

SOUTH AFRICAN WOMEN'S MAGAZINES & HEALTH COMMUNICATION

A Reception Analysis of HIV and AIDS Messages in Five Most Circulated Magazines in South Africa

A dissertation submitted in partial fulfilment of the requirements of the degree of

MASTER OF ARTS

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Claudia van den Berg (née Frindte)
(211549770)

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Supervisors: Prof. Keyan G. Tomaselli and Mike Maxwell

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DECLARATION

I, Claudia van den Berg (née Frindte), declare that

1. The research reported in this thesis, except where otherwise indicated, is my original research.
2. This thesis has not been submitted for any degree or examination at any other university.
3. This thesis does not contain other persons' data, pictures, graphs or other information, unless specifically acknowledged as being sourced from other persons.
4. This thesis does not contain other persons' writing, unless specifically acknowledged as being sourced from other researchers. Where other written sources have been quoted, then:
 - a. Their words have been re-written but the general information attributed to them has been referenced.
 - b. Where their exact words have been used, then their writing has been placed in italics and inside quotation marks, and referenced.
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Claudia van den Berg

March 2013

ABSTRACT

The aim of this study is to discover the relationship between health, media and gender, more specifically HIV and AIDS prevention, women's magazines and women as readers. This research has been conducted within a Master's dissertation at the Centre for Communication, Culture, Media & Society (CCMS) at the University of KwaZulu-Natal in 2012 and the primary emphasis is on media reception and the way in which women make sense of women's magazines messages, particularly of HIV and AIDS messages. Therefore, the study's focus is on media consumption, influences of women's magazines and personal interpretation of embedded messages. The aim is to identify the role of women's magazines as part of mass media within a particular field of communication rather than to identify the magazines' impact on gender roles. My study will discover the reception of health messages on HIV and AIDS surrounded by controversial messages on femininity and gender stereotypes. The main research questions are: i) How, why and when are recipients using women's magazines? ii) How are recipients perceiving and interpreting HIV and AIDS messages in women's magazines, and specifically within the context of contradictory messages on sex, femininity and gender roles? iii) And, if and how are health messages in women's magazines influencing recipients and their interaction with others?

The interpretive qualitative research paradigm is applied and the method of qualitative interviews is used for collecting the data. The uses and gratification theory, social learning/social cognitive theory, the concept of entertainment education (EE), and the women-centred sense-making approach are consulted.

As an overall result, the analysis reflects a positive picture and interpretation of women's magazines by the participants, but it also shows the dual character of women's magazines. Contradictions and critique on content were expressed, positive and negative features were identified, female stereotypes and at the same time the enjoyment of reading was noted, and with regards to health messages, the overall reception was predominantly positive and various content elements seemed to be relevant for the participants. In conclusion, the decisive factors for health messages on HIV and AIDS in women's magazines, identified in my study are: **motivation** as an important stage, according to social learning/social cognitive theory in order

to enable behaviour modelling; **relatedness**, originally identified as a third human need within the self-determination theory, which helps to strengthen intrinsic motivation; the **dual character** of women's magazines as an on-going conflict between the pleasure of reading a magazine and the consciousness of reprehensible stereotypes and female roles; the **sense of female community** and finally the role of readers as **female opinion leaders**. These results present women's magazines as a multifaceted medium and might influence future research and programmes for health communication on HIV and AIDS prevention.

Key words: Women, health, HIV and AIDS, women's magazines, print media, reception analysis, HIV and AIDS communication, development communication, media usage, media consumption, health messages, relatedness, duality.

INTRODUCTION

The central concern of my study is the relationship between health, media and gender, more specifically HIV and AIDS prevention, women's magazines and women as readers. The primary focus is on media reception and the way in which women make sense of women's magazines messages, particularly on health messages regarding HIV and AIDS. Within the field of public health communication, much attention has been paid to the use of mass media to influence attitudes, shape behaviour and persuade recipients to protect their health and prevent health risks (see Hornik, 1989; Wallack, 1989). Recently, more questions have been raised regarding the media's role within health communication (Barnett, 2006; Covello and Peters, 2002; McKay and Bonner, 2000; McKay and Bonner, 2002). This study follows this recent approach to identify the role of women's magazines as part of mass media within a particular field of communication, rather than to identify the magazines' impact on gender roles. The study's focus is on media consumption, influences of women's magazines and personal interpretation of embedded messages. In the context of this study 'embedded' messages are indirect messages about health and are portrayed in lifestyles, stories and articles in women's magazines.

