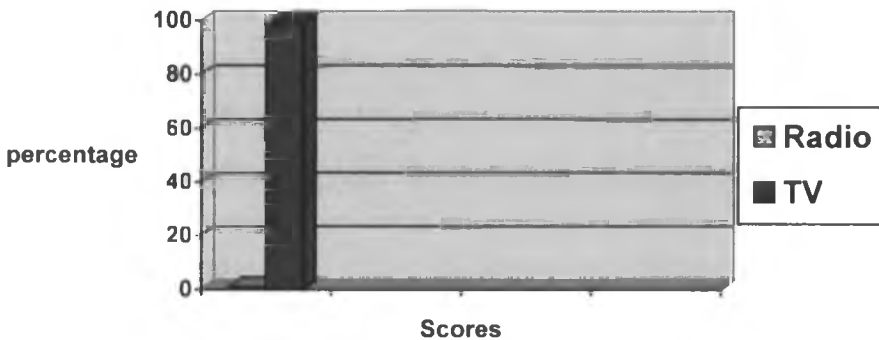
Observation

Majority, 99% of the respondents got their knowledge by obtaining information after having watched television, a source which they always remember very well. 58% of the sample population who agreed to have seen the information on television were boys.

60

15. Information Sharing on Abstinence Messages

Table 15

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Yes	3	3	Nil	3
2.	No	97	57	40	97

Figure 15
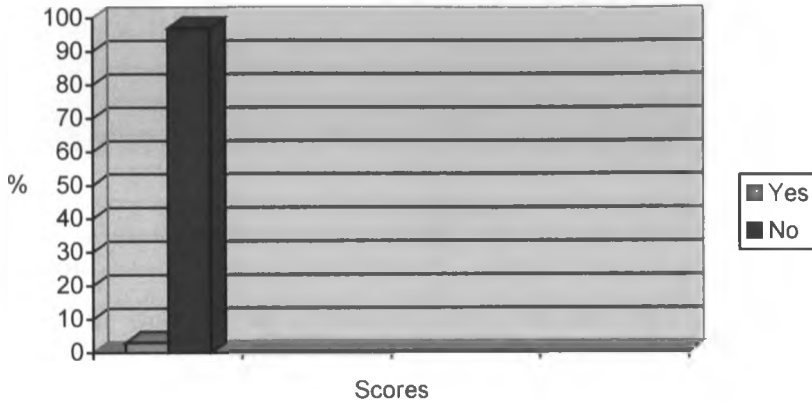
Observation

Only 3% of the students dared share the information they got from the television with other people. 97% kept the knowledge they acquired to themselves. Adolescents move from a stage of concrete thinking to a stage of being able to develop a decision taking tree (operational thinking). Researchers in the West have found out that some individuals never achieve this level of development of formal operational results in adolescent believing they are infallible and misfortune only happens to someone else. Guidance for that type of youth needs to be more concrete and geared to the present and not future (Grant 1988).

16. Level of Information Fatigue on Abstinence Messages

Table 16

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Would like to see/hear them more often?	21	9	12	21
2.	Have you seen them enough times and don't care if they are there or not	46	17	29	46
3.	I would not like to see them any longer	33			33

Figure 16
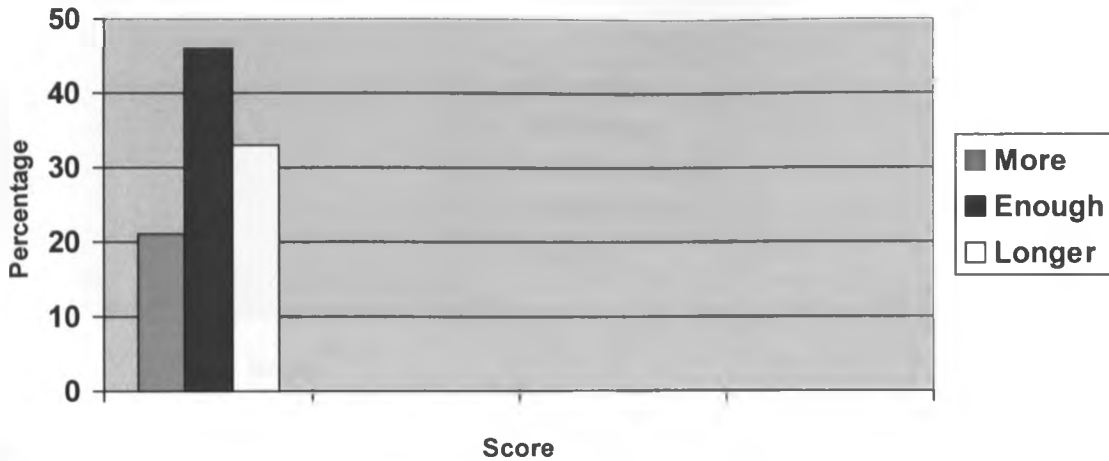
Observation

Majority of the students, up to 46% reiterate that they had seen the advertisement enough times and did not care if the adverts were there or not. 33% of them declared they would not like to see them again. Only 21% recommended they would like to see or hear more of the advertisements. The first two observations may be attributed to the fact that parents have a bigger impact on young adolescent, while older adolescent are influenced by their peers (Grant 1988).Young people seek peer groups in which they feel that their potential is fulfilled. More often external information is met with skepticism because the role the youth play in life has a significant impact on how they perceive themselves in regard to those close to them. This group may have a tremendous impact on youth behavior (Muhichi 1973).

17.   Level of Interest on Abstinence Messages

Table 17

No.	Item	Score	Boys %	Girls %	Cumulative %
1.	Boring / Not interesting	32	3	29	32
2.	Irritating	4	1	3	4
3.	Embarrassing	18	5	13	18
4.	Aired at the wrong time	19	6	13	19
5.	I like them but I have got the message	27	8	19	27
6.	Other (Specify)				
7.	No Reason				

Figure 17
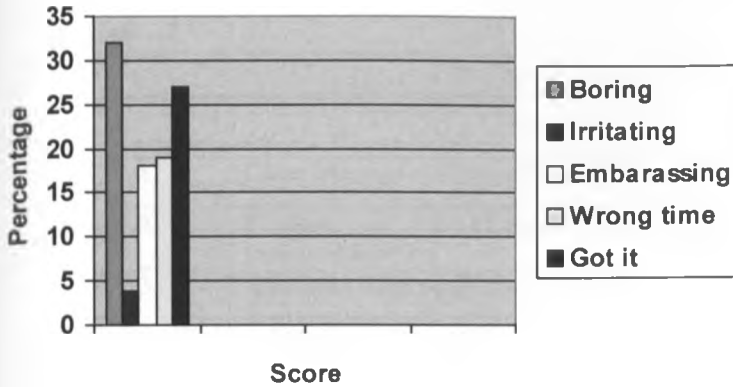
Observation

32% of the students said that the advertisements were boring, 19% argued that they were aired at the wrong time, while 18% were embarrassed to see them. 27% liked the advertisement though they said that they had seen enough of them. The majority of those who concurred that the message was either irritating or embarrassing were girls with a representation of 3% and boys 13% respectively. It could as well be argued that, in the diverse cultures, lack of explicit information on sexual issues, and barriers in communication because of taboos limited the parents' ability to counsel the adolescents. The passage from childhood to adulthood was marked by a variety of rites and specific customs. Adolescents need to go through several developmental tasks in order to develop a mature constructive sexual information and communication attitude. The findings indicate that most girls of the Hindu religion found the messages embarrassing. Customary law defines the transition and prescribes the behavior and roles to the adolescents without being explicit in the mass media.

