MODES and RESEMIOTISATION of HIV and AIDS MESSAGES in the EASTERN REGION of MALAWI

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A thesis submitted in partial fulfillment of the requirements for the degree of Doctor Philosophiae in the Department of Linguistics, University of the Western Cape

Supervisor: Professor Felix Banda

2013
KEY WORDS

Modes
Communication
HIV and AIDS
Community
Malawi
Discourse
Language
CiCewa
Resemiotization
Semiotic Remediation
Multimodality
Mobility
Gule
ABSTRACT

Modes and Resemiotisation of HIV and AIDS Messages in the Eastern Region of Malawi

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This study explores how HIV and AIDS discourse is differently constituted and evaluated across different modes by different communities of speakers in Malawi. Particularly, the study explores how different languages and other social semiotics are used as resources across the different modes. Among other things, it further investigates the implications of the unequal social distribution of modes of communication and semiotic resources in Malawi (eastern region in particular) for the fight against HIV and AIDS.

The study employed the Multimodal Discourse Analysis (MDA) approach, the notions of Resemiotisation (Kress and van Leeuwen 2006, Norris 2004, Martin and Rose 2004) and semiotic remediation (Prior and Hengst 2010) in analysing the data. This approach is necessary as the study focuses on HIV and AIDS communication which is essentially multimodal in nature.

The study used both quantitative and qualitative methodologies involving questionnaires, interviews, focus group discussions, document analysis and observation of television programs, traditional dances and other modes such as music videos.

The study found that different practices have been semiotically remediated and reformulated for health palatability. As a result, taboos have been de-tabooed and technical terms have been ‘untechnicalised’ so that even ordinary people are able to use health technical terms. The study also shows how cultural practices (such as having ‘live’ sexual contact with the widow) have been semiotically remediated with the usage of condoms or herbs for cleansing rituals. The study further finds that literacy is not a major challenge for the consumption of HIV and AIDS messages. However the study also shows that wrongly presented messages such as textual overcrowding, usage of proverbs and depiction of western culture in HIV and AIDS messages obscure consumption. In addition the study reveals that proverbs can hardly
be understood by all consumers and in turn led to division between mostly the older
generation and rural who understand and the younger and urban people who have difficulty
comprehending the proverbs. Lastly the study finds that some modes of communication did
not prove effective, for instance, SMS, television and radio as these do not benefit all
consumers as they are socioeconomically determined.

The study concludes that language and semiotic resources are consumed differently between
the urban and rural, older and younger generations, the rich and the poor, and women and
men. This translates into a different social and economic scale in the sense that urban, rich
and men have more modes with which they access HIV and AIDS messages than the rural,
poor and women. Second, as much as we know that the HIV pandemic has brought so much
pain and devastation through sickness and deaths in Malawi and in the world as a whole, it
has however brought some positive changes to people’s lives. It has brought linguistic
changes. There is a minimal gap between what is technical and non-technical in as far as HIV
and AIDS terminology is concerned. Taboo terms, topics or words have been de-tabooed.
Social practices have been changed for the benefit of humanity as there are healthier practices
now. The rate of people contracting diseases or dying during practices such as initiation, chief
installation, cokolo, kutaya mafuta and many more, has gone down. There is also more
gender equity as the fight against HIV and AIDS has brought men and women together as
health talks are now done by both genders. Although some modes of communication are seen
as destroying the cultural and traditional practices, the study concludes that the HIV
pandemic has brought positive changes and has transformed the lives of people into a new
global world. Considering the major conclusions, producers need to take into account how
HIV and AIDS messages are consumed, the inequalities in accessibility in different modes,
and in how different social groups consume different messages. Secondly the selection of
modes, language and other social semiotic components should be a critical component in the
fight against HIV and AIDS.

The main contribution of this study is that it is the first of its kind that has covered almost all
the modes of communication used in Malawi, eastern region in particular. Other studies
covered language, visual images or the youth in isolation. As far as the researcher is aware no
study had been conducted on SMS and this study is the first in that regard. Thus, this is the
most comprehensive study on HIV and AIDS messages in Malawi. The ethnographic
approach used for this study makes it outstanding in that it provides an approach that
combines different aspects. Another contribution relates to the use of multimodality in which not only language but also other semiotic resources are used. This is in line with O’Halloran’s (2010) plea for more studies that look at different phenomena other than language. In addition, this is the only study that has used both resemiotisation and remediation as critical concepts in the study for HIV and AIDS.
DECLARATION

I declare that *Modes and Resemiotisation of HIV and AIDS Messages in the Eastern Region of Malawi* is my own work, that it has not been submitted for any degree or examination in any other University, and that all sources I have used or quoted have been indicated and acknowledged by complete references. However, all errors remaining are my own.

Thokozani Eunice Kunkeyani
2013

Signed ....................................
ACKNOWLEDGEMENTS

This thesis is a result of the much-needed effort from my supervisor, Professor Felix Banda. He has been wonderful throughout my stay as his PhD student. Words cannot describe how grateful I am to him. I am seriously indebted to him for his shrewd scrupulous and thorough professional guidance, comments and helpful suggestions. The most serious debt I owe him is the fact that he opened my eyes to a different field of Linguistics. I am further appreciative for his moral and financial support throughout the period of my study. Furthermore, I thank the Department of Language and Communication Studies. I will remember the friendly smiles; noise that I met and made in the corridor of LCS. My study life and journey was made easy because of the gracious environment that surrounded me. To my friends and fellow PhD students at UWC, I say ‘dankie’ for the support, jokes and all that we did together.

I would like also to express my gratitude to University of Malawi, Chancellor College for sponsoring my studies and above all the entire administration for making sure that my fees and upkeep allowances were available to me.

I would like to make special mention of my husband Cosmas Ngoma who was always by my side and very understanding. I was away when he needed me most. You were a wonderful man.

To my mum for her profound love, care and moral training, making me what I am today, I say ‘Zikomo Njisi’. I do not forget my sisters: the late Jacqueline Kambanje and Misozi Kambanje, my brother Chipulumutso Kambanje, my nephews: Precious, Yankho, Praise and Yamiko for their moral support.

I thank God Almighty for being with me during my studies. You have indeed your own calendar of doing things. Jehovah my provider, I thank you.
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<th>Full Form</th>
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<tbody>
<tr>
<td>AIDS</td>
<td>Acquired Immune deficiency Syndrome</td>
</tr>
<tr>
<td>ART</td>
<td>Anti-Retroviral Therapy</td>
</tr>
<tr>
<td>ARV</td>
<td>Anti-Retroviral (drug)</td>
</tr>
<tr>
<td>CBO</td>
<td>Community Based Organisations</td>
</tr>
<tr>
<td>CLS</td>
<td>Centre for Language Studies</td>
</tr>
<tr>
<td>CWLH</td>
<td>Coalition of Women Living with HIV</td>
</tr>
<tr>
<td>DHS</td>
<td>Demographic Health Survey</td>
</tr>
<tr>
<td>FBO</td>
<td>Faith Based Organisation</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immuno-deficiency Virus</td>
</tr>
<tr>
<td>IEC</td>
<td>Information Education Communication</td>
</tr>
<tr>
<td>Lit.</td>
<td>Literary</td>
</tr>
<tr>
<td>MDA</td>
<td>Multimodal Discourse Analysis</td>
</tr>
<tr>
<td>MANET+</td>
<td>Malawi Network for HIV Positive People</td>
</tr>
<tr>
<td>NAC</td>
<td>National AIDS Commission</td>
</tr>
<tr>
<td>NAF</td>
<td>National AIDS Framework</td>
</tr>
<tr>
<td>NAPHAM</td>
<td>National Association for People Living with HIV in Malawi</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organisation</td>
</tr>
<tr>
<td>OVC</td>
<td>Other Vulnerable Children</td>
</tr>
<tr>
<td>PEP</td>
<td>Post Exposure Prophylaxis</td>
</tr>
<tr>
<td>PLWH</td>
<td>People Living with HIV (and AIDS)</td>
</tr>
<tr>
<td>PMTCT</td>
<td>Prevention of Mother to Child Transmission</td>
</tr>
<tr>
<td>PSI</td>
<td>Population Services International</td>
</tr>
<tr>
<td>SFL</td>
<td>Systemic Functional Linguistics</td>
</tr>
<tr>
<td>SMS</td>
<td>Short Messages Services</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>United Nations Programme on HIV and AIDS</td>
</tr>
<tr>
<td>UNESCO</td>
<td>United Nations Education and Scientific and Cultural Organisation</td>
</tr>
<tr>
<td>UNGASS</td>
<td>United Nations General Assembly Special Session</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
</tr>
<tr>
<td>YONECO</td>
<td>Youth Network Organization</td>
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CHAPTER ONE: BACKGROUND

1.0 Introduction

This chapter introduces the study and presents background information on the impact of modes of communication for Human Immuno Virus (HIV) and Acquired Immuno Deficiency Syndrome (AIDS) messages in the Eastern region of Malawi. Just like any other country, Malawi has also been affected by the onset of the HIV pandemic. People are dying every day as a result of AIDS and there is evidence of new infections of HIV (UNAIDS 2010:16). This is indeed a threat to humankind not only in Malawi but globally. In order to pass on HIV and AIDS messages to the community as a way of mitigating its impact, various modes of communication have been employed and these are examined in this study. Furthermore, there are some factors that pose a challenge to the measures taken against the spread of HIV pandemic. For Malawi, these factors include cultural practices and beliefs. This study also investigates the implication of these practices on the understanding and interpretation of HIV and AIDS messages.

The motivation for the study emerged from the fact that although NGOs, researchers and government institutions have put forward so much resources and effort to deal with the epidemic of HIV and AIDS through campaigns, the impact these (the multimodal communication strategies in particular), have made on the community, required further research. Moreover, various communication modes with new and different technologies have been used to achieve behavioural change. The impact of these, as they have been used in rural and urban communities in Malawi, needed to be explored. It is hoped that the findings emanating from this study will be of benefit to both rural and urban target groups as well as the Ministry of Health, health care-givers and other national and international organizations that are involved in taking measures against HIV and AIDS.

The chapter is organized in five parts, namely, the background, the objectives of the study, the statement of the problem, the rationale, and the scope and limitations of the study. In the sections that follow, I discuss each of the parts in turn.
1.1 Background information on HIV and AIDS in Malawi

HIV and AIDS is one of the most severe epidemics the world has ever experienced. The world at large has been concerned with the epidemic since it was first discovered in the early 1980s (UNAIDS 2005). HIV and AIDS has become a health condition which has no respect of race, colour or creed (Bok 2009). Globally, 40.3 million adults and children are living with HIV and AIDS and 3.1 million adults and children had died by 2004 (UNAIDS 2005). The epidemic has mostly hit the sub-Saharan region which includes Malawi, partly due to poverty and lack of medication in developing countries. An estimated number of 25.8 million adults and children are said to be living with HIV and this presents grievous and heinous implications for development in the region (Cohen 1995, Gillespie 2005, UNAIDS, 2005). Thus, Malawi being a developing country with a population of 13,066,320 (National Statistics Office NSO 2008), is greatly threatened by the effects and devastation the HIV and AIDS epidemic is causing on the ever-increasing population.

The pandemic has had a serious impact on families. For example, about 650,000 children have been orphaned due to their parents dying of AIDS leaving them without a breadwinner to sustain their livelihoods. This severe effect of the epidemic on social, economic and most importantly health conditions of people has led to the sprouting of numerous Non-Governmental Organizations (NGOs), Faith-Based Organizations (FBOs) which are working closely with government departments in trying to adopt desperate measures to combat the scourge. Most of their efforts in addressing the epidemic have focused on communicating HIV and AIDS education related messages through different modes of communication such as television and radio programmes which include jingles and plays; printed materials which include posters, billboards, fliers, brochures, and leaflets. Other modes include door-to-door campaigns and mobile phone short message services (SMS). These modes of communication are used by almost all the groups and organizations that deal with health related issues.

Thus, many NGOs having blossomed with the coming of the HIV pandemic in early 1980s and though some of these organisations are outside this current study area, Eastern Region, most of them have branches stationed in the area. Thus, the Eastern region has National AIDS Commission, Youth Net and Counselling (YONECO), Coalition for Women Living with HIV
((CWLH), World Vision, United Nations Children’s Fund (UNICEF) (USA), UNICEF (UK), Action Aid Malawi and Dignitas. This region has more organisations dealing with HIV and AIDS than the other regions because of the HIV prevalence rate which is higher than the other regions (NAC/DHS 2004, NAC 2003).

1.2 Governmental and other institutional roles in HIV and AIDS
HIV and AIDS is undoubtedly the foremost peril for development that Malawi as a nation is facing at present. Since the first case of HIV and AIDS was detected in Malawi, in the year 1985, in excess of half a million people have died of this AIDS, and yet day after day countless more are being infected. The scourge has distressed every quarter, resulting in extensive loss of public output and an abrupt increase in the burden on persons, families and societies. The amplified blow of the pandemic goes on to diminish the cost-effective growth of the ancient times, and to spread anguish and misery amongst people living with HIV and AIDS and affected families. Malawi has done a lot in taking action on the HIV and AIDS deadly disease. Currently, there exist an extensive drive of alertness on HIV and AIDS and how to avoid infectivity. Institutions have established plans and ways of dealing with it. Diverse quarters such as public, civil societies, faith based organisation, private divisions and community based organisation have been mobilized in the campaign. These quarters were taking their part in helping orphans, taking care of the sick and combating discrimination and stigma. There have been various schemas of approaches that have been put in place in due course to tackle matters concerning treatment management as well as impact alleviation of the pandemic (NAC 2003).

The government through the Ministry of Health created its initial temporary plan in the year 1987 through the National AIDS Control programme. Its central action was the testing of blood for HIV before transfusion. The first Medium Term Plan (MTPI) was created and executed between the period of 1989 and 1993. The hub of this MTPI was extended to comprise information, education and communication (IEC) approaches. The centrality of the subsequent Medium Term Plan (MTPII) which was between 1994 and 1998 concentrated on the organization of a multiple approach to the pandemic. The National AIDS Strategic Planning Unit
was then involved in National HIV Mobilization campaigns, Consensus Building and Strategy Plan development procedures between 1999 and 2004.

The assessments and appraisals of the preceding strategies had signified numerous spots of accomplishment, particularly the soaring level of knowledge of the epidemic by the communities. Although survey statistics specify that the yearly increase in the HIV prevalence rate has gone downward since 1992/3, however, there was epidemiological proof that the rate of fresh infectivity was nevertheless towering, particularly among females between the age group of 15 and 24 years old. The assessment studies therefore exposed that the Medium Term Plans (MTPs) in their initial stages did not engage the target groups, that is, the urban and rural communities. The strategies were created and established by decision-makers from the public and private sectors, non-governmental organizations, specialized organizations and donors at workshops prepared by the Ministry of Health (UNESCO 1999).

The nationwide reaction to HIV and AIDS designed for the period of 1999 to 2004 was multi-sectoral, linking government ministries and departments, private divisions, para-state organizations, media legislative bodies, political parties and AIDS support groups. A central secretariat, the National AIDS Control Programme Secretariat, now the National AIDS Commission, that is situated inside the Ministry of Health and Population encompassing institutions mentioned above and organizations directed policy, promoted commitment on politics as well as making resolutions on crucial matters in addition to supervision and checking implementation (UNESCO 1999).

Within the government, there existed also a cabinet committee on HIV and AIDS and it was presided over by the Vice President of the Republic of Malawi. The committee comprises the Vice President, Minister of Health and Population, the Minister of Finance, Minister of Women, Youth and Community Services, Minister of Education, Sports and Culture, Minister of Information, and the Director General of the National Economic Council. The committee’s duty was to campaign for the translation and interpretation of pertinent rules into laws and to examine policies on hand and generate fresh ones for the management and deterrence of HIV and AIDS (UNESCO 1999).
Several ministries of the government were also fairly taking part in addressing HIV and AIDS issues. For example, the Ministry of Education, Sports and Culture had activities that comprised anti-AIDS school clubs and formulation and streamlining of curricula that took into consideration AIDS reproductive health and life skills. Nowadays, pupils start learning about HIV and AIDS as early as in standard four (Primary four) as a Life Skills subject while in the senior primary classes, HIV and AIDS is studied under the subject of Social Studies. The Ministry of Women, Youth and Community Services implemented and evaluated the recording systems for births and deaths, organized events such as orphan-care and activities relating to out-of-school youths and programmes for adult literacy which incorporates HIV and AIDS education. The Ministry of Local Government sensitized the general community to different areas of health that include HIV and AIDS, water and hygiene. The Ministry of Labour integrated Family Life Education into the Technical School curricula, and the Ministry of Health and Population implemented programmes concerning Reproductive Health and HIV and AIDS such as Prevention of HIV Transmission from Mother to Child (PMTCT). Furthermore, the President of the Republic of Malawi, whenever she spoke to the nation, included issues of HIV and AIDS pandemic and reproductive health in her speeches. She had also been involved in activities specially organized to draw attention to the HIV and AIDS situation in the country.

The clubs under UNESCO such as AIDS Toto Clubs in schools and Associated Schools Project (ASPNET) also vigorously took part. At present about 30 secondary schools and two primary schools were under the UNESCO Clubs/ASPNET (NAC 2003). HIV and AIDS education was integrated within three themes of study which were world concerns, human rights and intercultural learning. Non-governmental organizations (NGOs) also took a significant position in the fight against HIV and AIDS. A good number of NGOs were actively involved in counselling; out-reach programmes, human rights issues, home-based care, income generating activities (IGAs), recruitment of charitable society support, training and education, networking and information broadcasting (NAC 2003). About 140 NGOs existed locally and worldwide, registered within the Council for Non-governmental Organizations in Malawi (CONGOMA) and 50 of these handle issues related to health and HIV and AIDS. Some of the organizations included Banja La Mtsogolo (BLM), Livingstonia Synod AIDS Control Programme, Population
Services International (PSI Malawi), Salvation Army, Save the Children (UK), Action Aid, Save the Children (USA), UNICEF, Media and AIDS Society of Malawi (MASO), Development Aid from People to People (DAPP), Youth Net and Counselling (YONECO), NICE, People Living with HIV (PLWH), Malawi Network for People Living with HIV (Manet +), Coalition for Women Living with HIV (CWLH) and many more. The different NGOs and FBOs have the responsibilities of producing HIV and AIDS materials, dissemination of HIV and AIDS information, providing health services such as treatment for HIV and AIDS related diseases, providing support for HIV and AIDS infected and affected individuals and many more.

1.2.1 National AIDS Commission

The government established NAC to control interventions in HIV and AIDS pandemic and also oversee the tasks of the institutions involved in programmes for HIV and AIDS. This was formed after National AIDS Control Program (NACP) which operated between 1987 and 2001. The National AIDS Control Programme was changed and reorganized to become a commission so as to efficiently take action in the state-run programmes concerned with HIV and AIDS. Thus, the NAC was established in July 2001 as a civic trust to substitute National AIDS Control Program. The commission took form when it was realized that the reaction to the HIV and AIDS pandemic needed a multi-sectoral strategy and interaction between extensive issues of population and HIV and AIDS, culture, economic development, social service provision, workforce development and administration, community development and gender. This institution acted as a body that coordinated all HIV and AIDS activities with an aim of offering management in organizing, preparation, coordinating and putting up standards and guiding principles for the control and deterrence of HIV and AIDS in Malawi. The commission incorporated the National HIV and AIDS Strategic Framework in its activities. The National HIV and AIDS Strategic Framework (NSF) came in three phases:

1. The first one was established to cover the period of 2000 – 2004. It came into being after a countrywide consultation which was done between October 1998 and April 1999. It was created by the then National AIDS Control Program (NACP), a section within the Ministry of Health of Malawi. The NSF started to operate in January 2000. Its main objective was to provide management for a multicultural approach to HIV and AIDS at
every level: community, district, and nationwide levels. It included the national, local, private institutions, NGOs, FBOs, development partners such as donors, and HIV and AIDS related groups.

2. The second one covered the period 2005-2009. National HIV and AIDS Strategic Framework, contributes to the general health arrangements and is a fraction of the government stratagem on the reduction of poverty.

3. Third period was 2010-2012.

The third phase 2010-2012 was an extension of the second phase and this was established after the Mid Term Review which was done in 2008 (NAC 2009). This extended phase based its principles on the ‘Three Ones’ of one national strategy, one national governing authority and one monitoring and evaluation system (NAC 2009). Its main role was to redefine the technical program so as to attain the Universal Access to HIV Prevention, Treatment, Care, Support, and fulfill the Millennium Development Goals (NAC 2009).

The general objective of the frameworks was to lessen the occurrence of sexually transmitted infections and HIV and improve the lives of those affected and infected by the HIV and AIDS. But the overall policy was to elevate the levels of the health status for every Malawian by reducing the incidences of illnesses and occurrences of deaths among people by providing a reasonable delivery system competent of promoting healthiness; preventing, reducing and curing disease; caring for life and nurturing universal health and improved output (NAC 2005).

The NSF put emphasis on prevention, which was available in every priority area. This was acknowledged by the government through actions and strategies of the various actors in HIV and AIDS programmes which principally concentrate on activities to do with prevention, and less on health mitigation, psychosocial, socio-cultural and socio-economic impact of the pandemic.

The NSF, which was then called National Strategic Action Framework (NAF) between 2005 and 2009, had its general objective based on countrywide HIV and AIDS policy and this one had a
new component of treatment. The aim was largely to avert the spread the infection of HIV amongst Malawians, give access to the management for PLWH and alleviate the well-being, socio-cultural, psychosocial and socio-economic impact of HIV and AIDS on every person, families, society and the country. The specific objectives were as follows, prevention and behavioural change, management and programme arrangement, affiliation and capacity building, treatment, resource mobilisation, investigation and development, care and support, alleviations through socio-economic and psychosocial impact, follow-ups and utilisation, mainstreaming, screening and assessment, and public guidelines.

Apart from the objective, NAC under the Office of the President and Cabinet (OPC) had roles which included assisting in strategy progress, directing the countrywide HIV and AIDS Action [Strategic] Framework, helping in formulation of policy and tactical preparation in different divisions and locally, promotion as well as societal mobilization in HIV and AIDS in every subdivisions at different hierarchies, mobilizing assets, allotment plus trailing of efficient operation, edifying joint ventures between each and every person within the nation through local and global links, improvement of understanding management strategies to record finest practices, broadcasting in addition to promotion of the best practice, plotting interferences so as to show coverage and scope geologically, aid and sustainability for human resource structure, general scrutinizing and assessment, recognition of HIV and AIDS research priorities.

1.2.2 Non-Governmental Organizations

Apart from the government, other organizations had also taken part in the measures taken against HIV and AIDS; some NGOs took up the initiative to deal with the HIV and AIDS pandemic. For instance, the most active NGOs in the Eastern region were Youth Net and Counselling (YONECO), PSI Malawi, Save the Children UK, Save the Children USA and Diginitas. YONECO was the most active of all NGOs in the Eastern region. As such this study had mainly concentrated on the activities taken by this organization. This was because YONECO was an NGO fully stationed in the research area for this study, Eastern region. It was apolitical and an NGO that did not make profit. It was founded in the year 1997. The NGO was formed to tackle the societal unfairness, issues on reproductive health on the adolescence, children and women. YONECO got registered with the National Youth Council of Malawi which fell within the
National Youth Council (1996) Act, with the (1962) Trustees Incorporation Act in the year 1999. It was also registered with the board for NGOs in 2003. This NGO, YONECO, was affiliated to several networks such as Civil Society Coalition for Quality Basic Education (CSCQBE), Council for Non Governmental Organizations in Malawi (CONGOMA), Human Rights Consultative Committee and Malawi Network of AIDS Service Organization (MANASO). In 1998 YONECO was accorded membership to the Human Rights Consultative Committee.

The vision of this NGO was: ‘An HIV and AIDS - free society that values independent principles and ethics’ and its operation statement included ‘to be dedicated to fighting the spread of HIV infection, extenuating the blow caused by AIDS in addition to upholding democratic system and human rights’. This mission statement was visibly displayed on the walls of one of the youth offices for accessibility by the visitors and public in general. This mission statement had values which the NGO upheld in highest regard and they were: transparency, accountability, respect for human dignity, shared responsibility, being honest and integrity.

The objectives of YONECO comprised promoting constructive youth, women and child improvement through life skills, counselling, leadership and free enterprise development; protecting, supporting and defending human rights with meticulous indication to the constitutional rights of women, youth and children; carrying out public education in HIV and AIDS, democracy, gender, human rights, and good quality governance among the common populace; improving women, youth and children contribution in the social equality procedure plus socio-economic improvement of the state; giving public and financial support services for women and children that have been ill-treated and persecuted at society level, and offering care and support to the people infected and affected with HIV and AIDS not excluding orphans and people living with HIV and AIDS.

The second example of an NGO which was active in the Eastern region of Malawi was PSI Malawi in conjunction with Pakachere. PSI Malawi started working with Soul City in 2001. This NGO was believed to have started as part of a five year Regional Programme which covered eight SADC countries, Malawi inclusive, and was funded by the European Union (EU), DFID, RNE, BP and Irish Aid. Pakachere was a branch of PSI Malawi which dealt with health mass-
media communications aiming at re-aligning societal and traditional customs and practices, behaviours and attitudes. The objective was to promote the implementation of healthy behavioural practices. Pakachere used television, radio and print to accomplish its goals. Even though the central spotlight of Pakachere was HIV and AIDS prevention, the programme enveloped supplementary topics like domestic violence, school harassment, in addition to accommodation problems. Pakachere endeavored to reach all Malawians, both urban and rural (http://www.soulcity.org.za/projects/regional-projects/malawi accessed on 17th June 2010).

Pakachere also attempted to promote an 'edutainment' model with the intention of coming up with local Malawian capacity building to administer and expand successful and useful multi-media communication campaigns. Additionally, Pakachere complemented Malawi’s National Strategic Action Framework as NAC acknowledged that HIV and AIDS prevention and social mobilization were fundamental to the accomplishment of the HIV and AIDS programmes in Malawi. Conclusively, the rationale of the regional programme was to condense the spread of HIV and AIDS amongst the communities by three percent (3%) over the established period of five years.

1.2.2.1 NGOs for people living with HIV

Excluding the above-mentioned two NGOs, there were also other NGOs which were formed by people living with HIV and AIDS and some of them included: Malawi Network of people living with HIV (MANET+), Coalition for Women Living with HIV (CLWH), National Association of People Living with HIV and AIDS in Malawi (NAPHAM) and many more.

MANET + or MANET PLUS was established in 1997 and was founded by people living with HIV and AIDS and its vision, just like the other NGOs for people living with HIV, was to visualize a liberated, serene and diplomatic atmosphere for people living with HIV and AIDS. With this in mind, they hoped to live in harmony with different kinds of people and enthusiastically played a part in daily activities including policy-making bodies. MANET+ tried to progress the standard of lives of people living with HIV by coming up with an accommodating and supportive environment, free of stigma and discrimination (http://www.manetplus.com/aboutUs/aboutus.html accessed on 17th June 2010). Its main goal
was to advance successful networking between different support groups and links of people living with HIV and AIDS.

The MANET+, as soon as it was established, produced an outline of activities that were supposed to be carried out, which included going around communities to check the health status of its members. These activities specifically included collecting a data-bank of information on HIV and AIDS so as to come up with proposals for interventions. Further, the institution's mandate was to publish newsletters and magazines to educate the community, both the infected and affected, in addition to distributing HIV and AIDS messages and information from other NGOs and government. The MANET+ also gave radio talks so as to provide those living positively with a platform to voice their opinions on their health status as well as to help break the silence about HIV and AIDS, since up to this present day people were still reluctant to talk about HIV and AIDS. In these radio talks, they discussed their progress in health and how they managed their treatment, Anti-Retroviral tablets (ARVs). They also answered questions from listeners as the programs were usually ‘live shows’. On the other hand, they provided support in the form of cash or in kind from the money they fundraised through activities such as ‘big walks’, ‘cycling races’ and many more. They also organized memorial ceremonies for those who had died of AIDS.

1.2.3 Challenges for both government and other institutions

Both public and private health institutions were faced with a lot of challenges that needed to be addressed as HIV and AIDS came into being. The immediate issue that was actively addressed was prevention. All organizations emphasized the need to abstain as the pandemic is transmitted through sexual contact. Thus, the emphasis was on the avoidance of ciwelewewele ‘being promiscuous sexually’. In this regard, there was a massive campaign of abstinence, being faithful and the use of condoms, popularly known under the acronym of ABC. This was under the NSF 2000-2004 and all NGOs collaborated on the same campaign. After ABC campaigns, came treatment campaigns which fell under NSF 2005-2009. Presently, the emphasis is on being faithful to one’s partner under the slogan ‘one love’. To address these issues the government and NGOs met challenges that ranged from inadequate funding, capacity building, health centres for counselling and testing, inadequacy of medicines to treat the opportunistic illnesses that came
along with the HIV infections, misinformation, misunderstanding and misinterpretation of HIV and AIDS messages to accessibility of information by both the urban and rural communities. Thus, the institutional sector had to come with measures to address the challenges. NSF outlined approaches to deal with these challenges which included the implementation of Information, Education and Communication (IEC) materials as well the need for close monitoring and evaluation (M&E) of all HIV and AIDS activities (NAC 2004). In turn, under IEC, different modes of communication to pass on the HIV and AIDS messages were identified. Although challenges were identified, and approaches put in place, the impact that these modes of communications made on the target group was hardly assessed, hence this study.

1.3 Communication modes in Malawi

In Malawi, modes of communication vary just like the rest of the world. As noted above, communication refers to a form of medium for passing on information from one end to the other and modes mean various ways or different kinds with which communication is used. Traditionally, in Malawi, information is usually passed on orally. The oral traditional form of communication, that is, the old form of one human being carrying information to another person or people, is very common and relied upon. Consequently other forms of communication such as the internet, television and so on are regarded as too modern, expensive and high-tech to the extent that people feel they can do without them. Television was only introduced in Malawi in 1994. The first President of Malawi, Hastings Kamuzu Banda, refused to give television licenses to individual entrepreneurs in Malawi. Thus, even if one wanted to run a television station in Malawi, he/she would not be allowed to carry out that kind of business during his tenure. His argument was that, just like Socrates was tried, convicted and executed for corrupting the minds of the youth in the ancient Greek world (Plato, Benjamin Jowett (ed) : Apology http://classics.mit.edu/Plato/apology.html accessed on 10/05/2010 ), similarly, television spoils or corrupts the minds of people, the youth in particular. People who had a chance to travel abroad, managed to bring television sets and screens but they were used for watching videos only. However, all video screens, VCR or DVD players, video tapes, and discs were scrutinized at the entry point, be it the airport or borders. The scrutiny was done by the Censorship Board of Malawi which was usually headed by the clergy such as bishops, pastors, and reverends. If
found to be contrary to the government rules not only was the equipment confiscated but the owner was also arrested and sent to prison without trial. Thus a lot of people were incarcerated as a result of bringing sensitive materials like pornographic videos into Malawi.

Internet was only introduced in Malawi in 1999 by the University of Malawi, under the department of Physics, and it was run and coordinated by the department as a departmental project. Although, now it has been introduced by most institutions, not all institutions have access to the internet, for example, most hospitals do not have internet access. To those that have access, such as the University of Malawi, the accessibility is not reliable as most of the time it is inaccessible due to a heavily loaded network to the extent that people opt to browse the internet late in the night or the early hours of the morning, just to get uninterrupted internet access. Thus the internet is not a reliable form of getting information in Malawi, even for the urban community.

The most accessed mode of communication in Malawi is radio. There are about thirteen (13) radio stations which include Malawi Broadcasting Cooperation One (MBC1), Malawi Broadcasting Cooperation Two (MBC 2), Capital Radio, Star Radio, Radio 101, Dzimwe Radio, Radio Maria, Islamic Radio, African Bible College (ABC) Radio, Trans World Radio, Zodiak, Joy Radio and many more. Radio Islam, ABC Radio, Radio Maria and Trans World Radio are religious radio stations and as such their programmes are limited and mostly broadcast religious specialties. Dzimwe Radio, MBC 1, Radio Maria, and Radio Islam broadcast mostly in local languages of CiCewa and Yao. The programmes are limited in the sense that they are selective in nature and ideologically inclined. For example, in the case of HIV and AIDS messages, most radio stations do not promote the use of condoms for HIV prevention. They deem that to promote condoms is to encourage promiscuity which is considered sinful before God or Allah. Radio Maria is affiliated to the Roman Catholic Church. It was started by a group of priests and up to now the coordinator of this radio station is a Catholic bishop. Most of the programmes are announced by priests and they follow the Roman Catholic religious festive calendar, for instance, when it is Easter time they conduct ‘the way of the cross’ programmes. Radio Islam also produces Islamic festive religious programmes, following their calendar. When it is the fasting period, they announce times for meals, where to go for prayers, when the moon will appear and
so on. ABC Radio, on the other hand, is a Presbyterian charismatic radio station owned by African Bible College. The college is an independent private institution established by some Americans. One of its academic programmes is radio announcement and programme production. Thus, this radio serves as a practical ground for students studying that course.

However, the first radio station in Malawi, which is MBC 1 radio, was established by the government of Malawi in 1964. The second station came into operation in 1994 after the multiparty election. This is the period that the press was ‘liberated’ from the oppressive rule of the one party state led by Hastings Kamuzu Banda, whose government controlled the media and the press. This second station was called MBC radio 2 and is mostly for the younger generation as most of the programmes are music and programmes that the youth like. Both MBC radio 1 and MBC radio 2 are state-run radio stations in Malawi.

MBC radio 1 and Trans World radio were the only radio stations in Malawi during the one party era. The number of radio stations proliferated after the multiparty government system came into being. Thus, radio stations such as Zodiak, Star radio, Capital radio, radio Maria, Dzimwe radio, ABC radio and Joy radio, are relatively new in the media industry although they have made a tremendous impact on the community. So tremendous is the impact of radios such as Zodiak, Star radio and Joy radio that the communities tend to ignore MBC radio stations whenever they are looking for programmes or information of some kind. These three radio stations have become very popular because the production of their programmes is not compromised. They present facts as they are. They are not biased towards any political or religious affiliated institution. They are perceived by the public as being independent in their presentations. Most of them are owned and run by former employees of MBC radio 1 station.

Radio stations such as Dzimwe and ABC radio stations are community radio stations. Dzimwe radio station is specifically for Mangochi district although the coverage goes beyond the designated area. It goes as far as Balaka and some parts of Machinga. The radio station was established in 1994. It was meant to be an environmental sensitization radio station. The name Dzimwe is the name of a hill on which the radio is stationed. The hill originally had a thick forest with wild animals but soon after the multiparty elections people became so liberated that they
overruled government laws and regulations on environment and started cutting down trees to the extent that this hill became bare. All the trees were cut down for charcoal. Charcoal-making is an easy source of income for the community. Unfortunately, for one to produce two big bags of charcoal one has to cut down at least two trees. One big bag is worth K1500 which is equivalent to R60 or $9, taking the rate of K25 to R1 and K142 to $1. With many trees disappearing, animals spontaneously also disappeared. They disappeared when they were killed to sell their by-products or raw materials such as tusks in the case of elephants, hides for other animals and even for meat. Thus this radio station was established to deal with environmental degradation. It was established by some well-intentioned environmentalists. However, the original purpose of environmental sensitization has since been forgotten. The radio runs different programmes and the environment programmes are now in the minority.

1.3.1 Communication modes and HIV and AIDS messages
In 2003 it reviewed its policy on the HIV and AIDS epidemic when the government acknowledged the massive devastation it has and continues to cause on Malawi as a country. The policy had an Information, Education, Communication (IEC) section which in turn falls under the broad theme of ‘Prevention’. The prevention approaches incorporate the information supply and the offering of education, sterile injection equipment, voluntary counselling and testing (VCT), condoms, antiretroviral (ARV) medicines (for instance, to prevent mother-to-child transmission (PMTCT) or to give post-exposure prophylaxis (PEP)) and, once developed, nontoxic and helpful microbiocides and vaccines (NAC 2003). The rationale of the IEC is as follows:

- To tackle the HIV and AIDS epidemic, people must have the ability to adopt risk-reducing behaviour.
- To make full use of existing opportunities to cope with HIV infection and AIDS.
- To make sure targeted information is delivered within a culturally sensitive context to help increase awareness and knowledge and to overcome stigma, discrimination, myths, beliefs and prejudices associated with HIV and AIDS and sexuality.
- To support mass media, supported by interpersonal communication, which are vital channels to reach the largest number of people with accurate, targeted and relevant messages. (NAC 2003)
This was done to promote the adoption of new sustaining behaviours and practices and enabling the environment for people living with HIV (PLWH). With the above rationale in mind the government was inclined to undertake the following measures:

- ensure that all people have equal access to culturally sound and age-appropriate formal and non-formal HIV and AIDS information and education programmes, which shall include free and accurate information regarding mother-to-child transmission, breastfeeding, treatment, nutrition, change of lifestyle, safer sex and the importance of respect for and nondiscrimination against PLWHs.
- support development of adequate, accessible, sound and effective HIV and AIDS information and education programmes by and for vulnerable populations and shall actively involve such populations in the design and implementation of these programmes;
- make sure that behaviour change interventions are guided by the evidence-based needs of the target populations and existing evidence on potential opportunities for and barriers to behaviour change.
- ensure that behaviour change interventions aim at a transition from general awareness to knowledge of one's sero-status and, ultimately, to know how to protect oneself and others.
- integrate and promote sound, age-appropriate life skills education, including sexual and reproductive health education and HIV and AIDS information and education, at all levels of formal and non-formal education.
- ensure that life skills education is integrated into school curricula as a subject in which students are regularly assessed.
- to support programmes that strengthen the role of parents and guardians in shaping positive attitudes and healthy behaviours of children and young people with regard to sexuality and gender roles in the context of HIV and AIDS and other STIs.
- guarantee greater involvement of PLWHs in the design and implementation of HIV and AIDS information and education programmes, as well as activities aimed at influencing and sustaining behaviour change (NAC 2003:6).
• promote abstinence and/or delay of first sexual experiences for the youth and mutual faithfulness among adult sexual partners.

(NAC 2003)

Thus, both the government and other NGO institutions applied different modes of communication to cover the measures. The government used its wing NAC. This wing produced different messages to accommodate both the rationale and measures of the government on HIV and AIDS. Messages were passed on to the community through radio programmes, posters, fliers, billboards, television jingles, music, short messages services (SMS), newspapers, leaflets, traditional dances and many more. The messages were, however, designed in English as most messages are adaptations of some international organizations dealing with HIV and AIDS such as UNAID, UNDP, Soul City, and so on.

Since the messages were in English, some were translated into local languages, CiCewa in particular, while others were left out. The messages also contained some linguistic resources such as proverbs and euphemisms which attracted a lot of debates. Some messages were disbursed through songs and this magnetized debates too as most songs seemed to portray women as the main transmitters or purveyors or carriers of HIV. Therefore, this study has researched different modes of communication to unravel their impact on the consumers of the HIV and AIDS messages.

1.3.2 The role of language in HIV and AIDS education messages

The significance of language as a tool for communication in any society cannot be over-emphasized. It is the main instrument for expression (Nyati-Ramahobo 2008). Everything has to have some form of language for communication. For instance, directions have posters or boards or placards with arrows or words showing the way or route. Language is used in everything and all areas of specialised professional fields whether medical, numerical, or physical. It is a form of expression since it has verbal and non-verbal components such as speaking for communication and signs for communicating direction or information, respectively. Salawu (2006) observes that language is important because people are able to express themselves and their culture using language of any form. Thus, language is utilised to organize, comprehend and articulate our
observations of the world and of our personal awareness. Language enables us to partake in communicative acts with other people, to handle responsibilities and to communicate and appreciate attitudes, feelings and judgments. Language relates what is articulated (or written) to the actual world and to other linguistic actions. Nyati-Ramahobo (2008) further emphasizes that language is the DNA of culture. It is through language that one’s culture is acknowledged. It is through language that specific information is passed on to targeted groups. Language is a basic resource which requires negotiation of social relationships with others to construct the sense of our world by shaping values, meanings and understandings (Christie 2005). Language is vital to social communication because it is the procedure through which people share information, meanings, and feelings through the exchange of audio, verbal and non-verbal messages (Klopf 1998). It is, therefore, a basic resource that makes this communicative interaction possible.

As explained above, the significance of language in all fields is exceptionally evident. However, given the critical role that language plays in all aspects of life, its role had not been accorded its rightful place in the Malawi National AIDS Framework (NAF) nor has it been prominently emphasised in the Malawi National AIDS Strategy Framework (NSF) for the (http://www.aidsportal.org accessed on 27/10/09). In both cases, language was presented as one component referred to as ‘HIV and AIDS Information, Education and Communication (IEC)’ which also had one objective ‘to set up a standardised, inclusive and efficient IEC policy to diminish the spread of HIV and deal with the impact of the epidemic’. This goal has three strategies, which include:

i. To strengthen joint ventures in IEC actions
ii. To develop pertinent and helpful IEC messages and materials
iii. To establish systems for excellent control of IEC

The National Health Policy in its entirety has no mention of language just as the National AIDS Policy formulated in 2003. This could be attributed to the fact that, being so part and parcel of our lives, there was always a traditional lack of interest in language as playing an important role in social health issues like HIV and AIDS epidemic. Additionally, since HIV and AIDS is a health issue, both governments and NGOs/FBOs hardly considered language as a priority in
solving health matters. They took language for granted and dismissed it as commonplace (Oketch 2006). They tended to be incognisant of its role in carrying out information and making meanings, particularly in communicating health related issues like HIV and AIDS epidemic (Oketch 2006). However, some scholars came up with various studies proving how language was linked to social, cultural and health issues (Banda and Oketch 2011, Norton and Mutonyi 2010, Christie 2005, Eggins 2004, Fairclough 2004, 1992, Scollon and Scollon 2003, 2004, and Halliday 1994). These scholars have produced evidence on the importance of language to health and social issues. In health matters such as HIV and AIDS participants interacted with each other using linguistic concepts and ideologies to create meanings and messages, construct and reconstruct meanings. On the other hand, producers/writers of health messages constructed and reconstructed the discourses for the target group through different modes of communication and in the process both the discourses and the modes were resemiotised. Therefore, language cannot be overlooked in social and health matters because it is a system by which the community has access to information. Furthermore, scholars argued that language was at the root of the capacity to be innovative and to participate fully in social activities (Djite 2005, Arua 2003, Prah 2000, 1998, 1995, Robinson 1996 and Bamgbose 1991). In fact, it would be impractical to ‘deem exploits of language of any kind without tackling the societal reasons for which language is utilised, as well as the social procedures that manage ‘languages’ (Christie 2005:5).

Consequently, in cognisance of the importance of language to humanity in both social and health issues, scholars have come up with the notion of linguistic human rights (Heugh 2005, Prah 2000, 1998 and Miti 2008). The notion is relevant to this study because of the importance the researcher attaches to full participation of the community in the fight against the HIV and AIDS epidemic. To participate actively in social health issues as sensitive as HIV and AIDS epidemic, there is indeed the need for language rights (Oketch 2006). These linguistic rights thus, attract the use of local languages as the majority of the community in which the study was carried out cannot comprehend the foreign languages such as English or French (NSO 2008). These languages are usually acquired formally through the school system.

Furthermore, language has been expressively recognized in different agreements and pronouncements such as the Universal Declaration of Linguistic Rights of Barcelona (UNESCO
1996) and the Asmara Declaration (2000) which emphasise the support and reverence of all languages and their social use in public and private spheres. Language is fundamental to human communication, and is socially positioned and as such texts that we meet each day are publicly created, formed and determined through language and by language (Wodak and Meyer 2001, van Dijk 1998 and Fairclough 1996). It is through language that humans are able to think and express their thoughts in various ways. It is the most highly developed and frequently used form of human communication (Miti 2008 and Matlosa 2008).

1.4 Sociolinguistic situation of Malawi

Malawi is a multilingual society with about 13 local languages (Mtenje 2008 and http://www.ethnologue.com/show_map.asp?name=MW&seq=10 accessed on 5/02/2013) and these include CiCewa, CiYao, CiTumbuka, CiSena, eLhomwe, CiLambya, CiNgoni, CiNyakyusa/CiNgonde, CiNdali, CiNsenga, Cikokola, CiNyiha and CiTonga. CiCewa boasts of having the highest population, seconded by CiYao, and then CiTumbuka and the others come below (NSO population and Housing Census report 2008, CLS 2007). Thus, of all the local languages, CiCewa/CiNyanja is the most commonly used local language as it is regarded as the national language (Miti 2008, Bwanali 2008, and Mtenje 2008).

Although this is the case, English is accorded a high ranking position when it comes to using it as a medium for communicating HIV and AIDS education messages. CiCewa and CiTumbuka are the two local languages that are predominantly used after English (CLS 2007). For instance, according to NSO population and Housing Census report (2008), HIV and AIDS messages are 59 percent in English, 20 percent a combination of English and CiCewa, 9 percent CiTumbuka and surprisingly 1 percent CiYao when in fact CiYao ranks third in population numbers. In terms of population, CiCewa/CiNyanja presents 70 percent, CiYao 10.1 percent, CiTumbuka 9.5 percent, CiSena 2.7 percent, eLhomwe 2.4 percent, CiTonga 1.7 percent and the rest share the remaining 3.6 percent of the population (Mtenje 2008). Thus, CiYao language has been marginalised when it comes to production of HIV and AIDS messages. Apart from these, no other local language is used as the medium for communication for HIV and AIDS messages.
Additionally, this ranking of local languages can be said to have a political background emanating from the time of the first president of Malawi, Hastings Kamuzu Banda, who, being a Cewa himself, promoted and declared CiCewa as the national language and that it should be used as the medium of instruction in schools alongside English. Thus, CiCewa was used even in areas where the community spoke a different language. CiCewa was further put in the school syllabi, was examinable and further made to be one of the qualifying subjects of entry into secondary schools as well as into tertiary education. Thus, all students regardless of their mother-tongue had to learn CiCewa.

However, things transformed when the political situation changed in 1994. Changing from one party system to a multiparty system brought with it linguistic liberalisation (Kamwendo 2004). After the multiparty system was introduced in 1994, the linguistic liberalisation saw other ethnic groups fighting for the recognition of their local languages. Consequently, other local languages such as CiYao, CiTumbuka started to gain status. This invited a redraft of the language policy in Malawi to accommodate all languages. The language policy has since been revised, although disappointingly, it has not yet been implemented (Mtenje 2008).

In part, as a result of the linguistic liberalisation after the departure of Hastings Kamuzu Banda, languages such as CiCewa in particular, started to transform more rapidly than before in the sense that varieties spoken in urban areas were becoming increasingly different from those from the rural locations, even within the same district. For example, CiCewa in the city areas of Lilongwe (which is the capital city of Malawi), is different from the one in the Lilongwe rural areas such as Nsalu, Nkhoma, Nambuma, Nathenje, Malili and many more. The urban CiCewa is ‘modernized’ and speakers mix it with English, or with other local languages like CiTumbuka and CiYao. Speakers have increasingly become linguistically liberal. This, in a sense, has brought with it rapid linguistic change within the local languages in a short time.

Given the sociolinguistic background above, most HIV and AIDS discourses in Malawi are multilingual as outlined above. CiCewa has a representation of 59 percent of the discourses; English has 20 percent or a mixture of CiCewa and English; CiTumbuka 9 percent; CiYao 8 percent and the rest of other languages 1 percent (CLS 2007). This information is across all
districts, even where any of these is not their mother-tongue. This has been primed by Dr Kamuzu Banda, the first president of Malawi when he declared CiCewa a national language. For instance, the local language for Nsanje district is CiSena but HIV messages being passed on to this area which borders Mozambique, are mostly in CiCewa. Another example is the area for this study, the Eastern region where the lingua franca is CiYao, but the HIV and AIDS messages are principally in CiCewa language.
1.5 Geographical and demographic details of eastern region

Figure 1.1: Map of Malawi
Accessed at: http://www.nationsonline.org/oneworld/map/malawi_map.htm on 06/06/2012
Figure 1.2: Map of the Eastern Region

Figure 1.3: a Grid Map of Eastern Region of Malawi

Figure 1.1 shows the map of Malawi. Figure 1.3 illustrates the boundaries of the four districts of eastern region and the four lakes. Malawi is the new name for this country. The old name was called Nyasaland and this was during the colonial period. The name Malawi is originally spelt
Maravi because it referred to people called Amaravi (Agnew and Stubbs 1972:14, Randall 1971:51). The word Maravi literary means a bright haze or flame of fire. This was associated with the haze or blaze of sunlight on Lake Malawi (Pike 1968:43, McCracken 2000:29). Thus, Amaravi are people in the land where there is blaze of sunlight on the lake.

Malawi is a small and land-locked country. It is found in south of the equator and forms part of the sub-Saharan Africa. It is bordered by Zambia on the Western side, Mozambique on its lower Eastern, Southern and most of its Western Border, and Tanzania on its upper Eastern border.

Malawi is divided into three administrative regions: the Southern Region, Central Region and Northern Region. In Malawi missionaries came before the British colonial administration and the missionaries demarcated the country into regions according to ethnic groups (Abale-Phiri 2011, Debenham 1955:130). Then some years later the colonial British rule adopted the regions and further demarcated them into small administrative units called districts (Abale-Phiri 2011, Kalinga 1985:60). The three regions have now 28 administrative districts. The southern region has thirteen districts, the central region has nine districts, and the northern region has six of them. The districts are as follows;

**Southern region (Includes the eastern region-see explanation below)**
Balaka, Blantyre, Chikhwawa, Chiradzulu, Machinga, Mangochi, Mulanje, Mwanza, Neno, Nsanje, Phalombe, Thyolo, Zomba

**Central region**
Dedza, Dowa, Kasungu, Lilongwe, Mchinji, Nkhotakota, Ntcheu, Ntchisi, Salima

**Northern region**
Chitipa, Karonga, Likoma, Mzimba, Nkhotaby, Rumphi

However, although Malawi has three main regions, the three are further divided into other working administrative units which are called regions or zones. For this study, this researcher calls them ‘regions’ because that is the common term used in Malawi. The Eastern region
happens to fall administratively within the southern region. The southern region has three further administrative regions which include Eastern region, Upper Shire region, Lower Shire region or Shire Highlands region. Thus the eastern region includes Balaka, Mangochi, Machinga, and Zomba. This region is multilingual. It has more languages but there are two main languages, CiCewa and CiYao, which are the linguae francae. However, CiYao is the indigenous language for the indigenous people although currently CiCewa is widely spoken across the region.

As mentioned earlier, this study was carried out in the eastern region of Malawi. The eastern region, though located within the southern region, covers the southern part of Lake Malawi and its headquarters is in Zomba, the largest municipal city in Malawi. Zomba was originally the capital city of Malawi during the colonial rule (1891-1964) http://www.eisa.org.za/WEP/maloverview9.htm (accessed on 19/11/2012). The capital city status was transferred from Zomba to Lilongwe by the first Malawian President, Hastings Kamuzu Banda, in 1975, demoting Zomba to a municipal status. His argument behind the transfer was that a capital city needs to be in the centre of the country. This argument was contra-argued by others who felt that the transfer was political. They stated that Hastings Kamuzu Banda did this because he was from the central region so he wanted the capital city to be in his region, an argument that could also be seen as political. However, this was reversed by the late President Bingu wa Muthalika who awarded it a city-status in 2009 although the capital city of Malawi remains Lilongwe. Zomba is in fact the third largest city in Malawi. Apart from the four administrative districts namely Zomba, Mangochi, Machinga and Balaka, this region boasts of having four lakes within it, namely, Lake Malawi, the largest lake in Malawi and the third largest lake in Africa which is part of Mangochi and Machinga, Lake Chirwa is part of Machinga and Zomba districts, Lake Malombe is part of Mangochi and Balaka Districts, and Lake Chiuta, which is in Machinga and lies on the border of Mozambique. The region is dominantly Yao, a cultural traditional ethnic group. The National Demographic and Population Census (2004) indicates that the Yao community has a population of 4,392,196 people. This ranks them the second largest ethnic group in Malawi after the Cewa and Tumbuka comes third in the ranking of ethnicities.
1.6 The socio-historical bio-data of the eastern region

The eastern region is a Yao ethnic region. The Yao linguistic and ethnic group is largely positioned at the southern end of Lake Malawi. The Yao people are principally Muslims and are spread across all the other regions of Malawi as well as over four countries namely; Malawi, Mozambique, Tanzania and Zambia. The Yao people hold a strong cultural distinctiveness which goes beyond national, political and administrative boundaries.

According to Abdallah (1919:7) and Murray (1932:45-97), the Yao people originated from somewhere between the Lujenda and Ruvuma Rivers in northern Mozambique, east of Lake Malawi. When they reached Malawi, they were stationed in the eastern and southern part of Malawi (Phiri 1984). The Yao held a significant fraction in the history of East Africa during the 1800s. When Arabs reached the east coast of Africa; they started doing trade in slaves and ivory with the Yao people in exchange for clothes and guns (Sanderson 1973, Pachai 1972, Boeder 1984). Their participation in this coastal trade made them one of the prosperous and most powerful tribes in Southern Africa. Thus, hefty Yao monarchies and empires emerged and Yao chiefs controlled the Nyasa (written as Niassa) territory of Mozambique in the 19th century. Consequently, the Yao started to migrate from Mozambique, their traditional and original home, to Malawi and Tanzania. However, their reason for migrating to Malawi to do slave trade is argued by Pachai (in Agnew and Stubbs 1972:42) who maintain that between 1850 and 1870 the Yao migrated because they were attacked by the Makua, the Lhomwe and the Ngoni in Mozambique. Thus, the issue of Yaos being notorious slave traders has been exaggerated by interest groups (Abale-Phiri 2011).

These chiefdoms turned their people to Islam around the 20th Century and after World War 1. Since the Yao chiefs (sultans) wanted scribes who could help them keep their records, Islamic teachers from the Arab world were employed and they stationed themselves amongst the Yaos in the remote townships. They made an important impact on the Yao people when they offered them literacy education, a holy book (the Quran), ‘elegant’ clothes and taught them how to build square houses in place of their traditional round huts. Additionally, the Yao chiefs strongly challenged the Portuguese, German and British colonial rule. They perceived them as a threat to their trade and religion. Both the British and the Portuguese were perceived as Christians and
they also attempted to impede the slave trade by attacking several slave caravans along the coast. The British and the Portuguese liberated the slaves and impounded the ivory.

Some of the chiefs, such as chief Mataka, chief Jumbe, chief Mponda, and chief Jalasi, regarded Christianity as something that would bring a negative socio-economic impact on the community but regarded highly of Islam because it assimilated the social system and their traditional culture. Thus, the devotion of the chiefs to the Islamic religion caused their followers to be likewise. The type of Islamic religion practised in Malawi, like elsewhere in Africa, includes the traditional animistic beliefs. The Islamic religion in Malawi is sometimes called the ‘Folk Islam’. It is thus different from the Saudi Arabia orthodox Islam.

1.6.1 The Yao of Malawi

The Yao people migrated to the Southern region of Malawi around the 1830s. This is when they became dynamic working for the Swahili/Arab slave traders on the shoreline of Mozambique. For instance, powerful Yao Chiefs such as chief Jalasi, chief Mponda and chief Jumbe managed the slave trade on the Shire Highlands, the southern part of Lake Malawi. Jalasi in particular, strongly controlled the slave trade course which passed through the southern end of Lake Malawi to the Lujenda Valley and the East Coast, which is present Tanzania. The Yaos are rich in culture, tradition, music, and as earlier said, predominantly Muslims. When Bakili Muluzi became president of the Republic of Malawi, the Yao people became conspicuously overt. Thus, all those who did not want to publicly recognized as Muslims openly declared their Islamic allegiance because of the association of the President with their religion. They felt that they could benefit more in terms of job employment, scholarships and even food aid provisions from the government if they are known to be Muslims. Although the Eastern region is principally a Yao community, some parts of Zomba and Balaka have Mang’anja and Ngoni people.

The Yaos, with their closeness to the Arabs, adopted some of the Arabic culture such as in dressing etiquette and architecture. This close association also gained them access to firearms. Thus, with the acquisition of the firearms the Yaos waged numerous wars with their neighbouring tribes like the Ngonis and Cewas. In Tanzania, although the Yaos under the leadership of King Machemba resisted the German colonial rule which was colonizing Southeast
Africa (Tanzania, Rwanda and Burundi), they ended up submitting themselves to the German forces. Thus, Yao people exist not only in Malawi, Mozambique and Tanzania but also that there is a sizeable population of Yao speakers in the Eastern part of Zambia, bordering Malawi and Mozambique (Banda argues in Ethnologue 2010).

1.6.2 The Yao language
As a Bantu language, Yao is prefixed with Ci- as in CiYao. The speakers of CiYao are known as aYao, where [a-] is the plural prefix denoting people. The Yao speakers are variously known as aCawa, aJawa, adSawa, aYawa, jaAo, aDsoa, aYo, Djao, haLao, aYao, hiAo, hYao, waJao or VeiaO (http://www.ethnologue.com/language/yao accessed on 19/08/2011). Yao language is a cross-border language spoken in four countries of Malawi, Tanzania, Zambia and Mozambique. The Yao speakers also speak other languages from the countries they live in such as CiCewa, English, CiTumbuka, eLhomwe and so on in Malawi; Swahili in Tanzania and ciNyanja and iciBemba in Zambia, and Portuguese in Mozambique.

1.6.3 The socio-cultural situation of the Yao people
The Eastern region was selected because of its high HIV and AIDS prevalence (Nagoli et al 2010, DHS 2004) and its socio-economic, socio-cultural and geographical situation.

The Yaos like other groups in Malawi have some traditional cultural practices that can potentially spread the HIV and AIDS epidemic. Below I briefly discuss some of the practices.

1.6.3.1 Cinamwali ‘initiation’
*Cinamwali* initiation is a transitional rite which is practiced in the central and southern (which include the Eastern region) parts of the country. Depending on locality, this initiation rite is known by different names such as *jando* for boys in Mangochi and Machinga, and *cinamwali* for girls in some parts of Zomba and Balaka. These initiations, for the Eastern region, are annual ceremonies which take place soon after harvest, in the winter season, because they involve a lot of feasting and consequently require much food. The ages of the initiates range from 6 to 13. The initiation for the boys is actually circumcision. It involves cutting of the foreskin and they are principally not done by medical personnel but by the *Ngalibas* ‘male initiators and counsellors’. 
It is believed that the wounds heal quicker during the cold season than the summer period. These Ngalibas are alleged to use a small sharp knife for the circumcision and are believed to use one knife for all the boys under one tsimba ‘the provisional initiation shelter/shacks’, making the children vulnerable to contracting HIV and AIDS in the process. The ceremony takes a month or more to allow the wounds to heal. This whole period the children stay in the bush in those shelters, which are usually erected in a secluded area close to rivers or streams. Thus, once the initiates are inside the area, there is no contact with the outside community until the day the Ngaliba sees it fit to release them. Although the parents and guardians are not allowed to see their children, they are supposed to bring them food three times a day. The food is deposited about 100 metres from the shelter from where the Ngaliba collects it at his own time. Sometimes, it is said that the food does not even reach the children, especially if it is something tasty. If a boy dies in the process, as it sometimes happens, the parents/guardians are not told until the day that all of them are released. The dead body is buried in the shelter and no questions are asked. They believe if a boy dies then the parents did not follow the traditional ritual while the boy was being initiated. The ritual demands that parents should not take a bath for the first week of the circumcision and should not indulge in any sexual activity. Thus, when death occurs during initiation, all the blame goes to the parents and guardians, the Ngalibas are not sued, blamed or questioned.

Initiation for girls is also done between the age of 6 and 13. The girls have a boiled egg inserted in the vagina to break their virginity. Their initiation is called msondo. This initiation does not take more than two weeks. They are also taken to the tsimba for the whole period and are looked after and initiated by elderly women called anankungwi ‘female initiators and counsellors’. While in the central region this initiation takes place when the girl has had her first menstruation, the Eastern region does it even before the menstruation period.

In both initiations, the children are taught how to behave well in society, to have respect for the elders and to show good manners in general; how to handle a spouse sexually and how to have sex. After schooling the children in different sexual issues, the Ngalibas and Anankungwis tell their initiates to go and experiment what they have learnt and the process of experimenting is called kutaya mafuta ‘lit. throwing away of body ointment/lotion’. That is, the lotion they were
using while in the *tsimba*; or *kudzola mafuta* ‘to smear body lotion on their bodies’ – this is thus called because some areas do not use body lotion while in the *tsimba* until the day they are released; or *kusasa fumbi* ‘removing dust from their bodies’ – this is called by this name in some areas because of the dusty environment they were in, the *tsimba* and so they want to make themselves clean. Although the acts of cleansing are phrased euphemistically, they all refer to sexual acts. They sometimes use elderly senior men to cleanse the girls and elderly senior women to cleanse the boys.

Thus, the initiation is one of the ways that can precipitate the spread of HIV and AIDS because if one person is infected, he or she can pass on the HIV virus to the other person during the cleansing sessions or if they use the same unsterilized blade for circumcision.

1.6.3.2 *Fisi* ‘the hyena ritual’

*Fisi* is the CiCewa name for ‘hyena’. The name is a cover term to refer to a man who has been used in sexually related rites. The man is called a ‘hyena’ because just like ‘hyenas’ are nocturnal, he comes at night only to perform the sexual rites. There are three different types of *fisi*. What is common among the three *fisi* is that sexual intercourse is performed with a man who is not customarily recognized as a husband; either for ritual or social purposes in order to safeguard fertility or for cleansing purposes. The first type of *fisi* is performed when a couple fails to have children. So the couple or their relative usually an uncle makes arrangements that someone should be identified to help the childless couple by having sex with the woman so that she can become pregnant. This is always a secret arrangement that is known by just a few people. In this case, the hired man, *fisi*, does not claim paternity of the child but transfers it to the legitimate husband.

The second type of *fisi* is when, in other areas, a girl who has reached puberty stage, that is, has experienced her first menstruation, also locally known as *cinamwali*, and has to engage in sex with a man. The man involved is also known as *fisi*. The *fisi* is supposedly there to ensure and insure her fertility by deflowering her virginity. This ritual is known as *kucotsa fumbi* ‘to remove dust’. The act is meant to cleanse and purify her after her first menstruation.
The third type of *fisi* ritual is carried out when death has occurred in a family. When someone's husband has died, for example, a *fisi* is arranged to cleanse the widow and mark the end of the mourning period. This is arranged by the relatives of the deceased man and usually takes place soon after the burial ceremony. The same ritual happens if a wife dies. The idea behind it is to free the widow or widower, that is, not only giving them the right to remarry but also to prevent the dead person from haunting the bereaved widow or widower as well as the immediate family. Failure or refusal to undergo the *fisi* ritual attracts stigma and discrimination from the community. In the end, all these *fisis* are always rewarded in monetary or material terms by the responsible families.

In the light of the HIV and AIDS pandemic, these activities are being debated in the public domain and their roles in the spread of HIV and AIDS are being examined. In some cases, their complete abandonment is being advocated. Therefore, this study has also examined these practices and the results have shown some modification in the way they are carried out (see chapter 7).