Mass communication is designed for large-scale distribution via mass media, to reach many recipients, including a one-directional flow without dialogue opportunities, an impersonal and anonymous relationship with audience and the content is usually standardized (McQuail, 2009: 58). Compared to newspapers, magazines are designed for a smaller readership, are more specialised, are able to devote more space to health concerns than newspapers, and are more appealing to women (Frisby and Fleming, 2005). Women's magazines have a long history of providing health information, linking personal and family stories with community and national health concerns (Lewis, 2008). The coverage of health issues has increased over recent years, often in the form of health columns, role model messages or articles on health news (Bonner, 2000). Various researchers have documented the importance of magazines as health information sources, especially for women (Barnett, 2006; Covello and Peters, 2002; McKay and Bonner, 2000; McKay and Bonner, 2002).

Most of these studies focus on health issues such as breast cancer or heart diseases, often in the U.S. In the context of South Africa, Sonja Laden's research considers women's magazines as 'material goods' that are a product of the print industry and have to advertise the consumption of products, but at the same time they are part of "cultural production of collective meanings in which they also construct a range of identity options for communities of individual readers" (2001:15).

Although this thesis is based on national South African magazines, the interviews took place in Durban in May 2012. This choice was influenced by the fact that Durban is a highly populated city, consisting of people from all cultural and economic dimensions. The magazines are distributed within the area of Durban; therefore the selection of Durban based readers is valid and possible. The selection is furthermore linked to the target groups by the selected magazines and can be described as female, between 20 – 35 years old, black, white or Indian.

As a result of a first screening of South African women's magazines, it became evident that health issues, and particularly messages on HIV and AIDS prevention, were widely covered. The South African magazine market includes a number of nationally circulated titles such as *Bona, Move!, True Love, Fairlady* and *Cosmopolitan*. Although the market is huge and health messages are included, the relevance of magazines for health communication campaigns is controversial. According to Richard Delate, managing director of Johns Hopkins Health and Education in South Africa (JHHESA), the impact of TV for health campaigns might be stronger as print in general and magazines in particular (2011). Otherwise, women are an important target group for health communication campaigns and are addressed exclusively within women's magazines. Based on these facts, one could ask, how relevant are women's magazines for addressing health issues such as HIV and AIDS in South Africa? Or, in other words, are magazines an effective channel for health communication and if so, why?

The main research questions of my study are:

1. How, why and when are recipients consuming women's magazines?
2. How are recipients perceiving and interpreting HIV and AIDS messages in women's magazines, and specifically within the context of contradictory messages on sex, femininity and gender roles?

3. If and how are health messages in women's magazines influencing recipients and their interaction with others?

This research on South African magazines and the coverage of HIV and AIDS contributes to the public discussion on HIV and AIDS, which is of important social concern. The findings of the research may also be viewed in light of other research in the HIV and AIDS prevention communication field and contemporary theory in the health communication field. The limitations of this study are firstly the relatively short research period as required for a short Master's dissertation, secondly the application of a reception analysis and the coding of comments. According to Melissa Hardy and Alan Bryman "paradoxically, the limitations of the technique lies in [...] the variety of coding scheme designs. There is no single way of capturing the meanings of a text" (2004:550). A third limitation of the study is the selection of participants, who influence the results on a personal level. Their individual usage, experiences, interpretations and interactions with women's magazines influence the results significantly. In order to analyse the interviews, especially the uses and gratification theory, social learning/social cognitive theory, the concept of entertainment education (EE), and the women-centred sense-making approach have been consulted.

This study is structured into the following chapters:

CHAPTER ONE – BACKGROUND: This chapter provides the rationale and scope of this study, outlines the background and the context of HIV and AIDS in South Africa and offers an overview of the industry of South African magazines.

CHAPTER TWO – LITERATURE REVIEW: This chapter functions as the literature review of my study. It provides insights into communication, media and culture and explains concepts within development communication for behaviour and social change and entertainment education.

CHAPTER THREE – THEORETICAL FRAMEWORK: This chapter explains the theoretical framework with particular focus on the uses and gratification theory and the social learning/social cognitive theory.

CHAPTER FOUR – METHODOLOGY: Within this chapter the applied methodology is discussed in detail. It covers the interpretive qualitative approach, the women-centred sense-making approach and reception analysis by using interviews for sampling of qualitative data.