SECTION F: Ability; Social Norms

18.   Reasons for Early Sexual Debut

Table 18

		Strongly Agree	Agree	Disagree	Strongly disagree
1.	Older men pressure young girls to have sex	17%	21%	37%	25%
2.	Teenagers get a lot of pressure from their friends to have sex	23%	38%	24%	15%
3.	Abstaining from sex is the best way for youth to prevent themselves from getting HIV	72%	28%	nil	nil
4.	Single guys who abstain are seen as unmanly or even homosexual by their male friends	nil	12%	48%	40%
5.	Its more important for a girl to abstain from sex until marriage than a guy	47%	28%	19%	6%
6.	All teenagers should abstain from sex until they are married	71%	18%	7%	4%

Figure 18
Observation

Only 17% of those interviewed feel that older men used some type of pressure on girls to try and have sex with them. Majority 72% believed that abstaining is the best way for the youth to avoid getting HIV/AIDS, with 71% of them saying that all adolescents should abstain totally from sex. Only 6% aver that it is important for girls to abstain from sex until marriage rather than boys. One of the respondents strongly agreed that young men who abstain from sex are see as unmanly or homosexuals

SECTION G: Motivation of Expectations

19.   Sexual Compulsions among Young People

Table 19

		Strongly Agree	Agree	Disagree	Strongly Disagree
1.	It is not possible to abstain if you are in love	2%	4%	61%	33%
2.	Abstinence from sex is not possible	Nil	1%	57%	42%
3.	Life is too short to abstain from sex	Nil	Nil	23%	77%
4.	I would rather abstain from sex than risk getting an infection or worse	89	11%	Nil	Nil

Figure 19
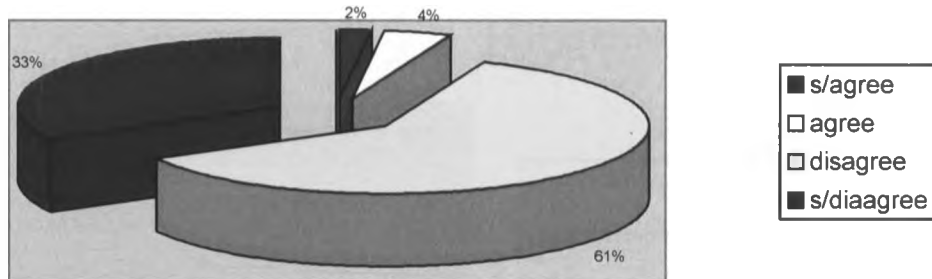
Observation

61% of the students disagreed that it is not possible to abstain from sex if one is in love 57% reiterated the same fact by disagreeing that abstinence from sex is impossible. 89% concur that they rather abstain than risk getting an infection, while non agrees that life is too short to for one to abstain from sex.

SECTION H: Motivation, Self Efficiency (Condom & Abstinence)

20.   Level of Personal Compulsion on Sex

Table 20

		Strongly Agree	Agree	Strongly Disagree	Disagree
1.	Abstinence is difficult for me	4	2	44%	50%
2.	I am motivated to abstain from sex	28%	70%	1%	1%
3.	If I am tempted to have sex, I can always figure out a nice way to avoid having sex	62%	31%	2%	5%
4.	I could avoid sex even if I was attracted to someone	39%	56%	2%	3%
5.	I could avoid sex even if someone bought me a drink or a nice gift	63%	31%	2%	4%

Figure 20
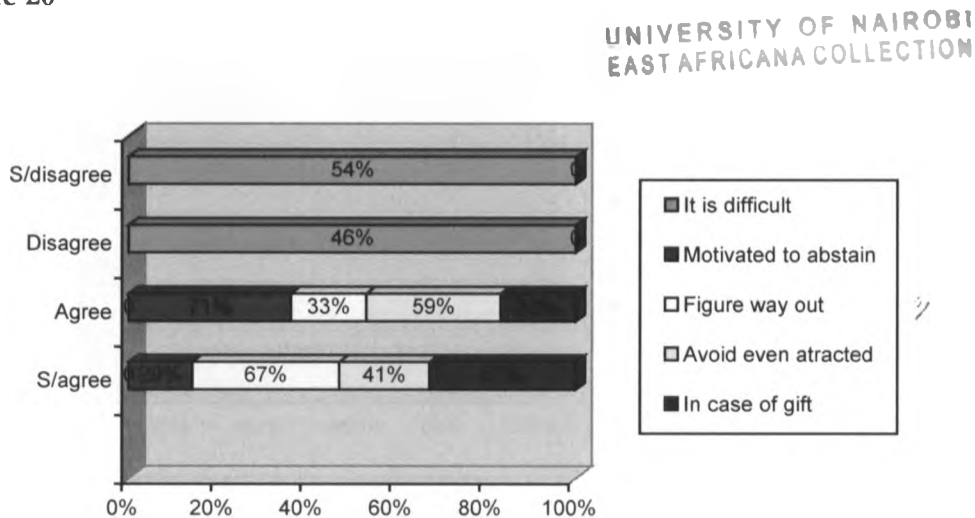
Observation

56% and 63% of the students interviewed said that they could avoid sex even if they were attracted to someone or even if someone bought them a drink or a gift respectively.

Most of them, 70% agreed that they were motivated to use a condom in future.

SECTION I: Motivation, Risk, Perception and Focus of Control

21. Level of AIDS Awareness

Table 21

		Strongly Agree	Agree	Strongly Disagree	Disagree
1.	AIDS is not a big problem as media puts it	Nil	Nil	87%	13%
2.	There isn't much I can do to prevent myself from getting AIDS	Nil	Nil	91%	9%
3.	I am not the kind of person who is likely to get AIDS	Nil	Nil	96%	4%
4.	AIDS awareness hasn't really affected my behavior	Nil	Nil	93%	6%
5.	There is no cure for AIDS	99%	1%	Nil	Nil
6.	AIDS is like an accident anyone can get it	3	1	86%	13%

Figure 21
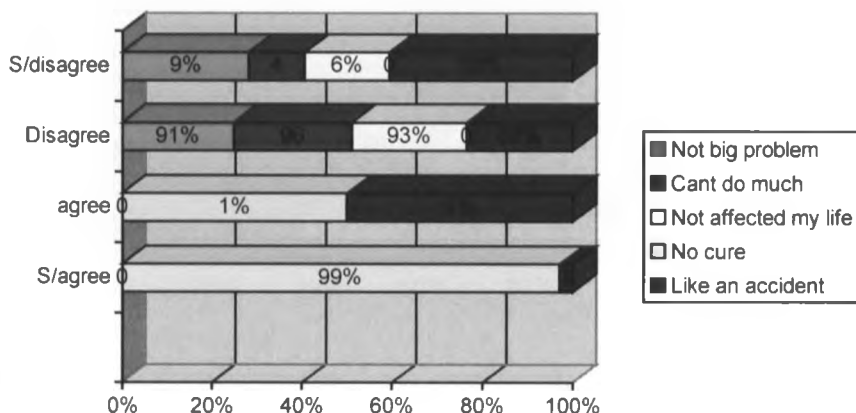
Observation

87% of the respondents disagreed with the statement that AIDS was not a big problem. 91% also disagreed with the statement that there was nothing they can do about it. 96% and 93% respectively concur that they can get AIDS like any other people and that AIDS had also affected their lives. 86% disagreed with the statement that AIDS was like an accident or just any other disease.

SECTION J: Motivation: Behaviour Intentions (Abstinence)

22. Level of Willingness to Abstain from Sex

Table 22

		Highly likely	Likely	Not Likely	Highly Unlikely
1.	I will not abstain from sex	Nil	1%	36%	63%
2.	I am motivated to use condoms in future	40%	33%	17%	10%
3.	Before starting a new relationship, I would have to go for a HIV test with my partner	69%	21%	8%	2%

Figure 22
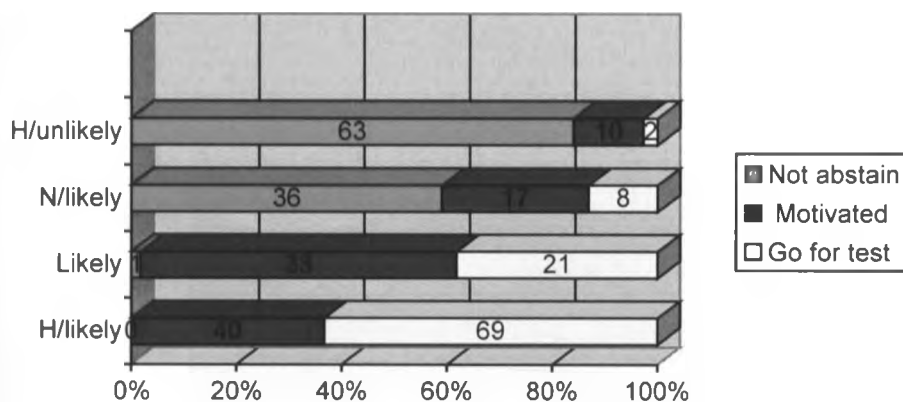
Observation

None of the respondents are likely not to abstain from sex. 63% are highly likely to abstain. 69% say that before they start a new relationship they would go for a HIV test with their partners. 40% are highly likely motivated to use condom in future.