1.6.4 Socio-economic situation in the eastern region of Malawi

The eastern region has faced numerous challenges ranging from devastating environmental conditions as a result of the cutting down of trees leading to flooding of the lakes as well as small rivers which outlet into the lakes, to health issues. There have always been poor yields of crops due to poor weather, soil erosion and arid spells. Other challenges include water borne diseases such as bilharzia, cholera, and other diseases like malaria and typhoid. The political situation of Malawi has also played a foremost responsibility in the economic and infrastructural situation of the region. This goes back to the period of the slave trade. When slave trade was abolished, schools were built and education was reinforced by colonial rule. However, the majority of the community in this region never attended the education system because of their Islamic background. According to one interviewee, they ‘believed’ that when they go for studies they would be forced to eat pork, an ideology implanted by the Muslims to discourage the community from going to the government schools. This was because most schools were under Christian dominations such as the Catholic, Anglican, Presbyterian, and Dutch Reformed Churches (Chincen 2001, Ross, 1996). Thus, they only attended the Madras education. This led to the
region having lower Western educational standards than other regions. Thus the literacy level for this region is low compared to other regions (Nagoli et al 2010).

In addition to the challenges mentioned above, HIV and AIDS also hit this region hard, probably because of the factors stated above such as poverty, cultural practices and lower literacy levels. The geographical situation of the region, that is, having four lakes, attracts frequent tourists and witnesses tourists’ inflow in large numbers. The scenic beauties of the lakes especially that of Lake Malawi have seen them emerge as a much wanted destination. This makes the region a ‘highway’ for the trade of goods, fish, sex as well as cross-border human trafficking as it borders Mozambique geographically.

The only main economic activity in the region is fishing. The fishes in the lake are also diminishing to the extent that they do not yield enough income for the demands of the growing population. Mangochi alone has a spatial population distribution of 6.2 percent ranking it second to Lilongwe’s 9 percent (NSO 2008). The scarcity of the fish in the lake has led to other socio-economic practices involving sexual activities locally known as kutola nsomba (lit ‘picking fish’). I elaborate on this below.

1.6.4.1 Kutola nsomba ‘picking fish’

Kutola nsomba is an act done by girls and women whether married or not in which they exchange fish with sex. This happens very early in the morning. As the fishermen are coming from an overnight fishing expedition, they are welcomed by girls and women who offer themselves for sex in exchange for fish. The fishermen indulge themselves in these activities having starved themselves of sex from their spouses during the night. Furthermore, some fishermen stay in fishing zones for some weeks or a month without going home to their spouses. Thus, they do not wait to sell their fish and go home for their conjugal rights when others are offering sex immediately. This has also led to high rate of prevalence rate of the HIV and AIDS pandemic in the area. This act ‘Picking fish’ is euphemistically well-known as not a potentially injuring and heinous activity along the lakeshores.
1.6.4.2 Other sexual activities

The region is well-known for other sexual-related activities. The eastern region has some traditional dances that can be described as ‘sexual’ in manner of execution. Dances such as *m’bwiza*, a dance performed during the night where a man and woman of whatever age cling to each other while dancing, wriggling their waists in tandem simulating sexual activities. The deed after the dance is not regarded as a crime, even if someone sleeps with someone’s spouse. As stated by one participant (verbal communication from participant) they are told not to dance with their spouses. Thus, everybody who comes to the dance is ready for the end result, that is, sex preferably a partner other than one’s spouse. The dance usually takes place after the harvest period. Although this kind of dance is discouraged by the government and some NGOs because of the HIV pandemic, it is still done in the rural communities. The former president, Dr Bakili Muluzi, once acknowledged that he participated in this dance when he was young. Both the government and the NGOs encourage the community to dance this type of dance during the day so as to avoid the sexual activities.

The rampant and uncontrolled sexual activities in the eastern region have been immortalised in popular songs such as *nkakwatila ku Mangochi* ‘I will marry in Mangochi’ (Subili & Valamanja 1993). Within the contexts of the songs people come to the region to get fish for sale in the townships and cities but end up indulging in sexual activities or taking up temporary spouses in the region. The Mangochi women, in particular, are described as bathing their partners, carrying them on their backs from the bathroom to the bedroom and anointing oil on their bodies, a thing that attracts a lot of men. The song goes like this:

*Kodi mankhwala kuMangochiko? Amawo nga wa mtela (CiYao), wa mkomya wa kuMangochi mkazi waulesi sangauhe........ cikondi ca banja cagona ku Mangochi cosalila mankhwala, angakhale azungu odzaona nyansa lelo akuchona ku Mangochi, mwamuna akalowa ndikulowa mnyumba, amacita kusambitsidwa, tiyi wamadzulo womwela ziminima akuwila pamoto, azimayi aku Mangochi posamala mwamuna, alibe mzako, mwamuna akasamba kucokela kubafà, amacita kubelekedwa, Achisale adakachona polowa kuMangochi pokatenga fuleshi, nkhani yake yomwe ija yocita kubelekedwa, pocokela ku bafa, nanenso mayi ineyo nkakwatila ku Mangochi, kwa*
CheMpondasi ineyo nkakwatila kuMangochi, ndikufuna cikondi condibleleka pocokela kubafə, ukafika mnyumbamo mafuta ocita kudzodzedwa, ndikufuna cikondi condibleleka pocokela kubafə, ukafika mnyumbamo mafuta ocita kudzodzedwa

‘Is it about love potion in Mangochi? Mama it is as if they use love potion, about love acts of Mangochi, a lazy woman cannot manage to satisfy them…….(.introduction of the singers and the song)….. Real love which does not need love potion is in Mangochi, even the whites who come as tourists to the lake are now stationed in Mangochi, when a man enters a house, he is bathed by a woman while an afternoon tea which usually goes with locally made bread is being prepared. Mangochi women when it comes to looking after men they do not have a match. They carry men from the baths to the bedroom on their backs after bathing them. Mr. Chisale never came back from Mangochi when he went to buy fresh fish, all because of these love treatments. Me too mum I will marry in Mangochi, at CheMpondasi, I will marry in Mangochi, I want a love affair of being carried on the back after a bath and when you reach the bedroom the woman anoints you with Bodycare lotion’……… (Literal translation of the song)

The song goes on to mention other remote localities in Mangochi famous for these acts such as Makanjila and CheMbaluku.

Thus, as the song states, people believe ‘good’ (in terms of sexual acts) women come from Mangochi district and therefore every man wants to go and marry there or just have the experience. This practice has led to one village, Mpondasi, to have been heavily affected by the HIV and AIDS. There are only old people and children left in the village. The sexually active group age 12- 40 of both men and women died. Thus the village has many orphans who are now growing into adults. NGOs and other government departments worked tirelessly trying to sensitize the area.
1.7 The general attitude of the public towards Yao people and CiYao language

The Yao language and people are marginalised by government. This is so because of various reasons and aspects such as:

- For example, to date, there are only a few Yao programs on the radio. Even the community radios such as Dzimwe and Radio Maria have programs mostly in CiCewa and English.
- Most Yao speakers take a lot of pride in speaking CiCewa and English so as to associate themselves with the rest of community.
- A negative attitude towards CiYao. People associate CiYao with the low and less intellectually challenging and taxing duties and speakers with menial vocations such as houseboy, store keeper, tailor or garden-boy and there is also a belief that those who converse in CiYao are conmen and tricksters.
- The CiYao language remaining a spoken language with no grammar. CiYao orthography has just been published but has not yet been put into practice (Mtenje 2008) and this has affected the writing and acquisition of the CiYao language.

Although, the attitude slightly changed when Bakili Muluzi, Yao by tribe, became the president of the republic of Malawi, the negative attitude people have persisted towards CiYao and the Yao people has not completely gone in that members of other ethnic groups do not want to intermarry with the Yao people.

1.8 Statement of the problem

Whenever there is an epidemic like HIV and AIDS in a country or community, communication plays a crucial role in passing on information from the government and non-governmental organizations (NGOs) to the community as well as within the communities, that is, from one individual to another. Language becomes the essential tool to effectively convey the intended information. Communication can be defined as the exchange of information between individuals through spoken, written, audio and common signs (Matlosa 2008). For communication to take place there has to be two ends: the communicator, that is, the speakers/writers and the ones receiving the information, the hearers/readers. Misunderstanding and misinterpretation of the
communicated information between the two ends implies communication failure. This may arise because of things like ambiguity, referential ambivalence, ellipse, implicature, illocutionary acts, metaphor, proverbs, euphemisms, irony, inaudible unclear messages, misplaced or overloaded meaningless pictures, cultural practices and many more. These require special contextual skills and knowledge which the hearers/readers must apply to infer and interpret the meaning as communicated by the speaker/writer. When all goes well, the result, that is, the intended communicated information, is received in its original message, if not, then misunderstandings and misinterpretation between the two groups develop. However, the viewers/readers tend to choose the closest and most relevant interpretation that requires no effort to construct (Gernsbacher 1995). Thus, the meaning conveyed by the producers/writers could be missed and consequently, the communication becomes conventional. The communication, in this case, has been impaired. Often producers/writers produce or write things that viewers/readers do not anticipate but they assume that the communicated messages would be understood with no doubt. The goal of pragmatics stipulates communication is a dynamic process involving negotiation of meaning between writers/producers and the viewers/readers because pragmatics is about meaning making.

Although the researcher emphasized the importance of language in the dissemination of information above, language is not the only semiotic system available. The communication strategies on prevention for HIV and AIDS adopted by the Malawian stakeholders, both public and private institutions, are multisemiotic and multimodal, and thus include message dissemination through electronic media, radios and television both private and those sponsored by government; print media: newspapers, posters, billboards, fliers, brochures, leaflets; door-to-door campaigns; mobile phone short message services (SMS); public meetings such as open day celebrations; music and many more. Of these, radio is considered the most accessed source of information for the communities. Radio presents 87 percent; and peers, school and health institutions were at 42.1 percent, 37.5 percent and 23.5 percent respectively (DHS 1996). These forms of communication created widespread knowledge of HIV and AIDS in Malawi (UNGASS 2010, Nagoli et al 2010, Botillen 2008, Mwale 2008, Horvaka & Houston 2007, Kaler 2003, USAID/MALAWI 2003, DHS 2000, and NSO and ORC Macro 2005). Though this is the case, some pockets are still very ambiguous about other modes of HIV transmission especially MTCT.
(NAC 2003, Hovorka and Houston 2007) and there are still new infections of HIV occurring (UNAIDS 2010). This study, therefore, set out to critically examine language and visuals deployed by agents as social semiotic resources in the fight against the HIV and AIDS epidemic.

1.9 Objectives
The main aim of this study is to explore how discourse on HIV and AIDS is resemiotised across modes of communication in order to persuasively convey specialized knowledge and messages about the epidemic. Additionally the study also aims to unravel the different evaluations and interpretations of the messages when the same message is presented in multimodal communicative format.

1.9.1 Specific objectives
The specific objectives are to:

i) explore how HIV and AIDS discourse is differently constituted and evaluated across different modes by different communities of speakers within the Yao people in Malawi

ii) find out how different languages are used as resources across the different modes

iii) investigate the implications of the unequal social distribution of modes of communication and linguistic resources in Malawi (eastern region in particular) in the fight against HIV and AIDS

iv) examine how HIV and AIDS discourse is resemiotised and encoded across modes, linguistic resources, contexts and locations

v) investigate how linguistic, textual and interactional/interpersonal characteristics of HIV and AIDS discourse multimodality are represented

vi) unravel the dialogicality of the modes used to carry HIV and AIDS messages, that is, the extent to which the different practices ‘speak’ to each other (cf Scollon & Scollon 2003) in time and space.

vii) examine how HIV and AIDS messages are transformed and repurposed within and across modalities;
viii) explore the mobility of texts and messages across modalities and from context to context and how these impact on their appreciation/consumption in different communities;
ix) unravel the different evaluations and interpretations of the messages when the same message is presented in resemiotised/remediated and multimodal communicative forms.

1.10 Research questions
The following are the research questions that guided the study:
i) How is HIV and AIDS discourse constituted and evaluated across different modes by different speakers in Malawi?
ii) How are the different languages used as resources across different modes?
iii) What are the implications of an unequal social distribution of modes of communication and linguistic resources in Malawi, Eastern region in particular, in the fight against HIV and AIDS?
iv) How is HIV and AIDS discourse resemiotised and encoded across modes, linguistic contexts and locations?
v) How are linguistic, textual and interactional/interpersonal characteristics of HIV and AIDS discourse multimodality represented?
vi) How are modes of communication dialogically used to carry HIV and AIDS messages, i.e. the extent to which the different practices ‘speak’ to each other (cf Scollon & Scollon 2003).
vii) How is the HIV and AIDS prevention messages semiotically remediated across these modes?
viii) How are the messages re-contextualised and repurposed across modalities and communities of practices?

1.11 Rationale for the study
The UNDP Reports (2000, 1996, 1990); UNESCO (2004, 1997) reports about HIV and AIDS on data from different countries that have taken the initiative in coming up with preventive, support and treatment programmes through different approaches. The programmes are run by
government, NGOs and FBOs at country, regional and district levels. The different programmes at all levels had to quickly deal with capacity building to accommodate all the proposed programmes and strategies. The programme at country level has the National AIDS Commission (NAC) which is the highest institution to deal with the epidemic. Thus, all NGOs, FBOs and government institutions are answerable to this institution as they try to implement any sort of HIV and AIDS programme. NAC came up with different strategies which other institutions and organizations could work with. This was a technique trying to curb the epidemic and providing the communities with needed information and tools. The rationale was to empower the communities with information on preventive, supportive and treatment measures. However, most of the information that reached the communities from NAC or NGOs and FBOs was largely in a language that could not be understood due to low levels of literacy. With this problem at hand, intellectuals were then involved in trying to change messages into languages that the communities could understand easily. Thus this study focused partly on the messages that were passed from these implementing institutions to the communities; thereby looking at the role language plays in the measures taken against HIV and AIDS.

Recent studies have suggested that language can no longer be ignored, even in scientific matters, and health matters in particular. In issues such as HIV and AIDS, most messages are in English a foreign language not understood by the communities. Thus, this study is also motivated by the need to distribute messages in local languages and local semiotic artefacts for the community to understand the messages. Consequently, since there is a spawning of new-fangled words in local languages, this will push for the ‘scientification’ of local languages so as to accommodate the demand for scientific progression and in turn take in hand the ‘challenges of the modern world’ (Oketch 2006, Kishindo 2004, and Matiki 2002).

Additionally, this study looks at language in connection with social and cultural practices within the health field of HIV and AIDS because language is closely linked to social and cultural practices (Fairclough 2004, 1992; Thompson 2003; Wodak 1996; van Dijk 1989). Language is a tool that can highlight the hidden understanding and interpretation or misunderstanding and misinterpretation of HIV and AIDS messages.
In turn the study hopes to provide the best way of resemiotising messages whether within or across modes. It is essential not to take resemiotisation for granted and expect the community to be conversant and acquainted with it. Most institutions take resemiotisation as a way of ‘experimenting’ with their advertising antics instead of taking the audience into consideration. Thus the study contributes towards having proper and appropriate modes and linguistic resources that can be used to disseminate HIV and AIDS messages, taking into account what devastation this pandemic has caused in Malawi and the eastern region in particular. This will go a long way to provide literature and resource material on the HIV and AIDS pandemic for other third world countries, especially in Africa.

1.12 Scope and limitations

The study was carried out in the eastern region among the CiYao/CiCewa speaking communities. The study focused on the HIV and AIDS messages which are tri-dimensional in the sense that they focus on preventive, supportive and treatment measures for HIV and AIDS.

The study examined different spoken, visual and written forms of communication as presented to the communities by producers/writers. Thus, the texts examined were multimodal. The study analysed these texts at the level of representational, interactive and compositional (Kress and van Leeuwen 2006, Jewitt and Oyama, 2001). Furthermore, the study also examined resemiotised as well as remediated messages in different modes of communication.

As complex as it was, the study was bound to face some limitations. Firstly, the prime limitation in this study related to the fact that some remote areas were impassable as the study was carried out during the rainy season. Thus, using a small family car was quite challenging as it got stuck in the mud almost on a daily basis.

Secondly, some key informants blatantly and palpably refused to be interviewed. Their argument was that academics tend to exaggerate the data that they collect thereby jeopardising the positions of the key informants. Nevertheless, the reluctance of these key informants to be interviewed was not felt as it was only three of them: one was a District AIDS Coordinator; the
second was Program Manager for one of the NGOs and the last one was a Programme Coordinator for one of the radio stations.

Thirdly, some NGOs follow scrupulous red tape procedures. They made the field work rather tedious as the research team was sent back and forth as they kept on changing appointment times. Thus, the researcher ignored and abandoned such organisations. The researcher instead used other NGOs that met similar criteria for selection.

Fourthly, due to the unbecoming practice by NGOs of providing cash as incentives to the communities in exchange for information (see Banda and Omondi 2009 for critical comments on this practice), the researcher had to part with some cash just to get the needed information. This was a challenge in regard to the limited finances that were available for this study.

Fifthly, some community members were pre-warned and told on what to respond to during the focus group discussions (FGDs) as well as the questionnaires by government officials. This was noted as the answers looked to be obvious and similar in the questionnaires for those groups. The researcher had to probe to find out what was going on and had to change the strategy, especially in the FGDs by swapping the questions and restructuring the questions. This happened because the highest senior personnel for that district asked the researcher to hand in questionnaires and questions for perusal before conducting the study in this area. Thus, it is believed that the participants were coached from this office. However, the researcher managed to get the needed information from FGDs after restructuring the questions.

The final limitation was that there was one community which did not want men and women to be interviewed together. This was due to their cultural beliefs and practices. In this case, the researcher had to change the format and strategy as suggested in the proposal of having a group comprising both women and men for FGDs. Women were then separated from men and were consequently interviewed separately. This also did not affect the outcome of the research as the expected responses were collated.
1.13 Research design and methodology

This section sketches out the methodological *modus operandi*, tools and techniques that were used in the study. It also unravels the sample population. The research was done in two phases. The first phase was the collection of texts such as HIV and AIDS messages on posters, billboards, walls, radio programmes, television programmes, newspapers, t-shirts, music both traditional and modern, and short message messages (SMS) from mobile phones. The second phase was the interviews where questionnaires and questions for FGDs were scheduled. Letters were sent to District Commissioners for access to offices and communities in all the four districts. Where responses were late, telephone calls were used to communicate with the district offices.

1.1.3 Sample data

This study used both qualitative and quantitative data collection approach. The data collection started with identifying NGOs carrying out preventive, support and treatment programmes in the eastern region. The sampling considered:

i) NGOs carrying out HIV and AIDS programmes in the region. The study identified those NGOs working in the rural areas and those working in the towns or semi-urban areas. The underlying principle was to find out if there existed any difference in their understanding and interpretation of the HIV and AIDS messages in order to ascertain the impact these messages make on the community.

ii) Community radio stations in the area that have preventive, supportive programmes.

iii) Television stations airing HIV and AIDS programmes

iv) Government offices (personnel) dealing with HIV and AIDS programmes

v) Hospitals providing preventive, supportive and treatment of HIV and AIDS programmes

vi) Posters, billboards, messages painted in walls, t-shirts messages, SMS messages, newspaper articles, music both traditional and modern on HIV and AIDS.
A total of seven organizations were identified. As stated above, after writing letters, the researcher then made calls to all District Commissioners (DCs) in the region as a way of making a self-introduction and explaining the intention of the study and also to get authorization to carry out research within their districts; both in the government offices and the project offices as well in the community. When the permission was granted, the researcher set out visiting NGO offices, government offices, radio stations, television stations, hospitals/clinics and the communities, community based organisations (CBOs) and youth centres. Key informants were first interviewed, and then they were given questionnaires to fill in and lastly they were presented with different HIV and AIDS messages to interpret. Observations were made on their responses and reactions during the oral interview, FGDs and during the interpretation of the HIV and AIDS messages. Observation was also made on the language used.

The researcher first administered questionnaires to the key informants which comprised district commissioners (DCs), district AIDS coordinators (DACs), project coordinators, hospital administrators, television and radio programmers and CBO leaders, as well as youth leaders in order to gather information on language use; levels of interpretation and understanding of HIV and AIDS messages; role of culture in the HIV and AIDS epidemic; preference of language, modes of communication, resemiotisation of HIV and AIDS messages; and the impact these have made on the community. The introductory facts gathered from the questionnaires provided some primary clues as well as some grey areas to be addressed in the data collected. Focus group discussions (FGDs) and interpretation of texts such as posters, billboards, t-shirts, murals, newspapers, music, SMS, radio and television HIV and AIDS messages followed subsequently.

Thus, this was a way of triangulating the data. The key informants provided information on how the HIV and AIDS messages are believed to be consumed by the community. They also provided different technical HIV and AIDS terms that present a problem whenever the messages are passed onto the community, the different modes of communication that they use to deliver particular HIV and AIDS messages and how they deal with technical terms for HIV and AIDS, as well as the role that culture plays in the HIV and AIDS epidemic. All discussions were tape-recorded using a video camera and later transcribed.
After dealing with the key informants, the researcher then organized focus group discussions, questionnaires and interpretation of HIV and AIDS messages for the community to authenticate and cross-examine some of the responses from the key informants. This tool unravels the impact that the modes of communication for HIV and AIDS and their resemiotisation have made on the community, understanding of the HIV and AIDS epidemic and the technical terms that have emanated as a result thereof. Again all discussions were tape-recorded and later transcribed. Where Yao and CiCewa languages were used, the data was translated into English before analysis.

In the end, a total of 28 key informants’ interviews were conducted, four focus group discussions for key informants were held, 30 questionnaires for key informants were administered and an average of 32 different texts of HIV and AIDS messages were presented to all the key informants. 120 local people were involved as part of the community. This is more than the number proposed for this study. The number was increased because most of the community members, the rural in particular, were literary-challenged. They could not write nor read and as such they participated in the discussions only. Thus the number had to be increased to get enough participants who could read and write. Furthermore, some participants came uninvited and the researcher could not send them away. The research team looked for ten people per group for the interviews but in some communities (rural especially), the moment they heard that their friends were being interviewed, they kept flocking in, joining in the discussion and interviews, hence the increase.

1.14 Data analysis
The field work was very procedural and always started with the key informants before the community in all the districts. The interview started with the highest personnel staff member in the district, the DC, before interviewing the DAC and other key informants, ending with the community. In some cases, especially with the key informants, several trips had to be made due to their busy work schedules and also the research was carried out over the Christmas holiday when the interviewees had to be called from their homes.
As earlier outlined, the study was both qualitative and quantitative. Thus qualitative and quantitative technique analysis was applied when analysing the data. Data was critically rationalised in accordance with the study objectives. This is detailed in chapter six.

1.15 Structure of the thesis
The thesis is presented in 11 chapters as follows:

1.15.1 Chapter one: Background
This chapter introduces the thesis presenting the general background information regarding the topic and the geographical area of the study. The chapter also contains information on the HIV and AIDS pandemic in Malawian situation and the cultural practices. Apart from these the chapter also introduces the various communicative modes currently used in Malawi. The statement of problem, objectives of the study, research questions, the rationale and the scope and limitations of the study follow. The research methodology of data collection is briefly highlighted, followed by chapter layout of the thesis.

1.15.2 Chapter two: Background to HIV and AIDS communicative modes in Malawi
The chapter gives a detailed account about the originality and background of HIV and AIDS. This includes the emphasis on awareness campaigns, modes of communication and linguistic resources used in Malawi. The chapter also reviews literature of HIV and AIDS studies done in Malawi.

1.15.3 Chapter three: Literature review
The chapter reviews literature on HIV and AIDS studies done in other countries other than Malawi. The chapter also reviews new terminologies that have emerged with the coming of the HIV pandemic.

1.15.4 Chapter four: Theoretical and analytical framework
The chapter discusses the theoretical and analytical framework to be adopted for this study. The theory of Multimodal Discourse Analysis (MDA) with its extension of resemiotisation and semiotic remediation is explained, and a summary of their relevance to the study is provided.
1.15.5 Chapter five: Methodology and research design
The chapter describes the fieldwork experience, recounting the process of data collection and data coding. It examines the data collection tools. The chapter ends with research limitations and problems that were encountered during the data collection.

1.15.6 Chapter six: Contestations of modes of communication of HIV and AIDS and spaces
This chapter presents demographic data and an account of the contestations between the KIs and the community. This chapter presents the first discussions of the data which are mainly on qualitative data.

1.15.7 Chapters seven: Reformulation of linguistic, cultural and social practices
The chapter discusses how linguistic, cultural and social practices have been reformulated for HIV and AIDS. The chapter also looked into the cultural practices that endanger the spread of HIV.

1.15.8 Chapter eight: Reformulation of electronic visual and audio modes of communication
This chapter discusses how messages for HIV and AIDS are disseminated through radio and television stations. It illustrates how programmes for the electronic visual and audio modalities have been reformulated to accommodate HIV and AIDS messages.

1.15.9 Chapter nine: Reformulation of songs for HIV and AIDS
The chapter discusses how traditional and modern songs have been reformulated in the face of HIV and AIDS. The chapter further presents multi-voicing and multi-performances in music as a resource in the fight against HIV/AIDS.

1.15.10 Chapter ten: Modes of communication
The chapter presents how different modes send different messages to the target group. The chapter also demonstrates how semiotic remediation of messages in different modes of
communication can be an advantage as well as a hindrance in the consumption of HIV and AIDS messages.

1.15.11 Chapter eleven: Conclusion and recommendations
The chapter presents a summary of findings as discussed in chapters six, seven, eight, nine and ten. This chapter also explains the proposed model of communication for HIV and AIDS discourses and outlines recommendations for the study. Lastly the chapter suggests areas for further research.

Lastly, this thesis ends with a bibliography and appendices.

1.16 Conclusion
The chapter has presented background information to the study highlighting the impact of HIV and AIDS in Malawi. The chapter also discussed the sociolinguistic situation and socio-cultural factors among the target Yao group, which engender HIV and AIDS infections in this particular region.
CHAPTER TWO: BACKGROUND TO HIV AND AIDS AND COMMUNICATIVE MODES IN MALAWI

2.0 Introduction
This chapter is in four parts. The first part is on the background of HIV and AIDS in Malawi in general and the second part is on the communication modes of HIV and AIDS messages. The latter includes awareness campaigns and linguistic and other resources used in Malawi in communicating HIV and AIDS education messages. The chapter further discusses the denial that has persisted in Malawi in the early years of HIV discovery and how, later on, people are now dealing with it. Additionally, it discusses the approaches taken by different institutions including the government of Malawi.

2.1 HIV and AIDS in Malawi

“There is a group of people who are in denial that HIV and AIDS does not exist or has not been isolated which is in actual sense bizarre” (Moore 2009 http://www.houseofnumbers.com/site/ accessed on 10/05/2010).

“Imagine a disease that is spread through sex, that has no symptoms and may take a decade to show itself; a disease which initially seemed to ‘prefer’ marginalized and oppressed people... think of a virus which attacks the very cells that should order its destruction, which multiply, mutate and destroy, until many years later the host will die a cruel and wasting death... Well, would you believe it?” (Crewe 1992:2)

The first AIDS case in Malawi was diagnosed in 1985, two decades ago, and the pandemic was received with mixed feelings just like the rest of the world. It is described in so many different ways and is accorded so many different names and synonyms. Some descriptions and the names are somehow exaggerations that amplified the HIV and AIDS pandemic. The description comes uncalled for as mostly people do not understand how the pandemic came into existence as everything looked so mysterious. Concurring with Crewe (1992), the mystery of the HIV and
AIDS pandemic led to it getting a different description as a way of making an understanding of its existence. There were indeed mixed feelings and perceptions.

The terms HIV and AIDS in Malawi are known by their ‘CiCewaized’ forms as *katchaivi* or *tchaivi* and *Edzi*, respectively. This term, *Edzi*, is used by government and NGO institutions while *katchaivi* is used by the community. Thus, *Edzi* is used even in official documents as a form of translation to ease communication of the disease in the Malawian context. This fact marks the beginning of the challenge in understanding AIDS. For a lot of ordinary people AIDS is not a new disease, it has always been there under different names. AIDS was and is usually identified with the conditions of patients suffering from other diseases known to have similar origins and symptoms (Kunkeyani and Kishindo 2006, Moto 2004). This similarity in symptoms has much to tell us about people’s perspective of HIV and AIDS. Some common conditions such as *mdulo* or *tsempho*, *kaliwodziwodzi* ‘sleepiness’, *kaliwondewonde* ‘loss of weight’ and *kanyela* ‘running stomach’ mirror the signs and symptoms of AIDS. The *mdulo* refers to a complexity of illnesses arising from a breach, or lack of observance of traditional mores and ethnic beliefs largely to do with sexual regulations (Kunkeyani and Kishindo 2006, Moto 2004).

Van Breugel (2001:22) defines *mdulo* as a mysterious disease caused by the transgression of a taboo on sexual intercourse. It is believed that when there is bereavement in the family then no member of the family should indulge in sex, failing to observe this, results in people getting sick, old people and children in particular. The *mdulo* literally means ‘they have been cut off’ as the word *mdulo* comes from the verb *dula* ‘cut’. The sickness involves swelling of legs, hands, cheeks, hardening and swelling of the stomach, chest pains and vomiting of blood (Van Breugel 2001:171). Another terminology for this ailment is *Tsempho* (NAC 2005, Moto 2004).

On the other hand, *kaliwondewonde* makes a person look slender, insipid and the texture of the skin is pallid. With *kaliwondewonde*, a person loses weight the moment he is attacked by this disease. This disease is usually contracted by adults. Children do not suffer from *kaliwondewonde*. *Kanyela* is a wasting disease associated with acute diarrhea as a predominant symptom. Other symptoms include fever or the desire to bask in the sun or being close to a heater. This is believed to be caused by ‘pollution’ which results from sexual contact soon after
menstruation or deliverance of a child. In this case only the man is susceptible to the danger of contracting the disease unlike *tsempho* where a third party who is innocent may be the sufferer. All in all, the signs and symptoms of AIDS also appear to hinge on similar symptoms of the above outlined diseases with common symptoms such as swelling of the cheeks, legs, the abdomen, pain in the chest, vomiting blood, loss of hair and diarrhea. It is in these facets that they demonstrate the maximum probable resemblance with AIDS, that is, having not only similar symptoms but also that the procedure of infectivity in the sense of viruses or bacteria entering the human body is mostly through sexual transmission. The ethical discourse about acceptable or incorrect social manners and practices with regard to sexual practices is framed by the high regard for reproduction and social continuity in society expressed by the *mdulo* complex (Chakanza 2005:76). The HIV and AIDS pandemic is, therefore, interpreted within a cultural framework, or worldview that already exists. Any change related to sexual conduct is measured and interpreted in relation to existing concepts, which in the process, become broadened and ‘indigenalized’ or ‘localized’ (cf Banda and Oketch, 2011).

Just like the rest of the world, as confirmed by some scientists and health personnel (check the quotes above and also from http://www.houseofnumbers.com/site/ accessed on 10/05/2010), there is strong resistance to acceptance of the existence of HIV and AIDS amongst the majority of people. In Malawi, that denial is so strong that those infected try to provide other explanations for their suffering by citing the above mentioned diseases. With the commonalities of signs and symptoms, there is no clear distinction between the symptoms of *tsempho*, *kanyela*, *kaliwondewonde*, *mdulo* and AIDS. In turn people are convinced that someone suffering from an AIDS related illness is actually suffering from *tsempho*, *kanyela kaliwondewonde*, *kaliwodziwodzi* and many more, and so they take the sick person directly to a traditional healer for treatment. This is because they believe the latter to be curable with herbal medicines (Kornfield and Namate 1997, NAC 2005, Moto 2004). Meanwhile the sufferer who may have been suffering from AIDS related illnesses may be exposing others, for example spouses, to a high risk of HIV infection.
2.1.1 New terminologies on HIV and AIDS in Malawi

The ‘newness’ of the pandemic, the fact that people worldwide did not or do not know how to eradicate it off the earth surface and because of the sensitivity of HIV and AIDS, since the pandemic is a sexually connected disease, resulted in new terminologies emerging in trying to understand the epidemic. The new words came into circulation not only as a way of describing the disease but also trying to come to terms with what it has caused. The association of the disease with sexuality led to people talking about it in an indirect way just like has been done with cancer in English (Kunkeyani and Kishindo 2006). Below are some of the new phrases:

(i)  *Matenda a boma* ‘government disease’ (Lwanda 2002, Kunkeyani and Kishindo 2006, Bwanali 2008, Moto 2004): This new phrase became very popular in Malawi. HIV and AIDS are known by this term because the Malawi government put up a remarkable campaign and enormous resources in an attempt to curb the pandemic. Also the early days of the disease, rumour had it that the disease was a government conspiracy to reduce rapid population; hence it was regarded as a government reproductive preventive measure.

(ii) *Matenda acilendo* ‘the strange disease’. HIV and AIDS is so-termed because since its advent in Malawi in the early 1980s, no one knows for certain its origins, hence the strangeness of the disease.

(iii) *Kuponda/kulowa fodya* ‘trampling one’s tobacco field’. In Malawi tobacco is the most important cash crop. It accounts for 80% of the GDP. HIV and AIDS is, therefore, likened to a farmer destroying his own tobacco field, which is the source of his/her livelihood.


The phrases are mostly descriptive. They describe the origins of the disease, the posture of the sufferer, appearance of the sufferer and what the sufferer may do. Such terms are proliferating and new ones are being created everyday as the pandemic persists (see Bwanali 2006, Kunkeyani 2008, Kunkeyani and Kishindo 2006, Lwanda 2002, and NAC 2005).
2.1.1.1 Safe-sex terms in the face of HIV and AIDS in Malawi

Some new terms and concepts relating to safe-sex, abstinence and use of condoms have also been created and in turn new conceptions and attitudes have also been brought to the fore. For example, some terms are in connection with preventive measures against HIV infection and such terms include ‘condom’ which now has several euphemistic local CiCewa terms (i) mpira wa abambo ‘rubber for men’ (ii) sokosi ‘socks’, (iii) jombo ‘gumboots’, (iv) cipewa ‘hat’, (v) butsi ‘boots’, (vi) ovolosi ‘overalls’, (vii) golovesi ‘gloves’ (Bwanali 2008, Moto 2004, Kunkeyani and Kishindo 2006) and the female condom is known as mpira wa amayi ‘rubber for women’. While the term for ‘safe sex’ is kucindana kodziteteza and other writers use kugonana kodziteteza ‘protected sleeping with each other’, the term for ‘unsafe sex’ is kucindana kosadziteteza and other writers use kugonana kosadziteteza ‘unprotected sleeping with each other’. Others use nyamanyama ‘meat to meat’ or ‘skin to skin’, latalata ‘metal to metal’ (Kunkeyani and Kishindo 2006, Bwanali 2008).

Moreover, it has been observed that the less used terms such as mpira wa abambo/wa amayi ‘condom’, kudziseweletsa ‘masturbate’, cibwenzi cosagonana ‘friendship without sex’, kudzigwila ‘to restrain oneself’, kutseka zipi ‘to fasten the zip’, have been strengthened (Kunkeyani and Kishindo 2006, Bwanali 2008, Moto 2004). The earlier attitudes of praising promiscuous males as bwindi, one who always boasts about his sexual powers (Kunkeyani and Kishindo 2006, Mfecane 2010), have given way to pity for such males instead. And such unflattering descriptive names such as wosamanga zipi ‘one who does not fasten his zip’, woyenda nazo pa cipumi ‘one who has them (private parts) on the forehead’, woyenda ndi thalauza m’manja ‘one who walks around with trousers in his hands’ and wothamanga ‘one who runs’, provide a running commentary on their now unenviable behaviour (Kunkeyani and Kishindo 2006, Moto 2004).

It should also be noted that when the topic of sex is discussed in Malawi, it only means heterosexual sex. Homosexuality is illegal in Malawi. Although it is practised secretly, it is forbidden in Malawi by the constitutional law and attracts a penalty of 14 years in jail without parole. One homosexual couple got arrested in October 2008 for publicly celebrating their
engagement. The couple was pardoned in June 2010 by the late President Bingu wa Muthalika for practicing homosexuality (http://www.nyasatimes.com/national accessed on 18th June 2010).

2.1 HIV and AIDS and sexuality in the Malawian context

Speaking about sex in public or discussing sex related themes when children are around in both urban and rural communities in Malawi is a taboo. It is part of the sexual etiquette. This taboo is so immersed in our communities that even when engaging in sexual activity, one has to do it in the dark. To do otherwise one is regarded as a person of loose, cultural, traditional morals (Kunkeyani and Kishindo 2006; Kondowe and Mulera 1999). Consequently, according to Musopole (2006), the traditional understanding of sexuality amongst Malawians has been predisposed to use negative language. For example, the term for sexual advances is *kunyenga* which translates as ‘to cheat/to deceive’ with a view to engage in sexual intercourse. Other negative sexual terms include *kucita zoipa* ‘to do bad things’; *kucita zolaula* ‘to do obscene things’; *kucita zosayenela* ‘to do unacceptable things’; and common among the kids is *kupanga zopusa* ‘to do stupid things’ (Kunkeyani and Kishindo 2006). There is no equivalent CiCewa word for sex (Musopole 2006). The word that exists in CiCewa is only *kucindana* ‘to have sexual intercourse’ (Moto 2004), a word that cannot be mentioned even before a spouse.

Thus, however, to avoid taboo sexual words, people found solace in the use of euphemisms whenever they want to discuss sexual themes. Euphemistic terms include

- *Kukhala malo amodzi* ‘to be at one place’
- *kutola nkhungudzu* ‘to pick local peas’
- *kucita ciwerewere* ‘to have illicit sex’
- *kucita cigololo* ‘to commit adultery’
- *kupita mkazi* ‘to go the woman’

(Kunkeyani and Kishindo 2006, Moto 2004)

The negative perception of sex is aptly expressed by euphemisms. An expression widely used in sexual discourse is *ciwerewere*, another negative sexual term which actually refers to any illicit relationship including pre- and extra-marital sex. In turn, since HIV and AIDS is associated with sex, the emphasis on *ciwerewere* in the media contributes to the public disparagement of sexual
activity as well as to the shame and stigma of those who may have contracted HIV through means other than sex (Musopole 2006).

2.3 Which ones are swear words?

Body parts are sometimes used for insults in most parts of the world, Malawi included. As observed by Musopole (2006), these involve private parts of both men and women, especially of mother’s sex and excretory organs. In contrast, Thompson (1935) observes that there is an elaborate etiquette of swearing that existed amongst Aborigine ethnic groups in Australia (Kunkeyani and Kishindo 2006). He further notes that apart from the presence of certain relatives, there is no restriction upon reference to genitalia or physiological functions of reproduction, defecation. Thus, as Kunkeyani and Kishindo (2006) note what acts as taboo in one society, may or may not necessarily be forbidden in another society.

It is really unclear why the names of private parts should be used for insults. In Malawi, nothing brings more jeers and cheers than the mere mention of private organs (Kunkeyani and Kishindo, 2006). Musopole (2006) surmises that the phenomenon of using private parts to insult and humiliate someone when we all have them, betrays one’s deep-seated hatred of our bodies. Thus, taboo terms of private parts are used as a weapon. By mentioning private parts in public is actually de-tabooing the private parts. These terms are also used to goad and prod an adversary to fight (Kunkeyani and Kishindo, 2006). Trudgill (1983:30) observes that ‘swear words frequently occur in the speech of some sections of the community. This is largely because they are powerful’. Take the case of CiCewa taboo terms in concurrence with Wardhaugh (1992:236) who is of the opinion that ‘linguistic taboos are violated on occasion to draw attention to oneself, or to show contempt, or to be aggressive or provocative or to mock authority, or according to Freud, on occasion as a form of verbal seduction, for example, ‘talking dirty’. Though human anatomy is used for insults, it should have been highly regarded since it is associated with life giving, that is, the bearing of children (Kunkeyani and Kishindo 2006, Musopole 2006). Thus, negative language for sexuality in CiCewa, the negative attitude towards sexuality, the use of sexual parts for insults and the jeers, giggles that accompany the utterances of sexual parts or
acts, contribute to negative and passive understanding of the HIV and AIDS epidemic (Kunkeyani and Kishindo 2006).

2.4 General studies on HIV and AIDS in Malawi

There are studies that have been done with reference to HIV and AIDS epidemic which this researcher reviews in this section of the chapter. HIV and AIDS, though being a health issue, require language as it still plays a major role. The prevention campaigns, as well as campaigns on discrimination, stigma and treatment are all done with the use of language. Unlike the studies on modes of communication of HIV and AIDS in Malawi which are very minimal, the studies on HIV and AIDS and language in general are however numerous. Studies started as early the 80s when the epidemic had just been discovered in Malawi.

2.4.1 Is HIV pandemic still a ‘new’ disease?

‗kubwela kwa matenda acilendowa…..‘ (coming of this strange disease…..)
(Personal communication, 22/12/2010)

Twenty years after the clinical evidence of HIV and AIDS was reported, it is still referred to as ‘the strange disease’ in Malawi (Kunkeyani 2008, Bwanali 2008, Lwanda 2002). There are so many terms that have been created for HIV and AIDS. Most terms are associated with sexuality, government, appearance and actions of AIDS people and many more. The explanation below given by one of the respondents would be explain better in this scenario:

‘The government disease’ (...) the reason why people used that tale is because they said there has never been any disease where the Government has been so involved. You see, right from the central level; even the president himself is talking about the disease. So people felt that this is strange, because this is not how they have responded before. So you know that kind of reaction would not make me as a person in the village think that I was responsible too... for my own behaviour...because the government then is supposed to deal with it... they are so interested in it’ (Female respondent no. 3: cf. Botillen 2008:91)
With the medication now available for the infected, terminologies in reference to this, have also emerged. For instance, the Anti Retroviral treatment (ARV) is referred to as ‘top ups’ (Bwanali 2006). This is a borrowed terminology for airtime. When airtime is exhausted on a phone, be it mobile or landline, one needs to buy some more so as to ‘top up’ the talk time. Similarly the ARVs are supposed to ‘top up’ one’s life span.

As language is dynamic, new terminologies cannot be avoided. They will continue to emerge not only for HIV and AIDS but even other diseases. In the globalized world, new linguistic terminologies have come to represent creativity, innovation and modernism on the part of the people. Creativity in the sense that they can create a word to describe HIV and AIDS based on their world experience, for instance on, *nyamula makeni* (carry water-cans), an economic activity that they do in their households; *mtengano* (taking one another), an agonizing experience of a couple dying of the same disease; and modernism in the sense that new terms are associated with new technology. Cell phone and prepaid land lines are a new thing and are identified with modernism in the Malawian context, in a similar way, the term ‘top up’ is a recent term just as the disease of HIV and AIDS itself. Thus, only those who are acquainted with this new technology can interpret and understand the new terminologies.

The terminologies are also mostly urbanized. Terms such as *Chanache konzeka* (Chanache, be ready) from Bwanali (2006) and ‘top up’ are terms for the urban community because Chanache is a name of a company that makes and supplies coffins and is stationed in urban areas only. Someone from the rural community cannot know what *Chanache konzeka* means and the name Chanache itself has even been used to refer to a coffin. Thus, the name shifted to a coffin from being the name of the person (now deceased) who owned the coffin company, in turn unravelling semiotic remediation (Prior and Hengst 2010), a notion which scholars studying HIV and AIDS terminologies in Malawi overlooked. In other words, the terminologies are created in relation to one’s experience, for instance, *nyamula makeni* (carry water-cans), the environment for example *Chanache konzeka* (Chanache be ready), level of education and economic status in the case of ‘top up’ and also in relation to the age-group for example the youth also have their own terminologies such as *latalata* (iron sheet to iron sheet), skin to skin, a term used for unprotected
sex. The creation of new terminologies for HIV and AIDS has accolade in the sense that it demonstrates how much knowledge people have on the pandemic (Botillen 2008, NAC 2005, Nagoli et al 2010). The comprehension of HIV and AIDS pandemic amongst Malawians as outlined earlier on is very high.

2.4.2 De-stigmatisation of the language of HIV and AIDS
Kabwila (2006) observes that stigma was not created by individuals only but also through IEC materials. She proposes eliminating stigma through usage of proper language. She notes that the messages around HIV and AIDS which are sent to the target group through different modes such as posters, radio, music and so on, are ambiguous (Kabwila 2006:10). In reference to that she observes that some pictures with HIV and AIDS messages confer the wrong impression and meaning to the target group. For instance, a picture with the message ‘Pewani Edzi kuti mukhale ndi tsogolo la bwino’ (avoid AIDS to have a good future) could mean one who is infected has no goal, no future and is thus ‘doomed’ (Kabwila 2006:19). Furthermore, the picture of a local musician with the message ‘they are still my friends’ could mean that the infected belong to a group of their own and should be tolerated. She explicates that this explanation can arise because of the words ‘they’ and ‘still’. However, ‘they’ does indeed categorize them but the word ‘still’, apart from stigmatizing (Kabwila 2006), can also present an element of being forced to accommodate the infected group against one’s will, that is, the will of the uninfected one in this case. It is as if the musician distances himself from the infected group by calling them ‘they’. He is not part of their world. Their suffering does not affect or concern him. ‘They’ are just friends and nothing more. Kabwila (2006) believes that stigma can be eliminated through usage of accurate language since HIV and AIDS is at the present controllable, akin to a host of other ailments such as diabetes and hypertension. This researcher concurs with Kabwila (2006). Messages are read and interpreted beyond words and as such they have to be critically analysed before they are sent to the public, the target group. However, Kabwila did not investigate why the producer of that poster used a musician. Thus, this research illustrates the relationship between pictures and words in a text such as posters, billboards, and many more.

Mwandira (2006), on the other hand, observes that there is also stigma around the youth and children who are affected by the HIV pandemic. They are stigmatized both at schools and in
their own communities, at home. She notes that these youths, some of whom are orphans, are given so many epithets and soubriquets such as ‘mwana wa makolo a edzi’ (a child from AIDS parents), ‘wamasiye’ (orphan), ‘wafa kale’ (you are already dead). These labels which are pinned on the youths hinder them from having a voluntary HIV test and disclosing their status. The labels make the youths suffer twofold: firstly, losing their parents/guardians or having parents who have HIV and AIDS and secondly, being infected. Their rights to association are mired and they end up living on the periphery. Mwandira (2006) proposes the use of friendly language for the infected and affected youths. Mwandira (2006), however, does not specify what ‘friendly language’ means. What these children face comes from the community as such the change has to take place in the community. Therefore, this study looks at the practices in communities and how these can be changed.

2.4.3 Studies on gender and HIV and AIDS

Most pictures present women and girls as being the ones who carry the HIV virus (Kabwila 2006). This female gender dominance in the pictures provides room for stigma against that gender. However, as explained earlier in this chapter, there is very little discussion of sexual matters between males and females, worse still around HIV and AIDS topics (Botillen 2008, Arrehag et al 2006, Shah et al. 2002, Pinder 2004, Longwe 2006, Musopole 2006, Kunkeyani and Kishindo 2006, Moto 2004, Mwale 2008, Munyenyembe 2008). The culture of silence presents a mismatch between knowledge of HIV and AIDS and behavioural change (Mwale 2008). Additionally, the superiority complex dominating the male gender hinders them from asking for information on the HIV and AIDS pandemic, especially when it involves women (Zozie 2006). This negative and socially uncommunicative impediment is described as ‘the arbitrariness of toxic aspects in the Malawian culture’ (cf Botillen 2008:12). It is a cultural practice that can hardly be understood. It is implanted in the minds of the young during initiation ceremonies at a very tender age, as early as six years, and as such everybody grows up believing that women have to be silent and submissive before men (Zozie 2006, Mwale 2008, Munyenyembe 2008, Wolf 2003). The male dominance in Malawian society is also observed by Harris (1989) cited by Moto (2004:349) where he claims that males acquire superior positions because they have ‘command discourse’. Apart from that, the male society in Malawi also depicts men as wild and fearless, characteristics that make them even more vulnerable to
contracting the HIV virus (UNDP 2002). Men being ‘rulers and kings’ in households make women become submissive. This socio-cultural vulnerability of women and girls demonstrates that males and females gets affected by HIV and AIDS pandemic differently because although both groups are vulnerable to HIV virus infection, their vulnerability is at different levels as one group, the female group, suffers in silence and has no voice (Kaliya, 2006). Kaliya (2006) proposes therefore a fight against this cultural dominance of men.

Ndau (2008), on the other hand, notes that the presentation of women in the music industry in issues of HIV and AIDS is highly exaggerated. They depict women as transmitters of the virus. For instance, in songs where women are mentioned they use expressions such as: akunenepa nako ‘it is making her plump’; kuyenda dibwilidibwili, ‘she is enticingly, stylishly walking’. Women are sung about as objects of ridicule because of the way they walk (see Chibade’s song; Soul Chembezi’s song in the Appendix section), and the way they dress in tight clothes or mini-skirts (see Dan Lufani’s song in the Appendix section) which are described as enticing and inviting for the males, and consequently they are regarded as ‘spreaders’ of the HIV virus and in turn have to be avoided in society. In the song by musician Thomas Chibade, for instance, men are warned against looking at women to avoid being ‘trapped’ (see Thomas Chibade for a full song in the Appendix section). In the song men are even warned against marrying women from urban areas. They are advised to go to their respective villages to get a wife. For this, Ndau (2008) argues that musicians send the wrong messages and give erroneous impressions to the listeners. They should not give the impression that HIV is spread by women nor that HIV is more rampant in the urban location only (see Dan Lufani’s song). Nkhoma (2008) concurs with Ndau (2008) that in the music industry women are presented as spreaders of the HIV virus. This has implications on how women are viewed by the community and how HIV and AIDS messages are constructed and interpreted by the community.

Nkhoma (2008) notes that music is the most efficient mode of communication because it covers a broad audience within a limited time spam, and that illustrates its ability to be used as part of the mass media. Government and NGOs use the music industry to pass on messages to the community for various campaigns and the HIV prevention campaign is one of them. The prevention messages on HIV and AIDS focused on behavioural change, which up to the present
day still stands as a challenge (Botilen 2008, Mwale 2008). Nkhoma’s (2008) paper, however, concentrated on the legislation within the music industry. She observes that legislation has failed to recognize the status of women in music. The music industry has and keeps on eluding and evading censorship laws in Malawi, leading to unpalatable languaging that demean and degrade women and the music goes on air unchecked and uncensored. Nkhoma (2008) is of the view that gender stereotypes are disregarded in the music industry by the local artists and the idea behind it is to alleviate and mitigate HIV and AIDS. The national radios, MBC 1 and MBC 2 and the national television TVM, which are usually and largely used by the government and NGOs as public broadcasters, are not included in the Communications Act (Nkhoma 2008). Malawi upholds IEC through music and songs and when Malawi changed its system of government from one party to multiparty, the democratic governance, and the music industry, multiplied. The democratic governance adopted the republican constitution (Nkhoma 2008) and within the constitution there is the Communications Act of 1990 which operates under the Malawi Communications Regulatory Authority (MACRA) and the Censorship and Control of Entertainment Act of 1968. These acts regulate the media and music, advertising jingles etcetera. The Code of Conduct (Section 52 of the Communications Act) provides the broadcasters the freedom to receive and broadcast opinions but at the same time restrains them from disseminating messages with distasteful, offensive and insulting language (Nkhoma 2008). The Acts ensure that the broadcasters comply with the regulations of Section 5 (2) (k) (iii) of the Communications Act. The Bill of Rights, on the other hand, Sections 20 and 24 (2) (a) in particular, prohibits discrimination on the basis of inter alia sex and commits itself to eliminate practices, policies and legislation that discriminate against women through sexual abuse and harassment. The Censorship Board, through the Censorship and Control of Entertainments Act 1968, section 23 (2) of the Act, is entitled to check music/a song/or a record if

- it gives offense to the feelings of any section of the public
- it brings any member of any section of the public into contempt
- it harms relations between any sections of the public
- it is contrary to the interests of public order

(Nkhoma 2008)
Although Malawi has these acts with active boards such as the Censorship Board and MACRA, the legislation of HIV and AIDS is yet to be put in place. The National HIV and AIDS policy was drafted but remains a draft. It is yet to pass into a law. The policy promotes accurate languaging but fails to contain the unpleasant messages which they enjoy through the public broadcaster. It only concedes that there is stigma and discrimination against vulnerable people. Since the most publicized mode of transmitting HIV is sex, and sex in Malawi has become synonymous with having multiple sexual partners (Nkhoma 2008), messages in songs rebuke and label women as carriers of the virus. Nkhoma (2008) observes that the HIV and AIDS messages employ a softer tone on men than women. Men are only warned against going after women, or are advised to stay away from women to avoid contracting the virus. Nkhoma (2008) cited, apart from the same songs noted by Ndau (2008), songs such as:

…fisi oyenda usiku (hyena that walks at night…expression to describe sex workers)
…akunnenepe nako kacilombo (they are getting plump although they have the virus.. refers to women who get big because of contraceptives)
…namasupuni (green water plant which kills water animals like fish by closing the surface of the water and in the end suffocating every living organism in the water. This is an expression to refer to women/girls)
…cisiye cingakutenge…udzafela neng’eneng’e (leave it, it might take you…you will die because you are attracted to the plumpness) (Nkhoma 2008)

Apparently, unlike some Western countries, sex workers in Malawi are not conspicuous during daytime. They only come out during night and line up in the streets. This is so because prostitution is illegal in Malawi. The hyena, according to Malawian folktales, is an animal which is regarded as a coward and moves around only at night, hence sex workers are referred to as ‘hyenas that walk the night’. Namasupuni on the other hand, is a plant that is very difficult to get rid of. It is a plant that has a shape of a spoon, hence the borrowed word ‘supuni’ and since every woman in Malawi has a clan name that starts with the prefix [na-/nya-], it is appropriate naming it namasupuni, according to the way women are called. When this plant namasupuni covers the waters, for example, in a lake or rivers, all live animals such as fish die of lack of oxygen because this plant covers the whole surface area without giving enough space for fresh air to
penetrate the waters. This plant has attacked the waters of Malawi and the government for the past ten years has tried to get rid of it but to no avail. Likewise women/girls are referred to as namasupuni since they are regarded as carriers of the HIV virus, a virus which is difficult to get rid of. The last song is even more demeaning than the other songs because the words have the prefix \[ci-\]. The prefix \[ci-\] enlarges things in the local language, CiCewa. For instance, the fish \textit{nsomba}, when \textit{ci-} is added, becomes a big fish \textit{ci-nsomba}. The other side of the prefix \[ci-\] is exaggeration. It exaggerates things by amplifying them negatively, for example, the word head, \textit{mutu} when \[ci-\] is added, can mean a big head physically but it can also be a way of insulting someone else. Thus plump women are given the prefix \[ci-\] because of their huge physical bodies.

Nkhoma (2008) also observed that the music industry by default depicts women as subordinates and less powerful. This is illustrated by the fact that when musicians sing about them, nothing is done. She notes this after realizing that the caucus of female parliamentarians in 2007 echoed concerns over local music which goes against their rights and protection. The so-called ‘freedom of expression’ allows insensitivities to creep into the media and by default allows erroneous and unpalatable words and expressions the opportunity to be broadcast without any questions. The gaps in the legislation on HIV and AIDS which lead to miscommunication, need to be addressed (Nkhoma 2008).

\textbf{2.4.4 HIV and AIDS and the economy}

Nagoli, Holvoet and Remme (2010) observe that there is HIV and AIDS vulnerability in the fishery industry. This is when there are sexual relationships between fishermen and female fish traders during fish processing and trading. Nagoli \textit{et al} (2010), in their study of the fish industry, note that between the months of December and March, which is the peak for \textit{usipa}\textsuperscript{1}, the period coincides with food shortages. In Malawi people run out of food stuff or the year’s harvest by the end of November and as such they resort to other means of getting their daily food such as doing manual jobs or going into small businesses. Thus, women along the lake offer themselves for sex in exchange for fish which they use for food or sell to get an income. Other women engage themselves in the fish trade and since there is always competition with the seasoned traders they

\textsuperscript{1} Small fish which can be eaten fresh or dried
end up involving themselves in transactional sex (Nagoli et al 2010). During the cited months, people relocate themselves to the beaches, giving evidence of the mobility of people in pursuit of not only a better market but also food. This interaction of various people becomes the mode of transmitting HIV between individuals from high risk areas such as the beaches to low risk areas. The mobility age is from as young as 11 years old and fishing people have a high HIV prevalence rate which is ten times higher than the general population (FAO 2003, 2007 cited by Nagoli et al 2010). The fishing industry which is referred to as the Micro and Small Enterprises (MSE) represents 26 percent of the total districts, (Mangochi, a district which also falls within the study area for this thesis) (Government of Malawi (GOM) 2007 cited by Nagoli 2010). In the MSE there are 26,280 employees in fisheries alone (GOM 2007 cited by Nagoli 2010) and fishing is the third largest small and medium enterprise that links the urban and rural communities (Nagoli et al 2010). These researchers also observe that due to the low literacy level, there is poverty, food insecurity and lack of alternative income, The Mangochi district alone faces a high mobility and migration of people, transactional sex, multiple sex partners, intergenerational sex, alcohol abuse, and a gender power imbalance that contribute to the spread of HIV as fish traders stay away from their spouses and homes for long periods, from two days to two weeks. Furthermore, most of these mobile groups do not know their HIV status due to a low literacy level or denial and fatalism (Nagoli et al 2010).

2.4.5 HIV and AIDS and the youth in Malawi

Several studies that have been conducted concerning the youth unveiled the need for language used by youth to be used in dissemination HIV and AIDS messages. According to Kamanga (2008), Nyasulu (2008) and Mugaba (2008) the youth usually have their own ways of expressing things and issues, which are not necessarily understood by the older generation. For instance, Kamwana (1996), Chisoni (2001), Moto (2004) and Kamanga (2008) found that the youth of Chancellor College, one of the largest universities in Malawi, used words such as ‘windows 2000’, ‘DSTV’, ‘night queen’, ‘telala’ and ‘top-up’ to refer to various aspects of HIV and AIDS. These are words and phrases which the older generation would not pick up at first glance. The authors say the youth gave different reasons for their creative endeavours. Consider the following:
Windows 2000 female student seen in a sexual act through a window
DSTV female student wearing a short skirt/dress
Night queen female student who meets a boyfriend only at night time
Telala male student who has many girl friends
Top-up ARVs

Windows 2000, which is a reference to a computer software program, is a technology which is not stable as it changes almost every year and now it is called ‘Windows 2012’. Thus, the female student was like a sexual model of the year 2000, hence the term ‘Windows 2000’ (Moto 2004). DSTV is a term for a television program which is viewed through subscription but for undergraduates at Chancellor College at the University of Malawi, in contrast, this one is free and can be watched by anybody. Although these terms can be described as being creative, the youth in reality are using euphemisms.

Nyasulu (2008), Kamanga (2008) and Mugaba (2008) all propose the use of youth language for HIV and AIDS messages if the messages are meant for the youth. Nyasulu (2008) goes further to propose the use of direct language for HIV and AIDS messages for the youth. Although he admits that the youth are divided as some religious youths are against ‘straight talk’, they themselves do not use straight messages but euphemisms. As much as it seems essential to have youth language, however, that kind of proposal would not be practical. It would be tricky to come with one type of language for the youth as youth languages are temporal. Thus, one youth language would not be the same for another generation. Furthermore, it would be difficult to demarcate youth groups. The age group would be diverse from one locality to another since in other communities someone who is thirty-five years old can still be regarded as a youth unlike in another community where ‘youthness’ ends at twenty-five.

2.4.6 Proverbs, sayings and metaphors for HIV and AIDS
Malawians are part of many diverse communities that are fond of using proverbs, sayings and metaphors whenever they converse about any topic. With the coming of HIV and AIDS, proverbs, sayings and metaphors have been used to pass on messages to the target groups. Chimombo (2008) and Chakanza (2000:10) point out that proverbs are instruments for
education, instruction, guidance and social control. They are meant to educate people on morality, give instruction on how to survive, endure and handle various situations. They are a source of guidance in case someone is looking for direction for social problems and as such they act as a social behavioral blue print. Chimombo (2008) observes that proverbs have been collected since the colonial regime by mainly missionaries and other white people that came to visit Malawi. Chimombo (2008) notes that Cullen (1931) collected and recorded proverbs of the Tumbuka-Nkamanga people in the northern part of Malawi. Then, Gray (1944) collected about 400 proverbs. While Chakanza (2000:10) surmises that proverbs tap into people’s state of affairs from wealth and poverty, health and sickness, joy and sorrow, occupation such as farming, fishing, cooking and against vices like backbiting, stealing, selfishness, laziness, lying, pride etcetera, Chimombo (2008) on the other hand grouped all proverbs used in Malawi into four categories namely: (i) virtues and vices (ii) wisdom, experience, cunning, obstinacy and foolishness (iii) prudence, cowardice, caution and shame and (iv) friendship whether true or false. Aristotle acknowledges that metaphors give pleasure because they create knowledge (Aristotle Rhetoric, translated by Ingram Bywater 1980:141b). Chakanza (2000) and UNICEF (1997) both acknowledge that there is room for new proverbs, sayings and metaphors.

In Malawi these linguistic resources have been used to disseminate HIV and AIDS messages. They have been used in mass media: television, radios, posters and public addresses. Chimombo (2008) examined more than twenty-four proverbs and sayings that have been used in posters. Some of the examined proverbs are recorded while others have not yet been recorded by scholars and researchers. She observes some challenges when it comes to the use proverbs as a means to disseminating information to the public. The challenges include misinterpretation of the proverbs, some proverbs having a double meaning, absence of relationship between the representation of the proverbs and the activity in question, and contradiction between the proverb and the intended meaning. Some proverbs which have a double meaning present both a positive and negative meaning. On contradiction Chimombo (2008:10) gave an example of *kupha mbalame ziwili ndi mwala umodzi* ‘killing two birds with one stone’ where this proverb is advising people to use a condom in order to avoid pregnancy and HIV at the same time. The contradiction, according to her, lies in the original sense of the proverb, that is, one achieves something with limited resources and a new sense produced for HIV and AIDS messages.
‘avoiding two things: pregnancy and HIV’. Thus, the contradiction is in the words ‘killing’ and ‘achieving’. One is positive ‘achieving’ and the other is negative ‘killing’. In concluding, she proposes that producers of HIV and AIDS messages ought to be cautious of the challenges that come with the use of proverbs for HIV and AIDS messages. Wolf (2003) conducted research on proverbs, metaphors and sayings and also concentrated on the reference of sexuality as ‘food and movement’ in Malawi. She also notes the negativity of the Malawians when talking about sex and HIV and AIDS and proposes that understanding of the cultural and traditional background context be studied first before one can conclude or understand the way individuals approach and tackle issues, health matters in particular.