CHAPTER FIVE – ANALYSIS AND FINDINGS: This chapter presents the analysis and findings of the study. The profile of the participants and the South African context are considered. Six forms of consumption are discussed in order to find out how, why and when the participants use women's magazines. This consumption behaviour is linked to and discussed in relation to the reception of HIV and AIDS messages. Influences and contradictions of women's magazines and the interpretation of HIV and AIDS messages are discussed, especially within the context of contradictory messages on sex and femininity. Finally, the relevance of integrated messages is discussed in the light of interaction with others.

CHAPTER SIX – CONCLUSION: This chapter provides the conclusion of the study and summarizes the insights on motivation, relatedness, the dual character of women's magazines, the sense of female community and finally the role of readers as female opinion leaders.

CHAPTER ONE - BACKGROUND

Rationale and scope of study

According to the United Nations Agency for AIDS (UNAIDS) over 33 million people were living with HIV and AIDS at the end of 2009, circa 25 million people have died because of AIDS since the disease was first discovered in the early 1980s, and more than 15.6 million children under the age of 15 have lost their mother, father or both parents because of AIDS (2010). Sub-Saharan Africa is the region with the worldwide highest rate of HIV and AIDS infected people with 22.5 % and reached thereby 68% of the global total. Although the rate of new HIV infections in Sub-Saharan Africa has decreased, the total number of people living with HIV and AIDS is still increasing. With an estimated 5.6 million people living with HIV and AIDS in 2009, South Africa is the most affected country in the world (UNAIDS, 2010). Within South Africa, the Western Cape reported the lowest HIV prevalence at 16.1%, while KwaZulu-Natal has the highest prevalence in the country at 38.7% (Department of Health (DoH), 2010). A population-based household survey reported a disproportionately higher prevalence for females and the highest prevalence for women in the age group of 25 – 29 years and for men in 30 – 34 years (DoH, 2008). Although several sources show slightly different statistics, the overall message on the importance of HIV and AIDS becomes clear.

A focus on women within communication programmes for HIV and AIDS prevention can be recognized. It is especially strong because of their vulnerability and higher risk of infection based on cultural and social-economical conditions; for example a woman is infected with HIV by her husband, because the societal norms tolerate promiscuity among men. A woman does not ask her partner to use a condom, because she worries about her image within her tradition and culture. A woman is not able to access health care facilities outside her community, if her family or the community stop her from travelling alone to a clinic. Elaine Blechman and Kelly Brownell (1998: 206) recommend that “women-centred preventive interventions should be directed towards preventing violence and abuse by partners, addressing the power imbalances in sexual relationships and reproductive behaviour”. They further recommend including printed stories, role model stories, storylines such as refusing unprotected sex and introducing female-initiated methods to address gender related imbalances (Blechman and Brownell, 1998).

Because South Africa is the epicentre of the HIV and AIDS pandemic, it has become a centre for research and programming, especially for behaviour change communication (see Tomaselli and Chasi, 2011; Durden and Govender, 2012). The thesis offers an overview of the current debate on women's magazines, with a particular focus on health messages in contradiction to messages on female roles, stereotypes and 'typical behaviour' (e.g. domestic duties, strong interest in fashion and make-up, interest to please men, shopping, diet, weight problems).

HIV and AIDS in South Africa

There is a broad awareness in South Africa of the HIV and AIDS disease challenges and a response is noticed with new policies and programmes. On World Aids Day 2009 under the theme "I am responsible, we are responsible, South Africa is taking responsibility", the president announced a new national HIV counselling and testing campaign and policies related to availability of treatments, mobilizing of testing, stigma mitigation, medical male circumcision - all developed by the Department of Health (2010). Part of the government response is the prevention programme, which aims to achieve "information, education and mass mobilization, detection and management of sexually transmitted infections, HIV counselling and testing, widespread provision of condoms, both male and female, medical male circumcision, prevention of mother to child transmission (PMTCT), safe blood transfusion, post-exposure prophylaxis, and life skills education" (Department of Health, 2010). Central to these prevention activities are media campaigns, media coverage and related health communication programmes, often focused on behaviour change.