23.   Impact of Early Sexual Debut on young People

Table 23

If I do not abstain from sex, the following may happen

		Strongly Agree	Agree	Strongly disagree	Disagree
1.	Teenage Pregnancy	76%	12%	11%	1%
2.	Loose self esteem	21%	54%	9%	16%
3.	Stigmatization	2%	14%	23%	61%
4.	Early marriage	19%	20%	26%	35%
5.	Economic leadership	Nil	Nil	11%	89%
6.	Education is affected	16%	34%	21%	29%
7.	STI/HIV/AIDS infection	30%	59%	3%	8%

Figure 23
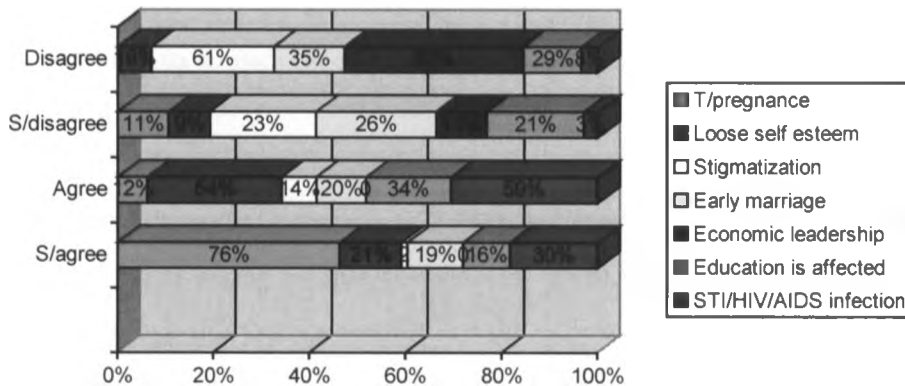
Observation

76% strongly agree that not abstaining from sex results in teenage pregnancy, while 59% agree it contributes to STI, HIV AIDS infections. Only 3% agree that not abstaining result in STI, HIV Aids infections. 35% strongly disagree that lack of abstinence contributes to early marriages. 19% concurred that not abstaining from sex results into early marriages.

4.2 Analysis of Presented Data

The study sought to analyze self reported awareness altitude, beliefs and practices during the focus group discussion organized. It was also noted that it was difficult to combine a survey of listener ship, viewer-ship and readership from the major media (radio, television and newspaper) with the demographical bio-data. The emphasis of evaluation was about messages from radio, television and newspapers as regards abstinence.

Try to imagine today a home in urban developed countries without a radio, television, newspaper, books, magazine or stereo. Try to imagine a car without a radio. Try to imagine a school without television, a library or internet? The question is not whether the mass communication systems have intriguing quest for social behaviour but rather that , behaviour is most likely to be altered, and then to isolate as being similar to those in Mass Media (Greenburg, 1996).

Mass Media overlap a major portion of our lives. This argument is occasionally difficult for teenagers to accept (ibid). Going to school is a temporary dislocation of Mass Media activities. Television may be inaccessible in day schools, newspapers irrelevant and radio used for listening to music. Most evening are consumed in doing the bulk of homework given at school.

Research finding show that television watching has increased by an hour a day for adults and almost twice so for young people (Greenberg 1998). Most surveyed homes at least one television set though this cannot account for the daily increase in overall reviewing habits.

A research finding indicates that 3 hours on the average go to television viewing each day which increases by an extra 1 ½ hours on weekends. Listening to radio averages to 2 hours a day, although a good portion of that may be while commuting (ibid). Newspapers are accessible to over 90 percent of all homes with 15 to 30 minutes spent reading them.

Typical urban teenagers probably read a magazine per week and do not often go to movies. There is an adequate supply of entertainment on television (ibid) to interest young people,

hence the nemesis of television as an effective medium for Information Education Communication initiatives.

In urban sites, 9 to 10 year old children on average spend 4 hours watching television in the day time; an hour listening to radio and about half an hour of listening to music listening and/or playing. Their adolescent counterparts, as attained from self reports in a Philadelphia study (ibid) intimated that they spend an average of 4 hours of television in a day; 2 hours listening to radio and an hour listening to music. Television watching is hence a primarily activity that absorbs time and retains a teenagers attention.

This justifies the notion that television, being a favoured and influential medium of use by the youth to IEC information for behaviour change. Documented observation shows that the most frequent messages about Delayed Sexual Debut Campaign came from the television, a facility that almost all respondents at the Focus Group Discussion had at home.

In the view of most respondents, messages from the campaign were relevant, appropriate and consistent with its objectives or themes. The respondents often expressed their dissatisfaction with the frequency or the time slot in which the message was aired. Often the discrepancy between the content of the 'Beat Time' musical show which was the backdrop and that of the *Tume –Chill'* television spots was cited.

'The Beat' had a seemingly contradictory message, given the scene and language of the lyrics that was tending towards luring the youth into sexual activity. On the contrary, the *Tume-Chill'* Campaign vouched for abstinence against the former backdrop that gave appeal to early sexuality through vague and abstract messaging. The show gave the allusion that it was right to downplay parental guidance that may have resulted into promoting antagonistic attitudes in the youth towards the parents.

Most students interviewed indicated that the television had provided useful information which would be otherwise difficult to obtain from adults. The message was more successful in catalyzing dialogue between peers, who 53% agreed were the source of their information,

albeit the presence of adults and teachers they could have consulted. The message was found to be more appropriate for urban youth.

The written analysis, documented from the theme included

- The importance, of self esteem and self respect (especially the youth being able to say no).
- The importance of truth and friendship between youth and for good communication and sex education, (by extension between parents and children).
- The need for gender equality and mutual trust.

From the study specific questions were raised to establish the target audience behaviour.
It was established that a combination of media and behaviour modification motives were determinants in the selection of medium and content viewed. Teenagers selected programs that were informative, affective or helped in developing life skills in them. Most of the students agreed that the message content of the '*Tume –Chill*' television spots were informative, emotive and focused on building negotiating skills within relationships.

While discussing abstinence and behaviour, the centrality of culture could not be ignored. Most of the students came from different background with different cultures. There is consensus among communication scholars and researchers that culture values are a significant factor in communication, especially if it's intended to influence attitude and behaviour.

In the research study, it's was note worthy to particularly analyze the respondents religious background using specific structured questions. For instance, the Hindu and Muslim girls found the television spots rather embarrassing and to some, irritating because it is imperative that they should abstain from sex until they get married.

Borofsky Dissanayake et al 1983 pg. 24 asserts; 'That complete whole which include knowledge, belief, art, morals, laws customs and any other capabilities and habits is acquired by man as a member of society". This asserts that the sum total of the knowledge, attitudes and habitual behaviour patterns are acquired by man from the society he lives in.Clearly, the

delayed sex debut campaign.aimed specifically to facilitate change in behaviour ,and knowledge levels; it was imperative to take keen and special concern into the analysis of culture.

The qualitative studies into the decision making processes undertaken by teenagers should have been explored. Another important limitation that should have been considered was the validity for individuals self reports on sexual behaviour.

The youth recognize that the general public is at risk of HIV/AIDS and that younger people may be even at higher risk. The concept of personal risk is not well articulated. The youth expressed concern about contracting AIDs and STDs but many believed that they were not at risk of contracting the same because they were not sexually active nor did they have multiple partners.

Their perception about risks found among teenagers is not very different from that of adults. For instance in the Kenya Demographic Health Survey, about 65 percent of the men and 46 percent of women acknowledged being at risk of attaining HIV/AIDS infection and most thought their regular partners would be the source of infection (DHS 1993; Carael, 1991).

The teenagers, especially the girls, believed in certain stereotypes such as, the fact that older men pressurize young girls to have sex while the, boys who abstain from sex are seen as unmanly or week by their peers.