2.4.7 Use of local languages for HIV and AIDS

Although there have been some studies on language as social semiotics in HIV and AIDS discourse in Malawi, there have been none focusing on multimodality. The literature shows that studies that have been done have demonstrated that the local languages have been poorly represented (Kishindo 2008, Miti 2008, Mtenje, 2008). The use of English has particularly drawn a lot of criticism as the majority of Malawians can hardly understand the language. Most of HIV and AIDS messages in Malawi are presented in English and the CiCewa language which are the official and national languages respectively. CiNyanja was accorded the status of national language at the Malawi National Party Congress Convention in 1968 and the name was changed from CiNyanja to CiCewa (Kamwendo 2004:277). Thus, after this declaration at a political party convention during the regime of the first President of Malawi, Hastings Kamuzu Banda, all other local languages were suppressed. For instance, CiTumbuka, which was also a national language before the above mentioned declaration, was removed from the school curriculum, radio broadcasting stations and print media (Kamwendo 2004). Although things changed with the coming of the multiparty democratic governance (Nkhoma 2008, Kamwendo 2004), other local languages besides CiCewa have not fully recovered from their suppression during the thirty years of a one party system of government. Thus the coming of HIV pandemic in early 1980s found only two languages, English and CiCewa, as active languages. It is not surprising that most messages are thus in these two languages. However, now there is a call for HIV and AIDS materials to be translated into all local languages spoken by different communities (Mvona 2008, Chiphanda and Maotcha 2008, Mhagama 2008, Kishindo 2008, CLS 2007, Kamanga and
Shame-Kalilombe 2008). There are some communities which to date do not understand CiCewa (Kamanga and Shame-Kalilombe 2008). Kishindo (2008) further observes that HIV and AIDS information is poorly presented in the print media. He notes that there are usually more articles towards December when it closer to or during the World AIDS Day campaigns; otherwise there is only one weekly CiCewa column. Other languages in the print media are not represented. Thus there is a need for a multilingual presentation of HIV and AIDS messages so as to reach all and every individual in their own mother tongue (Mvona 2008, Kishindo 2008, Kamanga and Shame-Kalilombe 2008). Mvona (2008), to emphasize the need for multilingualism in HIV/AIDS messages, went further to quote a Nigerian poet, Niyi Osundare, and this researcher reproduces the quote below:

“When two languages meet, they kiss and quarrel. They achieve a tacit understanding on convergence, and then negotiate often through strident rivalry and self-reserving alterations, their areas of dissimilarity and divergence.”

Niyi Osundare

2.5 Modes of communications in Malawi

Modes of communication are typically, for the most part, the efficient and proficient means of informing communities - those that absorb and consequently adopt the messages and information, pass them on to create awareness-knowledge (Rogers 2003:18). In Malawi, as said earlier on, the HIV and AIDS campaign started with the emphasis of abstinence, the ABC slogan. This was due to the association of the epidemic with sexuality (Kishindo 1994:153). This, however, has brought with it stigma and discrimination for the HIV and AIDS infected and affected groups as a result of the different interpretation of both the visual and verbal messages used during the awareness campaigns. Different modes have been used, as explained earlier on in Chapter one, to pass various kinds of messages to diverse geographical localities. However, according to Botillen (2008), pamphlets and billboards are not considered as important sources of information for health issues in Malawi. Botillen (2008:93) notes further that this can most likely be attributed to the low levels of literacy amongst the respondents, an aspect that is underscored by the fact that the radio scores very high as a primary source of information. These results indicate that a mass media approach mediated by radio is a strong contributor to the high
levels of awareness of HIV and AIDS in Malawi. When focus is shifted to behavior change, the use of these channels of communication has proved to be less effective.

Rogers (2003) proposes two types of modes of communication namely ‘cosmopolite’ and ‘localite’ channels of communication. He describes ‘cosmopolite’ modes of communication as those linking an individual with sources outside his social system. ‘Localite’ modes of communication, on the other hand, are those operating inside the social system. Whereas mass media channels are almost entirely ‘cosmopolite’, interpersonal communication modes can be either ‘localite’ or ‘cosmopolite’. Similarly mass media modes, the ‘cosmopolite’ modes of communication are more important at the knowledge stage, while ‘localite’ channels play a more important role at the persuasion stage in the innovation-decision process (Rogers 2003:207). Thus the health service places such as clinics and dispensaries, the village gatherings and religious gatherings which are also the main sources of health-related information for communities, the rural community in particular can be regarded as ‘localite’. These communication modalities embrace more of the qualities of interpersonal communication, and should therefore, according to Rogers’ (2003) classification, be more effective in terms of persuading potential adopters to accept and adopt the innovative messages. He does, however, refer to research findings which show that in developing countries, such as Malawi, the role played by mass media in the kind of modes of communication (creating awareness-knowledge) often seem to be replaced by ‘cosmopolite’ interpersonal channels of communication. ‘These cosmopolite interpersonal modes include change agents, visits outside the local community, and visitors to the local social system by outsiders’ (Rogers 2003:208). This could affect how efficient these communication channels are at the persuasion stage in the Malawian context. However, Botillen (2008) claims that neither mass media nor ‘cosmopolite’ interpersonal communication modes are the most effective when it comes to affecting ‘strongly held’ attitudes and beliefs such as traditional aetiology and norms of sexuality in Malawi. This could be attributable to what can be referred to as the ‘culture of silence’ in Malawi (Arrehag et al 2006, Shah et al 2002, Pinder 2004, Longwe 2006, Musopole 2006). As stated in the previous chapter, the association of the HIV and AIDS epidemic with sexuality poses a threat to the Malawian ‘culture of silence’. Sexual issues are not discussed publicly in Malawi and are neither discussed in front of ‘children’. By ‘children’, the researcher means even when one is 40 years old, he/she
cannot discuss sexual issues with his/her parents or even those older than himself/herself. So the discussion of sexual topics is restricted to one’s own age group. The older group only talks to the younger group during initiations and it is the initiation counsellors who do that.

Also sexual topics are discussed in accordance with the gender group. Thus men cannot discuss sexual matters with females. It is a taboo topic; a topic which is regarded as sensitive and susceptible. Worse-still the subject of sex is not even discussed by couples. Couples are counselled by marriage counselors on their marriage-day and are ultimately given a few tips for their sex-life and after that, due to the same culture of silence, they keep everything to themselves. Thus this ‘culture’ has not made things easy with the coming of HIV pandemic as people fail to discuss it in their homes. Thus the interpersonal communication as proposed by Rogers (2003) would not be feasible at household level.

Modes of communication in Malawi are believed to be incompatible with approaches to HIV and AIDS intervention (Botillen 2008). Mwale (2008:296) observes that ‘adolescent vulnerability to contracting HIV, egocentrism and other psychosocial factors in various empirical domains, have shown to be complicated by cultural practices, stoicism towards death and misconstruing of AIDS messages’. Mwale (2008) having done research on why there is a mismatch between knowledge of HIV and AIDS and subsequent behavioural change, claims that comprehension of HIV and AIDS transmission, and prevention dynamics cannot translate into behavioural change.

Behavioural change communication campaigns referred to in Mwale’s (2008) study as BCC, missed socio-cultural and psychosocial elements which she proposed need to be captured because she presumes that they are proximate barriers to change. In turn Mwale (2008) proposes HIV and AIDS programmes in Malawi and Africa in general ought to be innovative, anticipating the numerous social and historical, ontological as well as epistemological inconsistencies that may act as barriers to effective intervention efforts. Furthermore, she suggests that institutions must involve the community members. The donor communities that is so ready when navigating behavioral change must be intensely acquainted with varied barriers such as cultural practices.
Therefore, Mwale (2008) proposes that ‘retrogressive’ cultural beliefs which have congealed in the youthful minds of adolescents should be re-examined.

Rodgers (2003) described multimodality as mass media. Mass media is a form of passing on messages using different forms of communication such as radio, television, newspapers, posters, music, brochures, health institutions, schools, public meetings and open day celebrations and so on. In the Malawian context, mass media is known in the form of radio, television and newspaper only. The other forms of mass media such as billboards, posters, brochures, calendars, music, short messages services (SMS), t-shirt messages and messages in traditional songs are often overlooked when it comes to categorizing what is mass media. Thus, most researches that have studied multimodal communication concentrated on radio, television and newspapers. Mass media can be defined as one source reaching out to many individuals. It is regarded as the most rapid form of sending information to the target group and because of such a reason, multiple modes of communication have been used in Malawi just like the rest of the world for issues that need urgent attention by the public, be it health issues or otherwise. However, in the case of health matters, which most of the time come as outbreaks, multiplex modes of communication are used for awareness, civic education on prevention and treatment. Thus radio, in the case of Malawi, is the first option as it is believed that most people have access to its broadcasts (DHS 1996), especially community radios that broadcast in local languages.

2.6 Conclusion

This chapter has presented literature on HIV and AIDS in Malawi. In particular, it has highlighted the perception the community have on the pandemic and also the different terminologies that have developed in the linguistic repertoires of the people as they contend with the effects of the pandemic. The chapter has also presented literature on issues of sexuality in the context of HIV and AIDS in Malawi and how that influences people's conception on the pandemic which in turn impacts their behavior towards it.
CHAPTER THREE: LITERATURE REVIEW ON HIV AND AIDS ELSEWHERE

3.0 Introduction
The chapter also reviews linguistic resources used in HIV and AIDS messages. Then it looks at other similar research studies done in other countries. The literature review which started in chapter two continues in chapter four, but at the level of a theoretical and analytical framework used in the study.

3.1 Some studies on HIV and AIDS elsewhere
Norton and Mutonyi (2010) are of the view that the effects of HIV and AIDS in Africa have prompted many communities to ‘rethink’ their traditional customs and social relationships as most of the traditional practices aggravate the spread of HIV and AIDS pandemic. The traditional practices cited by these scholars include gender inequalities which translate into vulnerability for men and women, silence amongst women where women cannot express themselves to their spouses, and so on. The gender inequality includes the fact that men are given more privileges than women. Norton and Mutonyi (2010) observe that men and women are treated differently in Africa and as such there are more incidences of HIV and AIDS amongst women than men since they cannot say ‘no’ to unprotected sex, even when they know that their spouse is HIV positive. In their study of policy and the youth in Uganda, they note that the youth are most of the times sidelined when it comes to decision-making and policy formulation and implementation. In their study which was conducted amongst the youth, male students expressed concern about inequality in public institutions like hospitals, schools and government institutions while female students were concerned with women working ‘double day’ at the office and at home. It was also noted in the same study that girls, and this is the case in all African countries, receive more counselling and sexual guidance than boys (Norton and Mutonyi 2010). Thus, these scholars propose the involvement of the youth in HIV and AIDS policy making and division of labour.

Higgins (2010), in her studies on health literacies in Tanzania, observes that there are three main types of health literacies namely:
Amongst these three variant literacies, the functional health literacy is the one that is highly focused on by researchers (Higgins 2010) giving the other two lesser attention. However, she was quick to note that there is some research on ‘multiliteracies which focused on meaning making in different cultural and social contexts’ providing attention to multimodal aspects of communication. Higgins (2010) further notes that multiliteracies concede that the deconstruction of texts, interpretation of ideologies and reconstruction of meanings through creation of new-fangled texts and interactions, are only achieved through daily literacy practices in communities. The health multiliteracies are mostly used in educational settings. In her study of Life Skill Education (LSE), which has HIV and AIDS as one of the core topics of study in schools as it is one of the goals of Millennium Development Goals 2015 and Education For All (EFA), Higgins (2010) observes that it uses multiliteracies. However, Higgins (2010) points out that the multiliteracies used in schools do not include culturally relevant pedagogy. She noted the shortfall after acknowledging that cultural models form the basis of communities’ world experience as they are articulated through stories, metaphors, proverbs, riddles and other semiotic devices that involve people’s interpretation of their experiences, behaviours and events. Higgins (2010) elaborates that local tales formulate cultural models which help individuals understand HIV and AIDS in Haiti. Higgins (2010) proposes that cultural models are akin to movies in people’s minds. In addition, Higgins (2010) notes that there is more to understanding and implementing preventive measures for HIV and AIDS than meets the eyes. She cited poverty as one of the obstacles that hinder the absorption of HIV and AIDS messages. She acknowledges that individuals who struggle to make ends meet, women in particular find it difficult to prioritize things. Thus in agreement with Boler and Aggleton (2005) Higgins (2010) proposes a twofold approach to the HIV and AIDS pandemic:
(i) to promote critical health literacies in the form of culturally relevant dialogue
(ii) to find ways of addressing the structural problems that individuals face in their daily lives

In addition to these approaches, she advocates culturally relevant pedagogy in school curricula and also recommends the inclusion of cultural models in policies that deal with health problems so as to involve the target group. Although Higgins (2010) proposes the above approaches, she overlooked the fact that all people’s problems cannot be solved as they come in different formats and approaches. Therefore, this researcher concurs with her on promoting health literacies in form of culturally relevant dialogue. As much as culture cannot be eradicated, it can be modified and health literacies should play a part in the modification of cultural practices and this is what this thesis hinges on.

In the earlier years Vaughan et al (2001) observed that Tanzanians have a high knowledge of HIV and AIDS because of the entertainment education programmes that were aired on radio. In their study of accessibility of HIV and AIDS information, they found that radio was the most source of information in Tanzania (Vaughan et al 2001:85). The radio which uses soap drama programmes featured role model characters which attracted high listenership. Thus for high knowledge or awareness in health issues radio is the best media for disbursing information, at least for Tanzania.

In a related study on HIV and AIDS discourse in rural Kenya, Oketch (2006) argues that there are many disorders in discourse arising from factors such as linguistic choices, modes of communication and order of discourse. Choice of language is important in maintaining social identities and ethnic patriotism, especially when local languages are used. Modes of communication mostly serve the interest of the writers/ producers and not the readers/viewers. Oketch (2006) and Banda and Oketch (2011) in their analysis of HIV and AIDS discourse in rural Kenya, demonstrate that writers/ producers usually assume that readers/viewers are competent in extracting meaning from multimodal texts. However, this is not always the case. Thus, most of the intended information to the target group is inaccessible and misinterpreted
through unfamiliar linguistic choices and modes of communication. The linguistic choices, modes and imagery, as observed by Banda and Oketch (2011), are incongruent to the target people and community practices. Thus multimodal designs require visual literacies (Oketch 2006, Banda and Oketch 2011, Bok 2009).

Antia and Razum (2012) did a comparative study on HIV and AIDS messages in two countries, namely Germany and Nigeria. Their concern was mainly on what constitutes a message, how a message can be regarded as successfully consumed, understood and implemented. These researchers used Witte’s (1992, 1998) Extended Parallel Process Model (EPPM) to analyse the messages. They applied all the four variables of this model which are ‘perceived severity, perceived susceptibility, perceived response efficacy of recommendation, and perceived self-efficacy. In this study the noted that the higher the perception the more danger control is applied steering consumers of HIV and AIDS message to accept or consume the message. In turn, this led to ‘behaviorally appropriate responses’. Antia and Razum (2012) found that the response between the two countries varied due to resources and practices in each country. Germany was found to be open and did not use threat words or expressions and fall within the two variables of efficacy in EPPM model. Nigeria, on the other hand, was found to be using threat words and expressions. Thus the researchers concurring with Beaudoin (2007) concluded that messages are socially constructed. They arrived at this conclusion because they found that Nigeria’s prevalence rate of HIV is higher than that of Germany and as such Nigeria took a threat-driven behavioral intervention.

In Mozambique, Chimbutane (2012) claimed that unconsumed HIV and AIDS messages emerge because the messages are not constructed within the socio-cultural contexts. The researcher noted that people of Changana have invented their own discourses for HIV and AIDS. Thus they are coming up with a language known to them alone. Concurring with Drescher (2010) who did a study in Burkina Faso, he noted that prevention programs have been unsuccessful because of cultural beliefs and practices. Chimbutane (2012) whose study was on HIV and radio concludes that HIV and AIDS messages need to constructed and developed using a bottom-up approach. Everything should start from the grassroots and the consumers need to be part. He proposed an establishment of a corpus planning in institutions dealing with HIV and AIDS and that these
Institutions should consider cultural norms, beliefs and practices. Chimbutane (2012) suggested an interception between local and global discourses on HIV and AIDS.

In Lesotho, Sobane (2012) in her study of behavioral communication change (BCC) proposed that native speakers have to be consulted before HIV and AIDS messages are created. Her main concern was that multilingualism was overlooked when it came to construction of messages for behavioral change in Lesotho. Minor languages were sidelined. She also noted that Lesotho has no written language policy. It has only a clause in the constitution and this could be the basis of sidelining other languages in HIV and AIDS messages. Producers and writers of HIV and AIDS messages have mainly concentrated on two official languages which are English and Sesotho. The researcher believes that successful consumption of messages can be achieved if more languages are used. Her study on BCC produced by an NGO called Phela health and Development Communications (PHDC), she observed that the multimodal approach taken by the NGO: radio, television and poster were appropriate but were not fully consumed due to language problems as some could not understand the two languages involved. She further noted that there was a mismatch between images and words in posters and as such those who could not read the words could not get the messages. She felt that the HIV and AIDS messages on posters were not conducive to the illiterate people.

Milani (2012), whose research hinges on homosexuality and HIV and AIDS, problematises the issues of identity and group categorizations. In agreement with Oostendorp and Bylund (2012), he addresses the dangers of discriminating against homosexual people. Milani (2012) recounted that people associate homosexuality with HIV and AIDS. He further noted that men who have sex with men are automatically categorised as homosexuals. Recounting his own personal experience, he lamented that people usually ‘over-conclude’ and ‘over-generalise’ that homosexual are HIV positive. He therefore suggested that there should be new discourse for sexual identity. He proposed for uniform identity since men who have sex with other men can also have other desires such as desires for women.

Bat-Chava et al (2005) in their study of deaf people and HIV and AIDS found that there was low level of knowledge about HIV and AIDS among the deaf. Their study also revealed that using
interpreters for communication compromise confidentiality especially in the case of HIV and AIDS. Bat-Chava et al (2005) observed a division among the deaf when it came to HIV and AIDS message accessibility. The urban deaf people are more exposed to information than the rural and also that the deaf adolescents are more knowledgeable that deaf adults. Apart from the divisions in the deaf consumers of HIV and AIDS, Bat-Chava et al (2005) also noted that most health practitioners do not know sign language and as such when they are ushered with a deaf patient they use third parties, interpreters. Thus the study has proposed that all health practitioners should be trained in sign language and that HIV and AIDS materials should also be in sign language in that way the deaf will be accommodated (Bat-Chava et al 2005).

In a similar study Biakolo et al (2003) also found that people with special needs have barriers to accessing HIV and AIDS information. Their study which was on Kenya and Botswana, found that the deaf in particular were at risk of contracting HIV. For instance, in Kenya there was no materials for the deaf, no personnel to sensitize them, and no sign language people (Biakolo et al 2003). These scholars noticed that the story in Botswana was similar to that in Kenya. However, Biakolo et al (2003) observed that Botswana was ahead of all other countries in Africa in the fight against HIV and AIDS and yet there was hardly any material for people with special needs. Biakolo et al (2003) noticed that in 2002 Botswana introduced a syllabus for deaf children in schools but the teachers were incapable of handling it because they were not trained. Just like the study done by Bat-Chava (2005) in New York, this study in Botswana also found that lack of confidentiality barred deaf people from talking about HIV and AIDS issues through an interpreter. This led to many deaf people to shy away from discussing topics of sex, HIV and AIDS or even report sexual abuse (Biakolo et al 2003). Thus Biakolo et al (2003) proposed an establishment of task forces both in Kenyan and Botswana to produce HIV and AIDS programs that would people with special needs. They further proposed that HIV and AIDS materials and messages already in existence needed to be modified to accommodate people with special need (Biakolo et al 2003).

A study on mass media by Bertrand et al (2006) in developing countries found that most papers fall short of providing answers for the impact of mass media on HIV and AIDS because of mainly three reasons which are: (i) weak designs of materials (ii) failure to link campaigns and
their effects (iii) techniques used not being practical for social behavioral transformation. The mass media studied included posters, songs, interactive web sites, soap opera, music videos, films, billboards, pamphlets, radio and spots. Bertrand et al (2006) reviewed 24 mass media interventions which were related to knowledge, attitudes, and behaviors towards HIV and AIDS. Their study was grouped into three levels such as (i) pre and post intervention data (ii) treatment in contrast with control groups and (iii) post intervention level of exposure. Although the study indicated a short fall on definitive answers, it was found that awareness and knowledge of HIV and AIDS amongst people was 90% (Bertrand et al 2006).

In other African countries such as Zimbabwe, Nigeria, Botswana, the literature on HIV and AIDS has focused on stylistics, particularly the new emergent linguistic terminologies and the use of metaphorical phrases and how this has expanded the linguistic field and choice, but at the same time proven to be ineffective in the fight against the HIV pandemic. The following studies are important in this regard (Munthali 2003, Gunduza 2003, Sithole 2003, Mathagwane and Yusuf 2003).

In a similar study on stylistics, (Arua 2003) found that negativity towards HIV and AIDS resulted in desperate measures to deal with it. One of the strategies was to disburse messages that speak of dreadful consequences of AIDS and the need to prevent being infected with HIV (Arua 2003). Most of such kinds of messages were displayed on billboards, newspapers, on walls of auto repair shops, travels agencies, grocery shops, in buses, on school walls and in government offices. According to Arua (2003) most HIV and AIDS messages originated from high offices such as Ministry of Health, National Coordinating Agencies (NACA), UNICEF and UNIADS (p84). When messages are being produced the producers became informants and controller because of the choice of mood used in the messages (Arua 2003). Indicative and imperative moods are mostly used and punctuation marks such as pause (....), capital letters are also used to make emphasis and to attract people’s attention. Arua (2003) further noticed that messages contained no gender as producers used mostly first person singular personal pronoun (I) as the sender or the addressee and/or second person (you) as the receiver or addresssee. This kind of writing style Arua (2003) called it direct communication. However Arua (2003) noticed that HIV and AIDS messages are usually short straight, well constructed and uses basic syntactic
structures. Arua (2003) retorted that all messages are stylistically and aesthetically constructed. Although this was the case, he proposed the need to investigate how message are received, understood and consumed to establish if they were well-constructed.

Since HIV and AIDS is closely related to cultural practices, there have some studies that have been done in this regard. Airhihenbuwa and Obregon (2000) observed that discrepancies in health behaviors are mostly due to cultural functions and therefore he suggested that culture need to be viewed for its strength and not as a barrier to heath information consumption. He proposed that the terms ‘culture’ and ‘barrier’ should be reviewed, recreated and exposed so as to have a positive attitude towards the link between culture and health issues. Airhihenbuwa and Obregon (2000) noticed that in health matters, the role of culture is usually absent. He stemmed that culture a fundamental feature in health behaviours and as such it can be ignored. In this study Airhihenbuwa and Obregon (2000) analysed five theories and models associated with culture which are (i) health belief model (HBM) by Becker (1974), (ii) theory of reason and action by Fishbein and Ajzen (1975), (iii) social learning/cognitive theory by Bandura (1986) (iv) diffusion of innovation by Rodgers (1983) and this is the theory that was used by Botillen (2008) in the research and analysis of IEC interventions on HIV and AIDS in Malawi (see chapter two). This theory has been criticised for generating or broadening the gap between awareness campaigns and knowledge, and lastly (v) social marketing by Glanz and Rimer (1995). The last theory has five Ps which are product, place, price, positioning, promotion and the theory was used in the prevention of HIV infection through the promotion of condoms. Airhihenbuwa and Obregon (2000) claimed that all the five theories and/or models seemed inadequate for communication HIV and AIDS messages in Africa, Asia, Latin America and the Caribbean (p8). He concluded that HIV and AIDS communication is usually grounded on the behaviours and choice making procedures because decisions about HIV and AIDS are habitually built on emotions.

In further studies on culture and HIV and AIDS, Airhihenbuwa and De Witt Webster (2004) observed that culture instills both positive and negative influences on health behaviours. Using a model PEN-3 created by Airhihenbuwa (1989), these scholars discussed positive and negative perception that people have towards HIV and AIDS. The model PEN-3 has been used in Southern and Eastern African regions of UNCELF as a communications model. Ethiopia adopted
it as national response to HIV and AIDS. It is a model on culture meant for African countries
(Airhihenbuwa and De Witt Webster 2004). The model has been used in countries such as
Nigeria, Zimbabwe and South Africa. PEN-3 model comprise of nine categories which are (i)
positive perception, (ii) existential perception, (iii) negative perception, (iv) positive enablers, (v)
existential enablers, (vi) negative enablers, (vii) positive nurturers, (viii) existential nurturers,
and (ix) negative nurtures (Airhihenbuwa and De Witt Webster 2004). In conclusion these
scholars proposed that this model can be used to address stigma, discrimination, human rights
abuses because it can provide positive and existential behavioral changes among people.

In South Africa, concomitant with proposals made for the global national and local levels for the
there is still a mismatch between the youths’ aspiration and the need for their participation in the
HIV and AIDS programmes. There is a need for the youth to participate in HIV and AIDS
programmes based on three reasons: (i) there is a high HIV-risk amongst the youth, girls in
particular; (ii) there is unemployment and underemployment amongst the youth (ILO 2007),
untapped talents and labour and (iii) there should be youth language and activities relevant for
the youth (Gibbs, Campbell, Maimane and Nair 2010). Children on the other hand, orphans in
particular, in South Africa, are placed in children’s homes (Moses and Meintjes 2010). Thus with
the coming of HIV and AIDS pandemic, there has been an increase in orphanages in South
Africa (Foster 2004, UNICEF 2006a). The HIV positive children are instituted in these homes in
hope of better healthcare, food, educational opportunities and housing (UNICEF ESAR, USAID,
Save the Children Alliance 2003, UNICEF 2003, 2006a, 2006b 2006c, UNAIDS, UNICEF and
USAID 2004). However, although there is optimism about so many facilities for these children,
there is an expressed concern of overcrowding; no appropriate facilities for checking their health
status and no HIV prevention for those who are HIV negative (Moses and Meintjes 2010). Thus
there is a need for further assessment of these children’s homes. Apart from these children’s
homes becoming overcrowded, there also exist numerous Faith Based Organizations (FBOs) not
only in South Africa but the rest of the whole world. These FBOs concentrate on prevention of
HIV and AIDS using the message of abstinence amongst the youth in particular. FBOs are
exceptionally vital in every community not only in South Africa, as their networks and
movements reach out to the heart of the community and family life (UNAIDS 2008). As much as
this researcher agrees that youths should take part in the fight against HIV pandemic, she argues that there is nothing like ‘youth language’ as what is called ‘youth language’ is also spoken and understood by the older generation. Although, this researcher has this view, it is essential to point out that this thesis has not concentrated on that.

On the other hand, in her critique of loveLife campaigns in South Africa, Bok (2009) argues that HIV and AIDS messages are designed for urban and the formally educated/literate groups and biased against the rural and those with no formal Western education. She also argues that the loveLife multimodal texts present incorrect assumptions about the new literacies. She also notes that the use of metaphorical messages for the target group, the youth, are impractical; thus, making multimodal texts for HIV and AIDS meaningless, and defeating the purpose of the producers/writers (Bok 2009).

Oostendorp and Bylund (2012) observe that lack of engagement with language and multilingualism around HIV and AIDS and emotions suppress progress of a theoretical account of emotions as well as the development of locally based community-driven realistic participations. These scholars note that there is high rate of infection in South Africa because of poorly designed HIV and AIDS messages. Quoting Bok (2009) and Crew (2002), they further claim that cultural beliefs and practices, poverty and stigmatisation and sexual practices increase the high rate of HIV infection. Additionally, they elucidate that government’s and people’s responses to HIV and AIDS has been aligned with issues of race and identity. In agreement with Anthonissen and Meyer (2004) and Deumert (2010), Oostendorp and Bylund (2012) affirm that language in connection with HIV and AIDS has been neglected in South Africa. There is more focus on issues related to social and historical structures and processes. Since language on HIV and AIDS has been neglected, Oostendorp and Bylund (2012), there has been miscommunication between health caregivers (HCG) and patients since most of the time HCG use English or use untrained interpreters during diagnosis and this in turn lead to misdiagnosis. These scholars in their study of papers on HIV and AIDS concluded that there is a link between language emotions, especially with the case of HIV and AIDS. They observed that emotions are not easy to translate or interpret and as such there is evidence of overlapping emotion concepts (quoting Pavlenko 2008). Pavlenko (2008) as cited in Oostendorp and Bylund (2012) observes that
translators and interpreters often omit, substitute, add, condense, paraphrase and misinterpret information (p241). Thus, Oostendorp and Bylund (2012) propose the use of trained interpreters and translators.

Saal (2012) in his study of the youth and language proposes the use of youth language, teenage Afrikaans, for HIV and AIDS messages. He noted that there was high prevalence rate of HIV and AIDS amongst the youth in South Africa. Thus his proposal was to speak to the youth in their languages or in the language they use. His study was based on two communication theories of Burgoon and Siegel (2004) which are communication accommodation theory and expectancy theory. These theories argue that teenagers are more likely to view the writer and teenage variety only if they recognize teenage variety in the messages (Saal 2012). Saal (2012) used two teenage slang version of the same HIV and AIDS Afrikaans message. He also used the HIV and AIDS message on loveLife. He found that there was unfavourable reaction to loveLife by the coloureds and white Afrikaans teenagers. The coloureds analysed the slang teenage Afrikaans as being standard Afrikaans. As such they took it being apposite, suitable and good for HIV and AIDS messages. The whites, on the other hand, thought that use of teenage Afrikaans for HIV and AIDS messages as being greatly unsuitable. With this kind of findings, Saal (2012) observes that there is a big challenge that writers and producers of HIV and AIDS messages face. Although Yzer (2008) proposed that use of youth language improves consumption of messages, the challenge remains that the teenage variety divided the consumers of HIV and AIDS messages. Saal (2012) further notes that some scholars had proposed the use of mixing language, for instance, having EngAfrikaans (a mixture of English and Afrikaans). However, Saal (2012) cited Jacobs (2009) that such kind of mixing annoys and invites extraordinarily negative emotional action from scholars, journalists, academicians and writers because it lacks standard. Thus Saal (2012) concludes that the division on the consumers seemed to be a racial issue as each group, coloureds in particular, tries to upgrade their teenage Afrikaans.

Luphondo and Stroud (2012) who studied gender and sexuality through the campaign of ‘Brothers for Life’ observes that masculinity existed across generations. These researchers observed that gender is performed through language. In this study masculinity is represented as the ‘new man’ in contrast to the old perception of a man. Thus the campaign was trying to
reconstruct masculinity and this was done through the use of different chronotopes. However, the choice of figures (p49) and choice of discourse ‘his woman’, ‘his partner’, ‘his children’ (p53) in these campaigns reveal the old traditional controlling man. Thus, the campaign is reproducing the male authoritative patriarchy using new discourse ‘new man’ through changes in roles. However, Luphondo and Stroud (2012) admit that the representation of the new roles of ‘new men’ through the use of well-known figures is neither ‘wholly traditional nor fully contemporary’.

Thutloa and Stroud (2012) also researched on language in health issues. Their concern was that literacy in health matters has been overlooked. These researchers observed that literacy is essential for health citizenship. They felt that healthy literacy provides a voice to consumers of health information and empowers the citizens. However, Thutloa and Stroud (2012) noted that most health information is not disbursed in a language that is ‘not easy to understand’. During their survey, they found that when choosing a language they usually get health information from English ranks highest, seconded by Afrikaans and Setswana comes third. 86% of the consumers also indicated that they prefer being given information in English. However, though this is the case, 72% of the consumers find the English information useful but 25% were not sure whether the health information is useful or not. This indicates that some health information is not understood or not consumed. Thus, the researchers proposed that consumers should be consulted when designing the artefacts.

3.2 Studies on HIV and AIDS terminologies
Just like any other country, citizens of South Africa developed terminologies for HIV and AIDS. Selikow (2004) who studied specialized language used by the youth in South Africa found that the youth develop and create their own language about sexuality so that unsafe turns into the norm and is acceptable. The youth language includes terms such as ‘real man’, ‘top dog’ to refer to a youth with multiple girlfriends and the terms are locally translated as ingagara in isiZulu. The opposite of ingagara is isithipa. Isithipa is regarded as ‘dumb’, ‘sleeping’ and is not respected among the peers. Girlfriends are divided into two categories, according to the study of Selikow (2004) which are cherries also known locally in isiZulu as makwapheni literary ‘roll-on’ and regte ‘right one’ or ‘wife-to-be’. The youth said the terms cherrie and regte are actually
slang Afrikaans (Selikow 2004). A girlfriend can be called *rege* because the boyfriend felt she is the right one for marriage. Furthermore, Selikow (2004) observed that the youth also have different terms for sexual acts. For instance, a ‘one night stand’ is referred to as ‘fucking’ while ‘sex’ is done with a *cherrie* and ‘lovemaking’ only for a *rege* (Selikow 2004). Additionally, extra girlfriends are referred to as ‘spare wheel’, *iete* (tyre) that can be replaced anytime. Apart from regarding themselves as *ingagara* they also refer to themselves as ‘axes’ that can cut anything and can be borrowed by anybody at any time. Thus, the youth narrated that the ‘*rege*’ need not to be threatened by *cherrie* or *makwapheni* because the boyfriend or man can be borrowed and returned to them (Selikow 2004). (Selikow (2004) felt that these kinds of terminologies are being used because of cultural traditional beliefs especially amongst the Zulu people where men always want to prove their masculinity by being sexuality antagonistic, assertive and having multiple partners. Selikow (2004), however, claimed and thought that the sexual behaviours presented by the youth originated from the historical aspects of colonialism, underdevelopment, oppression, poverty, political instability and traditional patriarchal societies. Although this is could be the case, Selikow (2004) proposed that the youth should be involved in the creation of healthy materials, HIV and AIDS in particular.

In another earlier study in South Africa, Stadler (2003) examined different types of terminologies related to HIV and AIDS. Stadler (2003) observed that people regarded AIDS as being concealed and masked. AIDS was also viewed in parallel with witchcraft as both are associated to unusual and unrestrained desires. Thus different terms as created based on different perceptions of HIV and AIDS by people. Some of the terms included ‘sex’ which was referred to as ‘buying their own coffins’ because the moment one indulges in unprotected sexual activities, there were possibilities of getting the HIV resulting in death. Thus they looked at sexual activities in relation to death. Furthermore, wealth men were labeled as ‘womanizers’ because they could afford to pay for sexual activity with their wealth. HIV and AIDS were also talked about using gestures. For instance, lifting up four fingers was a reference made for initials for AIDS (A.I.D.S). the reference was made by referring to national lottery ‘three numbers plus bonus’ meaning ‘if you match three numbers or more then you will be given money and in this case, you get AIDS. Additionally, the word ‘lotto’ was also used in an irony way to mean the easy way of getting money has hidden costs, AIDS. Another lottery slogan, Stadler (2003) noted, included *tata ma*
chance, tata ma million ‘take a chance’, ‘take a million’) which meant going for a jackpot (sex) is a gamble between life and death. The researcher also observed that some terms were linked to gender and poverty or economic situation. For instance, the wealth men or boys who provided food in exchange for sexual favours were termed ‘lunch boys’; ‘minister of housing’ referred to those who provided money for rent; minister of education was for those who gave their partners school fees and minister of communication was for men who bought their partners cell phones or airtime. AIDS was also referred to as ‘OMO’ the washing powder because when people start suffering from it, their bodies look washed up, wasted. HIV on the other hand was referred to as a ‘house in Vereeniging’ or ‘house in Venda’ because of the initials H.I.V (Stadler 2003, Ulys 2005). There were also other terms in isiZulu such as ku hlewa ‘to pluck feathers from a chicken’; ku pirate (to rob); uku phanda ‘to scratch the ground for food like a chicken’ and these terms made reference to women who pretended to be in love but had hidden agendas of just getting money from the men. Stadler (2003) narrated that the practices of ‘plucking’ money from men were mostly encouraged by families, mothers in particular because of poor economic situation in the household. However, Stadler (2003) further observed that there were some terms that referred to women who also indulged in sexual activities ‘just entertainment’ and these comprised n’gwadla, magosha, isifebe, ngwavava in isiZulu ‘loose woman’, ‘slut’, ‘prostitute’. Secret lovers or mistresses, apart from being called ‘cherries’ (see Selikow 2004), were also referred to as xigagu or banyatsi.

Furthermore, Leclerc-Madlala (2002) studied the different definitions of the term ‘dirt’ amongst the Zulu in the context of HIV and AIDS. Leclerc-Madlala (2002) noted that the term ‘dirt’ referred to any disease. For instance, kidney disease would be called ‘dirt kidney’ and ‘dirt stomach’ could refer to either stomachache, diarrhoea constipation or any disease associated with the stomach, ‘dirt chest’ could be ‘coughing’, bronchial pain (Leclerc-Madlala 2002). Thus a sickness is mentioned through specific organs. The term ‘dirt’ is actually a term for ‘dirt blood’ or ‘unclean blood’ that caused an illness. Thus when ‘the dirt blood’ mingles with the rest of the blood in a person’s body, then it becomes general body sicknesses. The treatment of ‘dirt’ was regarded as ukwelapha in isiZulu. Leclerc-Madlala (2002) further observed that ‘dirt’ was also referred to menstruation of women and it was regarded as the process where women cleansed their body. Additionally, the researcher also noted that men, Zulus, said ‘dirt’ conceals itself in
women vagina and womb because it is mostly associated with ‘wetness’ or wet areas. Hence women had to make sure that they are clean and dry when indulging in sexual activities (Leclerc-Madlala 2002). Thus when HIV and AIDS was discovered, it became one of the illnesses for general body sickness as the ‘dirt blood’ would cover the rest of one’s body. Therefore Leclerc-Madlala (2002) made a conclusion that the search for dry sex had led to the rape of virgin, hence the increase in rape cases on babies and children. It is also believed that an HIV positive person can be cured by ‘sleeping’ with a virgin (Leclerc-Madlala 2002).

In addition, Stein (2003) referred to HIV and AIDS as the ‘dirty secret’, a term which was extended to mean stigma against people living with HIV (PLWH). Stein (2003) found that people in the Western Cape called HIV and AIDS ‘ulwazi’ (that thing). However, this study concentrated on stigma in association with ABC slogan for HIV and AIDS prevention. He noted that although some researchers claimed that stigma had diminished, however researchers have not succeeded in measuring the change in stigma. Stein (2003) made reference to two studies done in South Africa, the survey by Nelson Mandela fund/HSRC study of 2002, and the department of health. These two studies hinged on people’s attitude and association towards PLWH. Concurring with Joffe (1999), Stein (2003) claimed that the slogan ABC which was supposed to uphold social order among people, presented more stigma. Stein (2003) noted that it is complicated to measure stigma and as such researchers should not conclude that stigma was on the decrease. However, Stein (2003) detected that with the coming of Ant Retroviral treatment (ARVs) which has shifted HIV and AIDS from the category of terminal disease to chronic illness will decrease stigma on PLWH.

In another survey that covered five countries namely Malawi, Lesotho, South Africa, Swaziland and Tanzania Uys et al (2005) noted that different terms which were created for HIV and AIDS are all embedded in the culture of societies. The researchers noted that most terms referred to people, places, events, phenomena and sometimes the naming reflects people’s beliefs and perceptions in relation to HIV and AIDS (Uys et al 2005). Their concern in this study was whether stigma on people living with HIV (PLWH) was on the increase or not. Terms analysed by these researchers included ‘eating plastic’ (Malawi) a term made in reference to a situation that happens with animals, goats in particular. It is a known danger that happens on animals
which causes internal obstruction and gradual death from hunger. In a similar way people who are infected with HIV get sickness (AIDS) which lead to gradual death. The term ‘winning lotto’ also emerged but from Lesotho and was interpreted as ‘playing dice with fate and getting the winning number HIV and AIDS’. In South Africa, there was a term ‘joining www’ which was for HIV infected people who have since joined the growing network of PLWH. The other terms made reference to numbers such as ‘has number eight’, ‘standard eight’, ‘three names’, ‘three letters’, ‘three words’ which mostly made reference to HIV or/and the shape of HIV and AIDS ribbons. Uys et al (2005) observed that all the terms were usually mentioned in low tones indicating that people viewed PLWH with fear. Thus, the scholars concluded that the negative descriptions, perceptions, labeling increase distress and stigma on PLWH. Though this is case, the scholars observed that stigma can hardly be eliminated and as such they proposed that health service providers need to use factual reference to HIV and AIDS as well as people living with HIV and AIDS.

In a related study in Botswana, Heald (2002) people had a different perception of HIV and AIDS. They took the pandemic as not a new disease but that it was an old disease that has just being vitalized by acquiring new virulence due to decay in traditional and cultural mores. They referred to HIV and AIDS as tonono a disease the emerge as a result of having sex with a menstruating woman; thibamo a disease that comes when one sleeps with a ‘polluted’ woman, the one who had an abnormal delivery; and mopakwane a disease materializes when a couple or parent have sex within three month of giving birth (Heald 2002). Heald (2002) observed that thibamo actually had symptoms that overlap with tuberculosis. Thus, they not only regarded women as the source of infection but also that sexual life is a set of rules that had to be followed or else the consequences would be HIV and AIDS. The barring of having sexual activity with women did not only dwell on three months after giving birth, during menstruation but also a year after the death of a husband. Thus to some Tswana people HIV is the end result of disregarding nature tholego, taboos practices meila or cultural practices ngwao. Other Tswanas took the Biblical approach of analysing HIV and AIDS existence by saying that AIDS was a punishment from God in the same God punished Sodom and Gomorrah (Heald 2002). People even blamed the government for spreading the disease by encouraging the usage of condoms. Heald’s (2002) study illustrate a battle line between the traditional beliefs and practices on the one hand and
government biomedical approaches. Thus Heald (2002) concluded that the campaign of ABC in Botswana whose one of them was presented as ‘avoiding AIDS as easy as ABC’ is not easy at all as the government has to fight all the above beliefs and traditional practices for the campaign on behavioral change and prevention to be successful.

On HIV and AIDS related experiences in Zimbabwe, Wood et al (2006) found that children who are directly affected need to be spoken to openly. These researchers also established that using euphemisms when explaining an illness or death to children who are directly affected confuse them and in turn lead to inability to grieve appropriately. Wood et al (2006) studied narratives of orphans and observed that people did not refer to HIV and AIDS by their names but used indirect terminologies, expressions or euphemisms. They refereed to HIV and AIDS as ‘the disease’, ‘the long illness that came recently’, ‘the illness of the body’, ‘what’s there these days’, ‘the sickness of the tsotsis, criminals, gangster’ and in local language they call this chirimere chamatsotsi’, and ‘a tiny thing that has been discovered utachiwana’. Wood et al (2006) further found that caregivers or guardians were often ill-prepared to pinpoint and handle children’s suffering confidently. These researchers observed that the cultural background and practices could be the root cause. They noted that Ndebele people refrain from saying that someone has died. They say ‘someone has gone away and they will meet him or her again’. Although the scholars felt that this was helping the children with their grieving over the losses but the Ndebele practice provide a sense of hope and faith in children by referring to the situation (death) as a temporary condition.

Magwaza (2003) aimed to identify HIV and AIDS discourse in Kwa-Zulu Natal (KZN). He found that widely used terms for HIV and AIDS include ‘war’ because it was regarded as a threat to the community, ‘enemy’, ‘a killer that destroys everything’, and locally were called ingculaza/yimpi/yisitha/ngumashayabhuqe (Magwaza 2003). This study illustrated the positive and negative attitudes people had towards HIV and AIDS. Some people termed HIV and AIDS as ‘death sentence’ ingculaza yisigwobo sentambo/ingculaza ukufa one who gives the death sentence or God or partner or personified virus are the ones giving the death sentences. Thus they regarded HIV and AIDS as punitive measure for some wrong doing. Others called it ‘cancer’ ingculaza yikhensa/ngumdlavuza. They regarded it as the disease that destroys cells in
the body the same way AIDS destroys people (Magwaza 2003). Apart from giving HIV and AIDS different terminologies, respondents in KZN had the attitude of regarding HIV and AIDS as the disease for ‘others’. They said, according to Magwaza (2003) that HIV and AIDS came with foreigners, prostitutes, drug users or people in cities and towns. Magwaza (2003) concluded by retorting that no individual is immune to HIV.

Zisser and Francis (2006) who did a study on HIV and AIDS messages produced by loveLife in South Africa observed that most messages were ambiguous. These scholars arrived at this conclusion after asking the youth to interpret some messages by loveLife and one of the messages was ‘Get a life’ which was displayed on a billboard. On this message, the youth interpreted it as ‘enjoy your youth’, ‘love yourself’, ‘live to the fullest’, ‘respect yourself’ and many more. This is in contrast with loveLife intended meaning ‘gain confidence, set goals and fulfill aspirations’ (Zisser and Francis 2006). The researchers also observed that some youth distanced themselves from the message by retorting like ‘I didn’t think they [the images] concerned me, or had to do with me’ (Zisser and Francis 2006:193). Therefore the study proposed that when campaign organisations are producing messages for public consumption they need to uphold their obligation to creating and employing efficient messages on prevention which would be easily consumed by people who are ‘already bored’ with such messages (Zisser and Francis 2006).

Kana (2003) found that sexuality was a taboo in Burundi and as such cannot be mentioned. It is regarded as impolite to speak about it (Kana 2003). Terms related to sex are mostly used for insulting. Therefore, there is usually no discussion about HIV and AIDS since the pandemic is associated with sex. Kana (2003) further observed that regardless or one’s HIV status, motherhood is highly important. Thus women with no children are labeled as ‘ingumba’ (not being able to give birth and one who gets a children out of wedlock is uwavyaye ishushu . a woman who is divorced is called ‘igisubiramuhira’ and [igi-] is a prefix for things not people. By using such as prefix for a person they imply that that person is a ‘thing’ not human. These labels force women to stay in marriages whether they are being abused or not. Women also make sure they give birth even when they are HIV positive (Kana 2003). Marriage in Burundi is also for economic reasons where parents arrange marriage for young girls to get the dowry. Kana
(2003) in conclusion proposed that traditional practices should be used in the fight against HIV and AIDS because in such way women will gain a voice.

In a similar research done in Tanzania (Dilger 2003) found that HIV and AIDS is referred to as *chira*. *Chira* is a disease that comes because of infringement of some traditional rites especially during harvest and mourning period (Dilger 2003). Dilger (2003) told a story of family which was affected by HIV and was trying to point fingers. It was a game of blame where a family blamed a second wife of bringing HIV into a polygamous marriage. People never wanted to talk publicly although they knew the real details of how HIV infected the family (Kana 2003). Kana (2003) noticed that discourse around HIV and AIDS contributed to stigma hence people chose to keep quiet or referred to it as *chira*. Kana (2003) proposed openness on HIV and AIDS issues to avoid the blaming game.

Bond *et al* (2002) found that most HIV and AIDS terminologies exhibit the attitude of denial by people in Zambia. Those affected by the pandemic hide behind witchcraft, tuberculosis or any other disease. This happened because the terms for HIV and AIDS stigmatized people living with HIV and AIDS (PLWH). Bond *et al* (2002) observed that HIV positive women are the most vulnerable group of people who have more terms referred to them than men. Some terms comprised *chihule* ‘prostitute’, ‘the walking bed’, *makulingo* (women who exchange sex for money) and many more. Men also had labels but not as much. One of the labels was *mombwe* which was equivalent to the term ‘prostitute’ (Bond *et al* 2002). In their conclusion Bond et al proposed that that workplace programs for health service providers (HSP) should be put in place as there seemed to be inadequate knowledge about HIV and AIDS amongst people as well HSP. they also proposed an increase in the coverage of community based-help for PLWH, an intervention on support by strengthening prevention of HIV from mother to child transmission (PMTCT) and lastly to give information that dismiss uncertainties and correct misunderstandings and false beliefs about HIV and AIDS.

### 3.3 New technology and HIV and AIDS

Norton *et al* (2011) noted that access to HIV and AIDS information remained a challenge, especially among the youth. Norton *et al* (2011) did their study in Uganda. Their concern was
that there was gap in the research field of HIV and AIDS since researchers concentrated their studies only on issues of stigma, risk, sexual identity, poor resources on HIV and AIDS. Djite (2008) proposed that there was need for research on HIV and AIDS and sociolinguistics and this was the gap Norton et al (2011) tried to bridge. These researchers have done several other studies in the same country Uganda which included multimodal instructions, peer education, youth clubs, and sexual health literacy for the young Ugandan women and language policy. Norton et al (2011) now turned to barriers that the youth face in getting information on HIV and AIDS. They noted that health services in Uganda are insufficient and unfriendly to the youth (p569). Therefore these researchers developed a digital literacy course for the youth so that they can access HIV and AIDS information. Norton et al found that youth that participated in the research felt mentally modernized. They also found that gendered identities were prominent. Thus the study proposed that teachers in schools take education as what is desired by learners in these times of global changes. They further found that digital literacy was greatly fruitful for accessing HIV and AIDS information. Thus Norton et al proposed the need for more research of this type.

Cope and Kalantzis (2009) in their study of new literacies scrutinized the shifting of teaching and learning procedures. They observed that there were developments in communication and presentation of education materials. There are now gadgets such as laptops, projectors, power point slide presentations and many more. The old type of education using the system of writing on chalkboard with chalk is diminishing. Cope and Kalantzis (2009) answered questions of why, what and how to understand the shifts in literacy education. They noted that multilingualism as well regarding English as a global language played roles in interpretation of what happened to meaning making. They observed that meaning making takes that form of active and dynamic transformation which comprise of multimodal forms, linguistics forms, visual, audio, gestural and spatial modes. However, they found that analysis of such modes involved different teaching modalities or moves. With new technology such as email, SMS, iPods, wikis, and blogs required new spaces and so learning and teaching literacy had to assume these. Thus Cope and Kalantzis (2009) propose that there should be new conversion of meaning making through open-ended questions such as:
Representational: to describe the level meaning refer
Social: to establish how meaning get linked to people
Structural: to institute how meanings are prepared
Intertextual: to ascertain how meaning immerse into the bigger world of meanings
Ideological: to establish to whom are the meanings intended to serve (Cope and Kalantzis 2009).

To answer the open-ended questions, Cope and Kalantzis (2009) found that only a semiotic perspective can be adopted by positioning thoughts, inventive re-appropriation at the hub of representation. These researchers observed that designed text becomes redesigned. Thus something that has been designed becomes someone’s new resource. Through the designing and redesigning different modalities for meaning making are applied such as written language, oral language, visual representation, audio representation, tactile representation, gestural representation, representation of oneself and spatial representation. Some of modalities were adopted from Kress and van Leeuwen (2006). However tactile representation and representation of oneself are new. Tactile representation comprise of smell, touch, taste which include physical like food tasting or smelling (Cope and Kalantzis 2009). Representation of oneself Cope and Kalantzis claimed that it was a psychological representation that involves emotions and the mind. These scholars concurred with Kress (2003) that writing is disappearing and being replaced by the increase in multimodality. In their conclusion Cope and Kalantzis (2009) observed that concepts that were developed in the past were being redefined, reformulated and reconstructed. Since there seemed to be continuity and renovation in teaching and learning literacies then there is need for having multiliteracies pedagogy because transformation is essential and stability is delusion (Cope and Kalantzis 2009).

Kalantzis et al (2003) found that learning need to work with change and diversity. These researchers observed that this can be achieved if broader new assessment practices were adopted and that would reduce time and costs. Kalantzis et al (2003) examined that skills and characteristics required for successful learning. They noted that meaning is made through the usage of multimodal approaches such as visual, aural, gestural and spatial patterns (also Cope and Kalantzis 2009). Kalantzis et al (2003) observed that the old system of learning and
assessing hinged on determined syllabi, textbook and both the teachers and students had to follow these for successful results. Thus the syllabi and textbook entail success or failure of students. Kalantzis et al (2003) noted that the old system of education was a form of slave production. Students were referred to as slaves towards to the syllabi and textbooks. These researchers claimed that the school curricula were full of facts about history, about science and about language. Studying involved memorising facts set of rules for grammar, correct spellings, knowing multiplication tables many more. Kalantzis et al observed that successful learning was about knowing correct answers. Students were hardly taught things that concerned knowledge of life and diversity. These days, on the other hand, new economy comprises sitting in front of a computer, using electric gadgets such as automatic manufacturing machines, or robots etcetera. The old systems of learning through the three Rs: reading, writing, and arithmetic, Kalantzis et al (2003) described as a ‘shopping list’, things-to be known through drilling. The researchers stemmed that the old system of studying had three major problems which were (i) it took knowledge as being sufficient foundation for life (ii) it regarded knowledge as having two extreme ends: right and wrong, and (iii) viewed knowledge as being gained only from authorities and accept it from authorities as being correct. Kalantzis et al (2003) observed that the above three ways of getting knowledge cannot be efficient these days and we are now in the era of creativeness, problem solving and dynamic participation. Thus the scholars suggested that subjects such as mathematics should be regarded as set of accurate answers but way of way of thinking, outlining some kinds of system and structures. Literacy should be a way of communicating not set of sentence -bound rules (Kalantzis et al 2003). Although the researchers noted that software was being more frequently replaced than the old system, which is a sign of short life, they recommended that learners and educators needed to adopt new skill and attributes for the continually emerging diversity and transformation. In addition, there should be diverse assessment strategies.

3.4 Shifts in HIV and AIDS studies
Since the discovery of HIV pandemic in the early 1980s, there have been different types of researches and studies globally. Parker (2001) observed that there have been shifts in the research areas. For instance, earlier reaches have been on behavioral risk which dwelt much on individuals (gays and lesbians) and this shifted to collective or shared cultural studies. Studies
were more on cultural symbols, meanings, rules than individual behavioral risk. Thus the shift has been from an outsider approach to insider collective life. Then Parker (2001) further noted that there has been another shift of area of research from cultural meaning to structural violence where political, economic factors are viewed as shaping sexual experiences (p168). He also observed that collective structure points to drawing distinctive responsiveness to socially and culturally determined discrepancies in supremacy between men and women.

3.5 Conclusion

From the reviewed literature on HIV and AIDS at a global and at regional levels (Africa), it is obvious that there is still a problem as to how messages are created, passed on and consumed by the community. The messages sent to the community are not consumed as expected by the producers and writers of the messages. The consumers interpret them according to their taste. If the HIV and AIDS messages are not consumed as expected then the expected impact on behaviour change in the measures taken against the HIV pandemic will have a long way to go. Thus the writers/producers and the community need to revisit the strategy for passing on HIV and AIDS information as some modes allow unpalatable word and phrases resulting in the consumers ignoring the mode altogether.

The chapter has shown that different modes of communication have been studied but there are still other modes which have not been examined at global level and yet they are being used for HIV and AIDS messages, as in the case of traditional nyau dances and SMS. Regarding the modes that have been studied, the studies concentrated on the language used, mass media such as radio television, billboards, pamphlets and how language was formulated but the impact that the messages have made on the consumers has hardly been researched, hence this study. Also some modes of communication have not been exhaustively explored, for example the use of proverbs and sayings to pass on the messages.

Lastly, the modes of communication that have been studied have not used theories of multimodality, resemiotisation and semiotic remediation to account for the impact that modes of HIV and AIDS communication would have on the community. Therefore, this study is unique in
its own context. The next chapter looks at the theories that have been used to analyse the data for this study.
CHAPTER FOUR: THEORETICAL AND ANALYTICAL FRAMEWORK

4.0 Introduction

This chapter elucidates the theoretical and analytical framework that was used in the study. The theoretical approach informing this study is that of social semiotics (O’Halloran 2004, O’Halloran 2011, Kress and van Leeuwen 1999, 1996, 2006, Kress 2003, Iedema 2003, Baldry 2000, 2006, Scollon and Scollon 2004). The essence of this study is that language use is no longer theorized as an isolated phenomenon but comprises of other social semiotic approaches for meaning-making which are multimodal. Thus, the Multimodal Discourse Analysis (MDA) theoretical approach is adopted for this study. Subsequently, Systemic Functional Linguistics theory (SFL) (Hodge and Kress 2006, Halliday 2004, 1994, 1985, 1988, Kress and van Leeuwen 1999, 1996, 2006, Kress 1997, 2003) has also been used in the study. Furthermore, since various social semiotic resources are resemiotised for meaning-making negotiations, the notion of resemiotisation becomes also an main theory to the study. Additionally, within multimodality, there is the notion of remediation with an element of repurposing. Although multimodality seems to overlap with remediation (Prior and Hengst 2010), considering the kind of data that was collected, the notion of repurposing – not in the sense of ‘rebranding’ – became auxiliary to the other theories.

As outlined in the earlier chapters, the exploration of modes of communication of HIV and AIDS messages is integral to the study, the way they resemiotise within and across different modalities as a means of transmitting the messages to target groups in both rural and urban areas in Malawi. The exploration asserts that communication involves two ends and is an ‘interactive social construct’ (Oketch 2006) where producers of messages, endeavour to fulfil their intention. HIV and AIDS will hereafter be referred to as ‘texts’. This study unravels how HIV and AIDS texts are remediated and repurposed as they move from one point to the other. Texts comprise of different formats such pictures, billboards, music, SMS, newspapers, traditional songs and so on. These texts were scrutinized to see how communities understand and interpret them. The modes of communication are also specifically investigated to scoop out why they are used for different communities and how they are regarded as tools for behaviour change in Malawi. A closer
examination of aspects of context-of-culture and context-of-situation, and particularly register and genre, are analysed in this study, with the aim of unearthing the underlying hidden attitudes, values, ideological and power relations and how they impact on dissemination of development information. An analysis of this kind will provide a deeper understanding of development as a social practice in the study area.

In a nutshell, the theoretical approaches that were used to analyze the HIV and AIDS texts are Multimodal Discourse Analysis (MDA), Resemiotisation, Semiotic Remediation (repurposing) and Systemic Functional Linguistics (SFL). The analysis used for this study is the nexus analysis approach (Scollon and Scollon 2003)

4.1 Multimodal discourse analysis and systemic functional linguistics

4.1.1 Multimodal discourse analysis

According to Martin and Rose (2004), modes of communication are constantly mixing genres and meaning, and that attracts the use of more than one modality to establish what is happening. Multimodality involves the use of different semiotics to convey information. In other words, multimodality means a combination of modes. These modes of communication include visual, graphic and audio. Multimodality entails “going beyond linguistics into social semiotics and taking into account as many modalities of communication as we can systematically describe” (Flewitt 2008, Norris 2004, Baldry 2008, Martin and Rose 2003:255, Lemke 2002). It is clear from the descriptions above that HIV and AIDS discourse in Malawi and elsewhere is displayed in different modes of communication. Following Iedema (2003), Oketch (2006) and other researchers, Stroud et al. (2008) posit that our semiotic landscape is becoming not only sophisticated but also populated with social and cultural discourse practices. This has led to ‘sound and image’ taking over the duties formerly done by words since the invention of the printing press, and thus to some extent displacing language (Kress and van Leeuwen 2006: 37). The new realities in the semiotic landscape are brought about by social and cultural factors, such as the intensification of linguistic and cultural diversity within the boundaries of nation-states, and by the weakening of these boundaries, due to multiculturalism, electronic media in
communication, and technologies of transport and global economic developments. Global flows of capital dissolve not only cultural and political boundaries but also semiotic boundaries (Kress and van Leeuwen, 2006: 34).

MDA is the grammar for visual design. ‘Grammar’ here is defined as a set of socially constructed resources for meaning-making, and not as a set of rules for the correct use of language (Kress and van Leeuwen 2006, Thurlow and Aiello 2007). The multimodal designs provide a revelation of intertextuality (Shuart-Faris and Bloome 2004).

Figure 4.1: Multimodal modes as applied to meaning-making and information dissemination (adopted from Oketch 2006:252)

The figure above demonstrates multimodal forms for analysing texts for meaning-making. Jameson (1991) and Harvey (1990) describe the combination of more than one mode of communication in transmitting messages as a feature of ‘post-modernity’ while Fairclough (2004) describes it as a ‘cultural facet’. It reveals that postmodernism has gone beyond the traditional print media for information dissemination. Information disbursement has moved from graphic only, mono-modality, to a multimodal combination of graphic, visual and audio based modalities. Kress (2003) de-emphasizes writing in exchange for an emphasis on other representational modes, such as pictures, sounds, films and so on. He claims that multimodality
provides an opportunity to broaden the researcher’s approach to how texts are viewed. O’Halloran (2011) observes that MDA extends the study of language *per se* to the study of language in combination with other resources such as images, scientific symbolism, gestures, actions, music and sound. MDA is concerned with semiotic resources and semantic expansions which take place as semiotic choices combine in multimodal phenomena. MDA is also concerned with the design of the production and distribution of multimodal resources in social settings (van Leeuwen 2008). Lemke (2002) goes further by introducing a reconstruction of the theory of multimodality to an expansion of meaning creation, ‘hypermodality’. Lemke (2002) claims that hypermodality involves the analysis of e-communication texts which he called ‘hypertexts’. Hypertexts or hypertextuality include electronic details such as internet icons and SMS style, in addition to traditional language, image and sound. Thurlow and Aiello (2007) observe that because globalism keeps reconfiguring itself, the global semioscape is constantly being refashioned too. These scholars observe that due to what it is referred to as globalization; larger airlines tend to re-brand to re-present themselves as up-to-date, competitive global players while smaller airlines try to keep up with constant reformulation of global capitalism. Thurlow and Aiello’s (2007) argument is that although all airlines re-brand, it does not necessarily mean that the playground is even (Thurlow and Aiello 2007:338). Those who started earlier are at an advantage as capital favours them. Re-branding therefore, although it is currently the ‘in-thing’ due to globalization, has a cost effect.

Norton (1997: 410) states that every time language is used, people are not only exchanging information with their interlocutors, they are also constantly organizing and reorganizing a sense of what they are and how they relate to the social world. Language serves as the medium by which messages are cautiously conveyed from speakers to listeners or writers to readers, using different formats of texts or modalities. SFL is very effective as a tool for the analysis and interpretation of texts, spoken or written (Martin *et al.*: 1997:2) and has proved very effective in analyzing the metafunctions arising from the interaction between producers/writers of texts and the target audience. As a theory, SFL is concerned with the relationship between language and other elements and aspects of social life, and its approach to linguistic analysis is oriented to the social character of texts (Fairclough, 2004). The important claim in Functional Grammar is that
language, which is a verbalized semiotic, is structured to communicate meanings which arise out of the context of use. In this sense, SFL is also described as a functional-semantic approach to semiotic analysis. This means that it explores how people use language in different contexts to perform social functions and how language is structured as a semiotic system (Eggins 1994, 2004). Burns and Coffin (2001) commend that Halliday, the architect of SFL, believed that language problems were often inadequately dealt with in existing grammars and linguistic theories which focused on language structure rather than language function; and sentence rather than text analysis. The SFL scaffold is designed to explain the inter-relationship between culture, society and language use. One of its central tenets is that behaviours, beliefs and values within a particular cultural and social environment influence and shape the overall language systems and language instances, as well as the way people use language in their everyday interactions in shaping the social and cultural contexts in which it operates. Thus, unlike Chomsky (1957, 1965), whose syntactical approach was towards language structure, SFL looks at social context. Multimodal texts with various semiotics are becoming common and sophisticated in the contemporary world (Lemke 2002, Thurlow and Aiello 2007). These accommodate the same Hallidayan social semiotics. Kress and van Leeuwen (2006) have shown how SFL can be applied in analyzing visual semiotics using Halliday’s tri-functional conceptualization of meaning. Kress and van Leeuwen (2006) extended the metafunctions to images using slightly new terminology: ‘representational’ instead of ‘ideational’; ‘interactive’ instead of ‘interpersonal’; and ‘compositional’ instead of ‘textual’ (Jewitt and Oyama 2001). Likewise, linguistic signs or images not only represent the world, but also represent interaction, and that can be done with or without accompanying written texts (Kress and van Leeuwen 2006, Carminda 2008). Thus in this study, SFL will not be used on its own but it will be used within the context of MDA. This is to ascertain how social relations and ideological positions which form part of language are shaped and how they affect different types of communication (van Dijk 2001, Fairclough 1995).

4.1.2 Systemic functional linguistics: The metafunctions
Kress and Van Leeuwen (2006) adopted and adapted Halliday’s (1985, 1996, 2004) SFL theoretical notion of ‘metafunctions’ to demonstrate the complete interconnectedness of linguistic and social context in focusing how people use language to make meanings with each
other as they carry on with their daily activities (Christie and Unsworth 2000:3). Kress and van Leeuwen (2006) adopted a top-down contextual approach (O’Halloran 2011) and O’Toole (2010) developed a bottom-up grammatical approach. Jewitt (2009b: 29) claims that a contextual approach equates with social semiotic multimodality and a grammatical approach equates with multimodal discourse analysis and all these derive from Halliday’s social semiotic approach to text, society and culture (Iedema 2003) grounded through three fundamental principles (O’Halloran 2011) which include the metafunctions. Christie (2005:11) claims that any language serves concurrently to create some facet of experience to confer relationships and to distinguish the language productively as messages are adequately apprehended. Language, in this case, can be in pictorial form, audio form or graphic form. O’Halloran (2011) and Lemke (1998) note that multimodal phenomena may be viewed metafunctionally, resulting in multiplicity of meaning. Thus, metafunctions are not specific to speech and writing but also pictures and sound. Below the researcher now furnishes an outline of each of the metafunctions in detail.

### 4.1.2.1 Representational (ideational/experiential) meaning

Kress and van Leeuwen (2006) are of the view that representation entails that sign-makers, producers and writers have to select forms and shapes from what they see and use in their real world to express what is on their mind. They have to choose something that is appropriate and probable in the given context. That, Kress and van Leeuwen (2006) believe, is the proper way of representing one’s world experience. Analogous to Halliday’s experiential metafunction, language has a representational function (Oketch 2006). The representational function exploits our world experience to depict an authentic picture of things, events and circumstances. It represents meanings of human experience which is carved out in the field of discourse (Butt et al 2000) or answers questions like ‘what topic’ the communication covers, that is, what the discourse is all ‘about’ (Eggins 2004). In functional linguistics, representation is done through the system of ‘transitivity’. Transitivity is presented through the concept of ‘processes’. Process, in turn, is the action of the verb and the relation the verb has with its other relations such as objects and subjects which most of the time are ‘participants’. The roles of participants are determined by the process in the transitivity system (Halliday 2004). On the other hand, the
visual semiotics also have a functional role in relation to the participants which Kress and van Leeuwen (1996, 2006) presented as having two patterns.

4.1.2.1.1 Pattern 1: narrative representation
Kress and van Leeuwen (2006) claim that pictures can be represented as static, dynamic, dry, conceptual and dramatic. Pictures depict the role of an actor and the role of the goal in the sense of ‘doings’ and ‘happenings’ respectively (Jewitt and Oyama, 2001: 141). With the narrative representation, there are two types of participants, namely (i) the interactive: these are the ones who do the action of communication in the sense of speaking, listening, writing reading et cetera; and (ii) represented: the ones who comprise the subject matter and include people and places, things both concrete and abstract (Kress and van Leeuwen 2006). Images can be read through processes as ‘vectors’, ‘tensions’ and ‘dynamic’ forces in the form of art (Arnheim 1974) as well as in the sense of semantic function through terms such as ‘actors’, ‘goal’ and ‘recipient’. Images – whether it is through processes of art, theory of vectors, tensions, and dynamic or functional linguistic actors, goal and recipient – connect their participants through diagonal lines which are called vectors. These vectors can be formed by body parts or tools in action (Kress and van Leeuwen 1996: 57). Thus participants from which the vector originates or forming vectors themselves, whether in part or whole, are regarded as ‘actors’ while the resultant structure to whom/which the action is aimed at is regarded as the ‘goal’. When visual images engage participants in action this is referred to as being transactional. Visual images with two participants, where one is the actor and the other a ‘goal’ and the two engage in some action or happenings which are taking place in a transactive relationship and an action is directed at some goal, while in images where there is one actor, those are said to be non-transactive. According to Jewitt and Oyama (2001:143) the concept of narrative in visual analysis demonstrates who is taking an active role and who is a passive actor in the visual text.

4.1.2.1.2 Pattern 2: Conceptual representation
Conceptual representations devise a blueprint for social constructs. Conceptual visual representation accommodates three divisions namely: the classificatory, the symbolic and the analytical (Kress and van Leeuwen 2006). These divisions classify, symbolise and analyse
places, people and things. Classificational processes relate “different people, places or things together in one picture, distributing them symmetrically across the picture space to show that they have something in common, that they belong to the same class” (Jewitt and Oyama (2001). The classificational processes present ‘overt’ taxonomies where one participant plays the role of a super-ordinate participant and ‘covert’ when all other participants are presented in symmetrical composition in a visual text.

Analytical processes, on the other hand, have seven subcategories of processes which are:

(i) the unstructured analytical processes which display the possessive attributive of the carrier but not the carrier itself. The participant is the possessor, the process is the possessive attribute and the goal is the possession;

(ii) temporal analytical processes which reveal a timeline. These can be in the form of actual or imaginary, horizontal or vertical lines or topographical or topological assembling of participants;

(iii) the exhaustive and inclusive analytical processes which exhibit the possessive attributive of the carrier and the participant being the carrier itself;

(iv) the conjoined and compound exhaustive possessive attributive where the attributes are fitted together (conjoined) like a ‘pie chart’;

(v) the topographical and topological analytical processes where structures are read accurately and topographically using the scaling system and participants are logically related in the visual text;

(vi) the dimensional and quantitative analytical process based on participants being measured by quantity and frequency; and lastly

(vii) the spatio-temporal analytical processes which can be dimensional, exhaustive, compounded or topographical. They are used for comparative analysis. Symbolic processes can either be attributive or suggestive images. Symbolic attributives are
not narrative while suggestive attributives usually have one participant who is the carrier (Kress and van Leeuwen 2006, Jewitt and Oyama 2001).

Representation meaning displays the relationship between the participants in the visual images which are represented by the producers and the readers / viewers of such visual texts. The producers attempt to construct mental images, interpretation and understanding of the viewers / readers of the texts. That is, they try to produce something that would make sense to the readers and viewers. However, the way producers/writers understand, produce and create images can be subjective and objective: subjective, in the sense that, images are seen from a particular point of view with a particular perspective; while objective images disregard the viewers. This leads us to the next metafunction: the interactive/interpersonal metafunction.

4.1.2.2 Interactive (interpersonal) meanings
Just like interpersonal meanings are comprehended in the course of the tenor of discourses or texts and deal with relationships and the participants and the roles they play socially, Halliday (1985), Kress and van Leeuwen (1996, 2006) argue that visual communication constitutes and maintains the interaction between the producers/writers and viewer/readers of the texts. There are however three types of relations: relations between represented participants (people, places and things); relations between the interactive (those doing the act of communicating) and represented participants to see the actors’ attitudes towards the communicated subject matter; and relations between interactive participants. Since images interact with viewers/listeners and readers, Kress and van Leeuwen (1996, 2006) propose that three aspects are taken as essential to the apprehension of meaning-making and these are distance, contact and point of view. All these generate an intricate and delicate relationship between the represented and the viewer / reader / listener. Contact can be defined as the way images attract viewers’ attention so that they look at them and in turn they establish a relationship with them. Kress and van Leeuwen (2006) propose the terms ‘demand’ and ‘offer’ to describe pictures that look directly at the viewers. Thus, contact in this case, establishes interaction with viewers. In functional linguistics, that is regarded as ‘giving and ‘demanding’ information which, according to Eggins (2004), when contact is
made in reference to speech, they are called ‘initiating’ and ‘responding’. Distance, on the other hand, also attracts viewers. Jewitt and Oyama (2001) observe that images bring people, places and things close to those viewing them. This depends on the size of the frame of picture. Lastly, point of view, according to Kress and van Leeuwen (2006), deals with the angle at which the picture is viewed, whether horizontal or vertical. The angle at which the image is viewed can determine the interpretation of the viewer/reader which in turn can make the picture subjective or not and that can be used to analyse communicative interaction between the visual images in posters, murals, and brochures, etcetera. Visual social semiotics helps to illuminate how structures of the image contribute to the representation of the different concepts in the multimodal texts (Oketch 2006).

4.1.2.3 Compositional (textual) meaning
The same way the textual metafunction features of grammar have the capacity to form texts, complexes of signs which have a coherent whole both internally with each other and externally with the rest of the context to which they are attached, similarly visual communication utilises three different compositional arrangements to guarantee that the images also cohere as absolute entities in order to realize a meaning. The three different compositional resources embrace: framing, information value, and salience and modality (Kress and van Leeuwen 2006). These resources direct viewers/readers on how to read and interpret the texts so that writers / producers / speakers are in line with their audience, the readers/viewers/listeners in this case (Butt et al 2000). Below the three compositional resources are discussed in detail.

4.1.2.3.1 Information value
Kress and van Leeuwen (1996, 2006), Martin and Rose (2004), Jewitt and Oyama (2001) agree that the organization of images depends on the position of the images textually. This is the position or the placement of the elements of participants, the way they connect themselves to each other and to the viewers/readers to provide them with specific information values in relation to diverse points of the images. The points of images include: left and right, top and bottom, and centre and margin (Jewitt and Oyama 2001). Martin and Rose (2004) call these points ‘polarized’ and ‘centre’, ‘vertical’ and ‘horizontal’.
4.1.2.3.1.1 The information value of ‘Left’ and ‘Right’
Pictures on the horizontal axis place elements such as participants either on the ‘left’ or on the ‘right’. Thus those occupying the ‘left’ position are referred to as ‘given’ and those on the ‘right’ are regarded as ‘new’. ‘Given’ is for something that the viewers/readers know already and are familiar with and in turn they create the point of departure for the message. The information on the ‘right’ is considered as ‘new’ because it is intended for something not yet known to the reader/viewer. It is something that attracts the attention of the reader/viewer (Kress and van Leeuwen 2006).

4.1.2.3.1.2 The Information value of ‘Top’ and ‘Bottom’
The ‘top’ and ‘bottom’ which Martin and Rose (2004) call the vertical axes are presented as ‘ideal and ‘real’ by Kress and van Leeuwen (1996, 2006). The ‘ideal’ is something idealised or a generalised essence of the information, hence it is the most salient part. The ‘real’ on the other hand provides more explicit, unpretentious, realistic and practical information.

4.1.2.3.1.3 The Information value of ‘Centre’ and ‘Margin’
Visual images may be arranged along the dimensions of ‘centre’ and ‘margin’ (Kress and van Leeuwen 2006, Martin and Rose 2004). The ‘centre’ being regarded as the focal point, anything placed at the centre of the image is referred to as the nucleus of the information. The centrality of the position of information makes all other elements become subservient and submissive to that which is at the centre. All elements which are submissive to the ‘central’ information are, therefore, called ‘margins’ and they are all equal. They cannot be classified as ‘given’ or ‘new’. They are all alike and indistinguishable. In turn, ‘centre’ acts as a mediator for all elements in an image.

Oketch (2006) observes that the compositional (textual) metafunction is essential to the target community when it comes to analysing multimodal texts. Oketch (2006) proposes that the
interpretation and understanding of multimodal texts rest on the understanding and interpretation of what is regarded as ‘new’ and ‘real’ and is placed at the ‘centre’ of an image.

4.1.2.3.2 Framing
Another important ingredient of compositional meaning is ‘framing’. Absence of framing signifies group identity and the stronger the presence of framing the more the element is represented as a separate unit of information. Elements in an image can either be ‘connected’ or ‘disconnected’ and that is called ‘framing’. They are connected in the sense that they are not ‘marked off from each other’ and disconnected when the elements are in contrast (Kress and van Leeuwen 2006). Jewitt and Oyama (2001) note that ‘the connection’ or ‘disconnection’ of elements can be realised through colour schemes, empty spaces and vectors in the image.

4.1.2.3.3 Salience
Visual texts can contain some elements or participants which can attract the attention of the viewers. These elements, which are more attractive than others, are referred to as being ‘salient’ (Kress and van Leeuwen 2006, Jewitt and Oyama 2001). Elements can be ‘salient’ with the use of colour contrasts, size contrast, or rhythms: use of notes and stressed syllables in speeches, pitches in music; distance and placement in the image is also significant. These make elements outstanding in comparison to other images and give them some kind of ‘weight’ over others. Salience is mostly used for multimodal texts and these are read and interpreted ‘perceptively’ or ‘non-perceptively’, depending on the viewer / listener / reader’s position.

4.1.2.3.4 Linear and non-linear compositional meaning
Texts can also be read and interpreted linearly or non-linearly (Kress and van Leeuwen 2006). This component applies to mainly visual texts such as billboards, newspapers, posters, brochures, texts on t-shirts, wall paintings and moving texts like movies and television adverts. The layout of these texts or the way they are programmed determines the way viewers / readers / listeners are going to read, understand and interpret them. This component of compositional meaning is
equally important for texts which are disseminated to the public, like HIV and AIDS texts. The ways the texts are read and viewed are called the ‘reading paths’.

4.1.2.3.4.1 Linear reading path
Linear is when the texts are read the way they are laid out, from left to right. If the language is written from right to left then linear would be from right to left. Linear is strictly coded (Kress and van Leeuwen 2006). Texts with moving pictures, like movies or television adverts, plummet under the linear reading path because they do not provide viewers with any option of how to read them. They are read the way they are programmed and devised (Kress and van Leeuwen 2006). Although this can be contested with the advancement of technology in the movie industry, movies are now produced in chapters, and for one to understand the story, one needs to understand what is going on in the first chapter, that is, how did the story start. Only when the viewer has seen the movie several times, can she/he choose to start with any chapter other than the first chapter. Thus the viewer can now choose to move away from the linear coding. Linear describes or imposes sequence on the viewer/reader so that the viewer/reader can realize meaning from the text. Such types of reading present the connectedness of the elements and no element can stand individually.

4.1.2.3.4.2 Non-linear reading path
Non-linear, being the opposite of linear, includes circular diagonal, spiral reading or/and flipping through the texts. This kind of reading path is common for texts like magazines where readers flip through first, searching for catching stories. Newspapers depend on the reader, if the reader is a politician she/he will start with reading political stories. If he/she is an athlete or sports-lover, he/she will start with the sports news section and so on. However, websites have multiple reading paths. For scientific texts the readers usually start with glancing at diagrammatic representations or charts and figures before reading the results (Gledhill 1994 cited in Kress and van Leeuwen 2006). This reading path usually makes use of emphatic and absolute devices such as italics, bold headings, diagrams, tables, striking and prominent pictures, stereotyped characters, etcetera. In this case, there is the use of highly coded individual elements of compositional meaning. These texts can exist in the form of the pragmatic logic of ‘centre’ and
‘margin’; ‘given’ and ‘new’ and the reader/viewer has to connect the different format of presentation (Kress and van Leeuwen 2006). This format of reading path is becoming common and the linear reading path is steadily losing its grip in textual reading, viewing and interpretation.

These two types of reading of texts, the linear and non-linear, constitute two modes of reading and two regimes of control over meaning (Kress and van Leeuwen 1996, 2006). This is essential for reading to understand how communities read and understand texts when making meaning. It also determines what can be regarded as salient for specific communities. Kress and van Leeuwen (2006) claim that members of diverse cultural categories probably have different hierarchies of salient, that is ‘salience’ is cultural and environmentally or geographically specific. This therefore became a useful tool for analysing the data for this study since the data came from different communities: rural and urban.

### 4.1.3 Materiality and meaning-making

The process of producing texts is regarded as materiality since it uses varied material objects as semiotic resources. A text is a material expression of signs and the process of production is a semiotic feature (Kress and van Leeuwen 2006). The material objects, which make a variety of representational and production practices using a variety of signifier resources organized as signifying systems, are called ‘modes and a variety of ‘media’ of signifier materials (Kress and van Leeuwen 2006: 210). Production uses different materials which include surfaces, rocks, paper, plastic, textile, wood and so on; substances such as ink, paint, light, *et cetera*; and tools like chisels, pens, brushes, pencils, stylus. Production systems are culture or society specific and are in three different forms: (i) those regarded as technology of the hand, for example, production done with the aid of the hand using pen, chisel and other tools; (ii) those produced through recording, the one for listening to and seeing and regarded as technology of the ear and eye; and lastly (iii) those productions which are more sophisticated: they use electronic equipment like computers, keyboards, and mice, with the aid of the eye, ear and hand all together. All these productions are evident in the data collected for this research. The data include texts that belong to all three categories of production, that is, some are recorded, others
hand written on walls and yet others computer produced. Thus producers of texts are becoming more and more resourceful in trying to come up with ways of disseminating information. Depending on the cultural environment where these texts are sent to, materiality could transmit different meanings: concrete could become abstract; material immaterial, substantial insubstantial and reality virtual (Kress and van Leeuwen 2006). Visual materiality is superior to verbal when foregrounding is involved. For instance, a poster on a wall attracts more attention than the wall itself. But does that designate that texts on walls, whether painted or pasted, carry more weight when it comes to the target group who are reading and viewing messages? That question will be answered in the coming chapters.

4.1.4 Modality: truth value
Kress and van Leeuwen (2006) propose that modality is integral to the analysis of visual texts. These scholars go on to note that modality refers to the truth value of linguistically realized statements about world experience (2006: 155) because visual images represent people, places and things as though they exist in reality. Truth value is essential in decision-making on what we hear or see and mostly the decisions that we make are subjective. Messages that are closer to reality are given more credibility than those that are not (Oketch 2006). When the writers and producers of messages make signs, posters, billboards et cetera, they choose what they regard as appropriate and conceivable. Therefore, writers/producers use modality markers such as auxiliary verbs, adjectives and adverbs in their texts. Modality markers that are used in the construction of the messages can present meanings of truth or falsehood, fact or fiction, certainty or doubt, credibility or unreliability (Kress and van Leeuwen 2006). They provide a shared truth with readers and listeners. They establish an imaginary and illusory ‘we’ as if to demonstrate everybody’s involvement. Thus Kress and van Leeuwen (2006) observe that the social theory of truth cannot on its own create the absolute truth or untruth of representation but it can only demonstrate whether a given ‘proposition’ of visual, verbal or audio is regarded as true or not. Furthermore, these scholars elaborate that truth, which is a construct of semiosis, hinges on a social group to establish the ‘truth value’. As long as each social group has its own values and beliefs then ‘truth values’ will differ. This is very essential since this study is analyzing two different social groups: urban and rural. Consequently their ‘truth values’, even when they are presented with similar texts, will differ because of their different social values and beliefs.
Modality markers just help readers and viewers to interpret and understand the messages, but how they unravel the ‘truth value’, depends on the community’s social values and beliefs. Oketch (2006) remarks that it is worth noting that ‘reality’ itself is based on convention which is culturally and contextually bound and which may appear as natural to one person but not necessarily so with another. This will be outlined in detail in the coming chapters.

Modality markers come in different degrees and distinctions. All the distinctions of modality markers are categorized into two distinctive categories of (i) naturalistic and (ii) scientific. When modality is seen as equal or close to reality, the text is regarded as naturalistic, while scientific modality is based on what things are in general (Kress and van Leeuwen 2006, Oketch 2006). These scholars point out that naturalistic modality guarantees higher modality while scientific modality is regarded as low modality. The distinction of modality is thus based on reality and the veracity value of a visual and moving text, and certainly those that are low in modality will be contested and not taken seriously as opposed to those with a high modality. Modality judgment, apart from the level of realism or abstraction through modality markers, also depends on the colour used in texts. Colour creates coherence in texts. Thus colour, whether light, saturated, deep, modulated or flat, plays a role in finding the ‘truth value’.

4.2 Resemiotisation

Multimodality, which is regarded as a post-modern phenomenon with multiple semiotics, has as its extension, resemiotisation. Iedema (2003:41), and Stroud and Mpendukana (2009) observe that resemiotisation is about meaning-making, shifts from context to context, from one mode of communication to another, from practice to practice, or from one stage of a practice to the next. O’Halloran (2011) observes that resemiotisation takes place within the unfolding multimodal discourse itself, as the discourse shifts between different resources and across different contexts as social practices are made known. Resemiotisation involves a reconstruction of meaning as semiotic choices change over place and time. Lemke (1998) claims that resemiotisation results in semantic alterations as choices from diverse semiotic resources are not proportionate. Resemiotisation provides the analytical resources for tracing the translation and interpretation of
semiotics from one form to the other. It focuses on how some meaning-makings harbour a general accessibility and negotiability such as ordinary talk, gesture and posture while others require and embody considerable investment of resources such as brochures, music, jingles and so on. Stroud and Mpendukana (2009: 371) argue that resemiotisation entails remodulation or reframing of discourses and modalities, contextualization and recontextualisation. This is in agreement with Iedema’s (2003:30) proposal that resemiotisation should attend to the “inevitably transformative dynamics of socially situated meaning-making processes”, acknowledging the shifting and re-ordering of textual meanings. Furthermore, Mpendukana (2009) adds that to deal with resemiotisation is to find out how discourses are encoded across semiotics in different kinds of technology, such as

- visuals: images, both still or mobile;
- written: newspapers, brochures, billboards, leaflets, text mobile messages and so on;
- electronic: television and radio.

The end result of resemiotisation can be equated to intertextuality in the sense that discourses are disseminated through multimodal communication and that within one mode there is evidence of other multimodal texts. This indicates linguistic creativity, mobility, and transformation. Thus, resemiotisation takes an interest in how social, cultural and historical situations are realized and recontextualised.

Resemiotisation grants the analytical means for:

- tracing how semiotics are translated from one into the other as social processes unfold;
- asking why some semiotics (rather than others) are mobilized to do certain things at certain times (Iedema 2003: 29, Rose 1999).

Iedema (2010:142) observes that resemiotisation demonstrates how practices become apparent with intersemiotic shifts. He provides examples where linguistic meanings are reframed and become non-linguistic or the linguistic meanings become absent, ante-predicative becoming
predicative (Descombes 1980, Edwards 1990 and Habermas (1987, cited in Hengst 2010)). Unlike Fairclough’s (1992) concept of intersemiotic transformations, resemiotisation concentrates on ‘the principle and the possibility of social change’. Resemiotisation hinges on ‘transfigurations’ shifts from somewhat transitory or transient to sturdy or enduring social practices and resources (Iedema 2010). It borders and determines social difference reconstruction in new-fangled echelons of semiotic organization (Iedema 2010:143). Iedema argues further that resemiotisation is not describable in terms of textual transformation, although he admits that it may partly be manifested to some extent, but that it can be described in terms of social or organizational expansions. In his study of public policy shifting, Iedema (2010) observes that resemiotisation is integral to designing discernible issues like policy reforms (2010: 154) since policy reforms have become more complex and sophisticated as well as multisemiotic. Resemiotisation divulges networks, which are usually hidden and stacked away, through what he calls, ‘open disclosure trajectory’ through shifting from linguistification which, according to Lupton and McLean (1998), faced major opposition in the 1990s to delinguistification: visual, colourful and design based representations.

### 4.3 Remediation

Prior and Hengst (2010) explore semiotic remediation as a discourse practice in the sense that, just as people account and re-voice other people’s words in talk, they also habitually re-perform others’ gestures and actions, repurpose objects, represent ideas in different media and remake both their environments and themselves. Such reworking involves numerous categories of signs such as talk, gesture, and writing, designing of spaces and making of objects. Prior, Hengst, Roozen and Shipka (2006: 734) claim that taking up semiotic remediation as a social practice draws attention to the diverse ways that human and non-human semiotic performances, histories or images are represented and re-used across modes, media and chains of activity. Therefore, the centrality of remediation stems from ways that activity is remediated through taking up materials at hand, putting them to present use and thus producing transformed circumstances for prospective accomplishment. This entails not mediating anew but using the old semiotics for reading a current situation. It budges away from re-branding where re-branding is re-designing in order to abide by the global ‘scapes’ such as ethnoscapes, mediascapes, technoscapes,
financescapes and ideoscapes (Thurlow and Aiello, 2007: 308). Remediation hubs on the positioned and mediated nature of activity and at the same time identifies the subterranean amalgamation of semiotic mediation with the practices of socio-cultural life on a daily basis (Prior and Hengst, 2010: 6). This answers the questions of how individuals deal with different modes of communication across different times and environments. Bolter and Grusin (1999), cited by Prior and Hengst (2010), explore how novels or narratives are transformed into movies that spin into video games that lead to web fanzines and branded product lines, a process also referred to as ‘repurposing’. Although this dwells on how semiotic artefacts are understood and include manifold semiotic modes such as texts, images, sound, and the internet, Prior and Hengst (2010) argue that that does not focus on the emergent remediation of the situated production and reception of those artefacts. Although multimodality and repurposing seem to overlap, messages that were originally used orally and later printed onto a board would be an interpretation of remediation, but if the board was used for something else formerly then it would be repurposing (Irvine 2010:236). Thus remediation indexes to broader forms of communicative methods rather than just transferring information from one mode of communication to another.

4.4 Nexus analysis approach
Since this study engaged a nexus analysis approach, with the help of the theories above, the nexus analysis is also used to analyse the data for this study. According to Scollon and Scollon (2003), nexus analysis is germane to the study of discourses, social discourses in particular. It involves identifying social issues, social actors, cycles or circulation of discourse, zone and geographical identification, and strategies of establishing and getting answers to the problem in question. Scollon and Scollon (2003) present nexus analysis diagrammatically as shown below:
4.4.1 Transformations and Resemiotisation

Scollon and Scollon (2003: 16) observe that social activities habitually circulate. They cycle from one variety of action/object or discourse into another. For instance, according to these scholars, an agenda or a schema on paper ‘may become a sequence of topics that are discussed orally at a meeting’. Then the discussions which are habitually done orally at the meeting are recorded as ‘minutes’. The proceedings in turn become the focal point in decision-making at higher levels of management. The proceedings end up as policy statements. Consequently, the policy statements materialise into action to be executed socially. Thus, this semiotic cycle, as Scollon and Scollon (2003) call it, has moved from one form of semiotic mode to another, from text to speech and back to text and then into objects or actions. This transformation is considered resemiotisation by Iedema (2001, 2003).

Thus, this nexus practice is adopted in order to follow the cycle or map in which HIV and AIDS messages move, transform and resemiotise. Nexus analysis is tied up in social discourses and in this study it is the primary approach. Discourse is overt throughout a nexus analysis which is found in six structures, as follows:

- Speech of the participants in mediated actions such as television adverts, *etcetera* (whether foregrounded or backgrounded),

Figure 4.2: Activities of nexus analysis (Scollon and Scollon 2003)
• Texts used as mediational means (whether foregrounded or backgrounded) such as books, magazines, train schedules, street signs, logos and brand names, directions for use on packages and other objects,

• Images and other semiotic systems used as mediational means (pictures, gestures, manner of dressing, designs of buildings and other places, works of art as focal points or as decorations),

• Submerged in the historical body of the participants and in the practices in which they engage,

• Submerged in the design of the built environment and objects,

• Speech or writing or images of the analysts in conducting the nexus analysis (either within or apart from the moment of the mediated action) (Scollon and Scollon 2003:18)

Thus, mediated discourse analysis is found to be essential and fundamental in the analysis of organized HIV and AIDS texts.

4.4.2 Motive analysis
Grammar of Motive was first introduced by Kenneth Burke (Scollon and Scollon 2003). It unveils the way individuals work in their daily social life. Kenneth Burke’s book entitled Grammar of Motives explains that the actions of people or institutions start with imaginary thinking and thoughts, which end up being discussed at different angles. From these angles, Burke proposes five points of view of which four can be tackled at any angle, but all are connected to the fifth point. The five points of view are: (i) the scene, (ii) the social actor (Burke’s ‘agent’), (iii) the mediational means (Burke’s ‘agency’), (iv) the mediated action (Burke’s ‘act’), and (v) the purpose. Each of these points of view forms an expounding position or a discursive motive for the action (Burke, cited by Scollon and Scollon 2003). The figure below shows these five explanatory positions.
Whenever an individual commences a production or an industry they usually attempt to use the latest available technology in town. In so doing, they strive to be on par with the rest of the world technologically. This is like one NGO in Malawi which uses ‘SMS’ to pass on HIV and AIDS messages to the target group. They articulate that ‘this is how people do things now’ (Scollon and Scollon 2003). This, according to Burke’s Grammar of Motive, is termed as ‘scene’. When operating his work or industry, he himself is converted into the ‘social actor’
because he works in a social atmosphere. Being a social actor, he would give an explanation as to why he is exploiting the novel technology by alluding to the fact that he is attempting to develop his own ability with the new technology. With the ‘mediational means’ the social actor would give an explanation that it is the only means there is at his / her disposal to execute the chore. With ‘purpose’ the social actor would say the reason why that technology is used is that it is the most competent and plausible way to run an excellent business. Scollon and Scollon (2003) outline that even when the actor does not like the technology, or if it is the most efficient one, then it is regarded as the purpose. The ‘mediated action’ is connected to the four points of view because any of them can lead to the ‘mediated action’. Scollon and Scollon (2003) propose that this is the action itself. It is the sequential action of each of them. Thus,

a motive analysis is an aspect of discourse analysis which seeks to understand how participants, including the analyst, are positioning themselves in giving explanations for their actions. Are they taking on full responsibility? Are they displacing responsibility to society or ‘people’, or perhaps to technology, or are they giving a purely goal-driven (purpose) explanation? Or are they, as in the last case, just claiming that things have just happened? (Scollon and Scollon 2003: 21).

These questions test the subjectivity and objectivity of the participants as well as the researchers. Thus, the MDA used for analysis of the data in this study took this approach to understand why producers/writers of HIV and AIDS texts used the modes that they used.

Therefore, the objective of a motive analysis is not to try to establish any fundamental underlying or ‘true’ motive to ascertain how participants distinguish actions and their rationalizations, and secondly, to check if taking a different view may alter the nature of the actions themselves (Scollon and Scollon 2003:21).
4.5 Relevance of the theoretical framework

In this section the researcher relates the theories to the data. The researcher has shown how relevant the theories are and how they have been used in analysing the collated data.

4.5.1 Relevance of MDA and SFL

Sending messages on HIV and AIDS to the community can be quite daunting. Communicating such messages engages interactants and participants in discourse within a socio-cultural context using linguistic resources in order to arrest the intended meaning. Such meanings, when they get to the community, make an immense impact on social action and behavioural change towards the fight against the HIV pandemic and consequently through the impact the community constructs and reconstructs their own social world. Using the various variables, the focus of this study has been on intertextuality, framing, tenor, field or locality, mode, genre, register, field, of discourse. As explained above, SFL is used and immersed within MDA. This presents an excellent investigative text-based approach to elucidate the metafunctions of language in a detailed manner in the study area and how this impacts on the dissemination and attainment of HIV and AIDS texts.

MDA and SFL have both been used for this study, because language is viewed as a meaning-making system for functional purposes and HIV and AIDS messages are multimodal in nature. Thus this study of HIV and AIDS texts has moved from analysing texts using the mono-modal system of communication to multimodal social semiotics. Any individual using language has a choice of how to create and interpret / understand texts for meaning-making. In turn, the study has used varied concepts because of the diverse people and institutions who attempt to disburse information to the community using different methods. Both MDA and SFL played principally important roles in exploring the choices that producers and writers make within the viewpoint of the institutional mandates.

Therefore, the study settled for both MDA and SFL theories as being suitable for the analysis of HIV and AIDS discourses and used the theories to explicate and spell out how different communities make meanings, in what context, and for what purposes. The measures taken
against the HIV pandemic, which seem to be dragging its feet, depend on meaning-making and reciprocal understanding and interpretation of the HIV and AIDS texts. SFL was also ideal for analyzing texts, their usage, and relationship to the community’s socio-cultural beliefs. Resemiotisation and semiotic remediation fall within the theories of SFL and MDA.

4.5.2 Relevance of resemiotisation

Resemiotisation deals with the techniques of transmitting meanings of social practices across different modalities. It looks into the ‘inevitably transformative dynamics of socially situated meaning-making processes’ (Iedema 2003: 30). In addition, it unravels how meanings of texts are changed, re-ordered and become mobile as messages in multimodality trek across contexts and practices. Exploring the way messages are resemiotised means studying the way discourses are encoded across semiotic artefacts such as books, visuals, buildings, and signage, scientific technologies that embody considerable investment of resources such as expensively produced brochures, films, architecture, and machines; and different forms of spoken media that involve issues such as ordinary talk, gesture and posture (Iedema 2003: 49, Mpendukana 2009).

Therefore, the notion of resemiotisation is relevant to this study, as it looks at the mobility of linguistic resources, how messages move in different forms of modality, and the intertextuality of the texts within and across different modalities that provide understanding and interpretation of social meanings. As outlined earlier on, resemiotisation and intertextuality over-mingle and intertwine in that messages are disseminated across a diversity of modalities. The sole message of HIV and AIDS is observed in audio modalities such as radio and television; graphic modalities, for instance, posters, billboards, brochures, calendars, t-shirts, newspapers and so on; visual modalities, for example, posters, television, billboards, brochures, calendars, t-shirts, newspapers, etcetera. Some messages are resemiotised within a lone mode, for instance, television, where there is not only visual and audio, but graphic too. Furthermore, resemiotisation was appropriate because the study involved a comparative study of the understanding and interpretation of HIV and AIDS texts between rural and urban communities.
4.5.3 Relevance of remediation

HIV and AIDS texts have been mediated in different formats. However, there are some messages that have been remediated. Scholars have written of semiotic remediation by focusing on multimodality and transfers among media. Irvine (2010: 236) argues that to concentrate on ‘remediation’ in terms of media would mean defining the concept of modality in the sense of media and that would ‘overlook many interesting topics’. However, the definition of remediation by Prior and Hengst (2010), Irvine (2010) claims, proposes a view of remediation that stems from ‘repurposing’. Remediation, as explained earlier, implies taking up some previously existing form and deploying it in a new move, with a new purpose. This notion of ‘repurposing’ is what is of interest and relevance to this study. The notion is appropriate because some techniques of disbursing HIV and AIDS information to the community have existed since time immemorial, the time of oral tradition (as in the case of Malawi) and are now being used with a new purpose, the purpose of disseminating HIV and AIDS messages.

In summary, since one theory could not explain all the variables that emerged in this study, such as interpretation / understanding and the impact of HIV and AIDS messages, values of HIV and AIDS against cultural beliefs and practices, power and dominance against understanding the HIV pandemic, MDA, SFL, resemiotisation and remediation have all demonstrated that they are helpful and practical in the analysis of the data collected. The theories have provided an explanatory and interpretive outline for linguistic resources, performative, visual and audio semiotics as a means for meaning-making.

4.6 Conclusion

This chapter has discussed four theories that are pertinent to this study and these are Multimodality theory, Systemic Functional Linguistics, resemiotisation and remediation. Each theory has been explained in detail by outlining its uniqueness and its fundamental view. It is apparent that these theories are essential tools for the analysis of discourses that involve social practices. All the theories have been used to unravel the ambiguous messages and the diversity of meanings and interpretations in the HIV and AIDS texts produced for public consumption as a way of taking measures against the HIV pandemic. The analytical framework having been
elucidated, the researcher now advances to provide the research methodology that was utilised for assembling the data for this study.
CHAPTER FIVE: RESEARCH DESIGN AND METHODOLOGY

5.0 Introduction
This chapter presents the research design and methodology that the study adopted. The chapter presents the outline of the research pattern, sample design and sample size, instruments of data collection, the data collection process and the setbacks that were encountered as the research was being carried out in the field and how the data was analyzed. The chapter further presents the criteria behind the selection of informants and interviewees.

5.1 Towards an eclectic research design
As pointed out previously, this study examines the impact of modes of communication in understanding HIV and AIDS messages. HIV and AIDS messages, when they are produced/written by producers/writers - in this case NGOs and the government institution NAC in the eastern region of Malawi - are sent to the community or the target group, but whether or not these have an impact on the target group is what is discussed in this thesis. The researcher, therefore, had used both qualitative and quantitative research paradigms. This research involved collecting posters, radio programmes, television programmes, traditional dances/songs, modern music; mobile phone short message services (SMS), newspapers, and billboards. Analyzing such data critically focuses on the meanings, understanding and interpretation of the community in comparison to the producers/writers of the messages of the participants, and it entails describing a process that is meaningful and persuasive in language (Punch 1998, Denzin and Lincoln 2003, Creswell 1994).

The study involved the analysis of documents as well as people’s interpretations of the documents at the producer/writer’s level, and at the level of the target communities, both rural and urban. Qualitative research is defined as a research that derives data from observation, interviews, or verbal interactions and focuses on the meanings and interpretations of the participants (Holloway and Wheeler 1995). It is further defined as a free-form research technique that is used to gain insight into the underlying issues surrounding a research problem by gathering non-statistical feedback and opinions rooted in people’s feelings, attitudes,

2 healthlinks.washington.edu/howto/measurement/glossary/
motivations, values, perceptions, and usage behaviour. Lindlof and Taylor (2002:19) further explain that qualitative research is ‘the way how humans articulate and interpret their social and personal interests.’ This type of research is normally conducted with small groups of people, small samples which are sometimes also called *soft data*. Thus the aims of qualitative research and analysis are:

- to develop conceptual definitions;
- to develop typologies and classifications;
- to explore associations between attitudes, behaviours and experiences;
- to develop explanations of phenomena; and
- to generate new ideas and theories. (Lindlof and Taylor 2002)

While qualitative research focuses on an inductive research process that involves the collection and analysis of non-numerical data to search for patterns, themes, and holistic features, quantitative research, on the other hand, is defined as a deductive research process and involves the collection and analysis of numerical data to identify statistical relations of variables (Creswell 1998).

By applying both research methods, the researcher accessed the real and valid situation under investigation, by concentrating on samples and many variables to come up with rich and detailed data. Creswell (1998) and Patton (1987) explicate that researchers ought to provide an in-depth and detailed account of the theme in question, through direct quotation and careful description of situations, events, people, interactions, environment, literacy level and economic status, which are precisely what this study hinges on. In order to clearly understand the nature of modes of communication and resemiotisation of HIV and AIDS messages in the Eastern region of Malawi, the researcher committed extensive time in the field, engaging in the complex time-consuming process of data collection and analysis. Both research methods therefore provided the best design for this kind of study. The data collection was done in two phases: the first phase involved collecting HIV and AIDS texts in all districts in the region, and the second phase was to use tools such as questionnaires, focus group discussions (FGDs) (which turned into interviews in some cases where the required number for an FGD group could not be convened), texts analysis as well as participant observations.

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The research involved attempts to answer questions such as ‘what’, ‘how’ and ‘why’. This can only be attained if the data collection is done in phases, which was what this researcher followed. Since the researcher could not interview, consult and observe all individuals in the region given the size of the Eastern region and the number of modes of communication being used to pass on HIV and AIDS messages to the community through different organizations and institutions, this study cautiously sampled the target populace in order to limit the number of respondents and widely investigate the problem under study.

5.2 Sampling procedure

The researcher sampled the population in order to come up with a sizable number of respondents, and relevant information that would make the work manageable and practical within the time frame and resources allocated for the study. In this regard, this study applied purposive sampling to identify respondents who, according to the researcher, would provide the best information that would achieve the objectives set out in this study. Purposive sampling is a method done with a ‘purpose’ in mind. It would usually consist of one or more specific predefined groups (Oketch 2006, Bok 2009, Creswell 1998, Kumar 1999). Purposive sampling can be very useful in situations where one needs to reach a targeted sample quickly and where sampling for proportionality is not the primary concern. With a purposive sample, one is likely to get the opinions of the target population, although it is also likely to outweigh subgroups in the population that are more readily accessible.

The power of purposive sampling also dwells on selecting information, to enable the researchers to target and engage only those respondents who are likely to have the required information and who are willing to share it. This was important in this study because not everyone was willing to provide information. Therefore, the identification of a few individuals, those from whom one can learn a great deal about issues of HIV and AIDS messages, was important for the purpose of evaluation in terms of ‘purposeful sampling’ (Patton 1987: 52). In this sampling technique the researcher used knowledge of the population to locate the best informants (Kane 2004:133). Having been involved in several other HIV and AIDS research projects in the region, the researcher found this technique appropriate and convenient in selecting the informants, thus
reducing the task to a proportion that could be managed within the time frame of the research period. It would be false, however, to claim that the researcher knew all the participants before going into the field, or that only those informants that the researcher was familiar with were the ones who were interviewed. That would be unethical, and prejudicial, and therefore a second technique, expert sampling, was also used during the fieldwork.

Expert sampling involves the assembling of a sample of persons with known or demonstrable experience and expertise in the area of research. Often, these people are convened as a sample under the auspices of a ‘panel of experts’.

There are actually two reasons for adopting expert sampling. The first reason is because it is the best way to elicit the views of those people who have specific expertise. In this case, expert sampling is essentially just a specific sub-category of purposive sampling. The second reason is to provide evidence of the validity of another sampling approach that has been chosen. The advantage of doing this is for the researcher not to be out on his/her own and to try to defend one’s own decisions. One therefore procures some acclaimed experts to back up the researcher. This is to validate the outcome of the research. This method, however, also has a disadvantage – even the experts can be, and often are, wrong in the interpretation or understanding of the topic under research. Experts can also make an assumption about how the target group understands and interprets the topic under investigation.

Hence, the researcher identified the key informants to the study and asked them to identify other informants, who were subsequently interviewed and who were then also asked to identify others and so on (Schutt and Engel 2005). This is also referred to as the snow-balling technique. This technique was very useful in identifying consultants and community members, especially in the rural areas where the leaders of community-based organizations are not easily found in one place.

Before carrying out the research, pre-arranged criteria were drawn up and used for identifying the sample. These were the characteristics:
- Government officials at district level handling HIV and AIDS programmes
- NGOs carrying out HIV and AIDS programmes in the region
- Posters, billboards, etc. displayed in the region as part of the communicative methods for HIV and AIDS messages
- Radio HIV and AIDS programmes run by government and private NGOs as part of sensitization campaigns in the region
- Television HIV and AIDS programmes
- HIV and AIDS programme consultants working in the region
- CBO leaders and community members in the area
- Newspapers carrying HIV and AIDS messages into the area
- Music – songs done by musicians as part of HIV and AIDS messages using communicative methods.

A total of six non-governmental organizations were identified for this research. These were YONECO, PSI Malawi, Diginitas, Save the Children (USA), Save the Children (UK), and National AIDS Community Committee (NACC). These NGOs are actually stationed in the Eastern region. YONECO is an organization only working in the region. However, some of the above-mentioned organizations denied the researcher access to information, for example, Diginitas and PSI Malawi. Diginitas gave their excuse as ethical reasons. They said they could not divulge information which they regard as private and that it would be against the objectives of the organization to answer any questions in connection with HIV and AIDS messages. The PSI Malawi programme coordinator in the region refused to be interviewed, citing that he lacked authorization to give an interview. One radio station in the region, Radio Maria, also refused to help, as it claimed that the station’s executive coordinator was out of the country for some six months on a spiritual retreat and thus no other person could authorize the interviews. It was therefore not easy to hold interviews and so for these reasons the three institutions, PSI Malawi, Radio Maria and Diginitas, were dropped and data was subsequently gathered from the other organizations: MBC radios One and Two, Dzimwe Radio, YONECO, NACC, Save the Children (USA) and Save the Children (UK), World Vision, Television Malawi and Malosa Hospital, making a total of ten institutions, apart from the government body, NAC, at district level. With
the red tapes, the researcher still utilized the strategies used by these NGOs and radio stations as they are regarded as public knowledge and are heard from the radio broadcasts and from the designs and kinds of modes of communication. Some television and radio programmes were taken from the Internet.

Consent was first sought at the District Commission offices for all the districts in the region before going to organizations and the communities. After getting consent to carry out research, the researcher then booked appointments with key informants who were identified using the sampling techniques discussed above. Interviews and discussions were held in their respective offices or with the community members in their respective communities. Part of the date setting involved knowing the days on which institutions, such as hospitals, carry out VCT or ART sessions. This was diarized and time was set aside to attend such interactive sessions. With permission from the participants, the sessions were tape-recorded and video-taped.

5.3: Instruments of data collection
The objectives and research questions for this study led to a wide range of variables and this called for the application of several kinds of data collection. This practice, as argued by scholars, provides multiple methodologies for the researcher to get a better understanding of the topic under examination (Denzin 1978b, Patton 1987, Creswell 1998). With this understanding in mind, the researcher used the following instruments to gather data that was used in the study.

5.3.1: Questionnaires
Part of the study required the gathering of information regarding perceptions, cultural beliefs, attitudes, and the interpretation and understanding of HIV and AIDS messages through different kinds of communicative modes, hence the use of a questionnaire. The questionnaire comprised of both open-ended and close-ended questions. The mixture of open-ended and close-ended questions allowed respondents to provide unlimited and spontaneous responses.

The questionnaire was first field-piloted using a sample size of ten respondents in the urban area and ten in the rural area, as well as three key informants in the Zomba district to establish its strength and reliability. It turned out that the tool was not only too cognitively demanding and
time consuming, but also that the respondents needed some guiding and explanations on the questionnaire. This meant that the tool was not user-friendly to the respondents and therefore could not exhaustively capture what the study set out to investigate. Therefore, the researcher then re-organized the tool by simplifying what was perceived to be difficult or confusing so as to make it user-friendly. That was done without compromising the objectives of the study. The researcher further resorted to explaining the questionnaires to the respondents.

The design of the questionnaire provided the respondents with space for filling in the responses. The questionnaire comprised questions that sought to obtain information regarding the respondents’ bio-data, their understanding of the HIV and AIDS messages through different modes of communication, the language(s) they use and their preferences, modes of communication, whether they used translation, and the impact of culture, socio-economic status and resemiotisation on the HIV and AIDS messages, both within and across modes of communications. Although the questionnaire was self-administered, that is, the respondents filled in the information on their own, most of the time they were taken through the questions and explanations were made. The questionnaires were administered in front of the researcher and collected immediately after they finished. This was advantageous in the sense that the researcher was there to provide clarification in areas that respondents found difficult to understand, and that the researcher did not have to return to the area to collect the questionnaires. This consequently also provided a higher percentage of returned questionnaires as the respondents were obliged to fill in the questionnaires.

The preliminary analysis of the data gathered through the questionnaire revealed that some respondents had detailed responses, while others had unique perceptions about some of the questions. A careful identification of such cases was done and this became a guideline for FGDs. In the end a total of 29 questionnaires were administered to various key informants (KI) which comprised project consultants, District Commissioners (DCs), District AIDS Coordinators (DACs), Community Based Organization leaders, Programme Coordinators of NGOs, Radio stations, television stations and VCT/ART centres. Thirty-nine questionnaires were administered to community members in the urban area and 58 in the rural communities respectively. The questionnaires were initially supposed to be equal numbers for both the urban and the rural
communities, that is, having a ratio of one to one (1:1). However, this initial proposal had to be changed, because it was difficult to bring the urban participants together and to get them to answer the questionnaires. This was something unexpected and led to some changes in the strategy while collecting the data for this study. The initial idea of having equal numbers from both rural and urban communities was dropped. The researcher concentrated on getting any reasonable number of respondents, enough for the intended study. Questionnaires that were retained represented 89 percent of the community while the questionnaires for the key informant questionnaires represented 103 percent, 3 percent more than the required number of respondents. The number for the key informants (KIs) was supposed to be 21, 7 respondents from each district. The extra eight KIs came as a result of the posts they have at district levels. For example, one district gave the researcher one extra informant because he was a development planner for the district, Zomba, and as such he is involved in so many district projects that the DC felt that he had more answers for the study than the other listed informants. This was beneficial to the study as the extra informants boosted the number of informants. Additionally, the extra informant mentioned above, true to the word of the DC, had a lot of information for this study, making the Zomba district second in terms of providing information as rated by the researcher, first being Mangochi, and Machinga rating the lowest.

5.3.2 Key informant interviews (KII)
This study comprehensively used key informant interviews as a tool for gathering data on special insights, people’s experiences, understanding, and interpretations of HIV and AIDS messages, apart from their own assumptions of peoples’, that is, the community’s, understanding and interpretations of messages. This tool comprised a comprehensive interview largely consisting of open-ended questions that allowed the interviewees to talk freely without interruptions. The interviewees were also presented with a questionnaire to fill in. In the end the interviewees were presented with documents and texts to interpret and these included posters, billboards, radio and television programmes, newspapers articles, SMS messages and songs, all on HIV and AIDS messages. The interview schedule targeted HIV and AIDS themes and as such had specific uniform questions for all the interviewees.
In many cases key informant interview (KII) proved handy when dealing with the locals who could not speak English. The sessions were carried out in CiCewa, the lingua franca in Malawi which was later translated into English for analysis. It (the KII) also covered the opinions and perceptions of the non-English speaking informants. All sessions, except one where the interviewee asked not to be recorded, were tape-recorded and later transcribed and translated into English. In the case where the respondent asked not to be tape-recorded, the researcher repeated or rephrased the questions in order to understand the interviewee clearly and allowed for extensive note-taking (Punch 1998, Dey 1995).

Since the research was a one-off experience, the interviews conducted were comprehensive enough to ensure that they captured all possible information that was required. Thus, the process was not a back and forth type of research as required for a holistic qualitative experience (Denzin and Lincoln 1994, Creswell 1998). This was due to inadequacy of funds allocated to the research. The tool provided extensive data on specific case studies, language attitudes, and the role of culture in HIV and AIDS information dissemination, interpretation and understanding of HIV and AIDS messages. However, it still provided conflicting information and perceptions regarding certain key practices and views on modes of communication and resemiotisation of messages in the study area. As such, following Oketch (2006), it became necessary to use another tool to iron out the disparities and test the divergent opinions and perceptions that emerged from KII, thus focus group discussions were organized.

5.3.3 Target Population: Urban community

The urban community formed the nucleus of the research. The urban community was only from the Eastern region, the area under study. The interviews in the urban community were done on a two-fold basis: firstly to compare the understanding of the HIV and AIDS messages with those of the KI’s and secondly to compare the understanding of HIV and AIDS with the rural community. As explained above, a total of thirty-nine (39) interviewees were interviewed. This was more than the expected number of informants due to the difficulty in getting them together for an interview. The urban community also comprised mostly of those who had a secondary education. Only seven of the thirty-one respondents interviewed had primary school education and very few had a tertiary education. The urban community was also reluctant to be interviewed.
and to take part in the study. Even after promising them a handout (money) as per their demand, some answered the questionnaires hurriedly, skipping over some parts of the questionnaire, but those gaps did not affect the outcome of the research as the answers for those parts were almost similar for most respondents.

5.3.4 Target Population: Rural community
The number of respondents from the rural community was 58 for questionnaires only but the number for FGDs and translation and interpretations of HIV and AIDS texts was more than this. There were 21 extra participants who did not know how to read and write, of whom 18 were women and three were men. Surprisingly, one of the literacy-challenged informants is a leader of one of the CBOs in the Mangochi district, which made this researcher wonder how she manages the CBO considering her ‘handicap’. This leader shocked the research team when it came to doing FDGs with her group. The leader was more knowledgeable about HIV and AIDS information than many of the others, but when it came to the interpretation of texts, this leader would mislead the rest of the group by presenting the wrong interpretation due to her lack of literacy skills. In this case, the researcher did not try to correct the respondents and the results are presented as such. The respondents from the rural community also involved three elderly men and two women aged between 68 and 75. These elderly people provided vital information for the research, information that the other age groups did not have. Some groups were convened by community leaders at short notice when the DC offices had forgotten to pass on messages about the research group visiting them. Despite this, they would organize themselves and within a short period the required number of people would be together. The questionnaires for the rural community, however, took longer than their counterparts, the urban community. This was because most informants were semi-literate. They had very little education, as low as Standard Three (Grade Three) of primary education. As such, they needed more time to understand the questions despite the researcher providing them with some explanation and elaboration on the questions.

5.3.5 Focus group discussion (FGD)
FGDs provide a forum for discussions and as such they give room for extended accounts, descriptions and open talks for peoples’ opinions and perceptions (MacNaghten and Myers
FGDs, therefore, take place in the context of different types of argument, especially when people have conflicting views or beliefs. In this study, FGDs were very useful to smooth over perceptions, disparities and misunderstandings among the interviewees. The groups discussed issues in detail and argued over interpretations, understandings, and attitudes towards modes of communication, resemiotisation of HIV and AIDS messages and even more about the position of culture in dealing with HIV and AIDS messages.

For FGDs, a group of less than ten was used for a community and a maximum of three members for KIs were used. Both the researcher and the assistants played the role of asking and probing questions to engage the members in discussion. The discussions were relatively short for KIs as most of them had scheduled programmes and they asked for less than one hour for the FGDs. The community, on the other hand, took longer than expected and sometimes discussions had to be cut short if members were seen to have gone off the topic. Thus the researcher and her assistants acted as moderators, intervening and redirecting the discussions. Whenever a group was seen as withdrawing, the researcher rephrased the questions just to re-ignite the discussion.

The FGDs revealed contradictory definitions and understandings of HIV and AIDS messages between the different groups. Thus, the FGDs from KIs produced different understandings and interpretations of HIV and AIDS messages from that of the rural communities and the urban community. Furthermore, there was also a difference in the way the youth understood the messages in comparison to the older generation. Moreover, there was a difference in the understanding and interpretation of the messages between the literate and the literacy-challenged participants. A total of eight sessions for the community were organized. There were two sessions per district: one for the urban and another for the rural area. However, there were two extra sessions for the youth. The youth in the Balaka and Zomba districts only participated in the FGDs. This was so done to get a youths’ understanding on HIV and AIDS messages and these districts were chosen based on the number of youth groups and number of posters that were posted in the districts. It seemed that these districts concentrated more on the preventative campaigns for the HIV pandemic. The researcher tried as much as possible to balance the sex, age and even level of education, wherever possible, so as to capture a variety of perceptions on the issues being studied. CiCewa and CiYao languages were used in the discussions as some
members could not converse fluently in CiCewa, although they could understand it. Other participants were code-switching from CiCewa to CiYao and *vice versa*.

For the KIs a number of four sessions were conducted, one per district and KIs involved in the FGDs were selected in the following manner: one district of Zomba, the government personnel which were chosen comprised the DC, DAC and DPO in Machinga, the KIs for FGDs were only from the health service providers: a clinic officer, a matron, ART centre coordinator, who was a senior medical doctor and an ART teacher/adviser; for Mangochi it was the project coordinators, DC, DAC and DYO. The FGDs for KIs were all done in English, although it could be described as multilingual as the informants were code-switching in their discussions. Thus, a language that every participant was comfortable with and competent in was used (Macnaghten and Myers 2004). Dey (1993) and Sayer (1992) observe that qualitative research deals with meanings which are mediated mainly through language and action and allows informants to interact effectively. This FGD tool was also used to substantiate and authenticate the reliability of the data collected by the other instruments used in this study. The tool enabled the researcher to capture the participants as they create their own structure and meaning (Denzin 1989b) thereby clarifying arguments and diverse opinions. This came over very overtly in the community’s FGDs. Such discussions were tape-recorded, videotaped and later transcribed for translation and analysis.

5.3.6 Participant observation

Participant observation literally means looking or watching closely with interest at the participants’ facial expressions or behaviours for reaction. As Delamont (2004) suggests, participant observation is designed to see how people understand their world. It is one way of understanding people’s attitudes and behaviours regarding an issue, in this case the HIV pandemic. In this study, the observation was done as the participants were doing FGDs as well as interpreting texts. This provides the untold story of people’s attitudes and understanding of HIV and AIDS, a side which they would not normally express verbally or orally. Participant observation betrayed their own discussion because what they said was not in correspondence to their facial expression or body behaviour at the time.
During the fieldwork, the researcher interacted with different communities and people in different set-ups and situations and observed their activities. For instance, the researcher visited farmers in their houses and villages, patients in hospitals, community members in CBOs, and held discussions and interviews with participants as indicated in the previous sections. All these provided an opportunity to see and record people’s attitudes, behaviour, beliefs, interpretations, opinions and catchy statements which were written down. As an instrument of data collection it allowed the researcher to understand how the informants perceived the HIV and AIDS texts, saw things that were hidden in the questionnaires and FGDs, and got extra special facts and experience as a resource to assist in understanding and interpreting the HIV and AIDS messages in their original settings.

This is the tool that was not in the proposal for this study but was adopted during the fieldwork as the researcher observed that there might be more to what the informants were providing. This tool was used throughout the fieldwork, thus providing the researcher with a first-hand opportunity to capture a different understanding and interpretation of HIV and AIDS messages in real practice. This was captured through digital video recordings of all the discussions.

5.3.7 Document analysis

This study involved the collection of texts from HIV and AIDS messages which were used in different modes of communications as a way of passing on the intended information to the community. This was done in the first phase of data collection. Thus posters, pictures, calendars, mural paintings, billboards, messages on t-shirts, SMS messages, radio and television jingles and programmes, traditional dances, music and newspapers were collected. A total of 156 graphic pictures with HIV and AIDS texts which include murals, t-shirt messages, handwritten drawings, billboards, etcetera; 13 SMS messages, six jingles and four television programmes, three songs of traditional dances; ten music songs from renowned local musicians; and seventeen newspapers articles were collected. However, only 79 graphic texts were presented to the participants for interpretation. The researcher chose those texts that she felt would provide the required information. This selection was done with the help of the objectives for this study. These were collected using a digital camera for still pictures and a digital video camera for the motion data such as traditional dances, television jingles and music. These texts included those produced by
the government through the HIV and AIDS department, NAC, from NGOs and those done by the communities themselves. The texts such as posters, billboards, mural paintings and t-shirts were collected in different public spaces such as bottle-stores, markets, hospitals/clinics, stadium walls, along highways as well as other roads, public fences, shops, offices, schools, CBOs and youth centres. The traditional dances were recorded at the youth outreach campaign office for YONECO where they usually dance when they are not out in the field. This office is stationed along a small dusty semi-urban area of the Zomba district. The newspapers were selected from the researcher’s personal newspaper archive and music was also selected from the researcher’s son’s music collection. The radio and television programmes were recorded from the researcher’s radio facility. The SMS messages were collected from people who got the SMSs from the producer. Although the SMS is used by one NGO only in the whole of Malawi, fortunately this NGO is based in the region under study, the Eastern region. The researcher felt fortunate to get this kind of mode of communication for HIV and AIDS messages. Below is a table outlining the areas where the texts were found and produced by the different institutions:

Table 5.1: Modes of communication used by different institutions

<table>
<thead>
<tr>
<th></th>
<th>Government (NAC)</th>
<th>NGOs</th>
<th>Community</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Urban</strong></td>
<td>Posters, radio texts, billboards, t-shirts, music, newspapers, television texts</td>
<td>Posters, radio texts, billboards, t-shirts, SMS, traditional dances, newspapers, television texts</td>
<td>Mural paintings</td>
</tr>
<tr>
<td><strong>Rural</strong></td>
<td>Posters, radio texts, t-shirts, music, newspapers, television texts</td>
<td>Posters, radio texts, t-shirts, traditional dances, music, newspapers, television texts</td>
<td>Mural paintings, drawings on papers</td>
</tr>
</tbody>
</table>

Looking at the table above, one can notice there are two outstanding texts, the ones high-lighted: SMS texts and drawings on papers, which were found in one locality, urban and rural respectively. This demonstrates the kind of distribution that these messages provided. Traditional dances and mural paintings are produced by one institution but found both in the urban and rural areas.
The above table (Table 5.1) can also be represented using a Venn diagram.

![Venn Diagram](image)

Figure 5.1: A diagrammatic representation of modes of communication

The Venn diagram above represents the distribution of modes of communication across the Eastern region in Malawi. The two communities share most modes of communication which is represented by the area where the two circles run over each other, (see the point of the arrow). The only modes that the two communities do not share are SMS and the paper drawings respectively. These two outstanding modes of communication also present a perspective of not only the level of economic status but also literacy levels.

The study also looked at the government policy and strategic plan (through NAC) provided for the HIV and AIDS epidemic. The researcher intended to search for a wider understanding and interpretation of the HIV and AIDS messages by examining the above-mentioned documents to see the impact that these messages made on the community. The criteria of who to involve as informants was based on a variety of documents collected. Hall (1997) points out that with the objectives of health issues such as HIV and AIDS campaigns, failure is fairly hard to come by, but there are loopholes that need to be sealed and this was realized in this study. In almost all the
organizations, whether it was government offices or NGOs that were visited, all parties presented a public pretence of success. This will be elaborated in the discussion chapter, chapter six.

5.4 Triangulation

Denzin (1978:28) observes that one method used for research is inadequate to either critically solve a problem or identify a problem. He proposes the use of multiple research tools as each reveals different analytical results empirically. Thus, multiple tools for gathering qualitative data such as interviews, questionnaires, texts’ interpretation, and participants’ observations were all used for this study. The research started with questionnaires, interviews and participants’ observation. In this case, the participants’ observation was a last minute decision or *ad hoc* tool. This was included because as the research progressed, the researcher noticed some unusual behaviour from the participants which needed deeper analysis. Although participant observation was not originally included, the behaviours and attitudes of the participants forced the researcher to include this observation tool. This helped to ensure the truth behind the responses of the informants. Thus triangulation was applied to validate and elucidate data while in the field, even before analysis. This sealed all loopholes in the data collected, also providing data which can be described as very reliable.

5.5 Data analysis

The study has used several methods of data collection namely: questionnaires, interviews, and texts such as music, traditional songs, short messages services, t-shirts, posters, billboards, mural paintings, paper paintings, radio and television jingles and programmes. These were all analyzed differently. A quantitative approach was used for the questionnaires and the qualitative approach for text interpretations, interviews and participant observation. These different methodological frameworks presented different outcomes. Since methodology depends on the purpose of the research, it would have been misleading to think that one methodology is ideal for this kind of research.

Methods for the analysis of qualitative data ought to be systematic, disciplined, transparent and descriptive (Punch, 1998). Moreover, qualitative research has analytical processes that conform to a general contour (Bagdan and Biklen 1992, Huberman and Miles 1994, Wolcott 1994b) that
one can follow in the analytical phase of qualitative data analysis. Creswell (1998) discusses different approaches to what he refers to as a “data analysis spiral” and recommends that:

To analyze data the researcher engages in the process of moving in analytical circles rather than using a fixed linear approach. One enters with data of text or images (e.g. photographs, videotapes) and exits with an account or a narrative, in between, the researcher touches on several facets of analysis and circles round and round (1998:142)

When the data collection for this study was done, and it was time to begin the formal analysis, the researcher actually needed plenty of time to make sense of the data because it was considerable. This called for reading and re-reading of the data several times in order to recognize concepts and patterns. Certain tales began emerging and the more reading the researcher did, the more the data was scrutinized in detail and the more stories it revealed. These further revealed themes and sub-themes. The themes were then coded and filled into categories based on similarities and differences. The analysis then went further to define and describe the themes in detail through narration and explanation.

The final stages involved swinging back and forth and organizing the data in ways that helped formulate final themes, refine concepts and link them together to create a clear description and explanation of resemiotisation and modes of communication in HIV and AIDS messages in the Eastern region of Malawi. This was then interpreted in accordance with the existing literature, and the theoretical and analytical framework as discussed in chapters three and four. Conclusions were then drawn based on such interpretations and suggestions for further research provided.

5.6 Limitations
This study faced both predicted and unexpected limitations. As mentioned earlier, the study involved collecting different kinds of data materials from different angles, that is, from producers and writers of HIV and AIDS messages. The research was marred by some bureaucratic obstacles at NGOs and other government institutions. The texts which were supposed to have been collected from them were, according to their ethics, classified as highly confidential and
sensitive. However, this did not bar the researcher from finding a way of getting necessary information needed for the research from other sources.

Some institutions denied the research team access to texts, citing researchers as people who present research findings out of proportion. Even with the explanation and production of documents to show them that the research was for academic reasons, the producers refused to release the texts, let alone to be interviewed. This opposition came mainly from the religious radio and television stations. Fortunately, the researcher could make use of the radio and television programmes collected from other stations for the study. Thus, the study was not compromised.