Although all the students interviewed declined to answer or denied having had sexual intercourse before; the study by Lema (1993), Feldman (1993), found out that knowledge of HIV/Aids as an STD are not appear to have deterred youth from becoming sexually active. Youths continue to be exposed to multiple partners without any form of protection even though they recognize inherent risk of HIV in individuals with multiple partners.

The stereotypes of people at risk of HIV infection listed like prostitutes, immoral people victims of rape, bar maids, rich people, high class people like university students, drunkards,

football players, girls without regular income, and polygamists those who do not use condoms.

The study by Lema (1993), Feldman (1993), also found that youths of 10-19 years had had their first sexual encounter with most being initiated at the age of 15 years. Among Kenyan youths, these relations were partaken with age mates though this was sporadic and opportunistic, especially during exit classes of primary and secondary schools (Youri 1993, Kumah 1993).

Gender differences in sexual practice were established. In an earlier study of Kenyan high school students, boys initiated coitus earlier than girls and had more sexual partners compared to the girls. In one study among sexually active boys, 43% were in primaryn school while 33% in secondary. 62% of out of school youth had more than 4 partners, 15 % being girls. (Kumah 1993).

Lema(1994) found that 61.5% percent of the males had more than 6 lifetime partners compared to 4.1%. 70% of adolescents did not change their behaviour after hearing about AIDS though 29.9% opted to stick to one partner. 6.9% of boys reported that they used condom. Female were more likely to report change in behaviour (Sindiya 1993).

The environment in which the teenagers live in also has an impact on their sexual activities.For example rural youths are more sexually active than urban youth. Likewise the type and location of school of the youth affected sexual activities. It was reported that boys in boarding schools, were more likely to be sexually active (Kuman 1993).

In a crowded one room family residence in urban slums, youths grow up observing parental sexual activities hence start experimenting while they are still very young. Girls quickly learn from their mothers that sex can be used as a tool to manipulate men for economic gain. Often young girls may be raped by male neighbours who may have requested them to assist them in household chores (Balmer).

Teenage pregnancy and abortion are indicators of unprotected sex and active sexual life and therefore proof of lack of abstinence and a sign of high risk behaviour. Several studies have documented that teenagers are highly prone to acquire STDs which is an indication that a majority of them, do not abstain. In a hospital study in Kenya, 36 per cent of pregnant women aged 15-24 years had STD, while in one rural community in Kenya 13-15 year old were found to have an STD (Lema, 1994).

Teen pregnancy results in early parenthood, early marriage, abortion and dropping out of school. In Kenya it has been documented that the pregnancy rate among 20-24 year old is 13.6 % (DHS, 19993) while in an earlier study, 18% of deliveries in the city of Nairobi hospitals was to teenage mothers (Mati 1982).

In several studies in Kenyatta National Hospital, 53% of abortions seekers are under 25 years while 15.3 % are single and schooling ladies under 20 (Lema, 1992). Teenagers become involved in sex for monetary gains basically due to poverty which may explain their limited knowledge and involvement in sexual encounters. Factors that make unmarried girls or teenage become involved in sex include the need to demonstrate love to their boy friends, economic needs, naive ness peer pressure, being lured with promises of cosmetics, pornography, idleness and curiosity and pressure from teachers.

Other factors contributing to early sexuality include: availability and attraction of drugs and alcohol, lack of parental guidance during adolescent years, lack of jobs accompanied by increase of jobs accompanied by increase in cost of living, and peer pressure to practice sexual activity (Kuman 1993, Balmer 1994).

Although this study was limited to a small group of teenagers in particular schools selected as per the study needs, the findings cannot be extrapolated wholesale to teenagers in other circumstances. Nevertheless, they offer some important insight into youth culture surrounding sexuality- factors which consequently affect their responses to the delayed sexual debut campaign. Another important observation is that, teenagers are not victims but active participants in being sexually active.

CHAPTER FIVE

5.1   Conclusion and Recommendations

The data collected are indicative that most of the adolescent respondents strongly identified with a set of spiritual backgrounds as inducted by their families. This attributed to the mutual understanding a closeness of their family members.

Apparently, despite the spiritual guidance within the family set-up, What influenced adolescent sexual behaviour was due to their biological and physiological uniqueness; their individual attributes and other influences inherent in their environment. This presented the likelihood of the respondents to engage in sexual experimentation.

61% respondents, mainly boys, had access television more often than the 56% who preferred radio. Many of the programmes that interested them were those in the Entertainment and Sporting categories. Only 4% declared interest in programmes that were based on the health related issues. Most Entertainment programmes portrayed lifestyles with social values which contradict the expected norms of society. However, during the Focus Group Discussion (FGD), the respondents acknowledged that it was through television that they attainefrequent messages about the Delayed Sexual Debut and Abstinence Campaign.

The lack of interest in health related issues on the media by the respondents did not inhibit their ability to decipher the content and consequences of early pregnancies or the acquisition of Sexually Transmitted Infections (STIs) and HIV/AIDS. Their preference of entertaining content however, was due to the nullifying effects of overwhelmingly attractive romantic and intimate content herein. The FDG session revealed that, the respondents felt that the messages on the Delayed Sexual Debut Campaign were relevant, appropriate and consistent with the theme of the campaign.

The respondents' favourite local television channels were The Nation at 14% and Kenya Television Network (KTN) at 13%. The favoured international television channels were the cable The Magic Network and Digital Satellite Television (MNET/DSTV) at 21% viewer ship while East African Television Network (EATV) at 18%.This was attributed to the 24 hour televising of current worldwide sporting activities especially in football and of current movies on the MNET/DSTV channel while the same scheduling of different musical genre programming on the EATV channel.

KISS FM radio channel was preferred by 21% of the respondents while 16% favoured Metro FM .This was attributed to the popular presenters on the former station while the 24 hour programming of various reggae music genres on the latter. Reggae music is associated with freedom and rebellion that is consistent with the tendencies of the adolescents.

87% of the respondents acknowledged they had come across messages and advertisements on abstinence on both the television and radio channels. Girls had fast memory recall unlike boys and 73% of them remember with precision viewing these messages on television. Only 11% and 10% could attribute attaining these messages from radio and religious institutions respectively.

97% were quick to mention that they remembered the '*Chill- Tumechill*' campaign Logo and Slogan in the bid to impart the delayed sexual debut campaign. When reminded of the sequences in particular television spots on this campaign, 98% clearly visualized them as viewed on the television. However, the respondents at the FGD cited dissatisfaction on the frequency and the timing of airing these messages. The main backdrop of these messages was a musical show, The Beat Show, whose content was explicitly alluring music videos with enticing lyric with sexual content. Hence, despite the fact that the 'Tume- Chill' campaign had a sound message, it was shrouded with vagueness and was abtract.

When reminded of various sequences of action in advertisements on the campaign, 98% clearly visualized the scenes and messages as heard on the television and radio messages. On inquiring whether these advertisements generated any debate in the home front, only 3% experienced this at home.

This is an indication that little interpersonal communication aimed at clarifying and expanding knowledge on abstinence with close family members as initially intended. This is indicative of the nature of adolescents who tend to believe in their peers. They never probe further for clarification or explanation from adults and least of all from parents. Furthermore, the campaign apparently downplayed the importance of parental guidance while at the same time and promoted antagonistic attitude towards parents.

It was evident that despite viewing the television spots on abstinence constantly, 46% of the respondents cared less about the message and hence did not see the need to seek any further information on the topic but heavily relayed on their peers on matters on sexual reproduction. The respondents during the FGD accepted the fact that they received relevant information from the campaign that would otherwise be difficult to attain from their parents.

Most of that information was helpful as it initiated dialogue amongst their peers on issues about their sexuality. Some of the important themes acquired through the message were:

- The ability to say no to peer pressure towards early debut into sexual activities. This reinforced the importance of both self esteem and respect.
- It was a source of sex education that generated discussion between peers and to a little extent with parents, teachers and their siblings.
- The messages enhanced aspects on gender equality and mutual trust with regards to adolescent sexuality.
- The messages were informative, emotive and focused on the building of negotiating skills within boy/girl relationships with regards to the early entry into sexuality.