The research also was faced with another unexpected setback when, in one community in the rural area, men refused to be interviewed together with women. Their traditional customs, according to one informant, does not allow women to mix with men publicly. They are permitted to do that in their homes with their relatives only. Thus, the methodology of having equal numbers of women and men in one group for FGD was revisited just for that particular group. From the few texts that were collected and the producers that were interviewed, it became evident that producers produce texts as part of their job, but they do not practice what they produce. If they do not practice what they preach, then, what more is expected of the listeners and viewers of their programmes? Yet they expect the viewers and listeners to understand the messages and change their behaviour, and put the messages into practice. This will be discussed more in detail in the next chapters.

Another limitation was that the data collection was done during the rainy season and one rural group had to be cancelled at the last minute because the car which was used got stuck in the mud. The researcher therefore had to work with the remaining rural data that was collected. It could not be rescheduled as the researcher had a tight time table to follow.

5.7 Conclusion
In this chapter, the researcher has presented the research design, process and the methodological tools that were used while collecting and analysing the data for this study. Sample size and
sampling procedures have been discussed and also the challenges and shortcomings that were met during the data collection. However, solutions to such drawbacks have been provided. In the next four chapters, the researcher will proceed to analyze the data that was gathered.
CHAPTER SIX: CONTESTATIONS OF COMMUNICATIONS MODES ON HIV AND AIDS MESSAGES AND SPACES

6.0 Introduction
This chapter presents the contestations between the producers/writers and consumers of HIV and AIDS messages over modes of communication. The way people interpret and understand messages depends on their education, and social, linguistic background. Therefore, considering the ethnographic nature of this study, this chapter gives the background data of the modes used in HIV and AIDS dissemination as well as the identities of the different consumers. The data is on what modes the consumers prefer and use to get across HIV and AIDS messages. The chapter also presents the education background of stakeholders and their linguistic preferences as they encounter HIV and AIDS messages and languages they speak. The consumers include writers, producers, senior government and NGOs individuals who are categorised as key informants (KIs). The data further presents the consumers of the messages and these are categorised as urban and rural communities. The chapter also looks at the resources that are used to pass on HIV and AIDS messages. All in all, the chapter gives the background information on which the next three analysis chapters depend.

6.1 The education levels
How much education the respondents have determines how they reply to the questionnaires and interpret texts. Therefore, the study sought to know the respondents’ education level, both the KIs and consumers.

6.1.1 KIs’ education level
There were 32 questionnaires sent to KIs and only 29 were returned. This happened because the KIs did not want to fill the questionnaires before the researcher. They preferred that the researcher leave the questionnaires with them. They wanted to do them at their own time and pace. However, the returned questionnaires represent 91% of the total scripts for KIs.

The table below illustrates the level of education for key informants (KIs).
Table 6.1: Education level for key informants

<table>
<thead>
<tr>
<th>Age</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Primary</td>
<td>Secondary</td>
<td>Tertiary</td>
</tr>
<tr>
<td>21-30</td>
<td>3</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>31-40</td>
<td>4</td>
<td>1</td>
<td>13</td>
</tr>
<tr>
<td>41+</td>
<td>1</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
<td>5</td>
<td>29</td>
</tr>
</tbody>
</table>

It is interesting to note the disparity of education levels between males and females. Table 6.1 shows that the highest education level for females is mainly secondary school education. There are only 5 females that attained tertiary education and 8 with secondary education. Although they have secondary education only, however, female participants also manage to attain senior post in work-places. On the other hand, there more males that attain tertiary education and only one KI has secondary education. This demonstrates unequal distribution of employment. Although males attain tertiary, the highest qualification for these KIs was a Masters degree and it was the District Commissioner of Mangochi district. For those interviewed, 21 in total, the director and all senior posts, the highest education qualification was a first degree, for instance, YONECO program manager had a degree in education. For those heading district offices, some had diplomas and others certificates in health communication, for example the project coordinator for NACC in Namwela, Mangochi has a Diploma in project management. To present these education levels in a different format, figure 6.1 presents a bar graph of the same for easy analysis. Figure 6.1 confirms what is presented in Table 6.1 that males go ahead with education to tertiary education levels while their counterparts, females, find themselves stuck with secondary education.

The table above can be graphically presented in a bar graph as below.
Figure 6.1: A graphic representation of education levels of Key Informants

Figure 6.1 clearly shows that most women do not go beyond the secondary education level. However, both charts demonstrate that no institution whether government or NGO employ people with no secondary education. As explained, the table and figure above present the number of returned questionnaires for KIs. There are other informant that did not fill the questionnaires but participated in the FGDs and interpretation of the pictures. The research team was starting with interviews, interpretation of the texts and FGDs before asking them to fill the forms. This format was adopted only for the KIs as it was deemed that they were a busy and engaged group to deal with and these tools: interpretations of texts, interviews and FGDs took more time than expected and most KIs asked the research team to leave the questionnaires behind and four questionnaires were not returned despite reminders sent to them. However, the number of questionnaires not returned did not affect the end results as four is quite insignificant comparing to the twenty-nine of returned questionnaires. The KIs who did not return their questionnaires were largely the consultants.

Some KI (the consultants) are retirees from these higher learning institutions such as lecturers, secondary school teachers, etcetera. However, it is significant to note that all the KIs interviewed, only a minute number of the total number of interviewed consultants are trained in HIV and AIDS issues or social work or health issues. Most of these are professional moonlighters that seek extra cash to supplement their monthly incomes (Oketch 2006). As such they mostly participated in the interviews only. Only one filled the questionnaires. In general, the
consultants were, however, very elusive, full of excuses and thus most of the responses analysed under this section is hardly from them. The project coordinators were worse off than the consultants. Thus just like Oketch (2006) notes:

> it is somehow taken for granted that social work is best driven by those who have attained some high level of academic qualification, perhaps owing to the postulation that they have the acquired aptitude to grasp ‘new information’ and interactive social demands of HIV and AIDS issues such as baseline surveys, carrying out appraisals, writing proposals, monitoring and evaluating progress and writing progress reports.

Therefore, since high institutions offer training in proposal, report, appraisal, monitoring and evaluation reports writing even at undergraduate levels hence the employment of those with at least first degree in projects offices. Once on the posts, they are expected to be productive. Unlike the consultant group of KIs, this group was however very cooperative and participated fully in this study.

### 6.1.2 Education levels of consumers of HIV and AIDS messages

The table below shows the levels of education for all participants (consumers of the messages) that took part in the study. It represents the education levels of only those participants who could write. There were others who participated in FGDs only because they could not write. There were 43 women and 46 men. From the urban places, 14 of them were women while 29 were from the rural representing a ratio of 1:2 for urban women against rural women. Of the 46 men, 18 were from the urban and 28 from the rural areas. At tertiary level, there are more females with tertiary education than male in the urban and only one male with tertiary education in the rural area.
Table 6.2: Education levels for all study participants

<table>
<thead>
<tr>
<th></th>
<th>Urban</th>
<th></th>
<th>Rural</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P</td>
<td>S</td>
<td>T</td>
<td>P</td>
</tr>
<tr>
<td>14-20</td>
<td>2</td>
<td>2</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>21-30</td>
<td>2</td>
<td>2</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>31-40</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>40+</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>3</td>
<td>9</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

The education level of the consumers is also represented below in a bar graph format. Figure 6.2 indicates that women in general end their education at primary school level. Men further their education up to secondary school level.

Figure 6.2: A graphic representation of education levels for study participants
6.2 Language for communication

The other demographics are collated to find out the number of languages the KIs speak. The table below illustrates that.

<table>
<thead>
<tr>
<th>No of Lang. Spoken</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>5+</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

As Table 6.3 above demonstrates all KIs speak more than one language. There is no KI who speaks or know one language only. All women speak three languages. However, the males are more multilingual because there are some that speak more than three languages. This could be because they are bread-winners and as such they travel to other places where they learn other languages.

The study went further to find out the common languages that are spoken by the KIs and the results are illustrated in the table below:

<table>
<thead>
<tr>
<th></th>
<th>CiCewa</th>
<th>English</th>
<th>CiYao</th>
<th>CiTumbuka</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Female</strong></td>
<td>6</td>
<td>5</td>
<td>3</td>
<td>1</td>
<td>1(senga)</td>
</tr>
<tr>
<td><strong>Male</strong></td>
<td>22</td>
<td>23</td>
<td>6</td>
<td>5</td>
<td>2(lomwe)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1(senga)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2(sena)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1(tonga)</td>
</tr>
</tbody>
</table>
The commonly spoken languages by the KIs are CiCewa and English. Other languages spoken by the KIs include CiYao, CiTumbuka, CiSena, CiNsenga / CiNgoni which is actually a variety of CiCewa, CiSenga a variety of CiTumbuka, eLhomwe and CiTonga. As the table above shows, all the KIs are multilingual but they all speak and understand CiCewa, a language which is regarded as the national language (Kamwendo 2004, Kishindo 2001). Even though the KIs are multilingual, it does not necessarily mean that the languages they speak relate to the languages spoken in the areas they work. For example, to the surprise of the researcher, one KI who is a very senior person in at district level, a DC spoke three languages CiTumbuka, CiTonga and English but was stationed in a Yao speaking community. Thus the KI was multilingual but was in a community which does not speak any of his languages. This is a short-fall or an over-sight on the side of government on assignments of duty station for KIs. This KI actually admitted that he has problems when addressing the local members of the community. He admits as follows:

‘I really have problems especially at public rallies. Sometimes I use translators to pass on the message to the people ….like Kamuzu….ha..ha..ha…. You know, people expect you to address them in their own tongue. I have tried to learn their language but with my Tumbuka tone, the moment I start talking they all burst laughing…I..I really feel embarrassed. Now I use someone to speak for me. I just greet them and let someone continue delivering the real message…’ (Extract from response - KI for Mangochi district)

According to the attestation of the KI for Mangochi district, a key informant would deliver good services to a community which speaks his or her own language. After further probing of why he was comparing himself to Kamuzu, the former president of Malawi, he elaborated himself that Kamuzu addressed his audience even those from his own home town that speaks his own mother tongue in English and used a translator, a practice that he (at the time of the interview) was using. He said he felt as if he was not welcome as the community felt (this was his own opinion) and that they did not take him to be serving them since even when they go to speak to him concerning community matters, they had to do that through a translator. At the time of the interview he had requested for a transfer and was still waiting for a response from his employers,
the government. The same KI had another experience when he could not address one woman in the CiYao language:

“...we had a little bit of experience somebody had an issue about deceased estate, the husband died, then the husband’s...ee the husband and the daughter-in-law died, let’s say the children of that woman died both son and daughter-in-law died so she had to keep ee the grandchildren now she came to process the deceased state for the two, now because I could not understand what she was talking about I had to call somebody, a third person to come... now she gets, she got furious and said how can.....were you here when Welensky³ was here, I said no I was not here. You know we fought those guys to go away because we wanted to understand each other, why should you speak to me in a different language when I want...when I am here to hear from you..... ki...ki...ki... I said oh my God! (Extract from response - KI for Mangochi district)

Thus communicating in the community’s lingua franca is essential. The KI was referred to as a British Protectorate Minister who was addressing the community in English only and had to use translators, a thing not expected in the present days.

6.2.1 Language during first encounter of HIV and AIDS messages
Another question asked was on which language they first encountered HIV and AIDS messages. The table below presents data for their responses.

³ Sir Roy Welensky was the last Prime Minister of the Federation of Rhodesia and Nyasaland, a federation that covered three countries, Malawi Zimbabwe and Zambia. He served between 1956 and 1963. He was born in Southern Rhodesia but stayed in Broken Hill, Northern Rhodesia the present Zambia
(http://www.bodley.ox.ac.uk/dept/scwmswmss/wmss/online/bcas/welensky.html )
Table 6.5: The first language encountered by the key informants

<table>
<thead>
<tr>
<th></th>
<th>CiCewa</th>
<th>English</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>6</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>13</td>
<td></td>
<td>7</td>
</tr>
</tbody>
</table>

The KIs encountered their first messages in CiCewa rather than English or any other languages. This could be that in the early years when the HIV epidemic was first discovered in Malawi in early 1980s, the messages which were originally in English were translated into CiCewa, the national language and widely disbursed to the community. Thus it is not surprising that most KIs came across HIV and AIDS messages in CiCewa in their first encounter.

6.2.2 Preference of language for HIV and AIDS messages

They were also asked which language they preferred when they look for HIV and AIDS messages.

Table 6.6: Preferred languages when looking for HIV and AIDS messages

<table>
<thead>
<tr>
<th></th>
<th>CiCewa</th>
<th>English</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>5</td>
<td>2</td>
<td>1 (all languages) 2 (Yao)</td>
</tr>
<tr>
<td>Male</td>
<td>10</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

The table illustrates that more KIs prefer CiCewa language when looking for HIV and AIDS messages. Apart from CiCewa, the second language they prefer is English. Yet these KIs are multilingual (see Table 6.4).

This study also covers what language they are comfortable with when consuming the messages and the sections below present their responses.

6.2.2.1 KIs’ language mind-set

Questions 3 and 4 which were on language attitudes and why they have preferences respectively, all KIs think language is important for HIV and AIDS messages. Their reasons ranged from avoidance of communication barrier to conveying messages across. 15 of 29 responses representing 52 percent prefer CiCewa to English or other languages. The reasons for the
preference of CiCewa ranged from it being the mother tongue for some KIs to CiCewa being the language in the school curriculum and that it is a language that is understood by many people as it is used as a national language. Others prefer English because they claim that English is more explicit in giving information and taboo words and terminologies do not sound as such in English. Thus HIV and AIDS, a pandemic largely associated with sex has many taboo words. However, there were some questionable, standing-out responses, for instance:

- They said that their preferred English because it is an international language and media of communication in schools in Malawi
- Because they were ‘schooled’ in English and therefore it is easier to understand

These responses display a positive attitude towards English as a global language. These are the people who champion for foreign languages.

6.2.3 Community’s language preference

The consumers were also asked about the language they first encountered HIV and AIDS messages in. Only five for rural, four for the urban indicated other languages such as English and CiYao but the rest indicated CiCewa language. This could either mean that HIV and AIDS messages are only in CiCewa and only a few in other languages or that the ones in circulation are mostly CiCewa messages. This is confirmed by the messages that were found in these locations such as the graphic ones in form of billboards, posters, mural painting, handwritten messages, and t-shirt messages were all in either CiCewa or English. There was no HIV and AIDS message in CiYao, the lingua franca of this region. Furthermore, the consumers think language is essential for HIV and AIDS messages and the reasons they provided included language being used for communication purposes, understanding of the messages and for people to express their views, opinions and feelings.

Just like the KIs all participants of both communities except 13 from both rural and urban communities prefer CiCewa language to any other language when looking for HIV and AIDS messages. Their reasons for choosing CiCewa ranged from it being a national language to being a mother tongue. Some of the thirteen individuals chose English as their preference because they
articulated that some words that would be taboo in the local languages would not sound as such in English. This response is similar to that of the KI (see section 6.2.2.1 above). Others indicated CiYao and this demonstrates that some consumers want some messages in their mother tongue. Thus English and CiYao were the only other language indicated as preferences apart from CiCewa and yet there were some consumers that indicated other languages such as CiSena, CiTumbuka and eLhomwe as languages they also speak and understand.

6.3 Preference on modes of communication

In addition to demographic reports such as education levels and language preference, the study also revealed that there are different modes that are used for disbursement of HIV and AIDS messages. The disbursement of the messages is done by government institutions, NGOs and FBOs using these modes. However, according to the findings of this research, the modes that really reach out to community are the following: drama, posters, radio, television, hospital talks, meetings, magazines leaflets, church/mosques, class, newsletters, music, videos, newspapers and internet. On the modes when both the KIs and consumers were asked about which ones were thought to be the common modes in which messages were commonly disseminated, the following were their responses.

Table 6.7: The KIs’ responses on consumers’s preferred mode of communication on HIV and AIDS

<table>
<thead>
<tr>
<th>Method</th>
<th>Females</th>
<th>Males</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drama (DR)</td>
<td>5</td>
<td>7</td>
<td>12(fifth)</td>
</tr>
<tr>
<td>Posters (PR)</td>
<td>5</td>
<td>14</td>
<td>19(third)</td>
</tr>
<tr>
<td>Radio (RD)</td>
<td>8</td>
<td>16</td>
<td>24(second)</td>
</tr>
<tr>
<td>TV</td>
<td>6</td>
<td>12</td>
<td>18(Fourth)</td>
</tr>
<tr>
<td>Hospital Talks (H/T)</td>
<td>4</td>
<td>6</td>
<td>10(sixth/last)</td>
</tr>
<tr>
<td>Other (OR) (meetings, magazines leaflets,)</td>
<td>8</td>
<td>20</td>
<td>28(First)</td>
</tr>
</tbody>
</table>
church/mosques, class, newsletters, music, videos, newspapers, internet (one –DAC Mangochi), poems, banners, focus groups, CBOs, one to one, medical journals, youth centres)

In Table 6.7, the KIs think that consumers get HIV and AIDS messages mainly from ‘other’ modes seconded by ‘radio’, posters third and last is ‘hospital talks’. However, what the KIs and consumers (see table below) think of the modes for disseminating messages differ. The consumers rank ‘radio’ on the first position seconded by ‘other’ and ‘hospital talks’ comes third.

Table 6.8: The consumers’ responses on their preferred modes of communication on HIV and AIDS

<table>
<thead>
<tr>
<th>Modes</th>
<th>Urban Female</th>
<th>Urban Male</th>
<th>Rural Female</th>
<th>Rural Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drama (DR)</td>
<td>3</td>
<td>7</td>
<td>7</td>
<td>7</td>
<td>24 (5th)</td>
</tr>
<tr>
<td>Posters (PR)</td>
<td>2</td>
<td>7</td>
<td>1</td>
<td>3</td>
<td>13 (6th/last)</td>
</tr>
<tr>
<td>Radio (RD)</td>
<td>9</td>
<td>17</td>
<td>27</td>
<td>25</td>
<td>78 (1st)</td>
</tr>
<tr>
<td>TV</td>
<td>8</td>
<td>13</td>
<td>13</td>
<td>13</td>
<td>47 (4th)</td>
</tr>
<tr>
<td>Hospital Talk (H/T)</td>
<td>9</td>
<td>16</td>
<td>24</td>
<td>21</td>
<td>70 (3rd)</td>
</tr>
<tr>
<td>Other (meetings, magazines leaflets, church/mosques, class,</td>
<td>13</td>
<td>25</td>
<td>13</td>
<td>20</td>
<td>71 (2nd)</td>
</tr>
</tbody>
</table>
These two Tables, Tables 6.7 and 6.8, present the contestations between the producers and consumers of the HIV and AIDS messages. The contestation is overtly seen through the ranking of radio, posters, and hospital talks in both tables. Thus, what the KIs think about modes of communication for the consumers is in contrast with what is on the ground as the tables indicate. Thus, this disparity can only be solved if the producers/writers consult the consumers on modes of communication for HIV and AIDS messages before producing and writing the messages.

However, although the consumers rank ‘radio’ as first during FGDs, they complained that the community had no funds to purchase batteries to operate their radio sets as there is neither electricity nor solar power in rural areas. Furthermore, though they ranked ‘radio’ first, the consumers contradicted themselves during the discussions because their use of it is seasonal as they only listen to radio during harvest period and later shelve it due lack of batteries (see chapter eight for more). This is contra what producers/writers of HIV and AIDS messages think. They think ‘drama’ ranks for the community as it also acts as entertainment for the community (verbal communication from project manager of YONECO). Thus almost all institutions, private or government, have drama groups which are used to pass HIV and AIDS messages to the community. Some NGOs like YONECO use the youth to perform not only drama but also dances such as gule wamkulu. YONECO emphasizes on dances as they consider ‘drama’ as being for ‘laughs’ only (project manager YONECO, personal communication). Indeed the community, however, takes it as entertainment but when it comes to the real HIV and AIDS messages they feel they get that from posters, radio, hospital talks and other sources. Drama is for ‘laughs’ as one community member comments;

‘We go to watch drama just to laugh’ (Mangochi rural respondent)

Since the drama groups have regular programs, the consumers have even established their favorite actors. Thus they go there just to watch a particular character not to listen to the HIV and
AIDS messages. The respondents also indicated that radios have more ‘funnier’ characters for HIV and AIDS radio drama programs apart from jingles and other programs.

Surprisingly, the urban community also ranked ‘radio’ higher than ‘television’ demonstrating that although they have television sets in their homes they regard ‘radio’ as their main source of information. Thus, when it came to ranking the modes of communication, both communities ranked ‘radio’ first seconded by ‘other’ sources.

6.4 Comprehension of resemiotised messages

Table 6.9 below illustrates the consumers’ responses that show their comprehension of resemiotised messages.

<table>
<thead>
<tr>
<th>Response</th>
<th>Urban</th>
<th>Rural</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Yes</td>
<td>8</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>No</td>
<td>11</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
<td>12</td>
<td>28</td>
</tr>
</tbody>
</table>

Table 6.9 shows that there are more consumers who comprehend resemiotised messages from the rural areas than the urban as there are 11 responses from urban and 34 responses of from the rural. However, in both urban and rural females comprehend resemiotised message more than males. The urban consumers indicated that they do not comprehend resemiotised messages however the difference of the ‘no’ response between the urban and rural is only one person. The table shows that the respondents recognize that they get resemiotised HIV and AIDS messages. When they were asked next whether they understand the messages when they get resemiotised, most consumers responded that they understand them and their common comments for those that said ‘yes’ were that ‘whether the message get resemiotised/changed or not, messages is the same, it does not make any difference’. For those that said ‘no’ their reasons include that they ‘get
confused’ as they think that they were dealing with two different HIV and AIDS messages and also that the message ended up giving conflicting messages. Some messages become conflicting, for example, some campaigns advocate for ‘the use of condom for safer sex’, others say, ‘condoms are not reliable as they can burst, be faithful’. The conflicting messages could emerge as a result of messages coming from ideologies from the different institutions such as NGOs and FBOs. The Faith Based Organizations mostly promote faithfulness amongst couples and individuals while the government and other NGOs are advocating for ABC (Abstinence, Be faithful and Condomise) campaign on HIV and AIDS. Thus, the community does not have this kind of information hence the confusion. To resolve this issue then all institutions since they are under the umbrella of the one government body, the NAC, they need to come together and try to harmonize the messages before they are sent to the community to avoid one institution conflicting another institution’s HIV and AIDS message.

6.5 Use of proverbs and euphemistic terms

The researcher wanted to determine the extent to which people understand proverbs and euphemisms in HIV and AIDS messages. This is because proverbs are associated with particular language and culture. However, even within the same cultural practice it would also be interesting to find out whether the urban and rural have a differential effect in the understanding of proverbs. People may speak CiCewa but may not be familiar with proverbs. Below are the consumers’ responses;

Table 6.10: Consumers’ perception of proverbs and euphemisms on HIV and AIDS messages

<table>
<thead>
<tr>
<th></th>
<th>Urban</th>
<th></th>
<th>Rural</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td>Yes</td>
<td>2</td>
<td>6</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>No</td>
<td>7</td>
<td>8</td>
<td>6</td>
<td>9</td>
</tr>
</tbody>
</table>

The figures seem to be small as some respondents did not fill this part; they just rushed to write their comments. However, the few that filled still provided the required information needed as such it did not have any effect on the results. As the table above illustrates the rural community feel that proverbs and euphemisms should be used for HIV and AIDS messages. Their reasons
include ‘avoidance of taboo words, to maintain their cultural respect of private body parts not being mentioned in public and to avoid ‘embarrassment’ before their children whenever the taboo words are used with kids around’. Those that said ‘no’ articulated that they do not want proverbs and euphemisms to be used for HIV and AIDS messages. They want ‘straight talk’ language. They feel that by using proverbs and euphemisms then the real messages are hidden as one individual said;

‘zimakhala zozungulila kuzimva’ (the meaning of message become obscure for us to get it) urban respondent.

Although, the proverbs are meant for adult community as articulated by the KIs as in the following;

‘the proverbs are meant for adult people. So when we are making or writing the message we actually consider which community is the message addressing. If it is adult community then we use proverbs. If the message is meant for the youth, we also use youth language’ (project manager YONECO)

Thus, some NGOs are aware of these problems as can be determined from the KI.

However, there were some adults who could/can interpret what a proverb message was in one of the HIV and AIDS message posters. The HIV and AIDS message which was presented to the community to be interpreted included;

‘okaona nyanja anakaona ndi mvuu zomwe’ (when one goes to the lake, one sees the lake as well as hippos)

Such kinds of responses were referring to the post below.
The message is that when people are going to some places like the lake, they should not forget to take a condom as they might meet women and consequently indulge in sexual activities (see more on this in Chapter nine). Yet, on this proverb one respondent stated as follows;

‘tidzipita kunyanja kukaona mvuu’ (we should go to the lake to see hippos) a rural 50 year old female respondent.

Other posters with proverbs included the following posters:
Figure 6.13: A Euphemistic message on HIV and AIDS

The first part of figure 6.12 has the following proverb *mbewa ya manyazi inafera kuuna* (lit.) ‘a shy mouse died in its pit/ burrow’. This proverb means that people should not be shy to buy condoms. If they become shy, they will die like a mouse because they will indulge in unprotected sex. The proverb involves a mouse as it is known to shy away from people. It runs and hides in its pit whenever it sees people or something and ends up dying in there. Most of older rural consumers, ranging from 45 and above interpreted this proverb correctly. However, the urban have lost the proverbs because they struggled to interpret it. They kept on correcting each other. Their interpretation included the following:

‘*Munthu wa manyazi ama fa cifukwana safunsa*’, (a shy person dies because he/she fails to ask question) (Balaka 47 year old urban respondent)

‘*Munthu wa manyazi ama fa cifukwana amakhala opanda anzake*’, (a shy person dies because he/she has no friends) (Zomba urban respondent)

The second part of figure 6.12 had the following proverb: *mzako akapsa ndeu vzimile mawa adzazima zako* (lit.) ‘when your friend’s beard catches fire, help him to put it out, tomorrow he will help you too’. This proverb had some shocking interpretations by the consumers. One of them was as follows:
‘Ofunika kumathandizana polima’, (we need to help each other in farming) Zomba urban 45 year old female respondent

This was a misinterpretation as the proverb was not intended to mean that. The reason for this misinterpretation was because the background of the poster portrays people farming. Thus their interpretation dwelt on what they saw on the poster only.

The message for this poster is ‘there should be no discrimination against those living with HIV but rather that the affected should be helped as the problem affects anyone. This proverb provides hope and comfort to people living with HIV. It makes them live comfortably amongst their relatives and friends.

Figure 6.13 has a euphemism which has since turned into a new proverb because of its frequent usage in HIV and AIDS messages. This also brought confusion in its interpretation. Some interpreted it correctly as that ‘people should not forget condoms whenever they are going for outings’ but they usually referred the message as for boys only. This reference also emerged when some consumers were interpreting the first part of figure 6.12. These figures have young men as carriers of the messages, hence their references. The consumers hardly connected the proverbs in the second part of figure 6.12, and 13 with a condom message. On the other hand, the interpretations of the second part of figure 6.12 by consumers revolved around the activity that is taking place in the picture. They also hardly referred the message as being against discrimination of people living with HIV. Some wrong interpretation as said earlier on came from the rural areas and this was quite appalling to the researcher. This researcher had had a feeling before that the rural community should be conversant with proverbs since they are used most of the time in village meetings and thought this was their everyday ‘standard’ language. Thus as interpretations demonstrate, there are some individuals who do not understand proverbs. As Chimombo (2008) notes there is need for special education and skills for individuals to extract the deeper meaning hiding within the proverbs, otherwise use of them would be a waste of time and resources as HIV and AIDS messages would not be passed on as expected and intended by the producers and writers of the messages. More interpretation of HIV and AIDS messages come in the next chapter.
6.6 Conclusion
The chapter has illustrated that male consumers go further with their education in both rural and urban areas. Although education does not fully affect interpretations and understanding of HIV and AIDS messages, those with some education have better interpretations and understanding than the semi-literate or literary-challenged ones (see chapter ten).

This chapter has further showed that there is disparity between the rankings of the KIs and the consumers on what they thought to be the common modes of communication to get messages for the consumers. This differentiation is the starting point of how the producers and writers of messages miss the taste of the consumers on modes of communication.

The chapter has also demonstrated that the consumers preferred having messages CiCewa language. this is revealed even amongst the educated consumers.

Lastly the chapter has revealed that comprehension of messages get affected whenever proverbs or euphemisms are used in the messages. One would expect this to come from the urban and the youth only. However, the results have shown that the rural too have problems with these linguistic resources.

The researcher now proceeds to chapter seven where she discusses the reformulation of linguistic, cultural and social practices for HIV and AIDS messages.
CHAPTER SEVEN: REFORMULATION OF LINGUISTIC, CULTURAL AND SOCIAL PRACTICES

7.0 Introduction
This chapter discusses how linguistic, cultural and social practices have been restructured owing to the HIV and AIDS pandemic. In terms of language practice new terms such as *Edzi*, *kacilombo*, *matenda a boma* and many other terms have emerged. In addition, words which were formerly regarded as technical terms have been transformed and now occupy the public linguistic space.

Additionally, the chapter discusses how cultural practices have been modified and remodelled to accommodate the measures being taken against the HIV pandemic. Cultural practices such as *fisi*, *kutaya/kudzola mafuta*, *cokolo*, *kutola nsomba*, boys’ and girls’ initiation, chief installation and *kupita/kulowa kuja*, which traditionally use unprotected sexual acts for their completion, have since abandoned the sexual acts and have replaced the sexual practices with the use of herbs for some while others make use of hospital facilities as well as asking the participants to have an HIV test.

7.1 The reformulation of linguistic practices
Words that were considered ‘technical’ or difficult to understand have been semiotically remediated or recontextualised to make them palatable even to ordinary people. One of the most significant impacts of the HIV pandemic has been on linguistic practices, in which some new words have been coined while other words and phrases reformulated to account for the phenomena. Considering that the HIV pandemic is relatively a new pandemic (Kunkeyani 2008, Bwanali 2008, Lwanda 2002, Kishindo 1994), entailed that some terminologies were being recreated from existing ones and new ones being brought in. This has brought about linguistic broadening. There are certain terminologies that were associated with the technical aspect of the pandemic that have now become part of everyday discourse. Let us consider the terminology in Table 7.1:
Table 7.1: Difficult terminologies for consumers

<table>
<thead>
<tr>
<th>Rural Community</th>
<th>Urban Community</th>
<th>KIIls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Females</td>
<td>Males</td>
<td>Females and Males</td>
</tr>
<tr>
<td>CD4 Count, HIV, discordant couple, PMTCT, Gender</td>
<td>Niverapine, CD4 Count, ARV, PMTCT, Viral Load, window period, AIDS</td>
<td>Window period, CD4 Count, HIV, PMTCT, ARV, dissemination, discordant couples</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Peripheral, neuropathy, ARV, HIV, AIDS, PMTCT, penis, Sexual intercourse, CD4 Count, Window Period, genital diseases, syndrome, discordant couples</td>
</tr>
</tbody>
</table>

Even though these terminologies have become part of everyday discourse, they are not universally understood in the rural and urban areas of Malawi. In fact out of 89 respondents only 26% (23) said they did not encounter problems understanding these new terminologies. Of all these terminologies, all the participants seem to be most familiar with the following

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4 This is the number of literate respondents only.
terminologies: CD4 Count, PMTCT, HIV, AIDS, window period and discordant couples. The study also reveals that the rural communities have more difficulties understanding terminologies than their urban counterparts. Moreover, when the researcher asked the participants to give examples of some of the terminologies that they were familiar with, the urban participants provided more sophisticated terms such as neuropathy, peripheral and syndrome than the rural participants who mostly managed to give terminologies such as HIV, AIDS, CD4 and ARV. It is also noteworthy that the pronunciation of the new terminologies has been re-phonologized to take the sound of Bantu phonology. Some of the technical terms that have been re-phonologized include AIDS, HIV and ARV as is illustrated below:

- AIDS — edzi, kachaiviedzi
- HIV — kachaivi, kachaiviedzi
- ARV — malavi
- CD4 Count — sidifolo
- Condom — kondomu
- Unprotected sex — pulen'i

This type of reformulation of technical terms has eased the problem of translation. The Health Service Providers (HSPs) make use of these reformulated terms. The re-phonologised terms have become so localized in terms of sound that they have become part of everyday vocabulary and the need for explanation or definition is unnecessary. Although the roots of the terminologies are Latin, Indo-European or Germanic, they take the Bantu phonetic form. Since the terminologies referring to HIV and AIDS in local languages tended to be euphemisms and generic (Kunkeyani 2008, Bwanali 2008) it is not surprising that there are no reformulations of linguistic practices from local languages to English. The reformulation has eased translation problems to the extent that translators have two options: either to use the phonologized terms or use the English terms as they appear in the following posters:
Figure 7.1: Poster on ARVs

Figure 7.2: Poster on openness
In the figures above, ARV and HIV have been used as they are within CiCewa clauses (see figure 7.1 and figure 7.3) while AIDS has been re-phonologized to Edzi (figure 7.2). In either case, people understand the message and what the terms refer to. Thus, this researcher argues that the terms have been ‘untechnicalized’ because they have blended themselves as CiCewa dictions and have consequently gained usage in the public space. This ‘untechnicalization’ of the unfamiliar terms is becoming common practice among caregivers as language experts themselves have not come up with a translation of the terms. Through phonologisation and recontextualisation into Bantu or CiCewa vocabulary it can be said that the terminologies have been semiotically remediated (Prior and Hengst 2010). The terms have stopped being English and have been remediated semiotically to be CiCewa terms.
Moreover, below the researcher demonstrates how these technical terms have become part of ordinary people’s vocabulary in the public space. For instance the following utterance;

‘Pamenepe kachaivi ndiye aka kali caukuka, tsopano azibambo amenewa ndiazimayiwa alipalikiliki kankhondo kucithamangitsa caaani…kachaivi kucoka kumbali kwakhoma kwenikweni kuti mwina tikalimbika ifeyo anthu mwina tidzasiyana nako kameneka ca mma 2015 mwina anthu azakhale ndi moyo’ (Namwela, Mangochi rural female respondent)

Akutanthauza kuti kachaivi kalibe kuti kapena amampeza munthu amene ali walunga olo munthu amene ali olumala kachaiviedzi atenga nanga sinayenso ndimunthu ndiye palibe cifukwa coti atatengela coti uyuyu ndiolumala atatenge kachiviedzi ndiye cithunzi cija ....uijeni...maw aja ndi cithunzi cija ...eee...zinthuzi zimene zijo ziko zikuoneka zikuwilizana ndi anthu amene ali pamene paja (Ntaja, Machinga female respondent)

‘Uthenga ndiwakuti monga ifeyo aMalawi tonse pankhani ya kachaiviedzi sikakuyang’ana mbusa sikakuyang’ana shehe sikakuyang’ana muthnu wamba koma munthu aliyyense apezeka ali (.) ndi ciani...apezeka ali ndi kachaiviedzi ndiye tigwilane manja kuti mulili umenewo tiyese kucepetsa…..basi mau ndi omwewo…’ (Sawali, Balaka male respondent)

As they speak about HIV and AIDS and one mentions the word kachaivi or kachaiviedzi, nobody raises an eyebrow or asks any questions because they all understand them. The concept AIDS in edzi is an example of the total phonologisation of the English concept while kachaivi is a phonologisation of the English for HIV. Furthermore, regarding the concepts, for instance, HIV is re-created to chaivi. Then the speakers added the prefix [ka-] to come up with kachaivi. Their re-creation of the phonologized kachaivi is a diminutive because of the prefix [ka-]. Thus, the local people are able to mimic the word kacilombo (tiny animal) which used to be commonly used during the early onset of the pandemic, in the late 1980s and early 1990s. However, the word is no longer used because it is not precise as it can refer to so many other wasting diseases. This could imply that since HIV is described as a very minute thing that cannot be seen with the naked eye, the prefix [ka-] for both kacilombo and kachaivi is used. Additionally, the prefix [ka-]
is also deliberately put there to mean the opposite which is that even though you cannot see the virus, the impact is devastating. Through the localization and phonologisation of the concept, even people who could hardly read or write were able to explain what *kachaivi* meant. This just demonstrates that education cannot be a barrier to re-creation and reformulation. Furthermore, *kacilombo* (small beast) is semiotically remediated, that is, repurposed for the preventive measures against the HIV pandemic. In turn *kachaivi* has intertextual references not only to *kacilombo* but also to the dangerous beast. The diminutive marker [ka-] juxtaposed with [ci-] shows that even if the virus is small its effects are as huge as that of a big beast. Thus, the [ch-] is found in *kachaivi* and *kacilombo*: *ka-ch-ai*vi, *ka-ci-lombo*.

### 7.1.1 The recreation of taboo words

The researcher now turns to the resemiotisation of taboo words and other sensitive material resources to further illustrate how CiCewa has been reformulated through the onset of the HIV and AIDS pandemic. Taboo words and other sensitive material resources related to sexual encounters have been semiotically (re)mediated to make them palatable and less offensive to people. These have been semiotically remediated through euphemistic terms and proverbs. For instance, for the word for ‘penis’, the producers and writers of messages use *cida ca abambo* which literally mean ‘the tool for the man’; the word for ‘private parts’ is *kumaso* which has the literal meaning of ‘face’. Thus, although the participants felt that taboo words are conflicting with their cultural beliefs, the presentation of the taboo words through euphemisms and proverbs has made them palatable. Although there were some people advocating for ‘straight talk’, that is, real words should be used for sexual parts, in reality no real names for sexual parts are being used in HIV and AIDS programs on radios and television. On posters, billboards and other modes of communication for HIV and AIDS which the researcher collected, there were no real names for the sexual anatomy. On the other hand, the use of euphemisms and proverbs represents a modification and creation of the names. This is necessary as the modification and creation of euphemistic terms serve the purpose of avoiding a taboo act which would put off listeners or viewers from viewing HIV and AIDS messages. The semiotically remediated terms thus serve the purpose of avoiding offending people. Therefore, the study has found that same terms which were regarded as ‘taboo’ have lost their taboo status to serve a different purpose.
7.2 Reformulation of cultural practices

Cultural and traditional practices have seen some reformulation with the coming of the HIV pandemic. The practices have not been dropped but have since taken a new direction with a new semiosis. The next section presents different cultural practices that have undergone some changes.

In this section, the researcher demonstrates how cultural practices have been modified and remodelled for HIV and AIDS. Some of the practices outlined by the participants include the *fisi*, *cokolo*, *kulowa kufa/kupita kufa*, *kusasa fumbi/kudzola mafuta/kutaya mafuta*, *kutola nsomba*, initiations for boys and girls, polygamy, forcing under-aged girls into marriage, installation of chiefs and the sex-workers’ profession. These practices are discussed separately below.

7.2.1 The modification of early marriages for young girls

One of the cultural practices that have seen change and modification is that of forcing young girls into early marriages. Girls as young as 13 years-old are given into marriage by their parents. The marriage is arranged between the groom and the bride’s parents without the bride’s knowledge. The moment the groom or his representative, usually a senior brother or an uncle, pays some kind of dowry, then the girl starts living with the groom as a couple. This practice resulted in most young girls being infected with HIV. In the present day, because of advocacy from the government and some NGOs such as World Vision, Girl Guide, YONECO and NICE and because many girls are sent to school, the girls are now only betrothed to their future husbands and then sent to school. According to the participants, the girls, once they are married or their dowry is paid, are liable to their betrothed-man and their in-laws. Some even transfer themselves and stay in their husband’s compound. This presents a modification of the same cultural practice, because although the girl is betrothed young, she can continue to study until she reaches marriageable age. Thus the cultural practice has been modified to suit the conditions of the government and NGOs. Furthermore, both the groom and the girl are now often asked to have HIV testing. The cultural practice has been semiotically modified with the inclusion of HIV testing as a requirement for the marriage.
7.2.2 The remodelling of polygamy

Polygamy is a social practice that involves a man marrying more than one wife. Usually, the man marries the first wife and then decides to get another one or more at some other stage of life. The study area for this research being a Muslim community, a religion that allows polygamy at least up to four wives, polygamy was found to be a common social practice. In this case, religion was the reason for polygamy. However, there are certain cases that polygamy takes place through the cokolo practice (inheritance of a widow), (see section 7.2.6) below. However, this particular social and cultural practice of polygamy, which enhanced the spread of HIV, has been remodelled to avoid the spread of HIV. For instance, nowadays when a man wants to take another wife, the new wife has to go for HIV testing, even if the couple already had had the test. If the couple had not taken an HIV test then all of them, that is, including the bride had to undergo testing. This is to avoid the new bride from bringing HIV into the family or avoiding her from getting the HIV if the man and the other wife/wives are already living with HIV. Thus, HIV and AIDS have remodelled the cultural practice of polygamy. In other words, the community has not abandoned their practice, but HIV and AIDS has stealthily and slyly remodelled its practice. The originality of the practice is gradually losing its grip and very soon there might be no more polygamy. The changing of the cultural practice has led to the changing of the community because of the HIV pandemic. Thus the notion of repurposing by Prior and Hengst (2010), and Irvine (2010) emerges again. This is because the modified, reformed and recreated practice of having an HIV test serves a particular purpose which was not originally there.

7.2.3 Modified initiation practice

Initiation, which was also one of the practices attributed to the spreading of HIV, has been semiotically modified. The initiations have been adapted to prevent the initiates from being infected with HIV. The initiation done these days, in the era of the HIV pandemic, is not the same as the one done when the HIV virus was not yet discovered. For instance, presently some boys are sent to hospitals to get circumcised and when they are discharged from the hospital, they then go to the initiation camp to get some counselling, advice and techniques on life as an adult. However, there are some families that still do the old practice of circumcising boys in the initiation camps because of not only economic reasons but also to uphold their belief of the practice. They believe that sending children to hospital for circumcision is expensive, because it
is usually done at paying health facilities, and also public facilities need bookings which can make initiates miss the initiation period, the winter season. But other families also argued that that kind of practice, sending initiates to hospitals, devalues the cultural value of the practice. However, although, they send the initiates to initiation camps, the initiation done at the camp has also been modified because the ngalibas do not use one blade as was done in the past. They now use a different razor blade for each initiate. Furthermore, the modification of the circumcision practice also applies to the use of the razor blade. Formerly, they used one blade for initiates - it was not a razor blade but a sharp small knife which was passed on from one generation to another generation through the line of ngalibas. The change from that small sharp knife to a razor blade is in itself a semiotic modification of the original practice. Then the modification of blades from a small knife to razor blade was extended to asking each initiate to bring his own razor blade to the initiation camp. For some people, the practice has also shifted from having circumcision in initiation camps to having initiation in health facilities. Although Munthali (2001) claims that the practice has just gone underground, this researcher argues that recent cultural practices are different from the time when Munthali did his study. This study shows that the cultural practices have been remodelled. Reforming cultural practices does not necessarily mean stopping them, only that certain aspects have been changed or are not being followed.

In fact, trying to ask those indulging in the initiation cultural practice to stop their practice completely would be counterproductive. However, the people have already changed and adopted new methods of doing the initiation with the coming of the HIV pandemic as can be seen from the following responses:

‘Mukati tisiye, kodi mukufuna tonse tithe eti’ (when you say we have to stop...i.e. referring to the cultural practices....do you want all of us to finish i.e. dying)’ (male respondent from Mangochi –Namwela)

‘….yeah it’s like to them chinamwali is something that they cannot part ways with, it is there for them…. (Mangochi DC)

In turn, the new reformed and remodified cultural practices serve a particular purpose which is to avoid HIV transmission.
7.2.4 There is a 'new' fisi in town

The practice of fisi ‘hyena’ has been transformed for HIV and AIDS. There are three types of fisi. One is a male person who helps families which are having problems in having children by having sexual contact with the childless wife. The other fisi is a male initiate who is supposed to have sexual contact with any woman when they get out of the initiation camp as part of the completion of the initiation process. The third is the fisi that does death cleansing. Thus, the initiates would act as fisi by sleeping with girls or older women who have gone beyond the childbearing age. If the initiates are girls the fisi would be a boy or a man who would have sex with them at night as completion of the initiation. The new fisi now undergoes HIV testing. The women involved in the fisi practice undergo HIV testing too. They do not use a condom if the fisi practice is for helping a couple to get a child. Nevertheless, if the fisi is for initiates to practice sexual acts taught at the initiation camp, then the fisi is told to use a condom. The practice has been remodelled from having unprotected sex to protected sex. The act of sending fisi for HIV testing is again an adaptation of the cultural practice. However, there are some areas where it would be difficult to ask the community to cease the practice as this is regarded as part of the cultural practice. According to participants, initiation is part of their culture and as such cannot be stopped as outlined in the following:

‘….yeah it’s like to them chinamwali is something that they cannot part ways with, it is there for them…. (Mangochi community)

To confirm what the senior government officer had said, one participant also narrated that they still practice kutaya mafuta;

Timapangabe. Anyamata akabwela ku ndagala amayenela kutaya mafuta. Nanga siacimwene⁵, nanga tidziwa bwanji kuti ndi aciwmene. Olo mtsikana amayenela kutaya

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⁵ Acimwene which literally means ‘brother’, is a term used for initiates for the moment when they come from the initiation school. They are no longer called by their given names. Every boy is called acimwene in addition to his own name, for example, if he was named John when he graduates from the initiation he would be called ‘acimwene Che John’;
mafuta⁶, kupanda kutelo ndiye kuti azake amusekata!...ha..ha..ii amwali zikutika...
(Zomba rural female respondent)

‘We still do it. When boys come from initiation school, they are supposed to ‘throw away’ the body lotion or ointment. Because he is now a ‘brother’, how are we going to know that he is now ‘our brother’? Even girls when they come from initiation, they are supposed to ‘throw away’ the body lotion without which then her friends will laugh at her…ha..ha..ii my friend these things are still being practised…’(Zomba rural respondent)

Although the practice is still being performed, it is done differently because of the HIV pandemic. As explained earlier on the practice has been remodelled. The fisī is asked either to use a condom or to go for an HIV test. Since the practice of initiation cannot be complete without the sexual practice, it has been remodelled to avoid the initiates getting infected with the HIV virus. The initiation is incomplete without the sexual act as stated in the quotation above. Nevertheless, the sexual act is not the same; it has been transformed to suit the HIV pandemic. The remodelling of the fisī and kutaya/kudzola mafuta/kusasa fumbi has again been done through semiotic remediation. The sexual act which was done normally has been semiotically remediated through the use of a condom

7.2.5 Kulowa/kupita kufa (death cleansing)

Another cultural practice that has been modified is the practice of kulowa/kupita kufa. This practice exemplifies the third type of fisī. Kulowa/kupita kufa is a death cleansing cultural practice which has also been modified to avoid contracting HIV. Kulowa/kupita kufa involves close relatives of the deceased, for instance, when a husband has died, then the widow has to undergo a cleansing ritual which involves the widow having sexual contact with a surviving

⁶‗kutaya mafuta‘ literally means ‘to throw away body lotion’. This is a term used to refer to a sexual practice soon after graduating from initiation. This practice is arranged by elderly people and is done at night on the day they come out to appear to the public. The other term is ‘kudzola mafuta’ which is used in other areas where initiates do not use body lotion while in the camp until the graduation day and to cement the use of lotion, the sexual act has to accompany it.

NB: it should be noted that this initiation, in this region, is usually for children as young as eight years-old for both girls and boys. For this reason girls go to initiation before menstruation and they have another one when they start menstruating.
brother. If the deceased had no brother then an uncle or any close male relative available does the cleansing. This practice has since been modified by replacing the sexual act with the eating of herbs for some communities; while others use a condom. By modifying the practice from a sexual act to use of herbs, the people have remediated the cultural practice semiotically (Prior and Hengst 2010, Irvine 2010). The cultural practice still exists but using a different semiosis and context. Thus, although some research has shown that the cultural practices are defeating the measures taken against the HIV pandemic (see Kunkeyani 2008, Nagoli et al 2010), the practices have actually been modified.

Consequently, because of the shift from the practice of having a normal sexual act to the practice of having a sexual act with a condom, the meaning making has changed. The meaning is currently for HIV and AIDS. It is more than just for completing the initiation practice but also for avoiding the spread of HIV. Additionally, since the remodeling of the practice is done to avoid HIV transmission, the practice has changed for a particular purpose. Thus, this presents the ‘notion of repurposing’ (Prior and Hengst 2010, Irvine 2010). It is the same initiation but has been reformed, recreated, modified and remodelled for HIV and AIDS.

7.2.6 Cokolo (wife inheritance)

*Cokolo* is the practice of inheriting a widow. In the past, a widow would be inherited by the brother or an uncle of the deceased. However, this cultural practice has been modified. Before a widow or a widower is inherited by a surviving relative, both have to undergo HIV testing. If one of the parties is found to be HIV positive then the inheritance can fall through. In some communities the practice has been adapted in such a way that the widow or widower is not remarried to anybody but is asked to stay in the compound and be looked after by the surviving relatives materially and financially. He would support her the same way he supports his wife but would not have any sexual contacts. This is a new form of polygamy which has emanated because of the HIV pandemic. This is the case when one of the parties in the inheritance is HIV positive. Thus, this practice has also been remediated semiotically as they added or removed some semiosis. They have added HIV testing (for some communities) and have removed the sexual part (in other communities). The *cokolo*, which involved the context of an unchecked sexual act, has been recontextualised to be checked or for the abandonment of the sexual act.
7.2.7 Installation of chiefs
Another cultural practice of chief installation has also seen modification to avoid either the chief or the girl involved from being infected with HIV. The night before a chief is installed, he is provided with a virgin to sleep with. It is used as a symbol of breaking boundaries. Just like he is breaking the virginity of the girl so will he break all obstacles he might meet during his tenure. Although, this practice is not common in the Eastern region, some participants however mentioned it as one of their cultural practices. The practice has been semiotically remediated by removing the involvement of the virgin and thus it has been put into a different context. Currently, they use herbs only. It has been recontextualised as a preventive measure for the HIV pandemic.

7.2.8 Kutola nsomba (picking fish)
This is a practice which involves girls having sexual acts with fishermen early in the morning as they come from a whole-night fishing spree in exchange for fish. This practice has also been modified and remodelled as most girls involved in the act insist on the usage of a condom. The practice has been semiotically remediated (Prior and Hengst 2010, Irvine 2010) from having unprotected sex with fishermen to protected sex. Thus, the practice still exists but has since been adapted with the coming of HIV.

7.3 The reformation of some cultural practices through the use of mtela7
Some communities have completely reformed the cultural practice from using the sexual act to using traditional medicine. They give their initiates traditional medicine in place of the sexual act. Thus instead of the initiates indulging in sexual acts as part of the initiation process, the initiation camp counsellor (ngalibas/namkungwis) gives the initiates traditional mtela ‘medicine’ as completion of the initiation. This is still a reformation, not of the sexual act but of the initiation process because they have replaced the sexual act with traditional medicine.

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7 *Mtela* is a local name mostly used in Malawi to refer to herbs which are not harmful but helpful to people. But herbs which are harmful such as those meant to kill people are called *mankhwa*.
The *kulowa/kupita kufa* has also been replaced with the use of traditional medicine. This practice could not be reformed with the use of a condom because the cleansing occurred on contact between the man and the woman involved in the cleansing act. So the condom would not work hence the replacement of it with medicine.

Thus the use of traditional medicine for the completion of both initiation and the funeral process reveals the reformulation of the cultural practices. The practices have been semiotically remediated from using sexual practice to using *mtela*. The shift from the practice of using the sexual act to another one, using *mtela*, has altered the meaning making of the cultural practices. The alteration is from the completion of the initiation and funeral process to the completion of the initiation and funeral process for the HIV pandemic.

### 7.4 The transformation of *Ambele cile* practice for HIV and AIDS

Yet another practice that has been changed and transformed is in the area of sex-workers. This is the factor of socio-economic problem that participants of the study pointed as having an impact on the consumption of HIV and AIDS messages too. The majority of participants that mentioned this factor were mainly the educated, elite, urbanite people. Some rural participants also mentioned it though with no special emphasis. Nagoli *et al* (2010) observe that in areas along the lake, people indulge in sexual activities for either economic gains or to exploit others who are economically handicapped. Thus, the impact that the socio-economic status has on the understanding and interpretation of HIV and AIDS messages is twofold: some are for those that look for money and end up indulging in sexual acts or they indulge in the act because they do not have money to buy relish. Others comprise families or parents sending their girls to indulge in these acts just because there is nothing for food in the house. The second group is the group that gets manipulated because they are those in need of money. The manipulators are usually fish-mongers who stay away from their family for long periods (Nagoli *et al* 2010). They offer them money in exchange for sex. This dual impact of the HIV pandemic on people has been changed. The girls still indulge in sex-work but they insist on using *chishango* (a condom). According to

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8 *Ambele cile* is the CiYao term which means ‘payment first or money first’. It is a term used by those that indulge in sexual activities in exchange for money. It actually means ‘pay me first before we start anything’.

9 *Chishango* is a CiCewa name for a shield. This is the shield used for protection in war.
the narratives from some of the sex-workers interviewed for this study, they tell their clients to use a chishango.

‗timawauza avale chishango akakana…. ine ….ndiye ndimawabweza. Komano amatipatsa ndalama zocepa ati cifukwa takana puleni kikiki….‘ they all laugh. (we ask them to use a condom if they refuse….as for me….I send them away. However, when they use a condom they give us little money because we have refused to have unprotected sex kikiki….’they all laugh.) (Mangochi urban female respondent)

These ladies, three in number, were organized to meet the research team by the District Youth Coordinator (DYO) as it was difficult to get to them. The researcher presumes that these ones are those that were trained and oriented on the effects of the HIV pandemic. Thus, as illustrated in their response, the practice has not stopped but it has been modified by insisting on the use of a condom. The use of chishango in the sexual act is a semiotic remediation of the sexual act. They used to do without chishango but now they have semiotically remediated the same act by bringing in a new semiosis, chishango. Thus the meaning of sex has in turn changed because of the shift of practice (Iedema 2003). As Iedema (2003) observes, meaning making is by choice. Thus, the ladies’ choice of insisting on chishango brought in a new meaning to the sexual act. It is now referred to as safe sex. Furthermore, the semiotic remediation has taken place to serve the new purpose of safe sex. It was just sex in the past, now it is safe sex. Thus, the sexual act has been repurposed (Prior and Hengst 2010, Irvine 2010). The new sexual act has been adopted for HIV and AIDS.

7.5 Conclusion
This chapter has discussed how linguistic practices have been reformulated for HIV and AIDS. The practices have been semiotically remediated for health palatability. They have been reformulated through the de-tabooing of unpalatable words to palatable for some terms, and from technical terms to non-technical through phonologisation for others.

The study has shown that there is a blurring of lines between what is technical and a non-technical terminology as the former have been localized and have become part of everyday
discourse. The chapter has also demonstrated that there is an urban-rural divide in the consumption of HIV and AIDS in that the former are able to re-phonologise sophisticated unfamiliar terms such as window period, discordant couples, sero-status, microbiocides, non-reactive, receptor cells and prevalence rate while the rural can only re-phonologise commonly used technical terms such as HIV, AIDS, condom and plain sex.

The chapter has also illustrated how cultural practices have been reformulated through modification, and remodelling to prevent spreading HIV. This researcher has shown how cultural practices have been semiotically remediated by removing sexual acts and adding either the usage of condoms or herbs to the original practice. For example, there is now a new modified type of fisi, a new kutayakudzola mafuta practice, a remodelled initiation procedure which uses one razor blade per initiate.

The next chapter continues the discussion on the reformulations that have taken place due to the coming of the HIV pandemic. In particular, the chapter discusses the changes that have taken place in the radio and television programmes for HIV and AIDS messages.
CHAPTER EIGHT: REFORMULATION OF ELECTRONIC AND PERFORMATIVE MODES OF COMMUNICATION

8.0 Introduction
This chapter illustrates how reformulation has taken place in the refigured performative and electronic mode of communication. Furthermore, the chapter shows how the programs have divided the listenership. Thus this chapter demonstrates how HIV and AIDS programs are presented to the audience. The chapter, additionally, unravels how different radio stations and television exploit different genres for their audiences. It also demonstrates how traditional courts like pakachere have been adapted as television talk show.

The chapter lastly reveals that with the onset of HIV and AIDS, television programs have shifted from just being entertainment. HIV and AIDS has necessitated that change and some programs are talk shows while others are drama series.

8.1 The semiotic remediation of TV programs
The coming of the HIV pandemic has necessitated modification to a number of TV genres to accommodate HIV and AIDS messages. In the past, television presented programs that were exclusively entertaining, or exclusively educational. However, now program producers are advised to streamline their program with HIV and AIDS messages (NAC 2003). The modification to particular genres or the use of multiple/blended genres has impacted the format of presentation. There are many programs that address issues of HIV and AIDS but the popular ones amongst the viewers are Pakachere and Tikuferanji. Below the researcher discusses these two television programs.

8.1.1 Pakachere – a talk show program
This section which concentrates on pakachere television program has five sections. These include pakachere as a genre, pakachere as a talk café, traditional court within the pakachere program and the section presents a comparison of the standard talk show and pakachere talk café.
8.1.1.1 ‘Pakachere’ as genre

This section takes a look at the program from a generic perspective. The name of the program pakachere is based on a traditional court usually conducted under a kachere (fig) tree. The Kachere is a big tree which has many branches and has green leaves throughout the year. Because of the many branches and leaves, it forms an umbrella shape which provides shade to people sitting under it. Below is a picture of the tree.

Figure 8.1 Kachere tree  (http://flickrhivemind.net/Tags/kachere/Recent accessed on 10th June 2012)

Under the tree, traditional courts are conducted at which civil disputes are settled. Other villages which do not have the kachere tree use any other big tree. However the court session is still referred to as being done under the kachere tree. It is also used for discussing different issues affecting the community at the village level. When the village court fails to settle a dispute, then it is referred to a government court. [Pa-] is the locative prefix which denotes ‘on’ or ‘at’. Thus, ‘Pakachere’ literally means ‘at the kachere tree’. Because of that people just say ‘ndikutengela ku kachere’ (I will take you to the kachere tree) when they actually want to say ‘I will take you to court or I will sue you’. Under the kachere tree there are benches on which the chief and his indunas sit facing the rest of the villagers. The villagers, including the accuser and the accused,
sit on the ground facing the chief and his advisers. Thus the sitting plan of the village court can be presented diagrammatically as follows;

<table>
<thead>
<tr>
<th>Induna (facing the audience)</th>
<th>Induna (facing the audience)</th>
<th>Chief (facing the audience)</th>
<th>Induna (facing the audience)</th>
<th>Induna (facing the audience)</th>
</tr>
</thead>
</table>

The accuser (facing the chief)  

Audience (facing the chief)

<table>
<thead>
<tr>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
</table>

![Figure 8.2: The structure of Pakachere court](image)

In this court, it is the accused, the accuser, and the indunas that do the talking. The chief merely gives his judgment. The audience listens and are not allowed to ask questions or contribute to the discussions. The audience only takes part when the indunas feel that either the accused or the accuser needs some guidance from relatives, and then they are sent away from the scene to discuss it and come back to the court. Thus the court starts with one induna presenting the matter to be discussed and inviting the concerned parties to take their sitting positions. Then the accuser presents his/her grievances. Next, the accused defends himself/herself. After this, the indunas deliberate the situation before everybody else. Then they send all the people away, including the concerned parties, to give room for the indunas and the chief to make a decision. Lastly the audience and concerned parties are called back to hear the judgment.

**8.1.1.2 The Pakachere as a ‘talk café’**

The Pakachere talk show started as both a television and radio talk show in the early 1990s. It was introduced with the sole purpose of taking measures against the HIV pandemic. It is a show that is viewed once a week both on television and aired on MBC 2 radio station. Its target is the youth hence the audience for the television show is mostly youthful. The talk show comprises
two presenters, invited guests and the audience. It is also a live phone-in program both on television and radio where the unseen audience (listeners and viewers) phone-in asking the presenters or the invited guests questions on the topic under discussion. The Pakachere talk show starts with a jingle which goes like;

   Leader: Pakachele ayee
   All: pothela nkhani x two (under the Kachere tree is where people discuss issues)

The moment one hears this song, he or she knows that the talk show is coming. At this stage, the main presenter is seen coming into the television studio dancing to the tune of the song. He or she is followed by the co-presenter. By this time the audience is already seated in the studio. The main presenter then introduces the topic to be discussed on that day. Then the invited guests, who most of the time comprise experts on the topic under discussion or victims, are called into the studio. For example, if it is the topic of HIV and AIDS in connection with rape, then they would invite someone who is living with HIV because of having been raped. The presenters and expert or victim discuss the matter and then they invite the audience to ask questions or to comment. The questions and comments are also extended to the listeners and viewers of the program. The program ends with the same jingle but this time the presenter does not dance. He just waves at the audience and viewers.

8.1.1.3 Traditional court within the Pakachere talk café

From the sitting arrangement of the TV show, it is clear that the sitting plan of the village court has been adopted for the presentation of the Pakachere program and thus a reformulation of the traditional court. However, the only difference between the traditional kachere court and the television program is that the traditional court has two extra benches, one on each side of those under dispute, who sit on either side of the senior ‘judges’ benches. Another element that has been reformulated is the main presenter who enters the venue dancing to a jingle.

Similarly, since the Pakachere program is meant to provide solutions on social problems to the viewers, this settling of social disputes has been repurposed to provide HIV and AIDS messages
to the viewers. Additionally, the *Pakachere* program has presenters and invited guests who sit facing the audience as illustrated in Table 8.3 below.

<table>
<thead>
<tr>
<th>presenter</th>
<th>Invited guest</th>
<th>Presenter</th>
<th>Invited guest</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

**Figure 8.3: The adopted television *Pakachere* scenario**

Figures 8.2 and 8.3 illustrate the repurposing of the village court. However, the *Pakachere* village scenario can have more than four chief advisers although the number does not normally exceed six. This feature seems to have been difficult to be adopted by the television producers as it would have a financial implication on the company, hence the maintenance of two presenters. The number of the television invited guests usually does not exceed two per session. This could be because of economic reasons. Thus, although there is reformulation of the village scenario, the television program still has a shortfall of some figures for full representation of the *Pakachere* traditional court. Another difference between the two is that at the *Pakachere* traditional court, the audience is passive. They only listen and witness the cases being discussed and judgment being passed. The audience does not take part in the discussion nor ask questions, whereas with the television *Pakachere* program the audience is allowed to ask the invited guests or presenters questions. The reformulation can be summarized diagrammatically as follows:

*Kachere* tree  →  auditorium

*Kachere* traditional court  →  *kachere* television program

Standard language  →  hybrid language

Chief and his advisers  →  Presenters and invited guests

Chief as judge  →  solutions from the audience, presenter just facilitates

Elderly audience  →  mixed audience

Men and women sit separately  →  mixed sitting
Settling disputes and discussing social issues → discussing HIV and social topics
The accused is a person → the accused- HIV
Shade of kachere tree real → shade-symbolic (protection)

8.1.1.4 The multi-semiosis of the Pakachere program on television

The Pakachere program has been reformulated from being mono-purpose to multipurpose using genres. These include the presenter, who is also a well-known actor, coming onto the stage dancing to the jingle whilst whistling and ululating. The use of a jingle is to signal the opening of the program and the program further takes questions from listeners and viewers. The dancing of the presenter moves away from purposes of the program as well as from the standard normal talk shows (see Bhatia’s 1993 list purposes for communication). It serves no useful purpose for the viewers except entertaining them. The song re-narrates the activities that take place under the kachere. However, since it has been remediated and recontextualised then it is no longer a tree but a sophisticated venue, full of modern hyper electric equipment. The jingles comprise of drums and electric equipment and these upgrade the sophistication of the traditional court, the kachere tree, to an auditorium. The kachere program ends with question time within which the audience asks the invited guests as well as the presenters, some questions on that day’s topic. This part of the program also illustrates a departure from the traditional kachere because at the kachere traditional court questions come from the chief, his indunas, the accused, and the accuser as part of cross-examining the case. The drumming in the jingle is an attempt to make the program sound local by adapting the drumming of traditional songs so as to attract listerners and viewers’ attentions but this is augmented by the addition of other electric equipment. The language used in the show is also different from the standard village language where they use proverbs and euphemisms to youth language. The television Pakachere program uses youth language since the audience is mostly the youthful.