From the FGD, the respondents were quick to note that attention should have been given to the importance and centrality of culture and religion while designing the campaign messages and actual video footage.73% of the adolescents clearly indicated being uncomfortable while watching these advertisements. 19% pointed out that these advertisements were aired in between musical shows that played music with explicit sexual messages and video clips.

27% agreed that the messages were not only boring but also embarrassing and irritating. This was especially cited by girls of Hindu and Muslim backgrounds that highlighted that issues relating to sex were only discussed with them at the point of and shortly after marriage. These messages were monotonous albeit on taboo issues that are not easily discussed about with parents. These spots had content that did not cater for various cultural and religious backgrounds neither does it provide sufficient information on the benefits of abstaining from pre-martial sex.

Fear of contracting sexually transmitted diseases and HIV/AIDS was the main reasons why there was need to abstain from sexual activity. The respondents at the FGD, acknowledged that the youth were at a very high risk of being HIVI/AIDS and STI infection prone. For 73% of the respondents and 89% actually viewed this as the preferred way of staying healthy. The gravity of the AIDS pandemic was acknowledged by 87% while 96% agreed that they are prone to getting infection.

63% were highly likely to engage in sexual activity early but only 40% acknowledged they would use a condom then. 69% were likely to go for a HIV test before engaging in sexual activities with they partners.76% of the respondents acknowledge that early sexual debut would result to teenage pregnancy or the acquisition of dangerous infections. Failure to abstain does not however translate to marriage as agreed by 35% while 19% acknowledge that there is the likelihood of early married life.

Many during the FGD expressed their fear and concern towards attaining the HIV/AIDS and STI infection. They believed that by abstaining and avoiding multiple sexual partners, they would not get the aforementioned infectious diseases. Many female respondents believed it was stereotypical for older men to pressurize girls into having sex while most boys believed that it was a sign weakness to their peers to abstain from sexual activities.

The respondents intimated that despite their awareness about deadly sexually transmitted infections, this did not deter pre-marital sex. Many agreed to be aware of others or

acknowledged being exposed to multiple partners without any form of protection towards preventing these deadly diseases.

Sex within peers was sporadic and opportunistic especially during exit classes of both primary and secondary schooling. The boys indulged in sex to portray dominance over women, for fame and masculine peer appreciation. The girls viewed sex as a demonstration of love to their boyfriends, a means to meet economic needs or were caught unawares in action due to their naivety. Others were lured into sex out of curiosity and idleness, were introduced to pornography or succumbed to the pressure from especially their male teachers.

The use of drugs, alcohol, lack of parental guidance and financial sources were cited as other reasons for early sexual debut. Clearly, the youth were not just victims but active participants in sexual activity at their age.

5.2   Role of Schools in HIV/AIDS Education

Schools need to teach young people to avoid either contracting infection or transmitting of especially HIV/AIDS virus. The world education from in Dakar, Senegal of April 2000, sponsored by United Nations Educational, Scientific and Cultural Organization (UNESCO, United Nations Children Fund (UNICEF), World Health Organisation (WHO) and World Bank launched the Focusing Resources on Effective School Health (FRESH) initiative. The initiative was aimed at helping schools, through cost effective activities to launch school based health Programmes.

The FRESH approach deals in:

- Clear school health policies on HIV/AIDS discrimination.

- A healthy environment.

- Skill based education for the prevention of HIV/AIDS.

- School based counseling and students clubs for HIV/AIDS prevention.

This approach will to only just tackle the prevention of the spread of the HIV/AIDS but also the spread of STI's and other related issues like delays, sexual debate and unwanted pregnancies. Teachers are deemed as appropriate behaviour changing agents in schools because of their good rapport and communications with pupils, ability to have open and frank discussions, identify with sensitivities of their students, respect students and re confident of them, they are aware of their won sexuality know a lot about HIV/AIDS, are sincere and have a sense of humour.

When school children are given meaningful attitudes and teach necessary skills to keep them uninfected and they play an active role in the teaching process. To curb fears attitudes, feelings and anxiety, interactive strategies of teaching though thee strategies, the youth explore their feelings and gain insights into their won attitudes, values and perceptions. This may facilitate behaviour change that helps attitudes evolve.

HIV/AIDS fears like the 's' factors shame, silence and stigma, are tackled to a next denial, blame and discrimination open discussion of HIV/AID related issues need not be vulgar or undermine ones social beliefs and values. Good communication skills help educators examine a variety of behavioural options so that adolescents do not feel left out or out of step with peers. If they are resisting pressure or wish to engage in risky behaviour their peers do.

The ten most sensitive issues to be discussed through examining their pros and cons are:

- Issues dealing with sexuality and HIV prevention like, abstinence from sexual intercourse, delayed sexual 'debate' for as long as possible, monogamy with an uninfected partners, non penetrative sex and condom use.

- Issues dealing with substance use and HIV prevention like abstinence from substance abuse, non-sharing of intravenous needles and thorough sterilization and one–time use of needles.

School based AIDS education should be allocated at least four hours in the class room situation to achieve minimal impact on students knowledge, attitudes and behaviour changing intentions, ten to fourteen session the best the learning process can be facilitated by multiple media like stories, role plays, lecturers, self test for the active engagement of the

students use of video presentations, research on the internet, visit to hospitals, health facilities, class room discussions and debates are also effective. Repetition of basic AIDS messages, clarity consistency and sufficient variety to hold teachers interest. Active teachers' participation is enhanced by cooperative learning that increases social skills, increases retention and enjoyable learning.

The contexts used to teach AIDS education should be gender sensitive and appropriate as 75% of AIDS cases are due to unprotected heterosexual intercourse. These are contentious that sexually health and HIV education tends to promote promiscuity mot studies have proven that this form of education doesn't necessarily decrease sexual activity. Some do not show increased and decreased sexual activity or a reduction of sexual partners or reduce STI rates. However teaching HIV prevention to boys and girls will encourage them to discuss HIV and other sexuality issue hence establishing social norms.

Female management prevention strategies should try to convince already sexual active ones to conform to the practice of abstinence. This protects girls for unwanted sexual relationships. These approaches need to address structured and interpersonal inequalities. This education will be filled as irrational fears like HIV infection is obtained from marginal ways HIV education should identify and differentiating causes and non causes of HIV/AIDS.

The 36 month project that studied young peoples sexual and reproduction health related behaviour and behaviour change difference among gender. Reproductive health interventions targeted to adolescents is a new phenomenon in sub Saharan Africa. Few Programmes provide sex and reproductive health services because this is meant for the family planning section aimed towards married people.

It is feared sex education encourages risky sexual behaviour. One problem faced while the programs go on is the facilitation of vigorous evaluation on their impact on young people s knowledge, attitude and behaviour. Most evaluation of these programs is done in developed countries and most are school-based programs.

Impact assessments of various such programs in Africa reveal that most the evaluation did not clearly using out results to show their effectiveness.

A one-peer education intervention revealed that the target sample that resided at the project site had increased knowledge on STIS and Condon use. The results seemed to be biased because of the selection of the target population.

The impact assessment of mass media in Botswana, Cameroon, Guinea, and South Africa on peer education and 'youth friendly' contraceptives services was done. This study proved that there was an increase on contraceptive use and abstinence and the decrease of partners however, this reduced the belief that a Condon can be a preventative tool towards the spread of AIDS.

Peer education increased reproductive health knowledge especially to those in secondary school but mot studies tended not to have sufficient sample sized mot adolescent program models in sub Saharan African originate from outside the Nigeria context hence are ineffective on African targets. Most school based projects get to fraction of the youth and the mixed gender programs in youth centres may not be acceptable in traditional setting few programs intended for adolescents have used research in local communities to guide their design and development, totally in disregard of the cultural diversities, settings and norms of African continent. Hence the accepted cultural context is actually ignored. Below are some of recent studies done in sub Saharan African.

For an Information, Education and Communication campaign to be successful, its effects should be measured and interpreted. Planning should ensure that all physical barriers are removed for effective campaigning. Unfortunately, most information campaigns tend to release a magnitude of messages with no designed appeals that meet the needs or interests of the ordinary citizens.

A case in study are the recent *Tume-chill'* campaigns spearheaded by the Population Service – International (PSI) that are aimed to sensitize early teenage school going students to abstain

from teenage sex. Speaking to a spectrum of the students that I teach, it is clear that the forum used prime advertisements on one channel during a music show.

The irony of the situation is that the messages preach no sex during teenage in the midst of music videos that have nude dancers with lyrics full of sexual content. This beats the purpose of the advertisement on teenage sex for they are more attracted to the music played on this show.

These messages fail to draw the attention among uninterested groups of audiences hence the lack of motivation in learning anything new. Most of the messages in these campaigns turn out to be slogans other than explicit recommendations that the target audiences can effectively utilize. More so, many in the target population are likely not to be reached because of the unattractive style or inaccessible channels used to disseminate the information and may not change accordingly due to lack of information.

Most of the advertisements on condoms use what the youth envisage as their celebrities. They say that if the celebrities have condoms, they too should have theirs. They query for example "*Nameless ana yake, je una yako?*" This has become a slogan besides the fact it legitimizes promiscuity based on the belief that condoms will reduce chances of acquiring sexually transmitted diseases.

The phase '*Tume–chill*' is now a common jocular slogan across the age divide which is made worse by the insinuations made about the two finger salute that goes with the slogan. The slogan is used to depict the wrong signal that the symbol creates the connotation of being sexually loose as depicted by the space that parts the two fingers.

5.3 Findings on a recent study that has a bearing on Sexual and Reproductive Health

Mary Amunyanzu – Nyamongo, Ann E. Biddlecom, Christine Ouedraogo and Venessa Woog authors an Occasion Report No. 16 on January 2005 entitle 'Qualitative Evidence on Adolescents view of Sexual and Reproductive Health in Sub-Saharan Africa'. This report was

based on 55 focus group discussions with Adolescents took place at research fields in Burkina Faso, Ghana, Malawi and Uganda.

Issues in the findings were based on perceptions on sexual activity. On premarital sex, sexually transmitted diseases, HIV/AIDS, protective behaviours, abstinence, and the use of condoms and contexts of risks for STI's and pregnancies, aspects on sexual and reproductive health information communication and sexual and reproductive health services was studied.

The finds revealed that adolescents easily discussed actual sexual intercourse and other related sexual activities like kissing, hugging, fondling. Adolescents assigned various names to sexual intercourse like 'extinguish any fire'. Burkina Faso's young women referred to it as, 'the Adam and eve affair' to their male counterparts. Ghanaian men called it 'going to reduce our water level', while the Ugandan's called it "investigating Kandahar'. All this was in a bid to hide their intensions from their parents.

It was revealed that adolescent had disproportionately negative or positive judgment about premarital sex. To some, sex was tantamount to being 'prostitution', a bad thing or 'miss behaviour'. Sex without a condom was viewed as a way to enjoy it without barriers.

Sex is viewed as part of an intimate relationship, as part of exchange for money, when one succumbs to pressure or is forced to have it or even out of curiosity. To adolescents, sexual desires are seen as natural and normal as it's a way to meet a biological need. In most incidences, men made overtures and women were passive recipients despite the fact that some may give signs like seductive dressing and going to secluded places with the aim of making money from or to have sex with other persons besides their boyfriends.

Their views about premarital pregnancy had a sense of risk. Though people were sorry for the women, they were often insulted and made fun of. They were considered undesirable and prospects of their marriages breaking was high as their reputation was tarnished and they were thought of as prostitutes.

Parents and families were blamed for not having control over their daughters and drove these daughters out of the house. Adolescent fathers were viewed in negative light, pitied, teased and were gossiped about. Others were admired and viewed as 'real men' as this was a sign of fertility.

It was clear that young women were less knowledgeable about sexually transmitted infections (STI's) compared to their male counterparts. They had misconceptions about STI's or construed non sexual diseases as being STI's like sickle cell anemia, shingles and scabies in some groups from Uganda. In Malawi symptoms of this disease were basically about genital itching, pain, swelling, walking in difficulty, discharge, purulent urine, sores and blisters.

When quizzed about what they knew about HIV/AIDS they knew about it but had a similar number of misconceptions well evident. They thought that HIV/AIDS could be contracted through the sharing of chewing gum, kissing and swimming in dirty water. Physical symptoms of a person infected were hair changes by hair becoming scanty, change in colour and texture and weight loss. They assumed that transmission occurred due to the belief that their partners were healthy. Most young people thought their peers as being at risk of acquiring HIV/AIDS and some acknowledged that they too were at risk. They tended to sickly and thin looking people or those with symptoms.

Abstinence and condom use was deemed the most effective ways of protective behaviour. Being faithful, which translates to fidelity and monogamy HIV testing was the definite way to know one and their partners' status and hence led to behaviour change.

For pregnancy prevention; the pill and the condom was most favoured. Abstinence and using the safe period during the menstrual cycle some used injections, Norplant and withdrawal. Most adolescents saw abstinence until marriage, as being ideal as it was a sure way of preventing pregnancy, HIV/AID and STI infections. It was also viewed as the example to show patients and a sign of true love. Abstinence was viewed as a virtue and a way of self-preservation.

For those already sexually active, sex was a way to deal with problems. For those that are infected, it was time to abstain while for others there was no need to abstain because they said they consulted for treatment especially from traditional healers.

Abstinence, though viewed as ideal, was difficult to maintain because it was viewed as a way hindering the fulfillment of sexual desires and feelings. Alternative activities included focus on schoolwork, engaging in physical activities like sports in order to get ones sexual feelings and desires. Those out of school had other interests and engaged more in sexual activities.

Some abstained due to their religious beliefs like those who are 'sacred' or 'born-again Christians'. Abstinence was also advocated by family and the media as it was deemed as the easiest way to control their sexuality.

However most messages on abstinence were found impractical for example in Malawi, the members of the FGD views were that advertisements advocated for abstinence only once one knew their HIV/AIDS status as positive. Their view also suggested that negative messages about sexual intercourse create dissonance in the minds of people as sex is viewed as pleasurable.

When these messages come from their parents, they view it as a way to ensure their pleasure and movement is curtailed by controlling parents hence the inability and unwillingness of children to discuss sexual matters with their parents.

Some youth especially in Uganda and Zimbabwe viewed this practice as a practice likely to fail and rear an unrealistic option.

Though the adolescents knew that protective behaviour was ideal, these are contextual factors that compromised them like sex for money or goods, rape or forced sex. These are alcohol and drug use, poverty and peer pressure. Especially in Uganda, the use of alcohol and instant drugs played a significant role in risky sexual balances. Men took advantage of drunken women or even drugged them. Alcohol had a negative impact on engaging in protected sex, hence forgetting to use condoms in the process of having sex.

For especially the young women, social conditions and events increased their risk of unprotected sex. They linked sex to poverty and the need for money. A qualitative study done by Dodoo FN, Sloan M and Zulu EM published in the production and social context in Sub Saharna Africa by Agyei –Mensah S and Casterline JB (2003), sex for money exchanges normalize early sexual behaviour and unhealthy sexual practices.

Young women from 'broken home' needed to tend for themselves as found in Ghana leading to prostitution to meet their financial needs and sometimes due to parental pressure.

Peer pressure is also a contributing factor towards encouraging engagement in risky sexual behaviour albeit their lack of readiness to do so. It is a strong influence that encourages premarital sexual activity to gain social acceptance from their peers for having sex before marriage. Unfortunately, these youths were criticized by grown ups for having sex before marriage especially the young women.

5.4   The Nyeri Youth Health Project

This is an example of a good practice. The Nyeri Youth Health Project was a community-based project implemented by family planning association of Kenya to address adolescent sexual and reproductive health. The primary target group was young unmarried young people aged 10-24 as well as adults who influenced their environment. It was a sex delay debut project aimed at preventing the suffering of youth from the negative consequences of sexual activities.

It was also aimed at increasing reproductive health information and services to meet the needs of the young people. The project would instill skills building and create an adult supported and safe environment. Adult counselor known as 'friends of youth' educated parents and adolescents on reproductive health and encouraged dialogue between them.

There was a house to house introductory session before they visited the church, youth and sports club. The counselors formed groups with whom they met weekly for 4-8 weeks during 90-120 minute sessions.