8.1.1.5 The differences between stages of the standard talk show and the Pakachere talk show

Below, the researcher presents a summary of the differences between the standard talk show and the remediated one and this is illustrated diagrammatically.
The *Pakachere* talk show changed from the standard talk show by adding the question time. The questions come not only from the audience in the auditorium but also from the viewers and listeners of the program.

### 8.1.2 The *Tikuferanji* television program

On the contrary, another program that has come as a result of the changes of television programs is the *Tikuferanji*. In the past there were entertainment and news-worthy programs but now HIV and AIDS has to be streamlined into the plans. Unlike the *Pakachere* which is a talk show, *Tikuferanji* is a drama/soap program that also addresses issues of HIV and AIDS. The change from talk show to drama reveals a division in the viewership of the programs. Some viewers prefer the talk show while others prefer the drama program. More people prefer the drama to the talk show because of some characters involved in the acting as in the following statement;
‘Aa ife timangofuna tione kuti Manganya agwaza ngini\textsuperscript{10}yanji lelo’ (aa we are only interested in seeing what Manganya is going to do that day) (youth respondent, Balaka FGD).

The character in the drama/soap of Manganya is popular on this television show to the extent that some people have labelled the program Manganya. This is further explained below.

8.1.3 The name Tikuferanji
Tikuferanji ‘why are we dying?’ is a replay of the act of people dying because of AIDS. It is a name from the verb kufa ‘to die’. Thus Tikuferanji is a resemiotisation of the verb kufa (Prior and Hengst 2010, Irvine 2010). Additionally, the remediated Tikuferanji is a question which is ‘why are we dying?’ Thus, the acting in this program is supposed to answer the question of why there are so many deaths. The actors dramatize the behaviours of how people get HIV and how they can prevent it.

8.1.4 The semiotic remediation of the Tikuferanji program
The scene in the Tikuferanji program is a replay of a real life scenario. Their acting in the show is another resemiotisation of the real. For instance, they would mimic a traditional healer who is using one razor blade for all his customers. In the acts, there are usually two different family homes: one is a modern urban family and the second is a rural family. The urban family has a modern house with modern furniture and facilities that include driving expensive posh cars, using mobile phones, having sofa chairs, modern water-closet toilets, fridges, microwaves, cookers and many more. When they portray the urban scenario, the costumes of the actors/actress are also ‘urbanistic’, actors wearing expensive suits and they code-switch between English and CiCewa. With the rural scenario the costume is the opposite. They wear tattered clothes, riding bicycles, having an old pit latrine; living in old dilapidated daub thatched house with only a mat inside, cooking with firewood on three stones and the language is strictly standard CiCewa. However, there is always a connection between the urban and rural families. One person, the husband or the wife in the village, would be related to one member of the urban family, either the husband or the wife.

\textsuperscript{10}Kugwaza ngini is a hybrid language which can mean ‘to do an action’
The ‘Tikuferanji’ drama or soap opera\textsuperscript{11} program has actors and actress who have since been idolized by the community. The soap/drama is a sponsored program under ADRA, a religious NGO and the director of the NGO is the main actor in this soap/drama. Thus the religious organization has been remediated from spreading the word of God to spreading HIV and AIDS messages. \textit{Tikuferanji} has a character that usually depicts a naïve, foolish characteristic in all the acts. As such, he is the most liked character by the community. This character is Manganya who doubles as the director of ADRA. Some members of the community have even renamed the program after this character ‘Manganya’. Thus people are remediating the name of the program to a person. People say ‘I want to watch the Manganya program’ on TV as if the program is called ‘Manganya’.

The usual stages of drama as a genre which are the opening, progression and ending start with a jingle just like the \textit{Pakachere} talk show. The jingle also comes when they are changing the scene in between the acting. Sometimes the song can be heard in the background during the acting, especially when the part does not involve someone speaking. Currently the program does not only act out HIV and AIDS topics; it also caters for other social issues such as domestic violence, violence against children and many more. Thus the program which is supposed to address issues of HIV and AIDS has further been adapted to address other social issues. A Zomba urban respondent commented that the program has ‘lost its focus’. Currently the program deals with whatever issue is on the ground. For instance, if it is during the campaign of ‘Violence against Women’ then that week they act on that topic.

\textbf{8.1.5 The difference between the \textit{Pakachere} and \textit{Tikuferanji} television programs}

According to the rankings of modes of communications by both the KIs and consumers (see Tables 6.7 and 6.8 on pages 148-149 of this thesis), the study has shown that the use of the talk show \textit{Pakachere} as a tool for disbursing HIV and AIDS messages to the community is more appropriate than the drama, \textit{Tikuferanji}. This argument is based on the fact that semiosis used in the talk show is direct. During the presentation of the program, the panel, the presenters and

\textsuperscript{11} The researcher has used both drama as well as soap opera because the stories sometimes do not demonstrate continuity.
invited guests or experts discuss HIV and AIDS issues while people are viewing the program and are able to ask questions.

Furthermore, the community likes the character ‘Manganya’ in particular. In turn the HIV and AIDS messages do not seem to be consumed as they seem to be engrossed in the humorous acts of their favourite character. Thus, although the character makes the soap popular, it is a distraction to the consumption of the HIV and AIDS message as one of the respondents stated.

‘Aa ife timangofuna tione kuti Manganya agwaza ngini yanji lelo’ (aa we are only interested in seeing what Manganya is going to do that day) (youth respondent, Balaka FGD).

The intention of showing the soap is to pass on the HIV and AIDS message and if people, the target group, are interested in the action of the characters only, then the soap does not serve its purpose.

What the community love about this pakachere talk show is the fact that it is also a phone-in program in which people who are not in the show phone the TV station when the show is on to ask questions. The study results indicate that youth are the ones who showed more interest in this program than the adults. This is a very good program as there is first-hand experience from someone, for example, either she is HIV positive because she is a sex-worker or she was raped. The participants of this study indicated that it is very fascinating to listen to stories being told by those directly affected by the HIV pandemic. However it lacks medical expertise as it is just ‘a sharing of one’s life experience’. At the end of the show the main presenter provides advice to the community. The message of HIV and AIDS is consumed in its entirety in this program but the drawback is that most of the time the audience in the studio consists of youthful members. Malawian adults are very reserved and conservative and when a program is presented by someone who is young and the audience comprises youths, the adults switch off as one respondent said,
‘Aa program imene ija ndi ya anyamata. Ine sindionela’ (aa that program is for the youth I do not watch it) (Balaka FGD respondent).

The HIV and AIDS pandemic is said to be a challenging issue and UNAIDS (2010) put a new vision in place because of the new HIV infections that are being observed and as such any program with HIV and AIDS messages has to be taken seriously by the producers and writers of the messages. The producers have to see the gravity of the action taken by the world governing body, UNAIDS. If the program is to cater for all types of audience then they have to balance this in their production and presentation so that they do not leave out a category of the community.

Too many semiotics can also divert the attention of the target group. The target group, as the study illustrates, loses interest through some semiotics like the phone-in. The consumers articulated that sometimes those phoning in ask stupid, irrelevant questions which send the live audience to laughter, whistling and clapping of hands, diluting the seriousness of the topic under discussion.

This mode of communication as the results show is a disadvantage to the rural community as out of all the rural people who participated in the interviews, only four people had television sets. Some of these people are retired government officers and so they got their television sets while they were working. It is very difficult for someone in the rural area to buy a television set due to income problems. They would opt to buy other necessities rather than a television which they regard as a luxury.

8.2 The semiotic remediation of radio programs
Just like the television programs, the radio programs have also been remediated because of HIV and AIDS. The semiotics for HIV and AIDS messages include jingles, music, and radio drama. Formerly radio was meant to inform people, educate and entertain listeners. Presently, there are additional radio programs that warn people of the dangers of the HIV pandemic through different semiosis.
8.2.1 MBC radio programs

MBC has two radio stations, MBC 1 and MBC 2 which are both state owned. MBC 1 airs traditional programs, that is, programs that deal with people’s lives such as farming, health and education. It is the station that is used by the government to air state public functions, announcements, and etcetera. Because of the kind of programs that are aired on this radio station, the language that is used is ‘standard’. MBC radio 1 also uses proverbs and euphemisms and is regarded as a radio station meant for the older generation (comment from participant, Balaka FGD). MBC radio 2, on the other hand, is a ‘youthful type’ of radio station where the programs target the youth and as such presenters are mostly the youth. MBC 2 is more sophisticated than MBC1, as forms of urban youth language such as slang, hybrid and standard language are used. It features programs that use ‘straight talk’ language and it is meant for the younger generation.

Radio programs at MBC radio stations have been blended with HIV and AIDS messages. There are some exclusive HIV and AIDS programs while others have assimilated HIV and AIDS into the programs. Thus, the programs have been remediated as part of mainstreaming HIV and AIDS.

The music currently presented in these radio stations is also different because of the outlined reasons. There are modern types of music on MBC 2 and if one wants to listen to traditional songs then MBC 1 is the ideal station (comment from a participant, Machinga FGD).

The MBC radios have more than ten programs on the HIV and AIDS pandemic which are spread over seven days from Sunday to Saturday. Some of the programs comprise the following:

1. ‘Phukusi la Moyo’ which is aired in the local language of CiCewa and according to the KI who was one of the producers, the program is meant for the rural community and it usually emulates and recreates the village community. The program concentrates on prevention (MBC radio 1).
2. ‘Let’s talk it over’ this one focuses on the youth. It is fully aired in English and is also a prevention program (MBC radio 2).
3. ‘Njatose’ a Tumbuka program and as such targets the northern community since the Tumbuka language is largely spoken in that region (MBC radio 1).

4. ‘Tikuchitaponji’ a CiCewa program aired on Sunday and targets employers and employees. The rationale of this program is to see the impact of HIV and AIDS in the work environment (MBC radio 1).

5. ‘Kulinga Mawa’ another CiCewa program for all categories of individuals (MBC radio 1).

6. ‘Mututhulah Khimarna’ a Lhomwe program meant for the Lhomwe speaking community which is part of the Southern region (MBC radio 1).

7. ‘Tiunikirane’ a Tumbuka program also targeting the northern part of Malawi or the Tumbuka speaking community (MBC radio 1).

8. ‘Kauzganga’ another Tumbuka prevention program meant for the Tumbuka speaking community (MBC radio 1).

9. ‘Youth Alert’ an English program targeting the youth and also uses youthful, hybrid language such as ‘sharp’ for greetings (MBC radio 2).

10. ‘Timasukirane’ a CiCewa program meant for all groups of people (MBC radio 2).

11. ‘Pakachere’ a talk show program involving a group of people discussing the topic of HIV and AIDS but they also allow people to phone in and ask questions or give comments. This program is also aired on television as a live show (MBC radio 2).

These programs are a combination of programs from both radio stations. However, most of them are from MBC radio 1. These programs demonstrate the remediation of radio stations’ programs as they are spread over the seven days of the week. As one can note the programs are multilingual. The producers attempted to cover all languages spoken in Malawi except for CiYao, CiSena, and other minority languages. It could be that the KI forgot to mention the other program as she was being interviewed because CiYao, although it has a quiescent and inert orthography, it is not a minority language, and it ranks second to CiCewa (Mtenje 2008). It could also mean that there are no CiYao programs or they leave out the language deliberately as there are other radios concentrating on this language such as Radio Maria and Dzimwe community radio.
8.2.2 Radio Maria

Radio Maria, which is one of the private radio stations, has also remediated its programs for HIV and AIDS. It was set up by the Catholic Church to air religious programs and prayers. However, things have now changed to include other programs such as an HIV and AIDS program namely ‘Ulangizi wa Cikhristu pa matenda a HIV and AIDS’ which literally means ‘Christian counselling on HIV and AIDS diseases’ and the program is only 15 minutes long, aired once a week, on Friday from 2.45 to 3.00pm. Thus, though the time allocated for HIV and AIDS is not adequate for sensitization whether on prevention or treatment, the radio station programs have however remediated semiotically to include HIV and AIDS. The program is mainly a talk/discussion program in which several people discuss issues of HIV and AIDS from the biblical angle. Those talking in the program give advice to the public about the Christian way of living which is against promiscuous sex and no sex before and outside marriage. They emphasize on abstinence and faithfulness. They do not talk about condom use. By providing an HIV and AIDS program the radio station has illustrated how religious radio programs can also remediate semiotically. They have not only concentrated on selling or airing religious messages but also HIV and AIDS messages. Thus according to Prior and Hengst (2010) and Irvine (2010), the same radio which concentrated on Christian issues has repurposed its mission and has now blended HIV and AIDS messages.

However, some members of the community do not listen to it as much as they do with the national radio stations, MBC radio 1 and MBC radio 2. These participants felt that it was too religious and that they do not find it worth listening to as expressed in the following statement;

‘Ine ndiye sindimvela Radio Maria, tidzingopemhela basi (me, I do not listen to Radio Maria, should we be praying all the time) (Mangochi respondent)

Although this researcher felt that the respondent was exaggerating in his response, the other members of the FGD concurred in unison that there are a lot of prayers on the programs on Radio Maria, something which puts the community off. Even the program mentioned above, starts and ends with a prayer.
8.2.3 Dzimwe community radio

Dzimwe radio programs have also undergone semiotic remediation because of the coming of HIV and AIDS. This radio is restricted to Mangochi community, although some parts of Balaka and Machinga can tune in. Its coverage is very limited because it is categorized as a community radio station. Dzimwe radio station was specifically established for wild life and environmental protection. Thus it used to air programs on wildlife and environmental protection since it was established by the Parks and Wildlife department (verbal communication, program manager). As such this radio is stationed inside the wildlife building. According to the program manager interviewed, it is supposed to air sensitization programs on wildlife and environmental protection. Thus other programs are aired as a favour and not a priority. However, with the coming of the HIV pandemic, their programs had to be remediated. Thus, they have programs on PMTCT from the health department. There were also other printed pamphlets like magazines such as ‘One Love’ meant for distribution to the public although they were just lying idle in the offices. The PMTCT program is aired only once a week. It is on breastfeeding. It gives instructions as to how HIV positive mothers can breastfeed their babies for the first six months as well as the importance of breastfeeding. The semiotic remediation has changed the narrowness of the radio’s program as it has to include HIV programs.

However, some radio stations are not captivating for the listeners. Radio stations such as Dzimwe and Radio Maria do not have programs that incite listeners to be glued to them. Thus, although they have HIV and AIDS programs, the programs hardly have a listening audience. This in turn does not serve the purpose of semiotic remediation. For instance, the community seemed not to be aware of the PMTCT program aired on Dzimwe radio. When they were asked about it during the interviews and FGDs they just laughed, looking at each other. One respondent articulated frankly;

‘Ah ngati tiname, radio imeneyi sitimamvela. Nanga nthawi zonse...e nkhalango...e..nkhalango....aaa....they all burst into a laughter. (ah we should not lie, we
do not listen to this radio. All the time ee wildlife…eee…wildlife…aaa) (Mangochi respondent)\(^{12}\)

Additionally, radio stations use different kinds of semiotics in their programs. Their programs usually start with a song or a jingle. Their presentation of the programs is multimodal as it involves sounds of different types such as beats from the musical instruments, singing, talking of the actors and presenters. Thus within this mode there are different semiotics as they try to address different social settings (Kress & Van Leeuwen 2008). Different semiotics entails different choices of semiotics (O’Halloran 2010) for different types of target groups but this presents a shortfall in this mode of communication because they cannot address one target group without the other groups listening in. For instance, they cannot force the adults to switch off their radios and move away from the radios when the producers want to address the youth only. This is because the youth are for ‘straight talk’ language while the adults are for proverbs and euphemisms (see chapter six for rating on this). Thus radio as a form of communication, which Oketch (2006) call ‘distant phonic mode’, is a challenge to the producers when it comes to producing HIV and AIDS messages.

### 8.3 Conclusion

In this chapter, I have described and analyzed how television and radio stations have semiotically remediated their programs. The remediation is appropriate seeing how much devastation the HIV pandemic has caused to humanity. However, though this is the case, the use of television for HIV and AIDS messages does not benefit all members of the community since some members cannot access the information and messages because they do not have television sets in their homes. Thus the message would be consumed by only a few people. Furthermore, as explained above, the programs have divided the community as some community members prefer one program to another, as in the case of Pakachere and Tikuferanji. The programs have also divided the age group as some are preferred by the youth while others are liked by the older generation.

\(^{12}\)Note that the quotations are from Mangochi only because the radio is a community radio meant for the Mangochi district.
Additionally, radio listenership is seasonal for some communities: the rural in this case, because they only listen to the radio during the harvest period when they have resources to buy batteries. Therefore, messages sent to the community during the period that people have shelved their radios cannot be consumed by the target group. Thus, although the programs have been appropriately remediated for HIV and AIDS, they are not fully consumed by the public.

Just like television, radio also presented a division between old and young, and the urban and rural community through the use of proverbs or straight talk. The old and rural prefer the use of proverbs and euphemistic terms while the young and urban prefer the ‘straight talk’. This is problematic as the producers have to satisfy all types of listeners. Since some communities claim that they do not feel comfortable to listen to ‘straight talk’ language in the company of their children or some people who are not their age group, then probably the ‘straight talk’ should be introduced and aired during specific times of ‘listenership’ like the night hours. Producers can also specify the times for specific talks so that those not comfortable with this particular language can switch off the radio, until the time that the program would be finished. Straight talk was actually described by the older and rural group of participants as ‘youth’ language and the use of proverbs and euphemism as the ‘standard’ language whilst the young and urban regard ‘straight talk’ as the ‘standard’ language. Thus, what is called ‘standard’ language may not always be ‘standard’ language at all. Standard language in this case, depends on one’s taste. What is called ‘standard’ language by one group may not necessarily be ‘standard language’ by another.

Furthermore, by using different semiotics for the presentation of the programs, the producers are bringing in the element of hybridity. The songs or jingles come with sophisticated instruments. Thus, although a program would be traditional, for instance, in Phukusi la Moyo, the music that comes with it, though traditional, also uses sophisticated electric instruments demonstrating the hybridity. The semiotic remediation of using hybrid instruments has further seen a reconstruction of the sound. It is no longer traditional but a hybrid because it has been blended with modern instruments. The blending of the old songs with modern instruments is a transformation of the music industry which is another semiotic remediation.
The next chapter discusses music used to disburse HIV and AIDS messages. The chapter looks at both traditional and modern music.
CHAPTER NINE: REFORMULATION OF LOCAL MUSIC, DANCES AND ARTEFACTS

9.0 Introduction
This chapter illustrates how local music, dances, and cultural artefacts have been reformulated for the fight against HIV and AIDS. The chapter is concerned with the dialogicality between how the lyrics, different music genres, dances and cultural artefacts were utilised in past and their current reformulation in the fight against HIV and AIDS.

9.1 The reformulation of gule wamkulu
The gule wamkulu is one of the traditional dances that have been used to pass on HIV and AIDS messages, see figure 9.1 below.

![Figure 9.1: The gule wamkulu-makanja](image)

The gule wamkulu itself is a reincarnation of the ‘dead spirits’. It is sometimes called ‘gule’, the shortened term of gule wamkulu and at other times it is called ‘nyau’ (Moto 2004). These terms
are used alternatively because they all refer to the same masked traditional dance. The *gule* is a traditional dance belonging to a secretive society and principally for male members of the society. Moto (2004: 349) argues that it plays a crucial function in the socio-cultural, political, economic and educational life of the Cewa people. As a secretive society, anybody taking part in the dancing has to be initiated.

Although initially, *gule wamkulu* ‘big dance’ was practised in the central region of Malawi amongst the Cewa ethnic group, some ethnic groups such the Ngoni of Ntcheu, Mwanza and Mchinji; and the Yao of Mangochi have adopted it and are now practising it. This adoption is the result of the mobility and cultural contact between people from the central region and those from other areas. The adoption of the *gule wamkulu* by other ethnic groups led to the dance being reformed as some other dances such as ‘manganje’ and ‘masewe’ have been infused in them.

*Gule wamkulu* is also known as *cilombo* ‘a big animal’. Thus the secrecy of the dance is also reformulated as being a ‘big animal’. A big animal can kill and eat other animals or human beings. Because of that, when the *gule wamkulu* is out, people run away and hide from it. When watching it dance, everybody keeps his/her distance, apart from the women clapping hands and providing a chorus to the weird sounding chants of the masked dancer.

During the onset of HIV and AIDS, the *gule wamkulu* has been transformed from an ‘animal’ and spiritual mediator between ancestors and local people to disburser of HIV and AIDS messages.

In the past, *gule wamkulu* was seen on specialized occasions and at specified times, mostly night time only, but now there is what this researcher shall call ‘de-culturalization’ of the *gule* in that it is danced during day time, sometimes for public functions like political rallies. In addition, *gule wamkulu* is also currently seen wearing t-shirts and rags which are made from new clothes when in the past it was fibre and tattered clothes only. Furthermore, *gule wamkulu*’s body could be smeared with ash or mud but in recent times, they either do not smear their bodies or use paint instead, which is a shift away from what it was known for.
Additionally, the ‘de-culturation’ extends to the place where the *gule wamkulu* emerges from when coming to dance. Traditionally, *gule* comes out of the bush or graveyard but in the modern era it is not uncommon for the *gule* to come out of a house. In the past, when it was coming to dance usually nobody knew the direction that it would come.

Moreover, the *gule wamkulu* has also been commercialized. Some of the *gule wamkulus* that are used for disseminating the HIV pandemic are hired. For instance, the *makanja* (tall one) had to be hired because all the other dancers could not manage the *makanja*.

However, from the interviews conducted, the consumers of the messages regard *gule wamkulu* as entertainment. The idea of using ‘*cilombo*’ to kill ‘*kacilombo*’ is appropriate because the little animal has caused wide devastation on earth but the use of it for a community that is unfamiliar with that kind of dance defeats the whole idea.

9.1.1 The modern *gule wamkulu*

*Gule wamkulu* used to be danced in an open area and would appear from anywhere since it was a ‘spirit’. It was also perceived to sleep in the cemetery with other ancestral spirits. There is no secrecy about where the modern *gule* comes from: it comes from a house. This is a relocation of semiosis, placing down of the suspense and secrecy of the *gule*. The house is now the *gule wamkulu* den. The den is actually a youth office for YONECO who rents it from someone. At this youth office, they also perform drama as well as dances. Therefore, the *gule* has ‘morphomosized’ from playing a socio-cultural role to a formal job for YONECO.

Thus, the men who are the *gule* are involved with the other group members in other types of dances such as *masewe, cimtali, mganda, beni*¹³, just to mention a few. If the youth group is not performing in far away communities, then they do it at the youth office every Wednesday. The researcher asked for their permission to record the group’s performances. The researcher managed to record the *gule wamkulu* performance.

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¹³ These dances come from different parts of Malawi. *Masewe* is a dance from Zomba, Machinga, Phalombe and other districts in the southern region; *cimtali* is from the central region and is danced in Kasungu, Ntcheu, Lilongwe etc; *mganda* is a dance usually danced along the lake in districts such as Nkhati bay, Mangochi, Salima.
It is worthy of note that the youth office for YONECO is commercially strategically located along the dusty highway that people use when they come from the rural area into the central part of the municipal city of the Zomba district. Down the dusty road, there is a famous local market called Mpondabwino where lots of sales are done ranging from vegetables, fish (both fresh and dry), meat, farm tools, to second-hand clothes. Up the road, there is the Zomba main market and thus, traders get things from Mpondabwino market early in the morning and re-sell them at the main market, making that dusty road a busy road, especially in the morning and evening. Thus, the youth group, which comprises ladies aged from 22 to 34 and men aged 26 to 37 years old, do their performances. Their dances attract many people as they passby the dusty road. The dances start at about 9:00 hours in the morning to about 13:00 hours.

During the particular video recording, the gule wamkulu came out in three different outfits. One had a big face mask, the second was a very tall one and also had a relatively big face mask and the last one wore feathers as a head gear. At first, the researcher thought the gule wamkulu dancers were not initiated into the secret society as it is traditionally done (Moto 2004) but there was no mistaking that the makanja ‘tall one on stilts’ must have been initiated because it is said (see Moto 2004) that nobody can dance the tall mask gule unless one is initiated. The ‘tall one’ is a special type of gule wamkulu and is specially trained, given respect and is feared as it is believed that they use traditional mankhwala or juju ‘medicine’ for them to balance on those small sticks. Indeed, the researcher found out later that ‘the tall one’ was hired. He was not part of the YONECO youth group. He had been sub-contracted to do the specialized dance for a fee. Thus, gule wamkulu has gone commercial as the youth group is also contracted by YONECO an NGO which gets its financial support from donors.

9.2 Remediating popular songs for HIV and AIDS messages

In the subsections that follow the researcher illustrates how lyrics to songs are repurposed for the fight against HIV and AIDS messages. Thus to illustrate the argument, the study presents four songs used by the gule wamkulu. The songs send different messages to the audience. The researcher has provided these songs under different themes. Below the researcher visits the songs that have been used for HIV and AIDS. The gule wankulu dancers are a group of young men and
women who are hired by an NGO, YONECO. These people make up a sensitization campaign group. Thus the coming of HIV and AIDS has brought in commercialization through employment. In addition, since they hired men could not dance makanja then the hired group hired another for that purpose. Thus the commercialisation of *gule wamkulu* was extended through the *makanja* dancer.

9.2.1 Awareness song

The song below was originally sang by women and girls while pounding maize in a mortar but it has been appropriated and recontextualised by the *makanja* dancers. Such songs play an important social function as whenever women have issues and cannot talk openly about them to their spouses or anybody concerned with the matter, they air them during the pounding of maize. Girls on the other hand, sing the songs usually in the afternoon or during moonlight. The girls usually sing songs to spite other girls. The song is as follows:

Leader: Zowawa ee zowawa ee (it is painful)
All: Zowawa ee zowawa ee (it is painful)
Leader: *azimayi ena angokhala* (some women are just staying)
All: *azimayi ena angokhala* (some women are just staying)
Leader: *kuwafunsa za edzi, sakudziwa* (when asked about AIDS, they do not know)
All: *kuwafunsa za edzi, sakudziwa* (when asked about AIDS, they do not know)

Where there is the word *edzi* ‘AIDS’, the ordinary song has *banja* ‘family’ or *cinamwali* ‘initiation’ or *kudikula* ‘wriggling of waist’. Different words are used depending on what the singer/singers want(s) to express. The song has been recreated by replacing those words with *edzi*. The message has also been transformed from general family and social issues to about those women who are ignorant about HIV and AIDS. Even the *nyau* itself is also at a loss.

Malawi being mainly made up of matriarchal ethnic groups, the song focuses on women as they are in a more powerful position than men hence the emphasis. In the rural areas men still relocate to a woman’s village after marriage, and all the children belong to the mother and not the father as is the case in patriarchal societies.
9.2.2 Warning song

In accompaniment of the song below, the *gule wamkulu, makanja* appropriates and imitates a woman’s dance moves and gestures. The song has a warning message. This has been created from another one often sung in the villages by women and girls. Where there is the word *edzi* in the recreated song, the ordinary song has *mimba* ‘pregnancy’, *cizonono* ‘gonorrhea’, *cindoko* ‘syphilis’ and many other issues and diseases. In the recreated song, those words have been replaced by ‘*edzi*’. However, although the song has been recreated for HIV and AIDS, the way it is danced has not been changed. While this song is being danced, where it says ‘*gedemu waa*…’ girls or women open their legs as they dance. The dancing is supposedly an imitation of opening legs for sexual acts and contradicts the message of abstinence and avoiding sexual intercourse. However, the dance moves could also be taken to mean that the *makanja* is warning women against ‘opening their legs’, which is in line with the rest of the lyrics.

Leader: *Amayi anandiuza iyayi* (my mother told me no)
All: *Gedemu waa* (Gedemu waa…lit do not open your legs)
*Edzi ndiyoopsa* X2 (AIDS is dangerous)
All: *Gedemu waa* (Gedemu waa…lit do not open your legs)
Leader: *Ukakumana ndi anyamata, iyayi usagedemule kuli edzi* (when you meet boys do not open your legs, there is AIDS)
All: *Gedemu waa* (Gedemu waa…lit do not open your legs)
Leader: *Usagedemule iwe, kunjaku kwaopsa* (do not open your legs, there is danger on earth)
All: *Gedemu waa* (Gedemu waa…lit do not open your legs) X2

It is interesting to note that the *gule wamkulu* has come up with new dance moves and gestures as a result of HIV and AIDS. Some of the moves and gestures cross gender boundaries, which is a very sensitive issue in Malawi. Malawi is a country that has not yet accepted the practice of homosexuality. For instance, a gay couple was arrested and convicted of ‘indecent and unnatural acts’ to 14 years of jail sentence for celebrating the marriage publicly. The magistrate further justified his judgement by referring the gay engagement as being ‘against the order of nature’
(http://www.bbc.co.uk/news/10121618 accessed on 09/05/2013). Consequently, in reference to the *gule wamkulu*, a man is not expected to do a woman’s dance. A woman is not expected to behave like a man and vice versa. Though this is the case, the *gule wamkulu* gets away with it by dancing and dressing like a woman. The *gule* can thus be said to have ‘de-cultured’ the culture and traditional practices.

Indeed, since women also join the *gule wamkulu* in the dances, wriggling their waists as in the ‘secret’ initiation dances of women, they can be said to have created a new culture in which the forbidden becomes the open and ordinary dance.

**9.2.3 A song on anti-discrimination**

The theme of the song below is on anti-discrimination. This is another recreation of an old song that was sung at weddings. The day before and on the wedding day, people from both sides of the new couple sing songs. Some of the songs castigate the parents of the couple while others castigate the couple itself. However, this song has been recreated specifically for HIV and AIDS. While the marriage song is about the parents being callous towards their relatives and neighbours, the same song has been transformed to be used against discrimination of people living with HIV. The song is as follows:

Leader: *Amake amwanaa* (child’s mother)
All: *Iyaiyowo* (no, no)
Leader: *Amene wadwala* (the one who is sick)
All: *Iyaiyowo* (no, no)
Leader: *Ali pamaganizo* (has problems)
All: *Iyaiyowo* (no, no)
Leader: *Ameneyo ndi munthu ngati ife tomwe* (that one is a person like us)
All: *Iyaiyowo* X2 (no, no) X2

The song talks of the mother with an HIV positive child who is worried about the child’s health status. This song does bring hope to the consumers of the message by advising the community to
accept people living with HIV. However, the song also depicts the affected as ‘always’ being worried.

When singing the song, the women join the *gule wamkulu*. Two women enter the dancing arena, taking in turns dancing with the *gule*. When dancing, one stands in front of the *gule* and the other at the back. This is another de-culturation or innovation in culture and openness brought about HIV and AIDS. Traditionally, women would only clap their hands and sing choruses for the *gule*. They would keep their distance as the *gule* is regarded as a spirit or an animal and as such nobody comes close to the ‘spirit’ lest they get hurt. But now, the women wriggle their waists when dancing in tandem with the *gule*. As explained above, that kind of dancing is supposed to be secretive, meant for night time and during initiation of girls only. The dance imitates sexual moves and that defeats the meaning of the song repetition.

### 9.2.4 Song on prevention

The fourth song emanates from the song that sings about prevention of other diseases such as Malaria but has now been repurposed for HIV and AIDS. The identity of the person being addressed changes as the song is sung, for instance, *amayi* ‘mother’, *abambo* ‘father’, *anyamata* ‘boys’, *atsikana* ‘girls’ and lastly *aMalawi* ‘Malawians’. This clearly shows that HIV is the pandemic for everybody.

**Leader**: *Inu amayi* (would replace with *abambo* ‘men’, *atsikana* ‘girls’, *anyamata* ‘boys’ in other verses and the last one was *inu Amalawi* ‘Malawians’) *tiyeni* (women let us…)

**All**: *Inu amayi tiyeni tipewe matenda, matenda a edzi* (women let us prevent the disease, the AIDS disease)

**All**: *Aye eee* (yes...)

**Leader**: *Cifukwa cani inu* (why should we?)

**All**: *Alibe mankhwala* X2 (because it has no cure) X2

The song uses words that show hopelessness for those living with HIV as it mentions ‘*alibe mankhwala*’ (there is no cure). With the coming of ARVs, words like ‘*alibe mankhwala*’ have
now been discouraged from usage. This means with the new hope as a result of ARVs, the song has been transformed to give optimism to those affected.

9.3 General observation of the songs and dance moves

In these songs, there is also a re-phonologisation of the term AIDS to edzi (see songs 1, 2 & 4). As explained in chapter seven, the use of re-phonologisation as a linguistic resource is for untechnicalization of the technical terms and recontextualisation of technical terms into a Bantu language, CiCewa. Thus the term ‘edzi’ is now a CiCewa local name. In song third, the term has been ellipsed. Though the song is about HIV and AIDS, the lyrics do not mention the pandemic by name. The ellipsis is a strategy that avoids ‘threatening’ words. However, though this is the case, the listeners and viewers know what the song is about because the HIV pandemic is the current ‘talk disease’.

All participants in the study were highly amused with the dance. To them it was pure entertainment to the point that some members could not even remember the songs being sung by the masked dancers. The response below was from one of the members that watched the gule wamkulu live.

‘aaa panali uthenga wa HIV…iii..ife ndiye tinangotengeka ndi nyauzo. (aaa was there a message about HIV…iii..we (I) was just taken up by the nyau dancers. (female respondent asked soon after the performance- Zomba urban)

From the interviews conducted immediately after the dances, it was apparent that a good number of people watching the dance were more interested in the dance itself than the message. Thus, although the songs were meaningful, the audience was interested in the dance, and the wriggling of the waists by the women and the gule itself, more than the messages in the songs. Others watched the dances of the recorded performances by the researcher and they were equally fascinated and kept asking the researcher to ‘rewind.’ Both audiences, at the venue of the live performance and those watching the recorded version were captivated by the performance rather than the message in the songs. Thus, although YONECO uses traditional dances, the dances alone are not enough to disseminate the information. There are some areas such as Sawali,
Namwela and rural Ntaja that this youth group is yet to visit with their performances. However, though this was the case, the research team still showed the rural people the dances to get their views on the HIV messages. Instead it was total confusion; the interviewees were more interested in the *nyau*, and the masks and asking the researcher about the attire, rather than listening to the HIV messages. To those communities where these dances have reached such as the Balaka urban community, the Mangochi urban community, the Zomba, and Machinga district offices and some parts of the townships in the districts, the people were equally fascinated and some commented as follows:

*Ife ndiye timanjoya akawela gule wamkulu* (we enjoy when the gule wamkulu comes -- to perform) (Balaka youth respondent)

Furthermore, only AIDS not HIV is mentioned in the songs as in Malawi the term AIDS is also used to refer to HIV. Sometimes the two terms HIV and AIDS are used interchangeably. Thus, when people mention *edzi* they would be referring to HIV as well. Some people have collapsed HIV and AIDS, making a single term out of the two terms as in ‘*kachaiwedzi*’ (cf. Chapter 7).

**9.4 Modern music: multi-voicing, multivocality and double voicing**

It is not only traditional music that has seen resemiotisation but also modern music genres. Music, just like in any other country, is also used for HIV and AIDS education messages. Some artists just sing to sensitize people while others are sponsored by the government or NGOs to sing songs with a particular HIV or AIDS theme. Other artists also sing HIV and AIDS songs for economic reasons, that is, to sell and get an income out of them. The artists that were used for this study are Dan Lufani, Paul Subili and Ron Valamanja and Thomas Chibade. Dan Lufani’s and Thomas Chibade’s songs will be looked at in-depth.

**9.4.1 Hip Hop song (Dan Lufani)**

Dan Lufani music can be categorized as hybrid Hip-Hop with local flavour. His songs mix local traditional with modern hip-hop tunes. His songs are usually on girls’ and boys’ relationships. However, he has now created the songs for HIV and AIDS. One of his created songs is presented below:
Winiko: *Anthu amakuza iweyo iiiii eeee ........laughing......*

*Kodi cimakhala ciani makolo anu kukutumizani kusukulu bwinobwino kuti*

*mukaphunzile koma inu akazi....., mowa... lelotu izo*

(people told you iii.....laughing.... what really happens, your parents send you to
school to study but you girls......, drinking beer... see what is happening today)

Dan: *unkasewela ndi moyo wako* (you were playing with your life)

All: *wazimenya double kick* (you have double-kicked yourself/ or you have kicked
yourself with a double kick)

Dan: *ma outing munkapita aja* (the outings you were making)

All: *wazimenya double kick*

Dan: *umakana kuyuza chishango* (you were refusing to use a condom)

All: *wazimenya double kick*

Dan: *uli sweet sadyela m’pepala* (you said one cannot eat sweets with the paper on)

All: *wazimenya double kick*

Dan: *amakupusitsa ndani kuti ziphinjo sizingakugwele iwe, lelo taona lelo* (you cheated
that you cannot get sick, see what is happening today)

(See appendix for the full song)

In this song, the artist targets university girls in particular because he mentions a girl bringing
home diseases instead of a degree. It also mentions girls refusing the use of a condom claiming
that: *uli sweet sadyela m’pepala* – a ‘sweet is not eaten with a plastic cover on’. Thus sex is
referred to as ‘sweet’ and the condom as ‘the cover of the sweet’. In addition, diseases are
referred to as *ziphinjo*, ‘something that makes one to suffer.’ Thus he avoids mentioning the
name of the disease. Furthermore, the artist also uses football metaphors. He knows that
Malawians like football, hence the use of the football genre. Thus the football metaphor
*‘wazimenya double kick’* (you have kicked yourself with a double kick) in the chorus, refers to
firstly suffering from the disease, HIV in this case, and secondly getting pregnant. Thus the
‘double kick’ refers to the twofold problem that the university girl has inflicted on herself.
Furthermore, the artist has featured a well-known Malawian comedian, Winiko. The song starts with Winiko talking and also ends with him. This kind of presentation relates to Higgins’ notion (2009) of ‘multivocality’, which implies the multiple meanings that a message contains. However, this researcher calls it ‘multi-voicing’ because more than one person is rendering multiple voices. This siphoning draws the song into performance. The comedian is now performing the song, but rather in a comic way. Thus, there is a mixture of drama and music genres too. The song further mentions the tertiary girls’ activities which are described as ‘drinking beer’, ‘going out with different men’ and ‘going for social trips probably to entertainment places’. Winiko acts as an advisor to a girl depicted in the song.

Additionally, the lyrics mix English and CiCewa. Usually it is expected that artists would sing in CiCewa only. This bilingual element has led to the community, both urban and rural, labeling the artist as ‘someone who wants to behave like ‘whites’ because he mixes English with CiCewa. People question why he is mixing languages. Others have labelled him as a foreigner, for mixing English with local languages. Thus his style of singing though unpopular among the older generation has made him popular among the youth.

Besides, the artist felt that girls are the most vulnerable group when it comes to the HIV epidemic and as such the song was meant to caution school-going girls, including university ones. By featuring a comedian, the artist felt that he would pass on the message better with his comic artistry than merely singing the song. In the song the comedian takes the place of an uncle in traditional families who most of the time advises young ones on their sexual life. Thus, his recreation for HIV and AIDS is appropriate. At the same time, it can be argued that the artists are ganging up on women. That is, they are blaming the women for spreading the disease, when in fact it is the men who are the real culprits. Here it is worth remembering in Malawian culture, like in African cultures generally (see Banda 2005), it is frowned upon for women to initiate sexual encounters, let alone appear to be soliciting a man’s attention. In other words, generally speaking it is the men who ‘hunt’ for the women. Therefore, the song can be faulted for blaming the women only.
However, both rural and urban communities love the song, but the urban youth love it more than all groups. They love it because of the way it is sung. It blends reggae, hip-hop and local dance beats and rhythms such as *manganje*. The multi-vocality produced by the bilingual lyrics against a blend of hip-hop, reggae and manganje, and a popular comedian and the artist adding their mix of voices, makes it exciting for the communities. Although the communities seemed to like the song, their responses demonstrated that they were more interested in the vibes and beats of the song than the HIV message because some interviewees did not even know that the song contains an HIV prevention message. Others were interested in the song because of the comedian as can be seen from one youth, who said,

‘Ine ndimakonda Winikoyo… ’ (I like Winiko (in the song) …) Balaka urban youth

Thus, although the mixture of drama and music genres is appropriate for passing on HIV and AIDS messages as each genre serves a different type of consumer, it should be done with caution lest the message is lost.

### 9.4.2 Reggae song (Thomas Chibade)

Thomas Chibade uses archaic CiCewa (language) such as *mtela* ‘medicine’, *kumasano* ‘graveyard’ *dibwidibwi* ‘being plum’, and *cisembwele* ‘promiscuity’ in the creation of HIV and AIDS messages. These words are not in the everyday vocabulary of both rural and urban Malawians, which presents a problem of understanding for many people. However, this song, unlike Dan Lufani’s song, is addressing boys. This is one of the unique songs as most songs talk of girls or women, but like most other songs appears to blame females as carriers of HIV and AIDS. The song is entitled *kumasano* a synonym for *kumanda*, ‘graveyard’. The song goes as follows;

*Cioneka dibwidibwi cikamayenda mkati mwake cinaola*, (she looks very plump as she walks but she is rotten inside)

*mwana wanga udzingopenya koma usatole*, (my child, do not pick it up, just watch)

*abale ambili athela kumanda sicina koma kususuka*, (many relatives have died because of not abstaining)
mkazi kunyumba ali naye koma samukonda, (he has a wife at home but he does not love her)
kubwezelana zolakwa kwa anthu wili m’banja, (revenge between two people in a family is not good)
nanga mwatani kulila, kucipatala mankhwala kulibe, (why are you crying, there is no cure in hospitals)
Yehova alanga wana kamba ka utsilu wa makolo awo, (God punishes children because of stupid mistakes of their parents)
cisembwele canyanya padziko, edzi itha bwanji ooooo (there is too much promiscuity on earth, how can HIV and AIDS end ooooooo)

Chorus
Tikapanda kudziletsa tonse, tonse tidzasowa otiyika kumasano, (if we do not abstain, we will have no one to bury us in the grave)
koma pano citetezo kulibeee, kulibeee x2 (but now there is no prevention, x2)
apanga mankhwala otalikitsa moyo amatha kufana ndi singano, (they have made medicine which look like a needle to prolong life)
pano citetezo cija cabwelelanso amayo x2 (now the people are getting back their health, oh x2)
Kodi ndi mtendele umenewo? (is that freedom (good life) ?)

ukafuna mkazi wofatsa, pita kumudzi ukamusake, (if you a good wife, go to the village and look for one there) misrepresentation of messages
lelo anthu ali khumakhuma edzi yasalaza, yasalaza kumudzi konko, (but even in the village people are sad because HIV and AIDS has killed a lot of people there)
tataya anthu ambili, abale ofunika kusakazika, (we have lost many people, important relative have gone)
ili ngati nkhondo yophela zida za nyukiliya, (it is like a nuclear war)
lelo alibe edzi salimufasho, anthu acibwana akutelo (those who are HIV negative are not in fashion, stupid people say that)
The song warns boys that they should be careful of girls who may appear plump but in fact they are living with the HIV virus. The song has a ‘localized’ reggae beat. It blends aspects of the reggae vibes associated with Bob Marley and Lucky Dube, but with elements of the local manganje beat. The song advises boys to go to the village to get a wife. He refers to village girls as ‘good’ and then he quickly retorts that the HIV epidemic has even reached the villages, which is contradictory. By saying that he admits that HIV cases have not left any part of the country untouched. Thus, he cannot conclude that village girls are ‘good’. By referring to them as ‘good’
he is actually means ‘they are HIV negative’. On the other hand, he is also talks of women who are plump as being HIV positive and he advises boys not to go for them. Thus he is contradicts himself again. The song further spreads misinformation when he talks of God punishing children because of parents’ mistakes in getting the HIV virus. The punishment is in the sense that the children also end up getting the virus through the parents, that is, through mother-to-child transmission of HIV (MTCT). This statement on MTCT is misleading because it is not be their fault that they (the children), also get the virus. The musician here is blaming the victim. Moreover, an HIV positive mother can give birth to an HIV negative child. This information is missing in the song. Additionally, the song is overly alarmist as the musician talks of HIV having no cure and the devastation that HIV causes, as compared to ‘wars’, ‘road accidents’ and natural disasters such as ‘earthquakes’. That HIV has no cure is appropriate, however, there is now treatment that prolongs the life of an HIV positive person. Although comparing it to wars and road accidents is appropriate, but using all these metaphors in one song is rather too much. The artist has over-recreated the HIV pandemic by likening it to an ‘earthquake’, ‘war’ and ‘road accident’. Moreover, referring to it as a natural disaster like ‘earthquakes’ is misleading because ‘earthquake’ is a natural disaster that human beings have very little control over and cannot be avoid, while HIV can be prevented. Thus, the two cannot be compared.

All participants liked the beat, but did not understand the song and how it related to HIV and AIDS. First, the title kumasano confused some participants as they had never heard the word before. Some participants, including this researcher, did not know that kumasano means what everybody knows as kumanda, which is ‘graveyard’. Some other uncommon words used in the song are mtela ‘medicine’ and akacenjede ‘graduates or experts’ instead of the words ‘mankhwala’ and ‘akatswili’ respectively, which are commonly known and used by people.

Furthermore, the song has resemiotised borrowed words such as salimufasho ‘they are not in fashion’, tayimusi ‘multiplication’, and sitalaka ‘strike’ to something completely different from how they are used in the communities. The musician has now used salimufasho to refer to those who are not HIV positive, and he describes as out of fashion. The song tries to portray the devastation of HIV and AIDS in Malawi through saying that ‘living with HIV is not an issue anymore’; there are more people living with the virus than what people imagine.’ Thus, fashion
is no longer about fashion and modelling; it is also about living with HIV. The word *tayimusi* in this stanza has also this meaning:

‘*nkhondo mmayiko folo zivomelezi, ngozi pamsewu zatha wathu* (there is war in four countries, earthquakes, road accidents which have killed people)

*koma zikucepela kwa inu tayimusi miliyoni*, (but these cannot be compared to you, you have destroyed humankind by a million times)’

The word *tayimusi* in this sense means ‘more’. The devastation that the HIV pandemic has caused is ‘more than a million’ of other natural devastations like earthquakes, road accidents and wars. In other words, the HIV pandemic cannot be compared to any disaster. It is in a category of its own. The word *sitalaka* ‘strike’ in the following verses means that there is no cure for the HIV pandemic. The song says that even scientists have failed to find the cure; the scientists are referred to in this song as *akacenjede odziwa mtela*.

*yakana kupeleka salary edzi kwa akacenjede odziwa mtela*, (HIV and AIDS has refused to give a salary to scientists who make medicines)

*yapanga sitalaka nawo othetsa awoletsa moyo*, (it is on strike, it has made lives become rotten)

Thus, the HIV is on ‘strike’, it does not want the scientists to discover its cure and has since ‘destroyed life’ *awoletsa moyo*. The word *sitalaka* ‘strike’ is not as is used in the everyday activities, that is, when people are on ‘strike’ they do not go to work as a way of protest over wages and so on. The multiple use of archaic terminology, use of verses with dense collocations and words laden in imagery and symbolism makes the song difficult to understand. Consider the imagery in the term is *nyukiliya* ‘nuclear’ in the following line:

*ili ngati nkhondo yophela zida za nyukiliya*, (it is like a nuclear war)

To understand the entire verse one needs to be familiar with ‘nuclear war’ as HIV is referred to as ‘a weapon of mass destruction’. This is in reference to the devastation that the pandemic may
have caused on earth, Malawi in particular. Therefore, although the consumers may know the meaning of the phonologized terms such as folo ‘four’, sitalaka ‘strike’, nyukiliya ‘nuclear’, salale ‘salary’, and miliyoni ‘million’, their meanings are obscured in the song. Coupled with archaic CiCewa used, makes the whole song difficult to decipher.

9.3 Conclusion
This chapter has discussed and presented how music, both traditional and modern songs have been reformed for HIV and AIDS. Originally *gule wamkulu* was seen on specialized occasions and specified times only but now it is danced during day time, even for public functions like political rallies.

Secondly, the chapter has illustrated how *gule wamkulu* has been commercialized owing to the coming of HIV and AIDS.

Thirdly, in traditional song, appropriate dance should be used for the appropriate audience; otherwise the message could not be consumed as the alien dance, *gule wamkulu*, in this case, tends to distract people from consuming the real message being passed on in the songs. The idea of using ‘cilombo’ to kill ‘kacilombo’ is appropriate because the little animal has caused widespread devastation on earth.

Fourthly, the use of old CiCewa in songs makes the consumers miss the message. This is similar to the use of multi-voicing where consumers shift their attention from the message to the comedian. Furthermore, the use of metaphors, though appropriate, needs some skills to extract the underling meaning.

Lastly, though the use of re-phonologised terms has enriched the CiCewa language, the chapter has demonstrated that their usage in conjunction with archaic forgotten words sometimes hinder consumption of HIV and AIDS messages.
CHAPTER TEN: MODE OF COMMUNICATION-WRITTEN HIV AND AIDS MESSAGES

10.0 Introduction
This chapter looks at the transformation of HIV and AIDS across modes of communication. The focus is on modalities such as SMS, newspapers, t-shirts, murals, posters and billboards. The idea is to look at the linguistic and non-verbal constraints that are imposed by these modalities. The researcher has divided this chapter into five sections namely: SMS messages, newspaper messages, t-shirt messages, mural messages, posters and billboards.

10.1 HIV and AIDS messages in Newspaper
Newspaper articles and adverts for HIV and AIDS messages were collected from November 2007 to December 2008. Articles came from all papers both daily newspapers as well as weekend newspaper publications. The study has shown that there are more articles in the months of November and December than in the other months. This is because of the proliferation of HIV and AIDS messages during the celebration of the World AIDS Day which falls on 1st December of every year. The other months experience a drought of HIV and AIDS articles. When an article on HIV and AIDS appears outside these two months, then it either concerns some senior government official or appears under the opinion column. They also appear when something dramatic surrounding the HIV and AIDS topic has happened that is regarded newsworthy. For instance, there was an article by Mike Chipalasa which appeared in ‘The Daily Times’ on 25th February 2008 entitled ‘Law set to punish AIDS healers’; an article by Peter Kanjere which appeared in ‘The Nation’ on 18th March 2008, entitled ‘Sports leaders must steer HIV and AIDS fight, Minister’; an article by Yokoniya Chilanga which appeared in ‘The Daily Times’ on 27th February 2008 entitled ‘Consider innocent AIDS patients’ on a special column called ‘My point of View’; and an article by Kondwani Munthali which appeared in ‘The Nation’ on 4th March 2008 entitled ‘Mothers flee over AIDS Test alarm’ etcetera. The articles present confusion between HIV and AIDS terminologies. For instance, the title ‘mothers flee for AIDS test alarm’ when in effect what is tested is HIV and not AIDS. AIDS is the end result of HIV (UNAIDS 2010).
Although newspapers are vital for disbursing HIV and AIDS messages to the public because they reach out to the community on a daily basis, the rural community hardly read newspapers because of economic problems as one member pointed out;

‘Aa mmalo moti ugule matemba kumakagula nyuzi…hahaha...(laughing). Ndalama zimavuta kumudzi kuno ndiye timaona kuti cofunika ndiciani pakhomo pano...’ (aa instead of buying fish, you buy newspaper….hahaha...(laughing). Money is a problem in the rural areas so we weigh things that are important in life at a household level) (Ntaja community).

Thus rural areas find it not economically useful and feasible to spend their money on newspapers. This demonstrates that the newspaper is not the useful or effective mode of communication for disbursing HIV and AIDS messages as it leaves out some community members due to financial handicaps.


10.2 HIV and AIDS messages through SMS

While in the newspapers, the messages are long, here the messages are short and straight to the point. Short Message Service (SMS) on mobile phones is no longer for ‘just’ communication, and for connecting with friends, families and bosses only. It is not ‘just’ for passing on ‘mere’ messages, that is, informing people of what is going on or for chatting with friends and families. Now it is also a tool for health communication, passing on HIV and AIDS messages. This tool of SMS is used by one institution only, an NGO called YONECO. According to the program manager of this NGO, the SMS program was donor-funded. The NGO writes messages to the public on HIV and AIDS, human rights, youth rights, violence against children and the youth. On HIV and AIDS, apart from the SMS format of sending the HIV and AIDS messages, YONECO also has produced a booklet on the youth and HIV and AIDS and is in CiCewa.
entitled ‘Auntie Stella, Bwalo la Achinyamata’. But since the interest of study is on HIV and AIDS and SMS mode of communication, the researcher has concentrated on the HIV and AIDS topic and SMS mode only for this study. These messages are then sent to the public through mobile phones system of communication. During the interview, the program manager informed the researcher that they get people’s cell numbers whenever one of their members (employees) attends a workshop, meeting, or conference within Malawi where they meet other people. Then they use the mobile numbers on the registration forms filled out by participants at the meetings as their mode of disseminating awareness messages, HIV and AIDS messages inclusive. Some of the messages are the following;

(i) HIV/AIDS kills, use a condom
(ii) HIV/AIDS is real, condomise
(iii) *anthu odwala edzi ndi anthu, tisawasale* (HIV positive people are human beings, we should not stigmatize them)

The messages are fully graphic. They are not accompanied by pictures. The program manager of YONECO who also doubles as a producer of these messages narrated that the messages are meant to sensitize the community about issues of HIV and AIDS and other concerned topics. The messages are in two languages, CiCewa and English. The usage of this mode is new and as pointed out already, not many people think of using it in such a way. For instance the following is from a senior staff member at a district office;

‘As a district I don’t think we have (. . .) ee (. . .) been able to but we have one NGO aa that use mmm they it eee phone-in program eee people who don’t understand HIV and AIDS they call them, we have YONECO Youth Net and Counselling so if you don’t understand please call us so you call or just flash and then they will call back so you talk…( . . .) but in terms of instituting a deliberate program where people send each other SMS about HIV and AIDS on that mmmm that we have not I think you have given an idea or a hint of one way of doing it’ (Mangochi KI).
As seen in the extract, the key informant did not even know that messages about HIV and AIDS had already started circulating through SMS, originating from YONECO. He, however, knew about the phone-in program only. This illustrates that the criteria for choosing receivers of the messages had a shortfall. Thus, although the remediated message is very practical and efficient, there is a need to improve the criteria for recruiting the message receivers.

Remediated messages on the phone do not follow the accustomed and common way of writing messages. Some people have blamed modern technology. The mode does not use the sound or phonological system. The language used in SMS as described by Vosloo (2009), and Lee (2002) is ‘the continuing assault of technology on formal written English’ and (Humphreys 2007) describes it as ‘pillaging punctuation; savaging our sentences; raping our vocabulary’.

The SMS used for sending the messages use full words. This departs from the usual use of code language for SMS. For example, normally a mobile message would use codes like ‘C U L8er’ for ‘see you later’; ‘gnyt’, ‘gn8t’ for ‘good night’; ‘2moro’ for ‘tomorrow’ (Blommaert 2010) and many more. The messages used for HIV and AIDS messages do not use codes. They use full words to illustrate how significant the messages are. The producers of the messages did not want anybody to miss the messages by receiving the wrong translation of interpretation of the codes, hence the use of the standard language. Thus, the mode has further been reformulated to move away from the norm of using the coding system of messaging as is illustrated below.

![Diagram](image)

**Figure 10.1: A reformulation of HIV and AIDS SMS messages**

Figure 10.1 illustrates the opposite reformulation that has taken place because of HIV and AIDS. Instead of the ‘normal SMS’ having code system, the reformulated SMS has the full normative system.
Although this format is vital for the dissemination of HIV and AIDS messages, this is beneficial only to those with mobile phones. Malawi being a third world country had its first experience with mobile phone technologies only in the late 1990s and as such there are not so many people with cell phone handsets and not so many areas have network coverage. Thus, some groups of individuals and areas with no network are at a disadvantage. This was confirmed by the program manager of YONECO who said that the benefits of this information are mainly for the urban and semi-urban areas. If this is the case then this mode of communication is not only impractical for the use of HIV and AIDS message dissemination but also a shaggy dog story to the community. For instance, of all participants who were interviewed only one was part of the network who received the messages, the Zomba urban area. More KIs received the HIV and AIDS SMS messages from YONECO than the community. This is because of the criteria they used to collate people’s cell phone numbers. Getting the numbers at conferences and workshops meant getting numbers from a certain group of individuals that is educated, and are working class citizens. Other members of the community, even if they come from the urban area, would have a chance of getting these messages, for instance, business people. Furthermore, most of the KIs who were getting the messages said that they were just deleting the messages as soon as they arrived on their mobile hand-set, as one admitted:

...aa mameseji amene aja, ine ndimangofuta ndikawalandila. You know what you get almost similar message every day so you get tired of hearing the same message….’(...aa those messages, I just delete them the moment I receive them.) KI, Zomba

10.3 T-shirt HIV and AIDS messages
Messages have further been recreated for distribution to the consumers by fitting them on t-shirts. Apart from the use of colours, there is also a limited amount of words that are used on a t-shirt. Thus, messages just like in SMS have to be short and straight to the point. Bates (2007:75) regards this mode of communication as the ‘transcultural item of clothing’. This has revealed social economic transformation as consumers of the messages regard the t-shirts as clothes and not as a mode of communication for passing on HIV and AIDS messages. This mode of communication is used by almost all organizations dealing with HIV and AIDS and this includes the governmental institution, NAC. Some HIV and AIDS messages are written both at the front
and back of the t-shirt while others are written only either in front or at the back only. The languages used are mainly English and CiCewa.

Figure 10.2: The front and back of a t-shirt with messages in CiCewa

The T-shirt in figure 10.2 was worn by a woman who was found in the remote area of Mangochi district at Namwela trading centre. When the researcher was collecting HIV and AIDS texts in the study area, this woman was walking along a dusty road and the t-shirt immediately attracted the attention of the researcher. After asking her permission to have the t-shirt photographed, she accepted. Apparently, the t-shirt was given to her by a group of people who came to the area for an HIV and AIDS sensitization campaign and at the end of the campaign these people, who came from Universal Concern, an international NGO, distributed the t-shirts free of charge. As displayed above, the t-shirt is written on both at the front and the back. The t-shirt has logos, one for Open Space, another for Universal Concern. The t-shirt has also an HIV and AIDS symbol. The HIV and AIDS symbol is usually red in colour but on this t-shirt is presented in a whitish colour. This could be because the t-shirt is red in colour because if they had used red too for the symbol, it would not have been visible. This is breaking away from the norm for the HIV and AIDS symbol. The interpretation of the colors can be twofold. Firstly, the red color represents blood where the HIV dwells and representing it in white entails the goal of the campaign that the battle will be won and red would be forgotten. Secondly, since the t-shirt is in red it symbolizes that if care is not taken; HIV will take over the whole system of the body.
Furthermore, there are two languages on the t-shirt, CiCewa and English. English is used to name one of the NGOs in the campaign and CiCewa is only used for the intended HIV and AIDS message. This bilingual representation represents multipresentation of different worlds, one for the English reading people and the other for all who can read both languages. Since the message for the public is in CiCewa, the producers of the messages tried to put emphasis on the languages that most people in Malawi read. However, the presentation of the symbol for HIV and AIDS and the logos printed on top of the message symbolizes that the producers also emphasized where the message is coming from. The producers showcase the ownership of the message. Furthermore, the message starts with a question at the front whose answer is at the back of the t-shirt. The back message had neither logos nor the HIV and AIDS symbol which also entails emphasis on the ownership of the message, because viewers and readers would probably see the front message before reading the back. Additionally, the message is written in a stylish rhetorical and melodramatic format. The message comprises of three words which all start with a prefix [ti-] and ends with ‘e’. The prefix [ti-] in CiCewa language entails second person plural and the vowel ‘e’ can display an imperative mood and so the messages illustrate everybody’s involvement; the producers and readers inclusive.

The second figure presents a t-shirt which was worn by a man who was found riding a bicycle along a highway in a semi-urban area of Liwonde in Machinga district. The front of the t-shirt exhibits the red symbol for the HIV and AIDS pandemic while the back had words written in English in black and white and some words are underlined while others are not. The t-shirt is white. The front has the word ‘Escom’ and when the one wearing it was asked where he got the t-shirt from; he informed this researcher that he works for Escom (Electricity Supply
Commission of Malawi), a company that provides electricity in Malawi. According to him, at Escom there is an internal organization that deals with HIV and AIDS issues. He articulated that he was not a member but got the t-shirt when the organization was distributing them to workers at the office. The two colours, black and white, have been used on both sides of the t-shirt. However, the front does not have a real message only the symbol, while the real message is at the back. The underlined words ‘the promise’, demonstrate the emphasis of the message. Thus the message is to keep ‘the promise’. The use of red most of the time is for dangerous, blood associated things, as the English expression ‘red for danger’ mean serious, dangerous or danger zone. AIDS is associated with blood and consequently is dangerous to humankind hence the use of red.

Comparing the messages on the two t-shirts, the producers seem to put emphasis on themselves, that is, the institutions that produced the messages. For instance, figure 10.3 has the symbol for HIV and AIDS with the word ‘Escom’ only. However, according to Kress and Van Leeuwen (2006), if the notion of ‘ideal’ being ‘top’ or ‘new’ and ‘real’ being ‘bottom’, helps in the understanding of the message, then the picture provides a satisfactory interpretation. The information value of the picture can be picked up by readers and viewers of the message. HIV and AIDS, which is presented symbolically on the t-shirt, can mean that HIV and AIDS has hit Escom so badly that they are trying to sensitize the public or that HIV and AIDS is taken care of within the company. For figure 10.2, the logos have also been emphasized by placing them on top. However, if we apply Martin and Rose (2004); Kress and van Leeuwen’s (2006) theory about the arrangement of the logos and words, then the logos are ‘ideal’ because they are at the top while the message is ‘real’ and ‘new’. Therefore, the message was appropriately written.

This emphasis on logos was to illustrate the reformulation of the institutions and the organisations by taking part in measures against the HIV pandemic. The companies are no longer selling electricity (ESCOM) nor providing tools for agriculture (Universal Concern). They are now also selling HIV and AIDS messages. However, figure 10.2 has worded messages on both sides of the t-shirt while fig. 10.3 has only the HIV and AIDS symbol in front. Thus one company wants only to show itself to be seen as doing something about it while the other further presents the real message.
10.3.1 The reading of the literary-challenged consumers

All participants knew and understood the messages. They all acknowledged accessing HIV and AIDS messages on t-shirts. However, the messages written in English are consumed by those who can read and understand the language. The t-shirt with the symbol only was also understood by the community. Consumers said that the moment they see that symbol, then they know that the topic is about HIV and AIDS. This is confirmed by one respondent, who is literary-challenged and from the rural area, in her following interpretation of the message;

\[ tikaona kacinthu kolemba kamene kaja \] (she pointed at the HIV and AIDS symbol on the picture) \[ kaya ndi pagalimoto timadziwa kuti ndi nkhani ya Edzi ndithu, kwamunthu amene akudziwa nkhani ya Edzi \] (when we see that thing whether on a car, then we know that the issue is about AIDS, i.e. for someone who knows the topic of AIDS) Namwela - Mangochi respondent.

The response above came from a female respondent. Therefore, since the t-shirts had the HIV and AIDS symbol printed on them, the woman though literary-challenged knew that the message was on HIV and AIDS. This evidently exemplifies how important the symbol is and how much knowledge people have on the topic of HIV and AIDS in Malawi (UNGASS 2010, Nagoli et al 2010, Botillen 2008. Mwale 2008, Horvaka and Houston 2007, NSO and ORC Macro 2005, Kaler 2003, USAID/MALAWI 2003, DHS 2000.). Therefore, being unable to read does not necessarily mean that one is literary-challenged. This concurs with Kress and van Leeuwen (2006) as to how important the grammar of visual designs is. It changes the interpretation of literary challenges. As seen in the extract above, the literary-challenged were able to deduce that the message is about HIV and AIDS just by looking at the symbol. Thus grammar of visual design allows pictures to take a central role in extracting messages or information. Therefore, the grammar of visual design blurs the line between the literate and literary-challenged people.

However, in cases of images being dominated by the English language only, this incapacitates other people who are semi-literate, that is, they can only read CiCewa and not English. This will be discussed in detail in the section entitled posters.
10.3.2 Socio-economic transformation of consumers through HIV and AIDS messages

As explained above, for the community what is more important to them is the t-shirt rather than the message. Thus, the t-shirt has transformed the consumers by providing them with clothes. This equally solves the problem of poverty. When an individual or institution goes to a community to talk about issues on HIV and AIDS or otherwise, they usually are asked if they (participants) will receive a t-shirt at the end of the meeting or interview. After the FGDs, interviews etcetera, this researcher was also asked if she had brought the much needed t-shirts and they were kind of disappointed that she did not have any to distribute to the community. When probed as to why they value the t-shirt more one respondent replied;

‘komabe uthenga uli apo ndimalaya basi.....hahaha..they all laugh’ (But although there is a message it is a shirt after all.......hahaha they all laugh).

Thus they would rather have someone distributing a t-shirt with HIV and AIDS messages than someone just talking to them about HIV and AIDS.

10.4 HIV and AIDS messages on Murals

Messages on murals have also been transformed as they are short and straight to the point. There is not much space on the walls to write a lot of words. Furthermore, most of the time mural messages have both people and words so there has to be room for those. Therefore mural messages are like t-shirt messages and ‘SMSes’. However, as explained above, unlike SMS where messages are in word format only, these have people images as well.

Walls and fences, because of HIV and AIDS, are no longer just for protection but are now used as a platform to pass on HIV and AIDS messages. Some murals belong to a football ground, for example, figure10.4. Others are on a school building (see Figure 10. 5 below) and more belong to bottle-stores, hospital/clinic walls, restaurants and rest houses. The producers of the messages target areas where there would be readers and viewers passingby the walls. They also target places such as drinking joints as it is believed that these are the places where unsafe sex takes place.
This figure presents HIV and AIDS message to the consumers. However, multiple voices are coming out of this mural. It is multi-voicing. Multi-representation of messages is another facet of reformulation. One voice is on the measures taken against HIV and AIDS and the other on the need to help Other Vulnerable Children (OVC) such as orphans. Multi-voicing can be defined as the presentation of two different messages within one image. The producers are sending two voices at the same time. This differs from Higgins (2009) definition of double voicing or multivoicality in which one message has multiple meaning. Here there are two voices with two distinct messages and meanings.

Figure 10.4 comes from an urban area in Zomba Municipal town. The message is on the brick wall which is part of the fence for the municipal football ground. It is strategically painted along the road that connects the rural area and the municipal town. Thus this picture is on the side
where people from the rural areas pass through as they come to town; people use that route to come to town to shop, to the market to sell their farm produce, to the hospital, to banks, to the post office and many other important places. The picture is painted using different colours namely: blue, black and other colours can hardly be recognized because some paint has faded with the rains and seem not to have been repainted. As seen at the bottom right-hand corner of the picture, the message was sponsored by UNICEF. The picture consists of a daub house in which an old lady surrounded by little children is sitting. On the right part of the picture there are two young children about eleven or twelve years old who are in school uniform. Although the picture is faded, the message is incredibly conspicuous.

The reformulation of the message further extends to the school children and the grandmother. The school children are now passing messages on about their studies. They are passing on HIV and AIDS messages. The grandmother is not only looking after her grandchildren but also passing on messages about taking care of orphans. Thus the school children and grandmother have been used as vehicles for HIV and AIDS plus Other Vulnerable Children (OVC) messages. Furthermore, the mural image had both pictures of people as well as graphics. Without the graphic messages, the meaning of the messages would vary. Thus, the combination of the graphic and people was appropriate. The message *EDZI TOTO* which means ‘I do not want AIDS’ seems to be associated with the older school going children and was used as a national project that was run not only in school but also for out-of-school children. Thus, there are youth clubs which are called *EDZI TOTO* clubs. Thus, the mural message was in agreement with the *EDZI TOTO* project. The projects comprise activities such as reciting poems on HIV and AIDS, playing games to keep the youth busy so that they should not be thinking of indulging in sexual activities, and passing HIV and AIDS messages onto the public. The other message *TIYENI TITHANDIZE ANA AMASIYE* ‘let us help orphans’ is associated with the elderly lady and the little children. UNICEF is associated with children’s education and OVC could also be their other focus.

The message on the mural presents two contrasting worlds as the school going children are well-dressed with shoes and look smart while the elderly lady and the little one seem to be in dire poverty. This is also accentuated by the fact that the lady is seated on a veranda whose house is
an old traditional daub type, typical of the village setting. Thus, there are two classes of people: one is a middle class setting where the school going children are coming from and the other is poor lower village class.

Since the message *EDZI TOTO* is also associated with the school children as the image illustrates, the producer of the message targeted school children because they are in the category of the high prevalence rate age group 15-24 (UNAIDS 2005). The school children have to be reformulated to say ‘no’ to HIV and AIDS so that they can go to school.

Additionally, there is a reformulation of the word ‘AIDS’ to *EDZI*. The reformulation is through re-phonologisation (see chapter seven). In Malawi, *EDZI* is used interchangeably with HIV in Malawi. When one is talking about *EDZI* they could be talking about HIV, AIDS or both as we can see in the following extract,

*ndiye panali mkhalidwe wosasamalana kuti uyu akudwala HIV.....eee* ‘so there was a culture of not looking after each other because one is suffering from HIV…eee’ (Tigwirizane CBO FGD, Machinga district)

*conco atenge Chishango kuteteza ku Edzi* ‘therefore he/she should use chishango (condom) to avoid AIDS’ (Kachere FGD Community)

Although by the time the message was written on the wall which is early 2001 and ARVs had not yet been introduced in Malawi, it is also promoting the use of the treatment. The *EDZI TOTO* message in the picture is, thus, twofold:

i) that school children should not indulge in sexual activities to avoid the HIV virus, they should instead go to school and study.

ii) or that if school children are HIV positive they should take ARVs so that they do not develop AIDS
The second interpretation emerges because ARVs prevents people living with HIV from developing AIDS. Thus the words *EDZI TOTO* is double voicing. Double voicing is when one message has two or more different meanings or interpretation and Higgins (2009) regarded this as multivocality. Therefore, this differs from multi-voicing explained in the above section. Since the mural has a message that has two meanings as well as two different messages, it has both double voicing or multi-vocality and multi-voicing. This is important in the sense that people can have both messages from one tool of dissemination, wall.

This multiple presentation of messages is also illustrated with the second part of the wall where it is talking about OVC. The OVC message is an appeal to the public to help orphans, especially those being looked after by old people. The participants associated with the OVC message are in worn-out clothes and two kids are wearing shorts only not a shirt because probably the old woman cannot afford to buy them shirts. The overall picture presented there is of people in dire need of help. They do not even have a strong permanent house as daub houses tend to leak and have to be repaired yearly. The HIV and AIDS pandemic has created a lot of orphaned children, 500,000 in number (http://www.nyasatimes.com/national accessed on 15 march 2010) in Malawi due to the death of their parents, leaving the responsibility of raising them in the hands of the old people.
These pictures also illustrate how HIV and AIDS messages have been modified and get written on school walls. The words are painted on all the school walls on the top side close to the roofs. The school has turned into a platform for distributing messages. The walls are now billboards. Just like the mural above, the messages here are also short and straight to the point. These were taken in a remote area of Namwela in Mangochi district. The painting is in different colours, namely blue, red, white and black. The painting is so attractive that one coming to the school cannot miss it. This school, Kachere Primary, is a feeding school and the day the interviews were done the children were found having their porridge. This school has children from Namwela rural trading centre, villages around Chief Jalasi and as far as from the Mozambique border villages. It is a full primary school with classes from standard one to eight. The school is strategically placed at the corner of Mozambique border and Namwela trading centre. One can easily see it as he/she leaves the main road that goes to the Mozambique border and takes a dusty road going to Namwela rural trading centre. Its strategic location makes it possible for people passing by the school to the traditional centre access the message. The message is also accessed by the pupils themselves as well as people from the surrounding villages.
Different colours are used to attract the attention of viewers and readers to the messages. The producers or painters did have real ideas about which colour to use for which word. This researcher expected the word *EDZI* to be red as red colour is associated with dangerous things. However, other messages had the word *EDZI* in black. They kept the red colour for the symbol of HIV and AIDS in all messages which is appropriate.

Although the messages are so conspicuously written, during interviews and FGD the community at first did not realize that the pictures they were being asked to interpret were from the school in their own community, until it was pointed out to them, then they all recognized the messages. The messages had become so familiar that they had stopped existing in their minds. People would pass without reading to remind themselves about HIV and AIDS. The community had the mentality of ‘we know that already, let others get the message’. The community felt that the HIV and AIDS messages were appropriately placed so that the pupils could be reminded on a daily basis. One member stated;

> pasukulu pali ana asukulu amene ali ndi tsogolo lawo, ana ang’onoang’ono azidziwa...akamawelenga iziwapeza nthumazi kuti eee kani eti...azidziwa kuti....kaya ndimtsikana...kuti ndikapanga zaciwelwele...eee....kuti maphunzilo akupita patsogolo...eee...edzi yakupha ndiy e cifukwa ena amangova koma samayitengela kumtimu kwaoko.... amakayiwelenga muja eyaaaaaa. ‘at the school there are children who are establishing their future, so little children should when they read…..whenever they read they should have a guilty conscience that eee is it….they should know….whether a girl….that if I indulge in promiscuous sex…ee…that I should continue with my studies….eee…AIDS kills so because others they just hear about it but do not take things seriously …but when they read eyaaaah’ (Mangochi rural respondent, Namwela).

However the use of different colours confused the community. They thought that the different colours used had meanings. See the following response;
Anasiyanitsa kuti aliyense ayenela akhale ozindikila kuti ngati munthu sakuyenda bwino ndiye kuti azatenga magazi mmene alili kumtundako ndipo idzabweza msanga ndiye munthu ayenela kuzisunga ndiye kuti adzakhala abwino ngati mmene ili...ali a blue aja.... ‘they used different colours so that everybody should be aware that if she/he does not look after himself/herself, that is, indulge in unprotected sex, then the person will get the blood which is at the top then AIDS will come quickly so people have to abstain or be faithful so that their blood should be good like the way it is at the bottom….will be like (blood) that blue….pointing to the picture’ (Machinga rural respondent Ntaja).

Figure 10.5(b): A mural on HIV and AIDS warning message

The respondent was specifically making reference to the picture above in that if one gets the HIV virus he/she will get the HIV virus like the red colour on top and will develop AIDS quickly but if he/she abstains or becomes faithful to one partner then the blood will be as good as the colour below, the blue colour. The other respondents agreed with her. The researcher asked them twice and each time they made that same kind of response. The response came first from someone who is literary-challenged but even those who had some literacy also agreed with her. This illustrated what the community believed that colours are related to HIV and AIDS. This goes with the belief
that red is the danger colour. Blue on the other hand is the soft, kind good colour. Thus, people have been modified due to the coming of the HIV pandemic. They are able to interpret colours.

In addition, threatening words such as ‘killer’ and *yilibe mankhwala* (sic) ‘has no cure’ have been used and these are some of the words that UNAIDS (2011) discourages. The CiCewa message also demonstrates a language deficit. For instance, the word *yilibe* is supposed to be *ilibe*. This shows that the producer did not either consult any CiCewa language specialist, or did not use a CiCewa dictionary, or orthography. CiCewa is a second language for the producer of the message and the production of the message was influenced by his mother tongue language which is CiYao. However, since the intention was for people to read and get the message, then it was fulfilled.

The languages used for the messages are only English and CiCewa. According to the coordinator of the *EDZI TOTO* school club at the school, they used English and CiCewa so that the message can be accessed by people who can read both languages or can read CiCewa only. The *EDZI TOTO* club coordinator is the one that initiated the painting, apparently after receiving some in-service training on HIV and AIDS issues. Thus, the modification of the walls occurred because someone received in-service training on HIV and AIDS, hence the intention to pass on his own transformation to the public.

Furthermore, this is a Yao speaking community. So one would expect the messages to be in CiYao but they are in English and CiCewa. The participants narrated the following in relation to the use of languages than their mother tongue:

*nanga ngati CiYao timaphunzitsa? Timangolankhula conco tinaona kuti ndikoyenela kuti tigwilitse nchito zilankhulo ziwili zokhazi.* ‘Do we teach CiYao? We just speak it so we thought it proper to use the two (taught) languages’. (Namwela, Mangochi).

*Sitingakonde kuti akhale mu CiYao cifukwa cakuti CiYao ndi mtundu wa anthu amene amalankhula CiYao koma ¾ ya CiYao amathanso kumva CiCewa, conco cizungu ndi CiCewa cakwanila basi.* ‘We would not like the messages to be in Yao language because
Yao is a tribe of people speaking Yao language and yet \( \frac{3}{4} \) of these people also speak CiCewa, therefore English and CiCewa are enough’ (Balaka rural community).

Kungoti amene amakonda amene amamva CiYao ngakhalenso cilembedwe mCiYao sathanso kuwelenga ambili sathanso kuti awelenge CiYaoco amamva kokha ndi kulankhula koma kuti wawelenge zimakhala zovuta cifukwa cakuti ena mwa iwo ndiwoti kusukulu sanapite komanso citakhala CiYao kuti cidzimveka bwinobwino kwaamene aphunzila ndiyakongwa...acindise miyasi eee zinthu ngati zimenezi zimafunika kuti mapositala ena azikhalako mCiYao eetu mayi ‘only that those who understand CiYao, even if the messages are written in Yao language, do not know how to read that Yao language. They only understand but to read is a problem, it is a problem because some of them did go to school. Even if it is written in Yao language, if it is well-written those who do know how to read can read the Yao language eee it is necessary to read, AIDS is a problem…(.) there is danger…eee some of these things should be in Yao language yes madam’ (Ntaja Machinga rural community).

The people have a negative attitude toward the Yao language. Oketch (2006) observes that people can have a negative attitude towards their own languages because of other factors, likewise the Yao community. Yao is associated with backwardness, literary-challenged people who know only skilled jobs such as carpentering, builders, painting, tailoring and other household jobs like cooks, houseboys, gardeners, storekeepers. Thus, when they are in town and cities they try not to be known as Yao people although they can be recognized by their unique Yao tone, even if they are speaking other languages. The other problem is that Yao has an orthography which is not being used currently. This concurs with what the Zomba DAC said about CiYao. He said it is taught in school but has no orthography\(^{14} \).

10.5 HIV and AIDS messages on posters/billboards/leaflets

\(^{14}\)CiYao orthography has now been produced by the Centre for Language Studies at the University of Malawi but probably it has not been introduced to some schools. It was introduced in a few schools when they tried to introduce the use of the mother tongue in standards one to four but the project has since been abandoned by the schools.
Some HIV and AIDS messages have been resemiotised to be disbursed as posters, billboards and leaflets. Some are resemiotised as proverbs in posters. The use of the proverbs, just like the mural and t-shirt messages above, is because of the limited space provided. However, unlike the messages on t-shirts and murals which are short and straight to the point, the proverbs capture a lot of meaning. The graphic messages have illustrated different kinds of social transformation and reformulation since the coming of the HIV pandemic. For instance in figure 10.6, proverbs which were used to pass on special knowledge and wisdom are now repurposed for HIV and AIDS messages. Additionally, the use of proverbs illustrates the use of standard language which brought mixed feelings and a division amongst the consumers of the messages. Some prefer the use of ‘straight language’ while others prefer proverbs.
Figure 10.6 (a and b): HIV and ADS messages on prevention of HIV

The posters above have the same message but different participants were used in the images as well as different background locations. Thus, in this analysis the researcher mainly makes reference to the first. The poster has two people who are the main participants, a picture of a condom and in the background there are people dancing *ingoma*\(^{15}\). The proverb in the poster means that whenever a person goes out to other places such as ‘the lake’, he/she should not forget to take condoms as she/he might be attracted sexually to other people and indulge in unprotected sex. In the proverb the *nyanja* ‘lake’ is the ‘traditional dance’ that is taking place there and the *mvuu* ‘hippo’ is the woman the man is talking to. Thus when men go to watch traditional dances, they must not forget to take a condom with them as there are *mvuu* that might eat them up. The proverbs have transferred the dangerousness of the hippo onto the women. Hippos are known to destroy crops and kill people in Malawi. They are herbivores. So the

\(^{15}\text{*Ingoma* is a traditional dance that imitates war fighting.}\)
reference of women to them is not on the eating but on the destructive habits of these animals. The proverb also depicts sex as something women do all the time. It is as if any time a man sees or meets a woman, then sexual activity takes place. The proverb also gives the impression that all men and women that go to watch traditional dances do so with the preconceived idea of indulging in sexual activity. It further presents women as those that destroy people’s lives or the ones that are HIV positive or are spreaders of HIV (Kabwila 2006).

The interaction between the man and the woman in the image is typical of a village setting when people are courting. A woman is not supposed to look directly into the man’s eyes during courtship as that would be a sign of promiscuity, wrong upbringing and being ‘uncultured’. These habits or acts are taught at initiation camps.

Having a bicycle in the village is a sign of someone who is well-to-do, who is hands-on and is capable of supporting a family. A bicycle is an indicator of possible income. Every man in the rural areas tries hard to acquire a bicycle. A young man who has a bicycle would get married quicker than another who has not. A bicycle is an asset in the rural areas and so young people, as soon as they reach the marriageable age they make sure to get one as that would give them more chances of getting a bride. A bicycle is used to carry things to the market, to the maize-mill, to boreholes if it is very far, to the hospital, church, funerals if it is in another far away village and many more other functions. It is the most commonly used mode of transport. These days it has been turned into a real cash business where people hire bicycles at a fee. Bicycles are now found almost in all trading centres for hire. Thus, when one has bought a lot of groceries, one would hire a bicycle rider to carry both the goods and the owner to whatever destination at a fee. Riding a bicycle has turned into an income generating activity. Thus the use of a bicycle in the image was very appropriate since bicycle owners are ‘hot cakes’ amongst women in rural areas because they bring money home on a daily basis. Nobody would want someone who has no income. Thus, its use in the poster is very appropriate as single women would be attracted to someone with a bicycle.
The use of the background, whether the Ngoma dancers or the second-hand clothes market (as in figure 10.6 (b), is also apt for the message as usually these are the places where people meet and court each other.

The chishango packet is placed as a measure, telling or warning people not to indulge in unsafe sex. They should use a condom. The packet is located on the left where the woman is and yet it is a condom for men. Though the ‘placement’ (Scollon and Scollon 2004) is inappropriate, but its meaning could be twofold. It can mean that women should take the initiative for the use of a condom or that women are the most vulnerable people who need a condom, unlike men. Thus the placement of the condom packet presents double voicing or multi-vocality (Higgins 2009). It could also mean that since the condom depicts a woman’s half-naked thigh, then it should be placed close to the woman.

Furthermore, the proverb is one of the forms of standard language presentation. When a person uses a proverb or euphemistic idiomatic forms in a speech, it entails that that person speaks standard language. It demonstrates one’s proficiency in a language. However, one needs further training or skills to understand them (Chimombo 2008).

The HIV and AIDS message in this picture was found in two different districts of the study area, Balaka and Machinga only. The message was exactly the same but with a different background. In both pictures the presentation of the message is alike: two people, a man holding a bicycle smiling directly at a woman who is timidly smiling and looking down. In the one from the Balaka district, the background had a group of dancers dancing the traditional Ngoma dance, a dance for the Ngoni people in Malawi while the Machinga one has a background of a market for second-hand clothes. The use of a packet of condoms was probably an after-thought since one picture has it while the other does not. The Balaka message has a packet of condoms at the right bottom corner of the picture while the Machinga message does not contain the condom packet. Both pictures were found inside bottle-stores. This message from the Machinga district (Figure 10.6 (b), is also found in another location outside the study area, in Chiradzulu district at Mbumbuzi trading centre and is presented in a billboard mode of communication which is hanging along the M2 road, a main road that runs from the commercial city of Blantyre going to
the municipal city of Zomba. This illustrates that these picture were produced en masse and widely distributed or displayed.

The transformation of the message itself also leads to transformation of the people because they do not only go to bottle-stores or market to buy things but they also get HIV and AIDS messages. The social transformation is further demonstrated by the use of a man holding a bicycle indicating his economic situation.

However, the messages revealed a division amongst the consumers. The community is divided into the youth and urban people on one side and the old and rural on the other side. The youth and urban people regarded the use of proverbs as inappropriate because of the devastation the HIV and AIDS pandemic has caused, and they felt that there was no need to use ‘idiomaticity’. They are of the opinion that HIV and AIDS messages should be in ‘straight talk’. The older and rural community opposed this kind of thinking. They are for the use of proverbs and euphemistic terms, especially when issues regarding sexuality are concerned. They even retorted that,

*anthu apawayilesi ataya cikhalidwe amangochula ndiye pakakhala pali ana timangotsekano* ‘the radio presenters have lost their culture, they just name (body parts)*\(^{16}\)* and if there are children around we just switch off (the radio)’ (Balaka rural community, Sawali)

Additionally, figure 10.6 has exposed the linguistic development that has occurred in consumers. For instance, when they (consumers) were asked why people should take a condom wherever they go as the messages entail, one lady said:

*abambo aja ikangowagwila getsi yoti akufuna kuti acite cina cake, ndiye atenge Chishango cija ateteze pokumana ndi amayi* ‘when the man is aroused and wants to have sex with the woman, he should use the condom’ (Mangochi rural community member Namwela).

\(^{16}\)The words in bracket are added by the writer
The consumers could not mention the word for sex but rather used words such as *kuti akumane* ‘that they should meet’; *kuti acite cina cake* ‘that they should do something’ *kuti awonane* ‘that they should see one another’ etcetera. They were also using the words *gesti* ‘electricity’ or *nyetsi* ‘electric shock’ to refer to sexual arousal. They equate sexual arousing with ‘voltage of electricity’. The same way the voltage travels and lights things or makes things hot, similarly with sexual arousal. Wolf (2003) observes that Malawians equate sexual acts with food. Malawians use words like *lawa* ‘taste’ as in this sentence *inetu ndiye ndalawa lelo* ‘as for me I have tasted it today’ meaning ‘I had sex today’ (Wolf 2003:97). Thus, apart from describing ‘sex’ as ‘food’ they also describe it as ‘electricity’. Furthermore, this topic of sex during interviews and FGDs was full of giggling for some and silence and coyly looking down on the floor for others. This behaviour was observed in all groups. This illustrates that there is still a problem in communities when it comes to talking about sexual topics. This is confirmed by one KI, a clinic officer, who said that they were given a wooden sample of a ‘penis’ so that they should use it to demonstrate to people on how to use a condom but the moment they start the demonstration, the clients were always looking down on the floor not at the demonstration.

‘Ee as soon as you pick it up, they notice that it is a wooden sample of a penis. The patient looks down and then you say...ee what is the point...you just stop and start diagnosing him or her. You can see that the patient has switched off. Even if you want to go ahead, it would be like you are talking to a wall.’ (Malosa clinic officer)\(^{17}\)

Surprisingly, the situation was the same with the youth. Amongst the youth groups it was like entertainment with so much giggling and whistling. They were too amused to talk about it, boys in particular.

\(^{17}\) Apparently they were taught to give a health talk before starting a clinic daily in the morning. But if a patient has had a problem and needed to be given condoms, then the patient had to be taught how to use the condoms.
In figure 10.7, people in the picture are helping in giving out the message. The message is also acted out in the poster as one is standing, leaving, and has his hands showing the ‘no’ sign. Unlike the posters above, the message here is not short and straight. The picture also illustrates the transformation of people in drinking joints. The picture was produced by one of the NGOs called ‘Bridge’ and was found in several drinking joints pasted on the walls. The image presents a scenario of people drinking Carlsberg beer and has three participants and a graphic message written in CiCewa language. The picture has different colours, green, black, blue, white and yellow. The message does not talk about the use of condoms. It promotes faithfulness to one’s partner.
This figure 10.8 is in contrast with figures 10.5 and 10.6. This poster has multiple messages just like figure 10.4. Multiple messages are problematic for people to interpret. This is another demonstration of social transformation at different levels; in the village, in the town, in health facilities. The poster was found in Zomba district inside a hospital. It was pasted on a wall in one of the long corridors that runs from the out-patient department to the other departments. The messages themselves are presented by words, people, buildings, arrows, traffic signs and symbols. The multiple messages are on PMTCT, HIV testing, being faithful to one partner, to impeding the spread of HIV virus. Thus, again there is multi-voicing. The picture is very colourful as it has used more red than the other colours. The big open hand is analogous to the traffic sign ‘stop’. So by using it the producers had similar intentions of ‘stopping’ the HIV and AIDS pandemic. The traffic police raise their open hand to stop the traffic on the road and so similarly the traffic, which is HIV and AIDS, has to be ‘stopped’. The symmetrical line that runs
through the circle from one end to the other is parallel to a ‘no through road’ traffic sign. How the ‘stopping’ can be done is what is outlined below that circle, actions such as having an HIV test to know one’s HIV status so that one can properly adjust their sexual behavior; being faithful to one partner; a pregnant mother having an HIV test in order not to pass on the virus to the child before and during birth. The picture is extremely rich in information for the public. However, all that information cannot be consumed by someone passing along the corridor, someone that is probably sick and so can hardly concentrate or ingest all that is said in the image. Thus, the message is overloaded or overcrowded as Oketch (2006), and Banda and Omondi (2009) called them.

Additionally, the contrast between the rural setting and urban setting is also inappropriate because the messages for each setting are different. For the urban setting, the message is lingalirani bwino banja lanu ‘consider or think well of your family’ while the rural setting has tetezani banja ndi ena onse ‘protect your family and all others’. The message is as if it is saying that only urban people have to think of others and not the rural people, and that rural people should protect their families and urban people should not; urban has the capacity to think but the rural do not; the rural has the capacity to protect but the urban do not. Malawians traditionally have extended families and so whether one lives in town or in the village he/she has extended families to look after and consider. The picture is an illustration of social transformation on how the HIV pandemic is viewed at village, rural and urban levels. The urban setting is depicted inside the house displaying gadgets such as a television, a coffee table, a sofa set on which people are sitting, while the rural people are sitting outside the daub house on the veranda and the man is sitting on the stool. This gives the impression that rural people cannot have a television set, coffee table or sofa set which is unrealistic because there are some well-to-do farmers who can afford those things.
In contrast to the above picture, this poster has more words than participants. At places where people come to draw water, usually they discuss social issues. With the onset of HIV, people now also discuss issues to do with the HIV pandemic hence this picture has people at a borehole. There are three things that are noted on this poster; (i) the poster illustrates how an overcrowded message can miss the target group. The written words are just too many for a poster. Consumers of the message would just see the women and the borehole but would not have time to internalize the message. At boreholes, women usually share stories such as family problems, village problems and many more. It is the centre of gossip too. However, with the coming of HIV pandemic it is also used as (ii) the forum for discussing HIV and AIDS. This poster was found in three districts: Mangochi, Balaka and Machinga. In Mangochi, it was found at a trading centre pasted on the wall of a small grocery shop which had no condoms for sale. It was also found outside a Community Based Organization (CBO) on a wall next to the entrance of the director’s
office. In Balaka, it was found inside the YONECO office on the wall and in Machinga it was at a shop at Liwonde trading centre. As outlined, it was either at a shop or office. Thus, the producers are informing the community of what is going on at boreholes these days. However, it is never pasted at a borehole but at other places which are not specific to women. The poster has an excellent scenario, women drawing water at a borehole sharing messages about the HIV epidemic. The excess presentation of the messages can lead to people not fully getting them because usually people just take a glance and move on with whatever they are doing. The message is about the use of a condom. However, some posters had no picture of a condom on them while others had them. This gives the impression that the insertion of the condom was also an afterthought like that in figure 10.6 above. Furthermore since some came from faith organizations belonging to churches and mosques which emphasize ‘faithfulness’ and were against the use of a condom as condoms are believed to have promoted sexuality and immorality, hence the variation of the picture depending on their faith belief. Their emphasis is on ‘faithfulness’.

The third thing that is noted is iii) that there is the use of the borrowed English word ‘kondomu’. This is in contrast with the name chishango written on top. One would expect the use of chishango as it is already there.

Furthermore, while the other words are in black, two words are in different colours. The term ‘HIV’ is in red. This colour is associated with blood in Malawi because someone would say, *tandipatsile malaya ofiila ngati magaziwo* ‘can you pass me the shirt/dress that is red like blood’ but however, this is used if the person does not like the colour. It is used metaphorically to represent distaste of the colour. It is also used to emphasise the redness. So the use of red for the term HIV is like distaste of the epidemic or for emphasis so that people should know that it is the important word in the message. The other word *kukhulupililana* ‘trusting’ is in gold. The use of this colour is very questionable because some people take this colour as a representation of something soft while others take it as important as the real metal ‘gold’. This word is also in capital letters to demonstrate its significance in the message. The bottom message *KUKHULUPILILANA sikungakutetezeni kukachilomboka* HIV ‘trust cannot prevent you from getting HIV’ is appropriately placed because that is the new message that is being passed on to
the target group. However, this should have been accompanied by the chishango strip which is on top. Thus, the construction of the message needs to be redone. All important messages should be together, at the bottom or at the centre (Kress and Van Leeuwen 2006, Jewitt and Oyama 2001). Additionally the message should have a few meaningful words written in telegraphic format (Yule 2010).

Figure 10.10: HIV and AIDS message on ABC

Figure 10.10 represents the repurposing of the football theme. The words are short and straight and participants of the image are in the nucleus position (Kress and van Leeuwen 2006). Unlike figures 10.6, 10.9 and 10.7, this poster has the correct presentation of the message. The inclusion of girls did not go well with consumers of the message. Males and females do not play football together (according to consumers’ thinking) and so the producers of the message crossed the line because they wanted to capture all the messages. As they try to be inclusive, they are creating another problem at the same. Males and females usually have different football teams but the
message here has crossed the border to cover all messages for both males and females. They probably did not want to create separate messages for women and men. In Malawi, in church or at any gathering, men sit on their own, women the same (see chapter eight of this thesis on the traditional court). Furthermore, the message has used popular Manchester United (that time) footballers. This is intertextualising as they expect people to know the popular footballers. The use of well-known figures is now being repurposed and reframed for the measures against HIV and AIDS. This is also a reformulation that has come with the HIV pandemic. The popular footballers trained the youth, both girls and boys in soccer, and travelled through the country delivering HIV and AIDS messages. The use of foreign famous footballers for the HIV and AIDS campaign was to inspire the youth to concentrate on soccer and not indulge themselves in sexual activities. The HIV prevalence rate amongst the active young group aged 14-24 is high, women in particular (NAC 2003) hence the use of young footballers for HIV and AIDS sensitization campaign. The picture has the participants and written words too. The words are all in English and some are on top while others are at the bottom. The top message, ‘my goal is life’ is the main message brought by the professional footballers and their advice to the Malawian youth is that they should prevent HIV, which the message at the bottom. However, the bottom message ‘Play safe, Prevent HIV’ has a twofold meaning or interpretation. One interpretation is that while they are playing soccer they are keeping themselves busy and active and in turn have no time for sexual activities, preventing themselves from getting the HIV virus. The other interpretation is that they should practice safe sex, probably with the use of a condom and so in turn prevent themselves from catching the HIV virus. By having two interpretations the message is ambiguous or has double voicing or multi-vocality (Higgins 2009). The ambiguity falls on the words ‘Play safe’. The question that one can ask is, play what? The further or subsequent question that would emerge would be (i) is the message about soccer since the message came with professional footballers or (ii) is about practicing safe sex since the message that they brought is about HIV and AIDS sensitization and prevention awareness. According to Kress and van Leeuwen (2006) the message is appropriately constructed as ‘my goal is life’ is the ‘given’ and ‘play safe, prevent HIV’ is the ‘new’. The real message that people should consume ought to be in the ‘new’ position hence the appropriateness of the message.
However, the rural community did not know that the ‘white’ footballers were professional players from England. Most respondents thought that they were from within the country from some ‘white’ communities and are playing together with the ‘blacks’. Although the message was on HIV and AIDS, because the words are written only in English and, in addition to that, the red symbol for HIV and AIDS pandemic was not included, the community, from the rural areas in particular, ‘misconsumed’ the message. They interpreted the message as a ‘fight against colour discrimination’. This was a surprise interpretation as in Malawi there is very little talk and discussion of ‘colours’ by people or racial discrimination. Additionally, other community members were also surprised that there were girls in the picture. As said earlier on, men and women do not stay in one place unless they are related. Since football is traditionally associated with the male gender only, they do not even know that Malawi has a national women’s football team. To them, girls should be playing netball. To concretize this, one respondent bursts out,

a..aa..aa kodi uyu ndimtsikana?...aaa uyunso ....atsikana kusewera mpira (wamiyendo) ndiyemamasakanizana ndianyamata? Hee koma ziliko.... She giggles’ ‘a..aa.aa is this one a girl?....aaa this one too…girls playing football? So girls mingle with boys? Hee things are happening….’She giggles’ (Mangochi rural community, Namwela)

This is from one of the members of a community who refused to be interviewed together with men. To this community everything they saw in the picture was wrong: girls with boys; girls wearing shorts showing off their thighs; girls playing soccer; girls wearing a cap; a girl being held by a boy. This demonstrates the general view of the community of this picture. The community values their traditional practices that women should not mingle with men. Women should play netball not soccer. The issue of gender equity for this particular community does not exist. Thus, the coming of the HIV pandemic has enhanced social transformation as the picture exemplifies, a transformation which other community members feel is ‘not alright’ and depicts an element of ‘wrong upbringing’. The mixing of males and females in a football game or any other game in communities which did not have such practices is a sign of global change which comes mainly from the western world (Blommaert 2010). Thus, the global change has also taken place in social practices.
The poster is about HIV and people with physical impairment. The poster illustrates that HIV can affect people with a physical disability, hence the inclusion of the physically challenged people in the campaign. The physically challenged people have also seen reformulation as they have added a campaign on HIV and AIDS to their normal discrimination campaign. They are now campaigning for HIV and AIDS for people with disabilities. In Malawi, there is a belief that physically challenged people can cure HIV, that is, when someone who is HIV positive has unprotected sex with a physically challenged person, then the HIV disappears and the person becomes HIV negative (Moto 2004:354). This belief also exists in Tanzania where albino children have been killed for rituals including AIDS healing. Thus the poster is a measure against such beliefs. The poster also illustrates the involvement of the physically disabled people in the HIV initiatives. Furthermore, the awareness program is on discrimination against the physically challenged person. So the poster has multiple messages in it too.
This poster, figure 10.11 was found pasted on a wall alongside two other posters outside a CBO building in the rural area of the Mangochi district. By the time the research team went to conduct the interviews six months later, all posters including this one, were no longer there. They had disappeared from the wall. This attracted the curiosity of this researcher who decided to inquire about their whereabouts. The response the researcher got was giggles and laughter from the committee members of the CBO until one of them gathered enough courage and informed the research team that they took them to their homes. That response attracted even more curiosity and the researcher asked questions such as how, when, why and where are they kept in their homes. The researcher was told that they pasted them in their living rooms for decorations. This attracted further curiosity and the researcher requested if one of them would be kind enough to take the researcher to their house so that she could see the picture(s) with her own eyes. One of the people had her house close to the CBO and volunteered to take the researcher to her home. This poster was there on the wall inside her house, decorating and illuminating her sitting room. Thus, the poster has then extended its reformulation from campaigning for HIV and AIDS for people with disabilities to social transformation, posters for decorations. This is the message which was supposed to be consumed by the whole community but here it was inside somebody’s house serving the purpose of decorating. Producers therefore should not take things for granted. They should know that some posters end up in people’s homes.

The next two posters illustrate how resemiotisation, literary-challenges and language used can lead to incorrect interpretation.
The message in figure 10.12 was found posted in three districts, Mangochi, Zomba and Balaka. In Zomba district there were posters in both CiCewa and English while in the other districts the message was only in English. In Mangochi it was also painted on the wall of a bottle store right at the boma\textsuperscript{18}. Some posters with these messages were found in offices such as PSI Mangochi office and the YONECO office, Mangochi.

Figure 10.12 illustrates how the poster restricts the language as words are on one side and images on the other side. There is also restriction of the space. However, this poster seems to get it right in terms of imagery because the image of the lady is in the ‘given’ position and the words are in the ‘new’ and what is new is the condom and it is really new because normally a condom is associated with men. The condom message also comes in the middle illustrating the nucleus position (Kress and Van Leeuwen 2006), then the caption CARE in the nucleus position entails

\textsuperscript{18} Boma is the name used for the district headquarters where government administrative offices are situated
that women can take care of themselves without involving other people like men. This message also has a CiCewa version but the CiCewa message has been resemiotised.

Figure 10.12.1: HIV and AIDS message on female condom in CiCewa

Figure 10.12.1 has a man and a woman in the image. For those who could read they knew that it was a message on the prevention of HIV. However, they did not know that it was a female condom as the words ‘female condoms’ were not translated. The consumers were just interpreting the poster as people in ‘love’ because of the man who is carrying a woman on his back. The word CARE has been translated as ‘Mtetezi’. The word ‘CARE’ is a reformulation of another advert to do with skin care and this came up during interpretation from the consumers as follows:
In Malawi, there is a body lotion called ‘care’ which is similar to vaseline but very fragrant and people use it on their hair after they have ‘permed’ it hence his reference to salon and hair.

Additionally, some communities have never seen a female condom and this fact applies to both the urban and rural communities. Only a few have heard about it but they have never seen one. This demonstrates that people were not profoundly sensitized to change their sexual practices in preventing HIV and AIDS using a female condom. Some posters have a picture of a smiling woman while the other ones have a man carrying a woman on his back; others have words only no pictures of people. What the poster contains also determines how it will be interpreted. No wonder this one was interpreted as ointment or lotions for women. The respondent’s response above is far from what the message is all about. The participants talk about a hair salon, when, in fact, the message is about HIV and female condoms. This also illustrates how important local languages are because the above respondent was the only semi-literate person in the group and if it was written in CiCewa, he would have read it. The others just agreed with him because they could not read. That presents a division amongst the consumers of the messages. The respondent apparently was also a leader or chairperson of the CBO in their area. If he could not interpret the message, then the whole group would not.

Furthermore, he narrated that ‘the salon should use equipment not for one person but two or three people’ because he was making reference to the smiling woman and the other women on the other packets displayed at the bottom. The participant was trying to interpret the poster by looking at the visual designs and hardly the graphics. He had picked two words ‘store’ in ‘drugstore’ and ‘care’ which were probably familiar to him. These words in combination with
the smiling led him to conclude that the message was about hairdo. Additionally the word ‘care’ is in big letters overshadowing the other words and that further led to the wrong interpretation. Although, there was the word HIV, they could not pick it up or they failed to connect it with the word ‘care’ in the message.

Despite the misinterpretation of the HIV and AIDS message, the presentation of the message is appropriate. The people are in the ‘given’ position while the message in word format is in the ‘new’ position (Kress and van Leeuwen 2006). Thus, although the CiCewa and the English versions have different people, the presentation of the message is proper. The wrong interpretation of the English version of the poster illustrates how resemiotisation of messages (Iedema 2003) can affect consumption of the messages. It also demonstrates how local languages are important for HIV and AIDS messages. Additionally, it further explains how important the grammar of visual design is (Kress and van Leeuwen 2006). The word ‘care’ which usually goes with ‘being concerned about something’, has been reformulated to mean ‘a female condom’.

The next poster illustrates the misinterpretation of messages if posters are not translated into local languages. It also demonstrates how consumers of the messages can miss the message by failing to relate the image in the poster to the words.
This is one of the few posters that were found in all the four districts under study area. It was produced for the 2007-2008 World AIDS Campaign. While people in the other above posters are in the ‘given’, in this one people are in the ‘new’ position. The picture is advising members of parliament, journalists, teachers and faith leaders to be involved in taking measures against the HIV pandemic. Although the message is going to professional people, the image contains a woman and children who do not seem to be part of the message. The woman, looking at the way she is dressed, seems to be someone from the remote areas. She has no shoes on and only one child has shoes on. The main message is written at the top and at the bottom.

The poster was placed in CBOs, youth drop-in centres and shops. The poster was not translated into English. And since it was not translated into CiCewa then the placement (Scollon and Scollon 2004) was erroneous and inappropriate. It should have been in places where it would address learned people such as schools, or parliament. It was inappropriate to place it in the rural areas or in places where the consumers of the message do not understand English.
Furthermore, there is also a mismatch of the people and the words and that led to the wrong interpretation of the message. This poster illustrates how grammar of visual design (Kress and van Leeuwen 2006) fails in the interpretation of messages. The image in the poster did not help in the interpretation of the message. Although the message contained the words ‘HIV’ and ‘AIDS’, some members who are literary-challenged still interpreted the poster erroneously. The linguistic barrier led to some consumers not getting the message. Consequently, the mismatch between the words and the image led to labelling the poster meaningless as some consumers commented:

‘This picture is meaningless….eee.. I mean there is no connection between the woman with her kids and the written message’. (Youth respondent, Balaka community)

_Eee koma pamene papa uthengawo ndi anthu zikugwilizana?_ ‘eee here is there any agreement between the people and the words in the poster? (a question from a consumer, Mangochi urban community, Mangochi _boma_)

The rural community members had more problems as only a handful could read the English language used in the picture. One member interpreted it as:

_amayi amenewa coyambilila anali munthu wolephela kutani...kulela, ana amabwela pafupipafuli ngati mmene mukuonelamu ana misinkhu imodzi ndipo pamene akuoneka mayipo akuoneka ngati mayi wamasiye ana aja alibe bambo_ ‘this woman did not practise child-spacing….she was having a child one after another as you can see all the children are of the same size and the way it looks, it looks like the woman is a widow, those children do not have their father’ (Namwela, Mangochi female respondent).

To those who could not read English their interpretation dwelt on other features or participants in the image such as people and symbols. Because the symbol for HIV and AIDS is missing, that is when the interpretation moved away from the HIV pandemic. Therefore, the grammar of visual design by Kress and van Leeuwen (2006) only helps in the interpretation when relevant participants are involved. This in turn leads to the conclusion that Kress and van Leeuwen’s
(2006) grammar of visual design is not all accommodating. It only works when people are familiar with the visual design and the relevance in the image. The respondent assumed that all the children belong to the woman. Additionally, some children, including the woman herself, do not have shoes on, then it was concluded that she must be a widow because most widows do not have money for luxuries like shoes. The whole group which the researcher met at this community, Namwela, all quickly agreed with her. The owner of the response above was literary-challenged. She could neither read nor write. This literary-challenged woman was apparently the chairperson for the community’s CBO and was very active and loquacious. She interpreted all the posters presented to their group. When she made a mistake in her interpretation nobody corrected her and that illustrated how powerful and probably authoritative she was. There were some members of this group who were semi-literate. They could read CiCewa only but when the chairperson made a mistake, they kept quiet and agreed with whatever she said.

Similarly other rural community group members in Balaka and Machinga districts interpreted the poster the same way as the Namwela group. His interpretation was;

\textit{pamemepa uthenga ndi kulela, akuti anthu tidzilela} ‘the message here is on child-spacing’. ‘They are saying that we should practise child-spacing’ (Balaka rural male respondent Sawali,)

\textit{apa uthenga ndi olela basi} ‘here the message is about child-spacing’ (Machinga rural female community, Ntaja).

Just like the other community, these groups had nobody who read English written messages. Their interpretations also hinged on the symbols or people in the posters or billboard. Thus, in this case the interpretation is absed on the woman and the children. They also conclusively interpreted the message as that of child-spacing. Thus three different communities from different districts interpreted the poster the same way, as a message about child-spacing.

\textsuperscript{19} Child-spacing is a program that was introduced on a widespread basis in Malawi by the government as well as NGOs such as BLM. It was so successfully done that everybody knows about child-spacing, including people from the rural community.
Furthermore, the poster presents an attempt to localize the message by using a woman from a local setting (Banda and Oketch 2011). The producers wanted to localize the message by inserting a woman traditionally carrying a basket on her head, walking without shoes, strapping her child at the back. These are the features that are seen locally and daily in villages. Additionally, the woman looks surprised as if she was photographed by surprise. However, she managed to smile to the camera just as everybody smiles to the camera.

Unfortunately, the message contains a threatening, negative evaluative word (Halliday 2004) ‘fight’ as if the HIV epidemic is a war that can be defeated by weapons. This word also appears in the old logo for the government institution for HIV and AIDS (see below).

![Figure 10.14: An old logo for NAC](image)

Figure 10.14 is an old government logo which depicts a ‘fight’ against the HIV pandemic. The logo has people with weapons. A woman is carrying an axe, the man a shield and a sword; a boy has a catapult and a girl a stick. All of them have their weapons aiming at the HIV virus which is at the centre. The written message ‘unite in the fight against AIDS’ was translated wrongly as *tigwilizane pogonjetsa edzi*. The translation is unfortunately incorrect because the word ‘tigwilizane’ means ‘we should/must unite’ or ‘let us unite’ not just ‘unite’ as presented in the logo. ‘Unite’ would best be translated as *gwilizanani*. They have also used the word *edzi*, the CiCewa re-phonologized name for AIDS (see chapter seven) when it should have been HIV
because AIDS is the end result of HIV. What ought to be fought is HIV not AIDS because when AIDS develops it means that the damage is already done. This logo is in most old documents, as old as 2007/2008. For example, for the year 2007/2008 World AIDS Day, the logo was still the one presented above here. The current logo has a circle with the red ribbon in the middle. The logo has been recreated to avoid the threatening words. Although this is the case, the government institution that handles HIV epidemic issues is still called National AIDS Commission. So the emphasis is still on the ‘AIDS’ and not ‘HIV’.

The next is a ‘billboard’ that has a condom message. This billboard illustrates how foreign practices have been adopted for HIV and AIDS. It also shows how Malawi has been faced with different types of condoms. See figure 10.15 below.

![Figure 10.15: HIV and AIDS message on male condom (a different brand)](image)

The reformulation of HIV and AIDS messages has gone further to branding. *Manyuchi* is a new branded condom product. This visual image, which is presented in an improvised billboard
format, is found in Mangochi district along the road going to Lake Malawi. It is so conspicuous that nobody can miss it. Thus, Scollon and Scollon’s (2004) notion of placement is appropriate. It is strategically placed in this position for people who go to the lake for fun and to remind them that they should not forget to get one. Manyuchi refers locally to ‘something sweet’. Thus, ‘sweetness’ has been repurposed in the branded condom in Malawi. Unlike the above poster (figure 10.13) which has negative evaluative words (Halliday 2004), this new brand came with the positive evaluative connotation ‘sweet’. This ‘sweetness’ has double voicing (Higgins 2010). It could be interpreted as being either in the sexual act or that the condom adds more pleasure to the sexual act.

This is a brand of condoms which is produced by an NGO called Banja La Mtsogolo (BLM). Chishango is the name adopted by the government and other NGOs. Therefore, when this NGO, BLM, wanted to start producing condoms for its clients, they had to come up with a different name because their ‘donors’ asked that they use a different name (verbal communication, Zomba DAC). Thus the new brand is an offshoot of Chishango.

The billboard has three participants; a couple and an individual on the packet of Manyuchi. The couple portrays people ‘in love’ as the woman is touching the man on the chest with both hands. This kind of action is ‘unMalawian’ because Malawian women are generally shy, withdrawn and conservative. They do not touch men as depicted in the picture. The action by the woman is borrowed from western cultural practices where women can take the initiative through actions that would lead to having sex. Thus, the producers imported that action.

Furthermore, the woman on the packet of condoms is wearing a top that is showing much of her body, with her breasts almost exposed. Again, just like the couple, this is not the Malawian way of dressing. It is western. One wearing something like that is regarded as ‘uncultured’ and would be equated with ‘sex-working’.

Thus, apart from the man, the presentation of the women in this image is very foreign and unrealistic for the Malawian context.
These two ‘brands’ of condoms are all presently in use. The new brand did not bring confusion as BLM did a massive campaign sensitising the general public about their ‘new’ condom. Thus, even the rural remote people know that Manyuchi is another type of condom.

All pictures, which were found during the collection of texts which took place between June and August 2009, of the Manyuchi product, have words in English except for the names of the condom and the distributing organization. The name of the organization and the condom itself are in CiCewa. However, the consumers of HIV and AIDS messages could not say which one is the better condom, Chishango or Manyuchi. Manyuchi adverts have also evaluation (Halliday 2004) epithets in the wording. There are words such as maximum, protection, chocolate and aroma.

Since the wording on the billboard is in English, again most consumers could interpret them. However, those who tried to read and interpret did that erroneously as in the following excerpt;

Ooo apopo akutiuzu kuti ndi mbali imodzi yokhala ngati kuzitezea..(.)..citetezo sikuti ndicokwanila kwenikweni cimangokhala monga mwa…(.)... mongoyeszela, ndiyenso akutiuzu kuti ndimmene munthu amapangila cisangalalo cake ndiye pofuna kupanga cisangalalo akhalenso nticisangalalo cakeco. Akutiuzanso kuti with chocolate aroma akutiuzu kuti mwina amakonda chocolate … (.) eti tiyelekeze monga muja ukamadya biscuit wa chocolate uja ndiye izzonso akuzitengela kukhala ngati ciani…chocolate..eee..ndiye kukhalanso ndisangalalo ‘Ooo there they are telling us that it is one way of protecting ourselves..(.).. but there is no full/total protection, they are also telling us that…(.).. because of the way people enjoy themselves they should have the full enjoyment. They are also telling us ‘with chocolate aroma’, they are also telling us that maybe they like chocolate…(.) let us say just like when one is eating a chocolate biscuit so similarly those things also have enjoyment’ (Machinga rural community, Ntaja).

The respondent tried to connect the words and the condom. He equated the word ‘chocolate’ with sex, not flavours. His interpretation is on the sweetness of ‘sex’ in comparison to the ‘chocolate biscuit’. Thus, the ‘sweetness’ has been transferred from ‘biscuit’ and re-directed to
condom. Chocolate is very expensive in Malawi and only a few people can afford to buy it. In turn, very few people know anything about chocolate. They know it through chocolate biscuits. The chocolate biscuit is also relatively expensive and can only be afforded by a few individuals. This response came from someone with a stable income, a primary school teacher who could afford chocolate biscuits and that is why he knew about it. Other members of the same group did not even know about this chocolate biscuit. Additionally, the respondent vaguely translated the words ‘maximum protection’ because he translated it as ‘not full protection’ yet it is written ‘maximum protection’. He was trying to mean that people should not trust condoms as they (condoms) do not provide ‘full protection’. This is a belief amongst many people that a condom does not protect one from getting HIV. They believe it can only prevent pregnancy, as also narrated by another respondent;

timauza kuti musamacindane puleni ngati mukufuna kucindana puleni\textsuperscript{20} eee chishangonso ndi coopsa nthawi ina…ngati mukufuna kupewa musapange…eee (.) muzikhala ndi mkazi wanu basi ndiye mmalo moti anthu kusamva ndiye kumayesa…..chishango\textsuperscript{21} mwina mwake eetu mayi…. ‘we tell them not to have unprotected sex if you want to do it plain (without a condom)…eee sometimes a condom is dangerous…..if you want to avoid getting the HIV do not..eee(.) do it with your wife only but because people do not listen then try…. a condom maybe, that’s it madam…” (Mangochi rural community, Namwela)

Furthermore, the word aroma was mentioned by some respondents but they did not know that it had something to do with flavour. The Balaka youth group made a joke out of the words as in the following extract;

Chocolate aroma \textit{kuti cekeceke tseeee}\textsuperscript{22} ‘chocolate aroma so sweet…like tsee’ (Balaka youth respondent)

\textsuperscript{20}Puleni is the English borrowed word for plain
\textsuperscript{21}Chishango is used synonymously with a condom
\textsuperscript{22}Cekeceke tseeee is used phonologically to refer to something sweet
This respondent, although he used a youth-like humorous language, his interpretation and understanding is the same as that of the above (Ntaja community), describing it in terms of ‘sweetness’ not ‘flavour’. Thus, most interpretations circled around ‘sweetness’, likening it to the chocolate biscuit. This is very misleading, even for the literate people who could read the English. Thus, although they have knowledge of it as a condom, the wording has also brought confusion in the interpretation and understanding of the condom. The use of familiar things such as chocolate diverts the good intention of the producers in using positive evaluative terms (Halliday 2004).

The involvement of women who are half-naked was regarded by most respondents as inappropriate and some even narrated that this stops most women from using the condom and buying it because they feel ‘disgusted’. They feel like they are the ones in the picture.

10.6 Conclusion

This chapter has demonstrated how HIV and AIDS messages are resemiotised and repurposed through the graphic mode of communication. The reformulation of HIV and AIDS messages has brought different unforeseen challenges to the consumers as well as the producers of the messages. Firstly, the images are presented in different forms leading to different interpretations, both correct and incorrect. Most incorrect interpretations occurred because of linguistic problems such as the use of English only. Images with English only were incorrectly interpreted and misunderstood by the consumers of the message (see figures 10.9, 12, 13 and 14). Images which had English only but which also had the red symbol for HIV were vaguely interpreted because the respondents’ interpretations were based on the symbol only (fig 10.10). Secondly, some posters had elements of localization but the notion was used with either too much written information or English only, (as in the case of figures 10.11, 12 and 13). Similar to what Banda and Oketch (2011) found, this study also revealed that the overcrowding of the written words overshadowed the perfect idea of using the localization format. Furthermore, the overcrowded posters present a problem as the messages are usually consumed at a glance only. The target would not have enough time to internalise everything that is included in the poster (see figure 10.8). Some images which are appropriately written in the local language of CiCewa, however

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23 These words came from a respondent from Balaka who was a youth coordinator.
present a problem as the wording of the images are too much for a poster. They are therefore crowded by words (see figures 10. 7 and 11). In addition to using CiCewa words, as Chimombo (2008) noted, this study also found that the use of proverbs to disseminate HIV and AIDS message could hardly be understood by everyone. Such images also brought confusion and division amongst the consumers of the message. Some are for the use of proverbs while others are against their usage.

Thirdly, some images have imported foreign practices and actions which could hardly be consumed by the target group (see figures 10. 9 and 14). These images have also brought a division between the urban and the rural consumers of the messages. The division is also evident because of the use of English language. This language has divided the consumers into classifications of the literate and literary-challenged (for instance the English images in figures see figures 10. 9, 12, 13 and 14). Other divisions include: between the rural and urban community (for instance figures 10. 9 and 14 where the urban community had no problem with girls mixing with boys or a woman touching a man while the rural community thought those practices were not in order); between the youth and the old, for instance, in figure 10.6 the youth want ‘straight talk’. They do not want proverbs or euphemisms when talking about the HIV epidemic while the older people want proverbs and euphemisms.

Therefore, since most posters are produced by NGOs which abide by donors directives, this study concludes that visual images should not be produced hurriedly, or produced to fulfill a certain format imposed by the donors. The producers of the images should take the consumers into consideration before production and that can be done if the consumers are consulted before production or if the images are field-tested first before mass production and mass distribution to the target people. Thus they (producers) should adopt ‘the bottom-up approach’. Everything should start from the community and end with them too.

Additionally, the SMS mode of communication which is the worst of all modes in terms of usage by consumers as there were very few people who accessed the HIV messages through it; needs to be revisited. It is a good mode for disbursing messages if properly implemented as technology has gone global (Blommaert 2010).
Last but not least, since this is the most consumed and used tool for disbursing HIV and AIDS messages, some elements that distract from the consumption of these messages such as overcrowding, and multi-messaging, the usage of the English language has to be revisited. These types of messages are usually consumed when the target individuals are in transit, moving from one place to another. As such, they have to be straight to the point, in big letters and bright colours to attract the attention of the consumers.

Lastly, different messages contained different amounts of words and participants, depending on space, for example, t-shirts, SMS and mural messages. The short messages are effective in terms of space only but provide problems as not much information is consumed. Furthermore, the use of ‘famous’ figures like footballers (figure 10.10) and assuming that people know them, is unrealistic. There should also be a match between words and participants in the posters to avoid misinterpretations. Then, also the notion of placement is very essential. Messages should be placed in accordance with the relevant information to be consumed. In conclusion, all messages need to contain the HIV and AIDS symbol which would help in the interpretation of the messages.
CHAPTER ELEVEN: CONCLUSION AND RECOMMENDATIONS

11.0 Introduction
The researcher presents this chapter in two sections. The first section comprises the summary of the main arguments, findings and contributions of the study of the study. The second part contains the recommendations and possible areas for further research on HIV and AIDS.

The main aim of this study was to explore the impact of HIV and AIDS messages, how discourses of HIV and AIDS are resemiotised and semiotically remediated across and within modes of communication in order to persuasively convey specialized knowledge and messages about the epidemic. Additionally, the study also aimed to unravel the different evaluations and interpretations of the messages when the same message is presented in multimodal communicative forms. Various modes of communication and discourses for HIV and AIDS in Malawi have been used to convey messages. The study concentrated on television and radio programmes, SMS, posters/billboards, t-shirts, newspapers and music, both modern and traditional. The study also narrowed down the study area to the Eastern region of Malawi which comprises four administrative districts: Zomba, Mangochi, Machinga and Balaka.

11.1 Another check on objectives
In this part, the researcher presents the findings and conclusions by going back to the objectives of the study. This is done by addressing each objective separately. Where the objective had more variables, the researcher has split the objective into sections.

11.1.1 How HIV and AIDS discourse is differently constituted and evaluated across different modes
This study has revealed that there is disparity in the evaluation of modes of communication between the producers and consumers. The study concludes that consumers generally prefer radio and other modes of communication (see chapter six, section 6.3, Table 6.7 of this thesis) to drama and posters. Although this is the case, economic reasons force consumers to use radios in harvest seasons only. This is the time when they have money. Their preference of ‘radio’ to other modes of communication is seasonal. In the other season, they shelve their radios, and get the
HIV and AIDS messages from ‘hospital talks’ and ‘posters’. This indicates the direction that producers should take when disbursing messages.

The study has found that urban consumers ranked radio higher than television. This indicated that although urban consumers have television sets in their homes, their main source of information for HIV and AIDS is radio.

However, whereas the producers thought consumers get most of the messages from radio and posters, but consumers said they get information from clinics and radio. But as seen above consumption through radio for the rural community is seasonal.

11.1.2 How different languages are used as resources across the different modes
Another finding of the study has shown that people prefer CiCewa and English for the consumption of HIV and AIDS messages. Thus, although the Eastern region is a Yao speaking community, people would rather have HIV and AIDS messages in CiCewa. This is because of several reasons namely; (i) that CiCewa is a national language and as such everybody speaks and understands it (ii) that the Yao language is mainly a spoken language. This was seen from the fact that there were no posters, billboards, and so on for HIV and AIDS messages in CiYao.

The study has further revealed that the use of different types of languages affects the consumption of HIV and AIDS messages in terms of interpretation. For instance, the use of hybrid language on some radio and television programmes, while other programmes use standard language, affects how the messages are consumed. Additionally, consumption is hampered by the use of mainly one local language CiCewa in areas where the language is not a lingua franca.

11.1.3 The unequal social distribution of modes of communication
On equality of message consumption, the study has found that the rich and the urban dwellers have access to more sources of getting HIV and AIDS messages than their counterparts, the rural and the poor, because they have access to more modes of communication. The urban people have access to television, radio, posters, SMS, billboards, newspapers, music, drama and t-shirts. The rural community is at a disadvantage as they mostly rely on radios and posters to get messages.
However, the use of radios, as explained above, is seasonal and restricted to the harvest time only. Thus there is a period when they do not get HIV and AIDS messages due to economic reasons. During that period, consumers do not have money to buy batteries.

Furthermore, the use of proverbs and euphemisms has illustrated the unequal social division and distribution of (linguistic) knowledge amongst the people. The urban people and the youth generally prefer ‘straight talk’ while the rural people prefer the use of proverbs and euphemisms. The main reason for this is that urban people and the youth are not usually familiar with proverbs and euphemisms as they did not grow up using such language. On other hand, the rural people would rather use proverbs and euphemisms as an avoidance strategy not to use taboo words.

Additionally, the study has shown that some modes, such as television and radio programs, can be said to be divisive in terms of consumption because of economic reasons. For example, not many people can afford to have televisions sets in the rural areas. As explained in chapter six there were very few consumers with television sets in rural areas. The study has also revealed that the language, characters, and the style of presentation used in the programs determine consumption. For example, the use of ‘straight talk’ in some television programs puts off some consumers; also the use of English in some programs limits the number of consumers of the messages.

Mobile phones are a luxury as very few people can afford them. Thus, the use of the SMS mode of communication was the most divisive of all modes, as the study has shown, because it requires some levels of literacy and economic well being. The study concludes that the mode is advantageous to the literate urban consumers and those that can afford to buy cell phones. Furthermore, most areas in Malawi, the rural areas in particular, are not covered by the mobile networks. Thus even though some can afford to have a cell phone in these areas; they are still at a disadvantage because of network coverage problems.
11.1.4 How HIV and AIDS discourse is resemiotised and encoded across modes, linguistic resources, contexts and locations

This study has illustrated that some resemiotised messages brought some confusion in the consumption of the messages in some modes. For instance, the different presentations of the *chishango* condom messages on posters/billboards confused the consumers. Some consumers interpreted the message as ‘female condom’ and others as a ‘male condom’ because of the way the message is resemiotised. On other posters, the message was not regarded as anything to do with a condom because the picture of a condom was not included in the image. Thus the HIV and AIDS messages on condoms which came in three different forms: one message contained a female portrait, another contained a male and female, and a third one contained words only, confused consumption of the message.

Additionally, the study divulged that the use of erroneous modes of communication for the incorrect group of consumers can lead to ‘misconsumption’ of the HIV and AIDS messages. For instance, the use of *gule wamkulu*, an alien dance for some consumers, tended to detract people from consuming the real message being passed on in the songs. If the *gule wamkulu* was used in the central region, the messages would have been consumed without any distraction. The eastern region still regards *gule wamkulu* as alien to them. The masks in particular detract from the consumption of the messages. From the interviews conducted, the consumers of the messages regard *gule wamkulu* as entertainment. The idea of using *cilombo* ‘big animal’ to kill *kacilombo* ‘small animal’ is appropriate because the little animal has caused wide devastation on earth but the use of it for a community that does not have cultural capital in the associated imagery is inappropriate. Thus, modes and messages should target community’s communication resource based therein rather than borrowing from another community for the sake of variety which in the long run obstructs the consumption of the intended message.