Some of the findings revealed that between 1997 and 2001 there was a decline in the percentage of young men who had initiated sex from 34% to 24%. There was also a decrease in number of sexual partner's form 29% to 24%. The use of condoms had increased from 39% to 45% and abstinence from 34% to 38%.

Among the women fold, those who initiated sex reduced from 24% to 21, those with three or more partners reduced from 14% to 5%, 53% up from 40% abstained while 32% up from 22% used condoms.

The multivariate analysis revealed that; Age and school enrollment status were significantly associated with sexual initiation for both male and female. Youth in school were less likely to engage in sex than those out of school.

On Secondary abstinence were those who lived with at least one parent and were likely to report secondary abstinence for males than those with other arrangements which also applied to the female, it was especially found out that for the female, intervention was associated with long-term abstinence after sexual debut.

On the used of condoms those who were confined to the project were likely to use condoms while for the female, they just learnt more about the use of the condom. Females were less likely than men to hand three or more partners for sex.

RECOMMENDATIONS.

For further study, the following areas can be pursued:

1) A study into informal Reproductive Heath Education within the formal School System.

2) A Monitoring and Evaluation study of 'True man/lady Waits' Media Campaigns.

3) The efficacy of Radio advertising on Reproductive Health Campaigns.

4) A Monitoring and Evaluation study on the impact of the 'ZI' campaign on sensitizing parents and their youthful children in communicating Reproductive Health messages .

5) The use of 'irritating' advertising messaging in the current 'ZI' in castigating cultural beliefs that stereotype men to be accepted as irresponsible and promiscuous marriage partners.

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Research Questionnaire Letter

This Questionnaire targets teenagers between the ages of 15 to 19 years to whom the sexual delay debut campaign was targeted at.

The questions are basically on matters that pertain to sex and abstinence awareness messages as communicated by the IEC campaign. All respondents will be treated confidentially.

The final results will be published in a research report. Would you like to be one of the participants?

Thank you very much.

Robi Koki Ochieng

APPENDICES

Appendix 1

Questionnaire

SECTION C: **Religious Affiliation**

1. How religious do you consider yourself?

   (i)   Strongly religious

   (ii)   Somewhat religious

   (iii)   Not religious

2. What is your religion?

   (i)   Christian

   (ii)   Muslim

   (iii)   Non-believer

   (iv)   Other (Specify)

3. Which of the following facilities/items are available at home?

   (i)   Electricity

   (ii)   Radio

   (iii)   T.V.

   (iv)   Telephone

   (v)   Computer

SECTION D: **Access to Media**

4. How often do you read newspapers?

   (i)   Everyday

(ii)   At least once a week

(iii)   Less than a week

(iv)   Not at all

(v)   Other (Specify)

5. How often do you listen to the Radio?

(i)   Everyday

(ii)   At least once a week

(iii)   Less than once a week

(iv)   Not at all

6. How often do you watch television?

(i)   Everyday

(ii)   At least once a week

(iii)   Less than once a week

(iv)   Not at all

7. Please tell us which of the news topics according to you was most common in the media?

(i)   Entertainment

(ii)   Sports

(iii)   Education

(iv)   Health matters

(v)   Development matters

(vi)   Other (Specify)

8. Please tell us when you watch TV, which is your favourite channel?

(i)   KBC

(ii)   KTN

(iii)   Citizen

(iv)   Family TV

(v)   Metro TV

(vi)   East Africa

(vii)   TV Africa/STV

(viii)   MNET/DSTV

(ix)   Other (Specify)

9. Please tell us, when you listen to the Radio, which Radio Frequency do you often listen
    to?

(i)   Capital FM

(ii)   Kiss FM

(iii)   KBC English

(iv)   KBC Kiswahili

(v)   KBC Regional/Vernacular

(vi)   Easy FM

(vii)   BBC

(viii)   Waumini FM

(ix)   Family FM

(x)   Metro FM

(xi)   Citizen FM

(xii)   Kameme FM

(xiii)   Radio Tumaini

(xiv)   Coro FM

(xv)   Classic 105 FM

(xvi)   Ramogi FM

(xvii)   Voice of America

(xviii)   Baraka FM

(xix)   Hope FM

(xx)   Inooro FM

(xxi)   Y FM

(xxii)   East Africa FM

(xxiii)   Other (Specify)

(xxiv)   None

SECTION E: **Abstinence**

10. In the past six months have you heard or seen messages/advertisements about abstaining from sex?
    (i)   Yes
    (ii)   No

11. From which sources did you see or hear the messages or campaign advertisement?
    (i)   Radio
    (ii)   TV
    (iii)   Billboards
    (iv)   Paper/leaflet/sticker
    (v)   Church/Mosque/Pastor
    (vi)   Workshop/Seminar
    (vii)   Other (Specify)

12. Please tell me what slogan goes with which logo advertisement?
    (i)   Chill/Nimechill
    (ii)   Other (Specify)
    (iii)   DK/Can't remember

13. Do you remember seeing or hearing any of these messages or campaign/Advertisement about abstinence?
    (i)   Yes
    (ii)   No
    1) A girl in classroom, making some drawing on paper, sharpens a pencil and shouts.....Chill and other pupils echo the same.
    2) A group of school boys and girls, one of the boys in sun glasses and another is reading a book while seated on the floor. The boy in glasses confronts the one reading, telling him he is a fool for not having relationships with girls. The one

reading advices his colleague to avoid teenage sex. At the end wee see the two boys shaking hands and agreeing not to have early sex.

14. From which source did you see or hear the advertisement message or campaign from?

   (i)   Radio

   (ii)   TV

   (iii)   Newsprint

   (iv)   Poster/Leaflet/Sticker

   (v)   Other (Specify)

   (vi)   Don't know

   (vii)   Other (Specify)

   (viii) Don't know

15. After seeing and hearing this advertisement, did you talk to your family about the campaign?

   (i)   Yes

   (ii)   No

16. Which of the following statements best describe your feelings about seeing or hearing this advertisement on abstinence?

   (i)   Would like to see/hear more often.

   (ii)   Have been there enough times and I don't care if they are there or not.

   (iii)   I would not like to see them any longer.

17. Incase you wouldn't like to see them again, what would be your reason for this?

   (i)   Boring/Not interesting

   (ii)   Irritating

   (iii)   Embarrassing

   (iv)   Aired at the wrong time

   (v)   I like them but I have got the message

   (vi)   Other (Specify)

   (vii)   No reason

SECTION F: Ability, Social Norms

18. Please tell me how you would agree or disagree with the following statements?

(i) Older men pressure young girls to have sex

    a) Strongly agree

    b) Agree

    c) Disagree

    d) Strongly disagree

(ii) Teenagers get a lot of pressure from their friends to have sex.

    a) Strongly agree

    b) Agree

    c) Disagree

    d) Strongly disagree

(iii) Abstaining from sex is the best way for youth to prevent themselves from getting HIV.

    a) Strongly agree

    b) Agree

    c) Disagree

    d) Strongly disagree

(iv) Single guys who abstain are seen as unmanly or even homosexual by their male friends.

    a) Strongly agree

    b) Agree

    c) Disagree

    d) Strongly disagree

(v) It's more important for a girl to abstain from sex until marriage than a guy.

    a) Strongly agree

b) Agree

c) Disagree

d) Strongly disagree

(vi)   All teenagers should abstain from sex until they are married

a) Strongly agree

b) Agree

c) Disagree

d) Strongly disagree

SECTION G: Motivation, Outcome of Expectations

19. Please tell me how you would agree or disagree with the following statements

(i)   It is not possible to abstain if you are in love

a) Strongly agree

b) Agree

c) Disagree

d) Strongly disagree

(ii)   Abstinence is not possible from sex

a) Strongly agree

b) Agree

c) Disagree

d) Strongly disagree

(iii)   Life is too short to abstain from sex.

a) Strongly agree

b) Agree

c) Disagree

d) Strongly disagree

(iv)   I would rather abstain from sex than risk getting an infection or worse.

a) Strongly agree

b) Agree

c) Disagree

d) Strongly disagree

SECTION H: Motivation, Self Efficiency (Condom & Abstinence)

20. Please tell me how you would agree or disagree with the following statements

(i)   Abstinence is difficult for me

a) Strongly agree

b) Agree

c) Strongly Disagree

d) Disagree

(ii)   I am motivated to abstain from sex

a) Strongly agree

b) Agree

c) Strongly disagree

d) Disagree

(iii)   If I am tempted to have sex, I can always figure out a nice way to avoid having sex.

a) Strongly agree

b) Agree

c) Strongly disagree

d) Disagree

(iv)   I could avoid sex even if I was attracted to someone

a) Strongly agree

b) Agree

c) Strongly disagree

d) Disagree

(v)   I could avoid sex even if someone bought me a drink or a nice gift.

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

SECTION 1: Motivation, Risk Perception and focus of Control

21. Please tell me how you would agree or disagree with the following statements.

(i)   AIDS is not a big problem as media puts it

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

(ii)   There is no much I can do to prevent myself from getting AIDS.

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

(iii)   I am not the kind of person who is likely to get AIDS.

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

(iv)   AIDS awareness hasn't really affected my behavior.

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

(v)   There is no cure for AIDS

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

(vi)   AIDS is like an accident anyone can get it.

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

SECTION J: Motivation: Behavior Intentions (Abstinence)

22. Please tell me if you are "unlikely to go along with the following statements and actions

(i)   I will not abstain from sex.

    a) Highly likely

    b) Likely

    c) Not likely

    d) Highly unlikely

(ii)   I am motivated to use condom in future.

    (a) Highly likely

    (b) Likely

    (c) Not likely

    (d) Highly unlikely

(iii)   Before starting a new relationship, I would go for an HIV test with my partner

    (a) Highly likely

    (b) Likely

    (c) Not likely

(d) Highly unlikely

23. Please finish the following statement.

If I do not abstain from sex, the following may happen

(i)   Teenage pregnancy

   a) Strongly agree

   b) Agree

   c) Strongly disagree

   d) Disagree

(ii)   Loose self esteem

   a) Strongly agree

   b) Agree

   c) Strongly disagree

   d) Disagree

(iii)   Stigmatization

   e) Strongly agree

   f) Agree

   g) Strongly disagree

   h) Disagree

(iv)   Early marriage

   a) Strongly agree

   b) Agree

   c) Strongly disagree

   d) Disagree

(v)   Economic leadership

   a) Strongly agree

   b) Agree

   c) Strongly disagree

d) Disagree

(vi) Education is affected

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

(vii) STI/HIV/AIDS infection

    a) Strongly agree

    b) Agree

    c) Strongly disagree

    d) Disagree

FOCUS GROUP DISCUSSION INTERVIEW GUIDE

Date of interview …………………………………..

Taking notes …………………………………………

The interviewer should introduce herself/himself and clearly state what its exercise is about and why it is being done. Explain that it is purely academic, in part fulfillment of Masters Degree in communication Nairobi University. However the information will be useful in appreciating the importance the participants, in turn this will be useful in designing future information campaigns and development activities in IEC.

Tell them that you have come to hold the discussion with them to team from them. In the absence of a tape recorder, they note taker should take detailed notes and ensure that the writing is legible / reasonable.

SECTION - Background information

1. Inquiry into background i.e. name, age, class, religion, residence, facilities at home particularly relating to media.
2. Inquire particularly about the theme slogan media of various medium naming them each i.e. Radio, TV, Newspapers.

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3. Inquire particularly about the theme slogan of the study – Tumechill / Nimechill and probe recall and medium source from them.
4. Find about the feeling generated from the slogan hearing / seeking specifying reasons in the questionnaire readily sighted.

SECTION B - General Ability and Social Norms

Ask and probe about the theme questions in a time of discussion as listed in the questionnaire.

General Information on Uses of Television as a Medium

1. To pass time- this is one of the two most crediting and frequently expressed motivations for watching TV. Its position of prominence does not change from the youngest child to the oldest teenagers

2. For employment – this is less specific motivation, but it occurs with great frequency. That is it least frequent among older teenagers many reflect more specific articulation of reasons with increasing age.

3. For companionship- this motivation and the two that follow have occurred with a lower level of frequency and integrity than the preceding ones, but are still expressed by a majority of youngsters. For many teenagers, television provides a means of obtaining vicarious companionship.

4. For arousal – many young people respond that they seek out television in order to be stimulated. The stimulation sought encompasses a variety of emotional arousal types.

5. To learn – our original conception of a possible motivation base in terms of learning was that there would be two separate types of learning sought from television. One of these would be "hard" learning or the seeking of content full of information and news to supplement school type learning. The other would be social learning, i.e. seeking contents which would be of use to the viewer in his social interactions with other people. However, these two appear to merge undifferentiated in the responses of young viewers.

6. For relaxation – this is to find a*** identified and was reflected by about half of the young people studied. Its seeking contrast perhaps even contradiction with the arousal motivation is worth nothing.

7. As a source of refuge – many young people sought out television in order to divert their attention from specific kinds of problems. This appears to be a more goal-directed motivation than the one we labeled "pass time" although both have escapist attributes.

SECTION C - Abstinence

8. In the past six months have you heard or seen messages/advertisements about abstaining from sex?

9. From which sources did you see or hear the messages or campaign advertisement?

10. Please tell me what slogan goes with which logo advertisement -Chill/Nimechill

11. Do you remember seeing or hearing any of these messages or campaign/Advertisement about abstinence?

    (i) A girl in classroom, making some drawing on paper, sharpens a pencil and shouts…..Chill and other pupils echo the same.

    (ii) A group of school boys and girls, one of the boys in sun glasses and another is reading a book while seated on the floor. The boy in glasses confronts the one reading, telling him he is a fool for not having relationships with girls. The one reading advices his colleague to avoid teenage sex. At the end wee see the two boys shaking hands and agreeing not to have early sex..

12. From which source did you see or hear the advertisement message or campaign from?

13. After seeing and hearing this advertisement, did you talk to your family about the campaign?

    (a) How best can you describe your feelings about seeing or hearing this advertisement on abstinence?.

14. Incase you wouldn't like to see them again, what would be your reason for this?

SECTION D- Ability, Social Norms

15. Please tell me if you agree or disagree with that; older men pressure young girls to have sex; strongly agree; agree; disagree; strongly disagree

- That, Teenagers get a lot of pressure from their friends to have sex.

- Abstaining from sex is the best way for youth to prevent themselves from getting HIV.

- Single guys who abstain are seen as unmanly or even homosexual by their male friends.

- It's more important for a girl to abstain from sex until marriage than a guy.

- All teenagers should abstain from sex until they are married

SECTION E - Motivation, Outcome of Expectations

16. Do you agree or disagree with the following statements

- it is not possible to abstain if you are in love

- Abstinence is not possible from sex

- Life is too short to abstain from sex.

- I would rather abstain from sex than risk getting an infection or worse.

SECTION F - Motivation, Self Efficiency (Condom & Abstinence)

17. Please tell me how you would agree or disagree with the following statements

- Abstinence is difficult for me

- I am motivated to abstain from sex

- If I am tempted to have sex, I can always figure out a nice way to avoid having sex.

- I could avoid sex even if I was attracted to someone

- I could avoid sex even if someone bought me a drink or a nice gift.

SECTION G - Motivation, Risk Perception and Focus of Control

18. Please tell me how you would agree or disagree with the following statements.

- AIDS is not a big problem as media puts it

- There is no much I can do to prevent myself from getting AIDS.

- I am not the kind of person who is likely to get AIDS.

- AIDS awareness hasn't really affected my behavior.

- There is no cure for AIDS

- AIDS is like an accident anyone can get it.

SECTION H - Motivation: Behavior Intentions (Abstinence)

19. Please tell me if you are "unlikely to go along with the following statements and actions

- I will not abstain from sex.

- I am motivated to use condom in future.

- Before starting a new relationship, I would go for an HIV test with my partner

20. Please, I would like you to tell or finish the following statement.

If I do not abstain from sex, the following may happen

- Teenage pregnancy

- Loose self esteem

- Stigmatization

- Early marriage

- Economic leadership

- Education is affected

- STI/HIV/AIDS infection