11.1.5 Transformation and repurposing of HIV and AIDS messages within and across modalities

The study has shown the remediation of several cultural artefacts and dances in the process of HIV and AIDS message dissemination.
11.1.5.1 Remodelling *gule wamkulu*

The study showed the refashioning of *gule wamkulu* from ‘the big dance’ performing during special occasions such as a chief’s funeral to currently in the fight against HIV and AIDS where it is performed at public functions, political rallies and even private parties.

The study has illustrated that ‘attires’ for the *gule wamkulu* dancers have also changed with the modern era of consumerism. It is not uncommon to see the dancer wearing designer t-shirts or rags fashioned from new clothes when in the past it was old and tattered clothes only. Additionally, *gule wamkulu* used to smear ‘its’ (because the *nyau* is regarded as non-human) body with ash or mud; now, one can see the real skin or they paint themselves with paint from hardware shops. Thus, the study concludes that the *gule wamkulu* has gone hi-tech and commercial as seen from the *makanja* (tall *gule wamkulu*) that was hired at a fee to dance in order to disburse messages on HIV and AIDS.

Moreover, during the process of ‘dancing against HIV and AIDS’, the *gule wamkulu* dancers were shown to transcend gender boundaries in dance moves and dressing. This is when the *gule wamkulu* dances and dresses like a woman. Currently, crossing gender boundaries is criminalised by a jail-sentence in Malawi but the *gule wamkulu* gets away with it. Additionally, the study has revealed that the onset of HIV and AIDS has inspired the *gule wamkulu* to transcend cultural boundaries as the *gule wamkulu* and the accompanying girls dance secretive dances openly and during day-time when they are traditionally meant for initiation camps and night time.

11.1.5.2 Adaptations in television and radio programs

The study has further found that programs have been adjusted and transformed as HIV and AIDS messages are now streamlined in different programs. The study further has revealed that the blurring boundary between instructional language used in traditional courts and language use used in ‘talks shows’; thus blending traditional courts with ‘talk shows’ language. This study concludes that the streaming has led to the transformation of popular TV dramas as they have blended in traditional courts as way to enhance the communication potential of the information against HIV and AIDS.
11.1.5.3 Hybridity in music and dance moves
Additionally, the study revealed that the need for innovation in disseminating HIV and AIDS information has led to innovations in music and dances that accompany such messages. Modern music such as Hip Hop and reggae has been blended with traditional dance lyrics and dance genres such as manganje, cimtali and cioda. On the other hand, the traditional music and dance such as gule wamkulu has incorporated modern dance moves, some associated with Hip Hop.

11.1.5.4 Appropriation and remediation of cultural practices
The study has shown innovation and transformation in traditional cultural practices. The study has illustrated that practices such as fisi, cokolo, kudzola/kutaya mafuta, chief installation, kutola nsomba are now either using condoms whenever sexual intercourse is involved or use herbs; people involved in the practice are now asked to go for an HIV test; in the initiation camps, they are now using one razor per initiate or having circumcision at medical health facilities. This has come about because people are aware of the dangers of unsafe circumcision procedures and unprotected sex.

11.1.6 Implications for linguistic resources
This study has found that there are several linguistic implications that have emerged as a result of the coming of the HIV pandemic.

11.1.6.1 Blurring of linguistic boundaries between what is taboo and what is not
Words which were regarded as taboo and could not be spoken in public spaces have now been de-tabooed. People talk about sexual activities openly. The re-phonologisation of English terms is a favored strategy to avoid equivalent and culturally sensitive CiCewa terms. According to the consumers of HIV and AIDS messages, taboo terms do not sound taboo when they are mentioned in English.

The study has also divulged that there is a thin line between what are English and CiCewa words. The re-phonologisation has made English terms become embedded in the African languages such as CiCewa. In turn, the terms can no longer be regarded as English as they have become so local that people use them as CiCewa words.
Furthermore, the study has revealed that the phonologisation has brought another blurring of a linguistic boundary between technical and non-technical HIV and AIDS terms. The study thus concludes that technical terms have been phonologized to the extent that the terms have been ‘untechnicalised’. The ‘untechnicalization’ has made it possible for the consumers to understand HIV and AIDS messages because the terms have become so familiar that every individual knows them. They do not require health experts to interpret or translate the terms for the consumers. Thus, the technical terms have taken on CiCewa socio-cultural attributes.

11.1.7 The grammar of visual design

The study has further demonstrated that the grammar of visual design by Kress and van Leeuwen (2006) is not universally applicable. First it requires several literacies including the ability to read from left to right and to interpret certain visuals and images. There is a cultural capital required to understand certain visuals. Not every image transmits the necessary information or message to the target group. Images can only be interpreted when people are familiar with some features and participants contained in the image. If familiarity is absent then there is a high probability of that image being misinterpreted. This research has shown that the grammar of visual design does not fully transmit messages in some cases. Some posters were misinterpreted because of (i) a language barrier (ii) lack of a familiar symbol for HIV and AIDS; (iii) incorrect images and erroneous references. Therefore, visual as they might be, they fall short to pass on the intended messages to the target group. In accordance with Kress and van Leeuwen (2006), the layout of the posters may be appropriate but still the message could not be consumed.

Furthermore, this study has exposed that the grammar of visual design by Kress and van Leeuwen (2006) is for the literate, urbanite people as well those who are familiar with certain features contained in the images. Therefore, it can be said that special skills such as specialized literacies, familiarity of texts or text-types, and economic status also help in the consumption and interpretation of messages as illustrated below.
Figure 11.1: Suggested framework for message interpretation
As this figure 11.1 illustrates, this study suggests that consumption of messages, whether from audio, visual or written modes, depends on other features such as familiarity of images, economic situation and language used, for consumption to take place.

11.1.8 Education and understanding/interpreting HIV and AIDS messages
The study has also found out that education does not play a big a role in the erroneous interpretation of the HIV and AIDS messages. As long as the symbol for HIV and AIDS is included in the messages, consumers, even those who are literary challenged, deduced the meanings of the messages. When the symbol is absent, that is when the interpretation is compromised. This entails how important this symbol is. Therefore, whether one is literate or not, they would understand and interpret a message if the symbol for HIV and AIDS is incorporated in the message.

11.1.9 How modes of communication are dialogically used to carry HIV and AIDS messages
The study has found out that using unfamiliar modes of communication can also hamper consumption of HIV and AIDS messages. For instance, the consumers of the messages regard the use of *gule wamkulu* as a mode as entertainment. To understand how the ‘dance’ and particular songs relate to the fight against HIV and AIDS, one needs to be familiar with socio-historical factors relating to the dance. For instance, to a layperson the colours and shape(s) of the *nyau* mask are mere decorations, but to the initiated they tell a story. The same can be said about particular *nyau* dance moves. That is why there are designated masks and dance moves for installing a new chief and for funerals. For the latter the kind of mask and dance and accompanying songs differ according to the socio-economic status of the deceased. Thus modes of communication should be able to speak to the consumers for messages to be consumed.
11.1.10 The mobility of texts and messages across modalities and from context to context and how these impact on their appreciation/consumption in different communities

The study has found out that consumption of messages depends on what reaches the target group. The texts which are produced through different modes move through different levels to reach the intended community. The texts are thus multimodal and their multimodality features are conspicuous both across modes and within modes.

Table 11.1: The mobility of HIV and AIDS messages

<table>
<thead>
<tr>
<th>NAC</th>
<th>NGOs</th>
<th>FBOs</th>
<th>DAC</th>
<th>DHs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dos</td>
<td>CBOs</td>
<td>Community</td>
<td>RHCs</td>
<td></td>
</tr>
</tbody>
</table>

Table 11.1 demonstrates how HIV and AIDS messages move to reach the intended target. The messages start off at NAC, the government institution responsible for HIV and AIDS. NAC, as a body that governs policies concerned with HIV and AIDS in Malawi, approves all other messages before they are passed on the community. Thus, although NGOs and FBOs are
independent institutions, they still have to get approval from NAC before releasing them to the community. That is the reason they are presented as being below NAC in the above table. Messages that move from one office to another do so in different modes such as radio, television, newspapers, posters, billboards, SMS, t-shirts, music, murals and their mobility is presented in the following manner.

Apart from messages moving from one institution to the other, one HIV and AIDS message also moves in different modes as follows:

![Figure 11.2: Mobility of HIV and AIDS messages in different communication modes](image)

Figure 11.2: Mobility of HIV and AIDS messages in different communication modes
The table also shows how HIV and AIDS messages move and get resemiotised across space through different modes of communication. Every mode is consumed differently. Thus although the message would be one, however depending on the kind of mode that the message has been used to reach the consumer the interpretation will differ from another consumer who has received the same message through another kind of mode. Messages change to fit a particular mode and it is that change that brings different interpretation of the message.

11.2 General conclusion and contribution of the study

The study concludes that HIV and AIDS pandemic has brought some positive changes to people’s lives. It has brought linguistic changes as there is a minimal gap between what is technical and non-technical. Furthermore, taboo terms, topics or words have been de-tabooed. In addition, social practices have changed for the benefit of mankind leading to healthier practices because people are no longer ignorantly contracting diseases or dying in large numbers during practices such as initiation, circumcision, chief installation, cokolo, kutaya mafuta and many more. This is because they have now adopted new practices since the coming of HIV and AIDS. Although, some modes of communication are seen as destroying the cultural and traditional practices, the study concludes that the HIV pandemic has also transformed and elevated the lives of people into a new global world.

11.2.1 Contribution of the study

This study is the first of its kind in the sense that it has covered almost all the modes of communication used in Malawi, eastern region in particular. Other studies covered visual images only, while others targeted the youth only. The other studies focused on newspapers only as well as music. No study has been conducted on SMS in Malawi and this study is the first in that regard. Thus, this is the most comprehensive study on HIV and AIDS messages in Malawi. The ethnographic approach used for this study makes it outstanding. Most significantly, the study will help in understanding HIV and AIDS and effects on Malawians and the world at large. Furthermore, the MDA approach used for this study is one of the few because it has drawn a lot of literature such as literature on medicine, language, sociology, religion, education and technology. Most studies of MDA focused on language and other social semiotics in isolation.
(O’Halloran 2010, 2011). This study looked at language and other social semiotic materials on HIV and AIDS messages at the same time. This is also the first time that the notions of repurposing and remediation have been used for HIV and AIDS messages’ studies in the Malawian context.

11.2.2 General implications

The study has found that there are implications on the way messages are organized. This is both internally, that is, before the HIV and AIDS messages leave the institutions or NGOs and how they are distributed to the consumers. Most institutions are donor funded and as such they follow and abide by the rules and regulations of the donor community. This power-play produces a disparity which this study has uncovered not only between the all-powerful donor and recipients, but also between the intended meaning of the HIV and AIDS messages and the consumed messages or the way messages are interpreted by the consumers. The donors often determine the kinds of messages and modes to use in dissemination without consultation with consumers. Being donor driven entails that the consuming community has little say in the message construction. The cycle commences from the donor and ends with the donor. This is diagrammatically presented as follows:
Figure 11.3 The cycle of HIV and AIDS messages

Figure 11.3 illustrates the working relationship between the donor and the agent. This implies that so long as the donor gets what they want, what the consumers know, want, understand or face in real life is immaterial. According to what this study has indicated, there is need to break this kind of circle. The public or consumers have to be considered whenever messages are being formulated especially for crucial issues such as HIV and AIDS. The cycle has to be redrawn, as below, if meaningful change has to take place in the communities;
Although this implies a lot of work going back and forth but at the least they (donors) would know what the consumers like, know, understand and are familiar with. This figure demonstrates that before HIV and AIDS messages are sent to the public for consumption, the agents have to visit the consumers before formulating the messages so that every message sent to the consumers fits the consumers’ environment, cultural and traditional practices. Flooding the public space with materials does not imply more consumption if consumers feel alienated. Donors should also be flexible to allow consumers come up with their own messages.
11.3 Recommendations and possible research areas

The first main recommendation is that the producers and writers of the messages should develop a bottom-up approach. They should know what the community wants and abide by that. Different communities have different tastes depending on their cultural and traditional practices and beliefs. Using a top-down approach would be imposing the messages on them.

Secondly, this study concentrated itself in the eastern region of Malawi only. The outcomes are very evident and it is imperative that a nation-wide study be conducted because, as said above, other regions may respond differently to the responses for this study and this too might have other implications.

Thirdly, the study showed socioeconomic, age, educational, regional, linguistic, etc. stratification in as far as consumption of messages is concerned. This suggests that producers should as much as possible try to come up with messages tailored for a particular group. Research on a large scale into how different social groups consume HIV and AIDS messages would be useful.

Fourthly, since some communities do not feel comfortable listening to ‘straight talk’ in the company of their children or individuals who are not of their age group, then probably the ‘straight talk’ should be introduced and aired during specific times, for example, night hours. Alternatively, producers can specify by announcing the times for ‘straight talks’ so that those not comfortable with this particular language can switch off the radio or leave the airwaves until such time that the program is finished.

Fifthly, the study has shown that different terminologies have come into local languages as a result of the pandemic. There is need for government to formalize such terminologies so that they become ‘standard’ in the campaigns. Here, there is need for more research dedicated to terminology development related to HIV and AIDS discourse in Malawi.
Lastly, there should be a board for standardizing what should be on posters, for example, all visual HIV and AIDS messages on modes such as posters, billboards, t-shirts, murals, SMS and television must contain the symbol for HIV and AIDS to avoid misinterpretation.
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APPENDICES

Appendix A: Modern Music

Title: “Double Kick”

Author: Dan Lufani featuring Winiko (Winiko is a comedian)

Winiko: Anthu amakuuza iweyo iii eeee ........laughing....... 

Kodi cimakhala ciani makolo anu kukutumizani kusukulu bwinobwino kuti mukaphunzile koma inu akazi....., mowa... lelotu izo 

(people told you iii.....laughing.... what real happens, your parents send you to school to study but you girls....., drinking beer... see what is happening today)

All: wazimenya double kick (you have kicked yourself with a double kick)

Winiko: kusakhutitsidwa ndikwacabe, munali panchito yabwino accountant makobidi phwiphwi koma inu kumangoba, lelotu ndi izo ( being unsatisfied is not good, you were on a good job, accountant with plenty of many but you were also stealing, see what is happening today)

All: wazimenya double kick 

Winiko: ndiyetu ndakutengelani mwana amene wavuta kuno ku Malawi Dan Lufani kuti akulangizeni, Dan............. (so I have brought you Dan Lufani the famous guy in Malawi to advise you, Dan....)
Dan: unkasewela ndi moyo wako (you were playing with your life)

All: wazimenya double kick

Dan: ma outing munkapita aja (the outings you were making)

All: wazimenya double kick

Dan: umakana kuyuza chishango (you were refusing to use a condom)

All: wazimenya double kick

Dan: uli sweet sadyela m’pepala (you were saying, one does eat

All: wazimenya double kick

Dan: amakupusitsa ndani kuti ziphinjo sizingakugwele iwe, lelo taona lelo (you cheated that you cannot get sick, see what is happening today)

All: wazimenya double kick

Dan: mwamuna uli naye chili chonse akukupatsa walowetsa bwanji fisi (you have a husband who gives you everything, why did you sleep with another man)

All: wazimenya double kick

Dan: kutaya bomwetamweta, lelo akutulukila, banjanso nkutha (you have lost your chances, people know you now, your marriage is also broken)

All: wazimenya double kick

Dan: thupi lako mwali linasanduka golosale, aliyense ankashopa (your body my friend was a grocery where everybody was shopping)

All: wazimenya double kick

Dan: zibwenzi zamseli unkajijilika nazo zija, lelo zikukusala, iweee (the extra marital
affairs you were busy with, today are running away from you, check)

Dan: waphunzila bwinobwino madegree apamwamba, ukungogona kuchezi (you are well educated with good degrees but you sleep around with different men)

All: wazimenya double kick

Dan: ndalama zapita mmadzi, mmalo mobwela ndi galimoto, ukubwela ndi matenda (money has been wasted, instead of coming with a car, you are coming with diseases)

All: wazimenya double kick

Dan: abwana ankanena siyani kusolola, lelo akucotsa udindo (your boss was saying stop stealing, today you have been dismissed)

All: wazimenya double kick

Dan: ine Dan ndi Winiko, lelo sitikubisa wazimenya double kick iweeee (I Dan and Winiko, today do not mince words, you kicked yourself with a double kick)

Winiko: kufuna kukuwima basi, ukadule ziwalo mwana wa eni ake, kodi ngati ziwaloli zili zabwino ndipo zolemeletsa, bwanji simumayamba mwadula zanuzo (you want to be witch, you want to cut body parts of somebody’s child, if the parts bring in money and makes people rich, why don’t you cut your own body parts and sell them)

All: wazimenya double kick
Winiko: enanu kupemphelako ndiye kuli pati amayi, popeza mungopemphela dzina lokha, amayi otumikila, amayi amvano amene, amayi adolika, ufiti wokhawokha (some of you do not pray earnestly, you pretend to religious, women’s guild in Presbyterian, in Adventist Churches, there are full of witches)

All: wazimenya double kick

Winiko: ndiye matenda akowo mmene wawatengamo usabwele nawo kuno, kaya ndimimba yakoyo wayitengayo usabwele nayo mnyumba mwanga muno, ine Winikotu sindimafuna zinthu zachibwana (So the diseases you have contacted do not bring it here, whether it is the pregnancy you have do not bring it into my house, I Winiko do not condone stupid things)

All: wazimenya double kick

Winiko: kodi ana inu mukufuna…makamaka mukufuna ciani? Ndikulangizeni nditavula malaya, mukuona micombo ya makolo anu, lelo ndizimeneotu (you kids you want…. What real do you want? You want me to advise you while I am naked, you want to see parents’ naked body, see what is happening today….)

All: wazimenya double kick

Dan: Double kick eeeeeeeeee

All: Double kick aaaaaaaaaaaaaaaa

Dan: Double kick eeeeeeeeeeeeeeeeee

All: Double kick eeeeeeeeeeeeeeeeee etc
Song 2

Title: Kumasano

Author: Thomas Chibade

Cioneke dibwidibwi cikamayenda mkati mwake cinaola, (she looks very fat as she walks but she is rotten inside)

mwana wanga idzingopenya koma usatole, (my child, do not pick it up, just watch)

abale ambili athela kumanda sicina koma kususuka, (many relatives have died because of not abstaining)

mkazi kunyumba ali naye koma samukonda, (he has a wife at home but he does not love her)

kubwezelana zolakwa kwa anthu awili m’banja, (revenge between two people in a family is not good)

nanga mwatani kulila, kucipatala mankhwala kulibe, (why are you crying, there is no cure in hospitals)

Yehova alanga wana kamba ka utsilu wa makolo awo, (God punishes children because of stupid mistakes of their parents)

cisembwele canyanya padziko, edzi itha bwanji ooooo (promiscuity is too much on earth, how can HIV/AIDS end oooooo)

chorus

Tikapanda kudziletsa tonse, tonse tidazsowa otiyika kumasano, (if we do not abstain, we will have no one to bury us in the grave)

koma pano citetezo kulibeee, kulibeeex2 (but now there is no prevention, x2)
apanga mankhwala otalikitsa moyo amatha kufana ndi singano, (they have made medicine which look like a needle to prolong life)

pano citetezo cija cabwelelanso amayo x2 (now the people are getting but there health, oh x2)

Kodi ndi mtendele umenewo?(is that freedom (good life) ?)

Ukafuna mkazi wofatsa, pita kumudzi ukamusake, (if you a good wife, go to the village and look for one there)

lelo anthu ali khumakhuma edzi yasalaza, yasalaza kumudzi konko, (but even in the village people are sad because HIV/AIDS has killed a lot of people there)

tataya wanhu ambili, abale ofunika kusakazika, (we have lost many people, important relative have gone)

ili ngati nkhondo yophela zida za nuclear, (it is like a nuclear war)

lelo alibe edzi salimufasho, anthu acibwana akutelo (those who are HIV negative are not in fashion, stupid people say that)

koma pitani ku Queens mukaone anthu akulila, (go to Queens Hospital and see people crying)

tiana tikulila amayi wao, amayi akulila mwamuna wao, (children crying for their mother, wives crying for their husbands)

nanga titani dziko lakhiru umasiye aaaaaa (what else can we do, the world has been orphaned)

Yakana kupeleka salary edzi kwa akacenjede odziwa mtela, (HIV/AIDS has refused to give a salary to scientists who make medicines)

yapanga sitalaka nawo othetsa awoletsa moyo, (it is on strike, it has made lives become rotten)

tikanakumana nawe maso ndi maso tikanagwada (if we were to meet you we would have knelt down begging)
kusonyeza kugonja mwina uleke edzi iweee (just to show that we have given in so that maybe you stop destroying us)

Nkhondo mmayiko folo zivomelezi, ngozi pamsewu zatha wathu (there is war in four countries, earthquakes, roda accidents which have killed people)

koma zikucepela kwa inu tayimusi million, (but these cannot be compared to you, you have destroyed humankind by a million times)

mafumu ochuka olamula dziko avula zisoti angolila (well-known presidents have saluted you, they are just crying)

yawasandutsa yakumwa misozi ayi inu lelo eeeeee (there tears have turned into drinking water today eeeeee)

Chorus x2

Song 3

Title: Ndikakwatila ku Mangochi

Kodi mankhwala kuMangochiko? Amawo nga wa mtela (CiYao), wa mkomya wa kuMangochi mkazi waulesi sangauthe.....introduction of the singers and the song.....and this song has a message about mkomya wa azimayi aku Mangochi....... cikondi ca banja cagona ku Mangochi cosalila mankhwala, angakhale azungu odzaona nyanja lelo akutcona ku Mangochi, mwamuna akalowa ndikulowa mnyumba, amacita kusambitsidwa, tiyi wamadzulo womwela ziminima akuwila pamoto, azimayi aku Mangochi posamala mwamuna, alibe mzako, mwamuna akasamba kucokela kubafa, amachita kubelekedwa, Achisale adakatcona polowa kuMangochi pokatenga fuleshi, nkhani yake yomwe ija yoctita kubelekedwa, pocokela ku bafa, nanenso mayo ineyo nkakwatila ku Mangochi, kwa CheMpondasi ineyo nkakwatila kuMangochi, ndikufuna cikondi condibeleka pocokela kubafa, ukafika mnyumbamo mafuta ocita kudzodzedwa, ndikufuna cikondi condibeleka pocokela kubafa, ukafika mnyumbamo mafuta ocita kudzodzedwa
Kodi mmankhwala kuMangochiko, ayi simankhwala koma mkomya wakuMangochi mkazi waulesi sangauthe.. yayi ndipanga miela, wanga ivoyo maka (CiYao).... Mankhawala sangakuthandizeni ... aa .. mwatani.. mudzapweteka nazo amuna anunu inu...auze... abuluzi mmanyumbamu micila yatha, nkhanja yake cikondi.. mwana wa mwini kumubwulitsa mankhwala, akuti ayiwale kwao, azimayi aulesi wosadziwa mkomya amakonda zimenezo, kudabwila abambo kucapa matewela kunamizila gender, kodi nkhanza zipose pamenepe azimayi mmalayini, mwana wamwini kumsandutsa citsilu, nkhanja yake yabanza cikondi ca banja samacita cogula mudzapengetsa mamuna inu musalole satana kukunamizani buluzi simankhwala abanja, nanenso mayi inevo nkakwatila ku Mangochi, kwa Makanjila inevo nkakwatila kuMangochi, ndikufuna cikondi condibeleka pocokela kubafa, ukafika mnyumbamo mafuta ocita kudzodzedwa, ndikufuna cikondi condibeleka pocokela kubafa, ukafika mnyumbamo mafuta ocita kudzodzedwa

..... instruments..................................................
‘Is it about love potion in Mangochi? Mama it is as if they use love potion, about love acts of Mangochi, a lazy woman cannot manage to satisfy them……..introduction of the singers and the song….. Real love which does not need love potion is in Mangochi, even the whites who came as tourists to the lake are now stationed in Mangochi, when a man enters a house, he is bathed by a woman while an afternoon tea which usually goes with locally made bread is being prepared. Mangochi women when it comes to looking after men they do not have a match. They carry men from the baths to the bedroom on their backs after bathing them. Mr Chisale never came back from Mangochi when he went to buy fresh fish, all because of these love treatments. Me too mama I will marry in Mangochi, at CheMpondasi, I will marry in Mangochi, I want a love affair of being carried on the back after a bath and when you reach the bedroom the woman anoints you with Bodycare lotion’……….. the song goes on to mention other remote localities in Mangochi famous for these acts such as Makanjila and CheMbaluku.

Appendix B: TV and radio jingle

Pakachere aye (at the Kachere tree)

Eee

Pakachere aye

Pothera nkhani (where everything comes to an end)

Appendix C: SMS

(i) HIV/AIDS kills, use a condom

(ii) HIV/AIDS is real, condomise

(iii) anthu odwala edzi ndi anthu, tisawasale (HIV positive people are people like us, let us not stigmatize them)
Appendix D: Letter of consent for participants

Department of Linguistics
University of the Western Cape
Private Bag X17 BELLVILLE, 7535
SOUTH AFRICA

Number____________

Dear participant,

This questionnaire is designed to investigate ‘HIV/AIDS Discourse and Modes of Communication in the Eastern Region (Balaka, Machinga, Mangochi and Zomba)’. This is part of my ongoing PhD research at the above-mentioned university. The information you will provide will help me to understand better the discourse and modes of communication used by writers/producers and how they are understood and interpreted in the Eastern region. Since you are in the best position to give a correct understanding and interpretation of the HIV/AIDS discourse, I request that you respond to the questions frankly and honestly.

Your response will be kept strictly confidential. Only members of the research team will have access to the information you give. In order to ensure privacy we have provided a number for each respondent. This number will be used only for follow up procedures. The numbers and completed questionnaires will not be made available to anyone other than the research team.

Thank you very much for your time and co-operation. I greatly appreciate your help in furthering this research endeavour.

THOKO EUNICE KUNKEYANI
Appendix E: Ethical considerations

The research will comply with the American Sociological Research Association standards. All interviewees have the right to:

- Confidentiality
- Withdrawal at any stage of the research
- Request a report at the end of the research
- Research protocol – indicating the purpose of the research and the rights of the respondents.

Permission will be sought from individuals and relevant authorities to conduct the research. The interviews will be by consent. Interviewees’ identities will be kept anonymous. (See also, Consent Form).

Appendix F: Questionnaires

(Key Informants Questionnaire)

Sex: ______ Age: ______ Highest level of education: ____________________________

1. (a) How many languages do you speak?

   Mumalankhula zilankhulo zingati?

   ____________________________________________

   (b) List them below

   Zilembeni mmusimu

   ____________________________________________
2. In what language did you first encounter HIV and AIDS messages?
   Mauthenga a HIV and AIDS mumaona/kukumana nao mchilankhulo chanji?
   _____________________________________________

3. (a) Do you think language is important to HIV and AIDS messages?
      Mukuganiza kuti chilankhulo nchofunikila pa nkhani ya HIV and AIDS?
      _____________________________________________

   (b) Explain your response in 3 (a)
      Fotokozani bwino yankho lanulo
      _____________________________________________________________________________
      _____________________________________________________________________________
      _____________________________________________________________________________

4. (a) Which language do you prefer to use when looking for HIV and AIDS messages?
      Mukamafuna kuona mauthenga a HIV and AIDS mumafuna muchilankhulo chanji?
      _____________________________________________
(b) Give reasons why you prefer the language you have indicated above

Pelekani zifukwa zimene mwasankhila chilankhulo chimenechi

________________________________________________________________

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________________________________________________________________

________________________________________________________________

5. (a) Have you encountered any difficult words/ concepts/phrases in the HIV and AIDS messages?

Munakumanapo ndi mau ena ovuta kuvamva pa mauthenga a HIV and AIDS?

________________________________________________________________

(b) Please give examples of such words or concepts/phrases

Pelekani zitsazo za mau amenewo

________________________________________________________________

________________________________________________________________

________________________________________________________________

(c) List down any five words that you have found difficult to translate either from English to CiCewa and CiYao or CiYao and CiCewa to English(Use the columns below)

Lembani mau asanu amene amakuvutani kuwatanthauzila kuchokela

muchingelezi kupita kuchichewa (gwilitsani malo ali mmunsiwa)

CiCewa-English  English-CiCewa
6. How do you overcome such translation problems?
Mau ovutao mumathana nao bwanji?

7. (a) Are there language translators who assist you in case of such difficulties?
Muli ndi anthu amene amakuthandizani pa mavuto amenewo?

(b) If yes, in what ways do the translators assist?
Ngati alipo, amakuthandizani bwanji?
8. In what ways do you think the following impacts on interpretation/understanding/accessing HIV and AIDS messages?

Zinthu zili mmusizi zimathandiza/kuononga bwanji mauthenga a HIV and AIDS?

(a) Cultural experience
   Chikhalidwe

(b) Socio-economic status of viewers/readers/listeners
   Ndalama
9. Do you think understanding a cultural experience is important in understanding HIV/AIDS messages?

Kodi chikhalidwe chimathandiza kumvetsa mauthenga a HIV and AIDS?

Yes (Inde)

No (Ayi)
10. List down 8 information dissemination methods (Modes of Communication) that you have utilized in accessing HIV and AIDS messages

Lembani njila zisanu ndi zitatu zimene mumapezela mauthenga a HIV and AIDS

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<tr>
<th>Method (njila)</th>
<th>Reasons for preference (chifukwa)</th>
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11. Of the above methods which ones do you find appropriate and why? (Start with the most preferred)

Pa njila zimene mwalembazo ndi ziti zimene mumaona kuti ndi zabwino ndipo pelekanizifukwa zake. (muyambe ndi zimene mumazikonda)
12. Do you resemiotise HIV and AIDS messages? Mauthenga a HIV and AIDS muawasintha?
Yes (Inde)  

No (Ayi)  

(a) If yes, why do you resemiotise? Ngati mwayankha ‘inde’ chifuikwa chiani mumasintha?

(b) If no, why do you not resemiotise them? Ngati mwayankha ‘ayi’ chifuikwa chiani simumawasintha?

Thank you. Zikomo
(Questionnaire for the Community)

Sex: _______ Age: _______ Highest level of education: _____________________

1. (a) How many languages do you speak?

Mumalankhula zilankhulo zingati?

_______________________________________

(c) List them below

Zilembeni mmusimu

______________________________________________________________

2. In what language did you first encounter HIV and AIDS messages? Mauthenga a HIV and AIDS mumaona/kukumana nao mchilankhulo chanji?

________________________________

3. (a) Do you think language is important to HIV and AIDS messages?

Mukuganiza kuti chilankhulo nchofunikila pa nkhani ya HIV and AIDS?

________________________________

(b) Explain your response in 3 (a)

Fotokozani bwino yankho lanulo
4. (a) Which language do you prefer to use when looking for HIV and AIDS messages?
Mukamafuna kuona mauthenga a HIV and AIDS mumafuna muchilaknhulo chanji?

(c) Give reasons why you prefer the language you have indicated above
Pelekani zifukwa chosankhila chilankhulo chimenechi

5. (a) Have you encountered any difficult words/ concepts/phrases in the HIV and AIDS messages?
Munakumanapo ndi mau ena ovuta kuwamva pa mauthenga a HIV and AIDS?

(c) Please give examples of such words or concepts/phrases?
Pelekani zitsazo za mau amenewo
(d) List down any five words that you have found difficult to understand/interpret
(Use the columns below)

Lembani mau asanu amene amakuvutani kuwatanthauzila kuchokela

muchingelezi kupita kuchichewa (gwilitsani malo ali mmunsiwa)

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<thead>
<tr>
<th>CiCewa</th>
<th>CiYao</th>
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6. How do you overcome such interpretation/understanding problems?
Mau ovutao mumathana nao bwanji?

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

7. (a) Are there language interpreters who assist you in case of such difficulties?
Muli ndi anthu amene amakuthandizani pa mavuto amenewo?
(c) If yes, in what ways do the interpreters assist?
Ngati alipo, amakuthandizani bwanji?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8. In what ways do you think the following impacts on interpretation/understanding/accessing HIV and AIDS messages?
Zinthu zili mmusizi zimathandiza/kuononga bwanji mauthenga a HIV and AIDS?

(a) Cultural experience
Chikhalidwe

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

(e) Socio-economic status of viewers/readers/listeners
Ndalama

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
12. Do you think understanding a cultural experience is important in understanding HIV/AIDS messages?

Kodi cikhalidwe chimzthandiza kumvetsa mauthenga a HIV and AIDS?

Yes Inde

[ ]

No Ayi

[ ]

Explain your answer.
10. List down 8 information dissemination methods (Modes of Communication) that you have utilized in accessing HIV and AIDS messages

Lembani njila zisanu ndi zitatu zimene mumapezela mauthenga a HIV and AIDS

11. Of the above methods which ones do you find appropriate and why? (Start with the most preferred)

Pa njila zimene mwalembazo ndi ziti zimene mumaona kuti ndi zabwino ndipo pelekani zifukwa zake. (muyambe ndi zimene mumazikonda)
13. Do HIV and AIDS messages get resemiotised?

Yes Inde

14. Mauthenga a HIV and AIDS amasinha?

No Ayi

12. When HIV and AIDS messages get resemiotised, do you get the same understanding and interpretation in those resemiotised modes?

Yes Inde

No Ayi

(a) if yes, why? Ngati mwayankha ‘inde’ Fotokozani bwino

(b) if no, why? Ngatimwayankha ‘ayi’ fotokozani bwino

Thank you. Zikomo
Appendix G: Guiding Question for KIs interviews and FGDs

1. What do you do in the NGO?
2. What is HIV and AIDS?
3. How do you carry out dissemination of HIV and AIDS messages to the community?
4. How do you communicate HIV and AIDS concepts to the community?
5. What communication methods do you use?
6. Are they the effective in communicating HIV and AIDS messages?
7. What language do you use?
8. Why that language?
9. How do these modes and linguistic resources impact on the community?
10. Do you think HIV and AIDS messages can be effectively communicated in local languages?
11. What role does cultural experience play in HIV and AIDS messages on the target group?
12. Do you use any translated pamphlets?
13. Are there translation experts in your organization?
14. Are there any models of information dissemination used by the NGOs?
15. Do you think the communities understand the technical foreign concepts that you use for HIV and AIDS messages?

Appendix H: Raw Data Community (Rural)
(Jali CBO & Jail Youth Centre) CBO, Mangochi (Tiyende Pamodzi, Pakachere CBO, NACC Machinga (Ntaja -Tigwilizane CBO),Balaka (Sawali & Chibaso)

Oldest: 68 highest Education: Diploma (Coordinators of CBOs)
Youngest: 19 lowest Education: STD 3

Question 1 (a)

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<th>Male</th>
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<td>2</td>
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</table>
Most CBOs comprise of women ratio 1 to 8

**Question 1 (b)**

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<th>CiYao</th>
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<td>11(lomwe)</td>
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**Question 2**

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Comments:

| Gender | Easy to understand, for communication, for communication, to understand each other, for communication, CiCewa-important language, for communication, for east communication, for easy understanding of messages, for communication, for passing on of messages, for understanding of messages, for understanding of each other, for communication, for communication, for communicating HIV/AIDS messages, CiCewa-important language, get more information through language, for easy communication, for easy understanding of messages, to get messages easily, for communication, for communication, for communication, for getting messages, to communicate with others, national language, for communication, to communicate with others, for communication, to get messages | Easy to understand messages, for communication, we understand each other, key to communication, for communication, for communication, for communication, for communication, for communication, for communication, for communication, for understanding of messages, for communication, for communication, for communication, for communication, for easy to understand, for communication, for communication, to get messages, to communicate with others, national language, for communication, to communicate with others, for communication, to get messages |
communication, for communication, to understand messages easily, for communication between different people and areas, for communication, to communicate with others, to communicate with others, for communication,

<table>
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<tbody>
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**Comments**

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<tr>
<td>Mother tongue, easy to understand, easy to understand, national language, mother tongue, national language, national language, mother tongue, mother tongue, national language, mother tongue, national language, Mother tongue, understand easily, easy to understand, easy to understand, national language, national language, national and common language,</td>
<td>National language, national language, for communication because it is mother tongue, easy to understand and short to write, for easy communication, mother tongue, national language, national language, mother tongue, national language, mother tongue, mother tongue, national language, mother tongue and easy to understand things, national language, mother tongue, CiYao mother tongue and CiCewa</td>
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national language, mother tongue, CiCewa easy to understand, easy to understand, CiCewa national language and CiYao mother tongue, CiCewa easy to understand, CiCewa easy to understand and CiYao mother tongue, national and common language, CiCewa national language and CiYao local language,

national language, national language, CiCewa – national language and CiYao mother tongue, CiYao-mother tongue, CiCewa national language, CiCewa easy to read, CiYao mother tongue but CiCewa national language, national language, national language and mother tongue,

Question 5 (a) & (b)

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Examples of Concepts 5 d

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<td>CD4 Count, HIV, discordant couple, HIV, Condom, ARV, safe sex, discordant couples, condom, ARV, HIV, HIV, HIV, HIV, PMTCT, discordant couples. PMTCT, CD4 Count, ARV, window period, discordant couples, PMTCT, discordant couples, window period, Gender, PMTCT</td>
<td>Niverapine, CD4 Count, ARV, Niverapine, CD4 Count, ARV, PMTCT, Viral Load, CD4 Count, window period, CD4 Count, ARV, ARV, HIV, ARV,HIV, AIDS , ARV,ARV, AIDS ,HIV, ARV, PMTCT, ARV, ARV, PMTCT, ARV, HIV, ARV, PMTCT, CD4 Count, ARV, PMTCT</td>
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344
Difficult Words

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Question 6

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<tbody>
<tr>
<td>Ask experts at CBOs and hospitals,</td>
<td>Ask health experts, asks people,</td>
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7(a) & (b)

<table>
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</thead>
<tbody>
<tr>
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</table>

Comment: give us an explanation, give examples, give examples, they provide an explanation, explain through giving examples, they explain to me.

Question 8 (a – d)

<table>
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</thead>
<tbody>
<tr>
<td>Cultural Experience</td>
<td>Some practices promote spread of HIV e.g. <em>chokolo</em>, conflict with cultural practices, people engage in prostitution ignoring messages, some practices promote unsafe sex ignoring messages, culture conflicts with messages, helps in how to handle</td>
</tr>
<tr>
<td></td>
<td>Some practices spread HIV e.g. <em>fisi</em>, people ignore message because they want to follow cultural practices, so that every know how to prevent HIV, some cultural practices go against messages e.g. <em>kulowa kufa, kusasa fumbi</em> and initiation, some cultural practices</td>
</tr>
</tbody>
</table>
HIV/AIDS people, some practices ignore messages e.g. *kulowa kufa*, some cultural practices conflict with messages e.g. *kusasa fumbi*, some practices go against the messages e.g. circumcision where they say they have to use one razor blade because eth ancestors said so, some practices ignore messages e.g. *kusasa fumbi*, cultural practices have negative impact on message as they go against it, some practices go against messages e.g. *kusasa fumbi*, *fisi*, *kulowa kufa*, go against messages e.g. *kulowa kufa*, *kusasa fumbi* and initiation, people ignore messages to do sex cultural practices, people ignore messages to do sex cultural practices, people ignore messages to do sex cultural practices e.g. *kusasa fumbi* people ignore messages to do sex cultural practices e.g. *kusasa fumbi*, *chokolo*, *kulowa kufa*, people ignore messages to do sex cultural practices, people believe so much in cultural practices that they ignore HIV messages,

| Socio-Economic Status | Rich people do not care about HIV, the rich easily get HIV by exploiting girls, both the poor and the rich ignore messages, money helps | Poor people are vulnerable because they can be enticed by the rich to indulge in unprotected sex, the rich exploit poor girls |
spread messages, people with money would not indulge in prostitution, people indulge in unprotected sex to get income ignoring messages, people girls especially do not say no to sex when they see money ignoring messages, for communicating messages, poor people indulge in sex to get money, poor people indulge in sex to get money, if used to pass on messages good, people with money exploit girls, ignoring messages, money for radio batteries, money makes people get drunk with beer and indulge in unprotected sex forgetting about HIV messages, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, girls indulge in unprotected sex ignoring messages to get money, helps to spread messages, girls indulge in unprotected sex ignoring messages to get money,
| Education     | Literate people understand messages easily, literate people understand messages, literacy makes one more knowledgeable, helps to know more, literate people are more knowledgeable, literate people are more knowledgeable, educated or not people ignore messages, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, illiterate people do not understand messages, | Literate people understand messages easily through reading, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, literate people understand messages easily, |
Landscape (accessibility) | Remote people rely on radio only, rely on public rallies for information on HIV/AIDS, some people do not even have radios so they rely on health people to come and give the needed messages, remote people rely on radios and CBOs only, remote people hardly get messages because of batteries, remote people hardly get messages, remote people rely on radios and CBOs only, | Only those who come to CBO centre can access messages, only when youth clubs come to perform drama, remote people rely on radios and CBOs only, remote people rely on radios only, rely on CBO and youth centers only, we rely on CBO and youth centre only, rely on youth centre, rely on youth centre and radio only, rely on youth centre, rely on youth centre and radio only, remote people do not get messages, remote people do not get even important messages, | understand messages easily, Only those who come to CBO centre can access messages, only when youth clubs come to perform drama, remote people rely on radios and CBOs only, remote people rely on radios only, rely on CBO and youth centers only, we rely on CBO and youth centre only, rely on youth centre, rely on youth centre and radio only, rely on youth centre, rely on youth centre and radio only, remote people do not get messages, remote people do not get even important messages, |

**Question 9(12)**

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### Comments

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</thead>
<tbody>
<tr>
<td>So that cultural practices could be used for passing on messages, so that message can be spread through cultural practices, can use cultural practices for the spread of HIV messages, some practices spread HIV e.g. <em>kusasa fumbi</em>, some practices go against the teaching of messages e.g. <em>chokolo</em>, people when doing initiation they do not think of HIV, for spreading necessary advice to the people e.g. during wedding they are told to be faithful to one another, some practices promote spread of HIV e.g. <em>kusasa fumbi</em>, initiation, so the cultural practices can be used to pass on messages,</td>
<td>so that people know how to prevent HIV during initiation, conflict of interests, conflict of interests, conflict of interests, so that cultural practice can be used for HIV/AIDS messages, to cultural practices to spread messages, conflict of interest e.g. <em>kusasa fumbi</em>, conflict of interest e.g. <em>kusasa fumbi</em>, conflict of interest e.g. <em>kusasa fumbi</em> and <em>fisi</em>, most cultural practices go against messages, some practices promote spread of HIV e.g. <em>kulowa kufa</em></td>
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### Question 10 (Methods of Communication)

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<tr>
<td>Posters</td>
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<tr>
<td>Radio</td>
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</tr>
<tr>
<td>TV (Cinema)</td>
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</tr>
<tr>
<td>Hospital Talks</td>
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<td>11111111111111111111111111111111</td>
</tr>
<tr>
<td>Other (meetings, magazines leaflets, church/mosques, class, news letters, music, videos, newspapers, internet (one – DAC Mangochi), poems, banners, focus groups, CBOs, one to one, medical journals, youth centers, exercise books covers)</td>
<td>11111111111111111111111111111111</td>
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NB: Ntaja – 10 people only one with TV
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<td>TV</td>
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<td>Hospital Talks</td>
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<tr>
<td>Other (village talks by</td>
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<td>Third (CBO) fourth (church) first (mosque),</td>
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<td>chiefs)</td>
<td>third (CBO) fourth (church), fifth</td>
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<td>(rallies) second (public talks) third (CBO) third (CBO), fourth (newspaper), fifth (public talks), second (public rallies) fifth (CBO) first (CBO), second (Church), first (CBO), fourth (church), fifth (public rallies), first (CBO), fourth (books), fifth (mosque), first (CBO), third (newspaper), fourth (school), fifth (church), first (CBO), fourth (public rallies), first (books), fifth (CBO), first (newspaper), second (CBO) second (CBO), second (rallies) third (CBO), fifth (CBO), fourth (youth centre), second (CBO), first (CBO), third (CBO), second (newspaper), third (CBO), fifth (CBO)</td>
<td>(CBO), first (CBO) third (one to one), second (CBO), first (CBO),fourth (schools), fifth (church), first (CBO) third (drop-in centre), first (CBO), first (youth centre) second (youth centre) second (church), third (youth centre) second (church), third (youth centre),first (youth centre), fourth (church), first (youth centre), fourth (church), first (youth centre), second (CBO), second (youth centre), third (books) third (CBO),second (CBO), second (CBO), second (rallies),</td>
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</table>
Comments: cinema- real examples, radio plays are fun, radio-all the time, CBOs we discuss in details, radio need batteries, CBOs we meet every week, hospital we learn new things, hospital we see HIV infected people, radio and TV we see and listen but cannot ask them questions, radio we listen even during night, radio- everybody understand messages in his own way,

Question 12 (a-c) (Resemiotisation)

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Question 13 (12) (Resemiotisation)

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Comments

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</table>
Messages is same, same message, although they are in different modes the messages are the same, message is same, no we get confused, messages does not change, message change but we do understand, messages is one, we get confused because message change a little bit, message is same but presentation different, message is same but presentation different, message is same, messages is same, message becomes conflicting, e.g. some campaigns says ‘use condom, other say condom not reliable as it can burst, message does not change, messages is the same but presentation differs, messages is the same, messages is the same, yes all messages talk about the dangers of getting HIV, get confused, get confused, messages changes focus, yes because messages is one, yes because is all the same,

Yes-Message does not change, no-messages does not change, messages does not change, message is same, message is same, message is same, message is same but interpretation different, message is same, message is same, no message is same, message changes, no because things are changing everyday, no because we get conflicting messages, yes because messages is same, yes because messages is same, ‘no?’ because messages is same, yes messages is same, no get confused, get confused, message is same but presentation confuses the messages, no because message are coming form different people, no message tends to change,

NB: Akasintha amasokonezeka sitimva bwino, akasintha sitimvetsa,

14 (13) Proverbs/euphemisms

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<tr>
<td>--------</td>
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<td></td>
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<tr>
<td>Not all people understand proverbs, to avoid taboo words for children, for older people, no- can confuse those who do not understand messages, no- so that message can to all ages, so that all people young or old get the true messages, so that we should be open to talk about HIV/AIDS, yes so as to incorporate cultural aspects in the messages, there are good advices in proverbs for those who understand them, no proverbs are difficult to understand, proverbs predict what will happen in the future, to mix cultural aspects with messages, to avoid children from getting taboo words, no people would not get the real message, for easy understanding of messages, some people do not understand proverbs e.g. the youth, yes attracts the attention of the youth in particular for</td>
<td>Some people do not understand proverbs, people would others to interpret the proverbs for them, yes to avoid someone who might have touched with the topic, to avoid children from hearing taboo words &amp; things, for people to understand messages, yes to be practical, we understand them (50yrs), yes not to let children get taboo words, people do not understand them, even one is to translate them there would be chances of wrong translation, no because most people do not understand proverbs, most people do not understand proverbs, not important for understanding of messages, proverbs need someone to interpret them because are difficult to understand, most people do not understand messages, most people do not understand messages,</td>
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more discussion, no some people do not understand the meaning of proverbs because they are not educated, yes to marry culture with messages,

<table>
<thead>
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<th>most people do not understand messages, most people do not understand messages,</th>
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Community (Urban): CBOs Jali, Hospitals Malosa ART Centre, Youth Centers (YONECO Drop-in Centre, Mangochi Drop-in Centre, Thondwe Youth Club, Jail Youth Club)

<table>
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Question 1 (a)

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Question 1 (b)
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**Question 2**

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**Question 3 (a) & (b)**

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</table>
For communication, learn through communication, communication, for easy understanding of messages, for communicating HIV/AIDS messages, easy communication, common language, for communication, for easy communication and simple to understand, so that people understand each other and messages, national language, to communicate with each other, for easy communication,

For communication, communication, no-what is needed is the messages not language, easy communication, easy to communicate and follow, easy communication, for communication, mother tongue, national language, for communication, national language, for communication, for good communication, for easy communication, for communication, easy to understand messages, to get messages, to get information, everybody expresses better in their own language.

<table>
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Comments:

<table>
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<tr>
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</thead>
<tbody>
<tr>
<td>National language, mother tongue,</td>
<td>National language, mother tongue,</td>
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</table>
mother tongue, language used in schools as media of communication, easy to understand, mother tongue, easy to understand, to avoid taboo words in local languages, national language, for easy understanding, easy to understand, national language and mother tongue, CiCewa-national language, CiYao-mother tongue, national language, mother tongue, national language, simple to understand and explain, CiCewa easy to understand, I like CiCewa, easy to understand, mother tongue, mother tongue, mother tongue and national language, CiCewa easy to understand, helps those with lesser education, mother tongue, mother tongue, mother tongue, mother tongue, national language, there is straight talk in English, national language,

Question 5 (a) & (b)

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Examples of Concepts 5 d

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<tr>
<td>Window period, CD4 Count, HIV, PMTCT, window period, PMTCT, window period, ARV, dissemination</td>
<td>Peripheral, neuropathy, ARV, HIV, HIV, AIDS, PMTCT, HIV, penis, Sexual intercourse, penis, HIV, AIDS, ARV, ARV, CD4 Count, Window Period, genital diseases, PMTCT, syndrome, PMTCT, HIV,</td>
</tr>
<tr>
<td>Female</td>
<td>Window period, CD4 Count, HIV, PMTCT, window period, PMTCT, ARV, dissemination</td>
</tr>
<tr>
<td>-----------------</td>
<td>--------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
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<td>Dzanzi, kulowa kufa, ARV, HIV, AIDS, HIV, AIDS, ARV, ARV, CD4 Count, Window Period, genital diseases, PMTCT, syndrome, PMTCT, HIV,</td>
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</table>

Question 6
### Question 7(a) & (b)

<table>
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<tbody>
<tr>
<td>Seek health expertise, ask health experts, ask health experts,</td>
<td>YONECO give them translations, ask YONECO staff, ask someone who knows those words, they give us an explanation, ask experts, they explain, ask experts, ask the experts,</td>
</tr>
</tbody>
</table>

<table>
<thead>
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<tr>
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Comment: give us an explanation, give examples, give us lesson on the topic, give examples

### Question 8 (a – d)

<table>
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<th>Cultural Experience</th>
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</thead>
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<tr>
<td>Cultural practices encourages the spread of HIV, some practices such as chokolo, fisi ignore</td>
<td>Cultural like kulowa kufa prohibits understanding of messages, encourages spread of HIV by ignoring messages encourages spread of HIV by ignoring messages e.g. kulowa kufa</td>
<td></td>
</tr>
</tbody>
</table>

Messages, some practices ignore messages e.g. chokolo, initiation, chief
installation, culture conflicts with HIV/AIDS messages, conflict with messages, cultural things conflict with health messages, elders hide more info in fear of being dishonored, some practices go against messages, cultural practices spread HIV, some practices conflict with messages e.g. *chokolo, fisi*

encourages spread of HIV by ignoring messages encourages spread of HIV by ignoring messages e.g. *kulowa kufa*, initiation, some night practices encourages sex and people ignore messages deliberately, some practices encourages sex and people ignore messages deliberately e.g. *chokolo*, some cultural practices promote spread of HIV e.g. *chokolo*, some practices force initiates to indulge in sex, some practices conflict with messages, people deliberately ignore HIV/AIDS messages, conflict with messages, cultural practices like initiation go against messages, can use cultural practices to pass on HIV/AIDS messages, ignores messages by promoting
| Socio-Economic Status | Whether rich or poor people misunderstand messages, money forces men to have multiple sex-partners ignoring messages, rich people do not care whether there is HIV or not, poor indulge in sex ignoring messages, rich people indulge in sex with girls and poor people also indulge in sex to get income, less privileged people engage in unsafe sex to get income, poor ignore messages in search of money, people indulge in prostitution to get income, people indulge in prostitution to get income girls in particular, | The poor indulge in unprotected sex ignoring messages, Whether rich or poor people misunderstand messages, Whether rich or poor people misunderstand messages, rich people indulge in unprotected sex ignoring messages, Whether rich or poor people misunderstand messages, the rich use money as transport to hospital, lack of money leads to prostitution especially the girls, girls do prostitution to get income, rich people ignore messages, poor indulge in sex to get |
income, rich are like deaf people, poor people tend to ignore messages in order to indulge in sex to get income, rich are safe, cultural practices go against messages, poor people ignore messages to indulge in unprotected sex to get income, the less priviledged indulge in unsafe sex to get income ignoring messages, prostitution spread HIV, looking for money spread HIV (ambele chile)

| Education | whether educated or not people ignore HIV messages, illiterate misunderstand messages illiterate misunderstand messages better, Literate people understand messages easily, *kusaphunzila ndikufa komwe* (educated people are more knowledgeable, Literate people understand messages easily, whether educated or not people ignore HIV messages, Literate people understand messages easily, whether educated or not people ignore HIV messages, Literate people understand messages easily, |
literate people understand messages easily, remote people hardly access messages, educated people ignore messages thinking they know all, educated people ignore messages thinking they know all, literate people understand messages easily, literate people easily understand messages, literate people indulge in unprotected sex deliberately knowing there is ARV, literate people easily understand messages, illiterate people hardly understand messages, literate people are more knowledgeable and independent, literate people understand messages easily, poor people ignore HIV messages to get money, literate people understand messages easily, literate people understand messages easily, literate people get messages easily, education leads to bad behavior through peer
| Landscape (accessibility) | Those in remote areas can only get messages through church & public rallies, people in remote areas get messages in church and rallies, use of CBOs, remote areas do not have any type of information, those with radio can access messages, remote areas rely on CBOs only, remote people are disadvantaged because they don't get most of the messages, | Some area cannot even access radio programs, people in remote areas are disadvantaged as they don’t sometimes get messages, use radio, use radios, use radios and youth clubs, remote areas do not access messages, remote area are difficult to access HIV/AIDS messages, people in remote areas hardly access messages, remote people do not get messages, remote area rely on village chiefs only, remote people rely on radio only, remote people hardly get messages because people in youth centers bar them, remote people rely on radios only, remote people do not get messages, |
### Question 9(12)

<table>
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### Comments

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</thead>
<tbody>
<tr>
<td></td>
<td>Some practices encourages having unprotected sex, helps to avoid practices that can transmit HIV, every tribe has a culture, cultural teachings conflict with health teachings, cultural practices ignore messages in fear of disobeying their ancestors, can use cultural practices to pass on messages, some area they use cultural practices to pass on HIV messages, can use cultural practices to promote messages, some practice are bad for HIV there would be conflicting ideas,</td>
<td>Some practices encourages promiscuity, can lead to people contracting HIV, encourages unprotected sex e.g. <em>fisi</em>, some culture go against messages, no some practices are bad towards HIV/AIDS messages, yes to marry with messages, yes so as to use traditional practices for HIV/AIDS campaigns, no would conflict with messages, no would conflict with messages e.g. <em>kasasa fumbi</em>, some culture encourage prostitution by forcing them to do sex e.g. <em>kusasa fumbi</em>, no because people</td>
<td></td>
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</table>
mix message with cultural things, so to marry messages with cultural practices, some practices ignite the spread of HIV, no because people believe cultural practices is from their ancestors, yes helps what to avoid, to streamline HIV messages in cultural practices

<table>
<thead>
<tr>
<th>Method</th>
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<tbody>
<tr>
<td>Drama</td>
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</tr>
<tr>
<td>Posters</td>
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<td>1</td>
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<tr>
<td>Radio</td>
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</tr>
<tr>
<td>TV</td>
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</tr>
<tr>
<td>Hospital Talks</td>
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</tr>
<tr>
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<td>magazines leaflets,</td>
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<td>church/mosques, class,</td>
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<tr>
<td>news letters, music,</td>
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<td>videos, newspapers,</td>
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<tr>
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<td>Radio</td>
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<tr>
<td>TV</td>
<td>Second, fifth, first, first,</td>
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<tr>
<td>Hospital Talks</td>
<td>Second, second, third, fifth, second, second</td>
<td>First, second, second, first, second, fourth, second,</td>
</tr>
<tr>
<td>Other (village talks by chiefs)</td>
<td>Third (church) fourth (newspaper) fifth (drama) second (church) first (Newspaper) second (youth club)</td>
<td>Second (public talks) fifth (book covers) second (mosque) fourth (school) second (mosque) fifth public</td>
</tr>
</tbody>
</table>
Comments: newspaper- I read at my own time, posters – colorful and attractive, TV moving pictures, school drama, radio at any time and include plays, drama and TV-entertainment, radio – while resting at home, YONECO Drop-in Centre convenient for youth to get messages, choir-entertaining, from YONECO we get zishango, CBO we do discussion, Dram- people are always attentive, TV- people see reality of messages, newspaper- go back to it if forgotten the message, TV see visual and hear at the same time, books- can read info several times, music can sing along, radio – one gets entertainment, radio has direct impact as it does not address a particular person, hospitals- we are able to ask questions, drama- entertaining, posters- there are everywhere,

Question 12 (a-c) (Resemiotisation)
<table>
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Question 13 (12) (Resemiotisation)

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Comments

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<tbody>
<tr>
<td></td>
<td>No-Get confused, yes- messages is the same, messages is same, no messages change and get confused, messages are the same, messages change e.g. at church they hide some info, message is same, message is same, message is same</td>
<td>When they are resemiotized they confuse us, yes-same message, no-messsages change, same explanation same messages, messages change, message is same, message is same, change of mode distorts information, same message, same message, yes-no difference, message is same, message is same, message repeat itself and becomes boring “I just ignore it”, explanation and mode of deliverance</td>
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</table>
changes, message is same, the messages is the same, message is same

14 (13) Proverbs/euphemisms

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</tr>
<tr>
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</tbody>
</table>

Need for straight talk for all ages to get the messages, need for straight talk for messages to get across, when messages is meant for older people, no – so there nobody should be asking for further explanation, no we do not understand proverbs and euphemistic terms so we miss the messages, no so as to get the real messages/interpretation, the youth

Most people do not understand proverbs because they are illiterate, proverbs are difficult to understand, some people do not understand proverbs, most people do not understand proverbs, so that people get messages directly, for older people, proverbs provide more meanings, because I am an old person, old people
do not understand the messages, people do not understand proverbs, to ‘sweeten’ message so as to attract the attention of the people,

understand proverbs, yes because good for old people, no- not all people understand proverbs, no because some would need people to interpret the proverbs for them, not easy to understand, helps the elders to understand messages easily,

| do not understand the messages, people do not understand proverbs, to ‘sweeten’ message so as to attract the attention of the people, | understand proverbs, yes because good for old people, no- not all people understand proverbs, no because some would need people to interpret the proverbs for them, not easy to understand, helps the elders to understand messages easily, |

NB: Zimakhala zozungulila kuzimva,

Sample of Interview with Key Informants DACs

Zomba

Key: I= Interviewer; DAC= District AIDS Coordinator
I: mukamauza anthu za uthenga wa HIV/AIDS mumagwiliitsa nchito njila zanji? Uthenga ukabwela ku chokela ku NAC kaya kulikonse…

DAC: Pali njila zambili koma from our end ife timango sapota (support) anth amene amkapepleka uthengawo. So implementation ndiyochepa koma timawapanga support kaya kuwapatsa ndalama iwo ndi amene amkapanga implement kaya CBOs

I: Inu mumangotenga uthengawo nkupatsa ena

DAC: ee we equip them to do the job, ndiye amakhala osiyanasiyana kaya ndi education e.g. life skills amayika ku curriculum, kaya aku church iwo amapanga play mbali yawo ya faithfulness, kayak u youth dept iwo aja nmapanga visit midzi ndi ma drama kaya kuchipatala amagwiliitsa nchito public address system addressing people coming to hospital komanso amagwilitsanso nchito drama.

I: when you use those methods, do you think they are effective to the community?

DAC: Yes, chifukwa zimaonetsa kuti levels of knowledge yakhala ikupanga improve

I: What language do you use?

DAC: timayuza (use) language imene ili kumenekoyo monga ngati tikupanga sapoti madrama group a uku kwa Malaemia, kwa Mulmbe kumene kuja anthu ambili amkhalankula CiYao ndi CiCewa amayuza (use) language imeneyoyo, ku Chikowi ndi aMang’anja ndiye amayusa (use) CiCewa

I: Ndiiye uthenga uja ukabwela, for example, mu English mumayamba mwapanga translate kapena mumangowatsa kuti mukazionela komweko olo amakapanga translate okha into CiVewa and CiYao?

DAC: kunoko we get za English, CiCewa ndi CiYao koma zambili zimakhala za English ndiye timapanga translate along the way tikamachita communicate

I: Are there any translation problems that you face?
DAC: ee amakhalapo especially from English to CiCewa

I: when translating, do you translate from English to CiYao then to CiYao or you can translate from English to CiYao direct?

DAC: I think English to CiYao sitimapnga pakakhala kuti textyo ndiyofunika kuti… translation nthawi zina matipangila aku Centre for Language Studies, ndiye zina sitimapanga locally koma ikakhala yakuti mwina it’s like a theme ya msokhano timapanga translate into CiCewa, timapanga ife koma tikafuna kupititsa mu CiYao amapanga ndi a Centre for Language Studies

I: Ndiye ma posters onse ndakuonetsani aja tinazungulila mu Zomba muno, they are all in English and CiCewa, ndiye what about the community, where they speak CiYao, how do they understand the messages?

DAC: eeee alipo amapitaa CiYao koma ndi ochepa

I: ma Posters?

DAC: yes

I: Ndiye sitinawapeze ife a CiYaowotu

DAC: ha ha ha ha…laughs

I: olo kuchipatala kulibe olo chimodzi cha CiYao

DAC: ma poster ambili mostly ndi English and CiCewa, a CiYao ndi ochepa, it’s natural kuti zitelo koma ifeyo timakhulupilila kwambili CiCewanso amvchimva more especially ngati munthu amene angathe kuwerenga anaphunzila kuwerenga CiCewa, CiYao amalankula koma kuwerenga sindikudziwa panopa kuti amaphunzilabe, CiYao kuphunzila reading CiYao, kulemba andi kuwerenga zinayamba ku Primary School koma CiCewa ndi chimene chikupitilila, eee as long as they can read something it means they can read CiCewa

I: ok. Nanga ma posters aja chifukwa chiani mukumaphatikiza mau ndi zinthuzinthuзи osangolemba mau okha kapena kuyika zinthuzinthuзи zokhazokha?
DAC: sindikudziwa chifukwa production si area yanga/yathu ife timangolandila ndikupanga
distribute, mwina pa expertise at level of production anauza choncho ife timangogawa
mmene aziyikilamo kaya anapanga pretest kuona chimene chilieffective ife sitikudziwa

I: Zikomo

Appendix I: Posters/Billboards
Mismatched HIV and AIDS message
Message on ARVs
Female condom message in CiCewa
Female condom Message in English
Male condom message
Male condom billboard
Male Condom message (a Different brand)
Male condom poster
HIV and AIDS message in a proverb
Same proverbial HIV and AIDS in different picture
HIV and AIDS message in a proverb
HIV and AIDS message in a proverb
Euphemistic HIV and AIDS message in
Games and HIV and AIDS message

HIV and AIDS messages on a Primary School Wall
HIV and AIDS and OVC message on a football ground wall
HIV and AIDS message and women activities
Overloaded HIV and AIDS message
HIV and AIDS messages on t-shirt (front and back)
HIV and AIDS message on faithfulness