Considering a report by the World Health Organization (WHO, 2003) on gender and HIV and AIDS there are important differences between women and men in the HIV and AIDS infection mechanism, and the social and economic consequences of an infection. These differences include aspects such as biology, sexual behaviour and socially constructed gender differences. In the early stage of the pandemic, HIV infection was mostly among men, but latest estimations show now a higher prevalence rate for women, e.g., 58% of HIV-positive adults in Sub-Saharan Africa are women (UNAIDS, 2002). Gender inequalities are therefore key drivers of the HIV and AIDS epidemic: "gender norms related to masculinity can encourage men to have more sexual partners and older men to have sexual relations with much

younger women” (WHO, 2012). Different kinds of norms related to femininity can lead to less knowledge on HIV and AIDS because of restricted access to education. Therefore HIV and AIDS programmes are addressing these gender norms and stereotypes in order to change behaviour to achieve more sexual responsibility, decision-making and empowerment of women. In addition the aspect of violence against women, which is experienced by up to 60% of women worldwide, increases their vulnerability to HIV and is part of several communication programmes (WHO, 2012).

Health Communication, HIV and AIDS and the Media

Addressing sexual behaviour to prevent the transmission of HIV is an important communicative challenge. UNAIDS reveals that the majority of people newly infected with HIV in Sub-Saharan Africa are infected during unprotected heterosexual intercourse and this remains as the greatest risk factor for HIV in this region, followed by mother-to-child transmission (2010). Specifically for South Africa drivers of the epidemic are intergenerational sex, multiple concurrent partners, low condom use, excessive use of alcohol and low rates of male circumcision (UNAIDS, 2010).

UNAIDS (2001:13) summarizes the communicative challenges for HIV and AIDS as follows: “(1) Communication is a necessary but not sufficient condition for either preventing HIV/AIDS or for augmenting care and support programmes. (2) An individual’s response to HIV/AIDS is strongly influenced and shaped by societal norms; by their gender and socio-economic status; by their faith, beliefs, and spiritual values; and by the prevailing governmental and policy environment for HIV/AIDS”. They point out, responses on HIV and AIDS communicative messages are not just depending on personal and individual situations, but are also strongly influenced by the social and cultural context of the recipients (UNAIDS, 2001).

Southern African societies are marked by linguistic, socio-economic, and cultural diversity and according to Luuk Lagerwerf et al. (2009) health messages have to take into account the different ways of interpreting and understanding of media messages. Therefore effective health communication programmes in South Africa are based on understanding, knowledge, attitudes, and practices of people from different cultural backgrounds. Keyan Tomaselli and John-Eudes

Lengwe Kunda highlight the relationship between language, culture and human experience in order to construct meanings, especially in the creation of stigma and point out the power of language for health communication, especially in the context of HIV and AIDS communication (2009).

In order to address sexual behaviour and HIV and AIDS and communicate via media, the structures and networks, ownership and shares, availability of channels to recipients and current media discussions in South Africa are of special interest and are highlighted hereafter.

The Industry of South African Magazines

The overall media landscape in South Africa is diverse, complex, still growing and one of the largest in Africa (MDDA, 2009). Since the demise of Apartheid the South African media landscape is transforming and marked by significant changes. Some characteristics are the freedom of speech, which is currently endangered by the controversial ‘Secrecy Bill’, which would give the state the power to classify documents as secret in the ‘national interest’ (SA Journalism Schools, 2012). At the same time the commercialisation and privatisation of broadcasting and overall media channels and a huge competition and pressure of action can be noticed (MDDA, 2009). The media industry in South Africa is defined by three main categories: electronic and broadcasting media (television and radio), print media (newspapers, magazines) and new media (online, Internet, mobile) and the consumption by the audience. The following graph considers South African media consumption based on ‘past seven days’ (P7D) for TV, radio, newspaper, magazine, outdoor and Internet and ‘past six weeks’ (P6W) for cinema and is divided as followed:

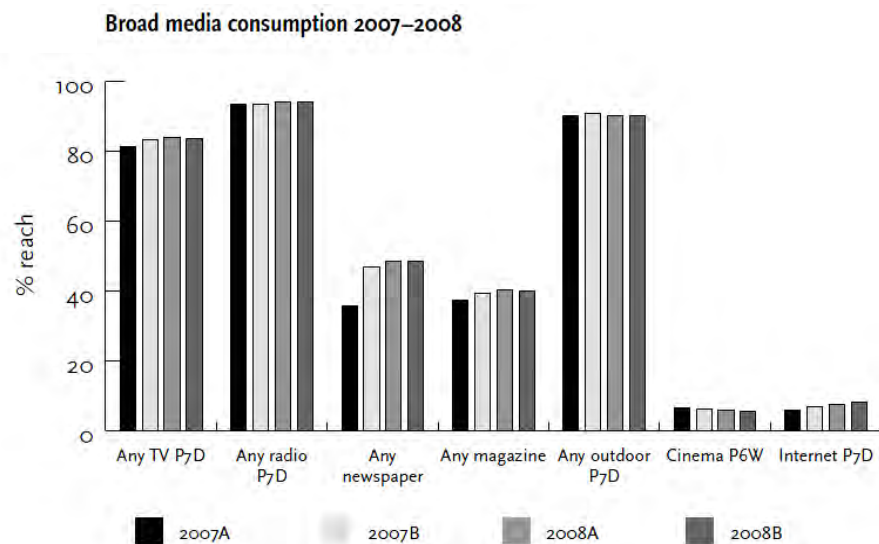


Figure 1: Media Consumption South Africa, 2007 – 2008 (SAARF AMPS, 2008)

The print media industry consists of two broad categories, the major media players and the independent publishers. There are five key players in the ownership and control of print media in South Africa: Naspers through its subsidiary Media24, Caxton, Avusa, the foreign owned Independent Newspapers and Primedia.

Owner	No. of wholly owned newspaper titles	No. of magazine titles
Media24	65	89
Caxton	89	39
Avusa	23	32
Independent Newspaper	28	0
Primedia	0	15

Figure 2: Major Print Media Owners and Number of Newspapers and Magazines (MDDA, 2009)

Circa 500 different magazines could be identified in 2009 in South Africa, of which the top five owners control approximately circa 30%. Media24 controls 18% of all magazines and is therefore the biggest player (MDDA, 2009). According to MDDA one of the challenges facing

the South African media industry is ownership and control (2009). The majority of print media is owned by a few companies which assume that variety of opinions, diversity of topics and news are potentially limited. Beyond that, print media is an expensive medium to spread information and is limited to literate people (MDDA, 2009). A long-term declining trend in circulation of magazines is noticeable (OMD, 2010).

According to a ranking by South African Advertising Research Foundation (SAARF, 2011) and their All Media and Products Survey (AMPS), Media24 is the largest publisher of women's magazines with a total readership of over 6 million per month in South Africa. They are publishing a number of the most circulated women's magazines such as *True Love*, *Move!*, and *Real* (SAARF, 2011).

Consumer magazines are generating circa 60% of print advertising revenue and are by that measure the most important part of magazine publishing in relation to professional magazines (MDDA, 2009). In terms of overall readership, SAARF concludes that print remains stable, but the average number of publications read is declining. In December 2009, consumers read an average of 4.91 print publications (newspapers and magazines) while in December 2010 just 4.21 publications have been read (SAARF, 2011). Based on the average readership of magazines per month during the period July 2010 until June 2011, the five largest women's magazines are listed below and shown in Figure 3. They will build one of the foundations of this study and are part of the discussed magazines (SAARF, 2011).

Bona is published by Caxton Magazine. Its readership grew up to 11.1% of total adults in South Africa, due to growth in rural areas which pushed its total readership up to 3.79 million per month. It is the largest magazine in South Africa and the only magazine published in four of South Africa's official languages – English, Sotho, Xhosa and Zulu. *Bona's* target group is described as 99% black South Africans, 57% women and 67% within LSM 4 – 6 (*Bona* Online, 2011). LSM (Living Standard Measures) has become the most widely used marketing and segmentation tool in South Africa and divides the population into groups according to their living standards, where 10 is highest and 1 lowest (SAARF LSM, 2011).

True Love is published by Media24. With 2.838.000 readers monthly and 8.3% of total readership in South Africa it is the second largest magazine. The defined target group is 95.7%

black South Africans, 64.1% women and 62.6% LSM 5 – 7. As an example of costs per full page for advertising but also as an equivalent for costs of space, *True Love* has calculated R52.418 (*True Love* Online, 2011).

Move! is also published by Media24 and has a readership of 2.388.000 per month. Its demographic profile concentrates on 94.7% black South African, 70.1% women and 63.2% LSM 5 -7. According to the magazines description the content is “tip-driven advice, information and knowledge for a better, well-informed life” (*Move!* Online, 2011).

Cosmopolitan is published by Associated Magazines. The magazine is an international adaptation and reaches 855.000 readers in South Africa. 32% are between 18 and 34 years old, 50% black South African, 29% white South Africans and circa 76% women. The cost per full page at R60.000 is the highest (*Cosmopolitan* Online, 2011).

Fairlady is also published by Media24. Its readership declined to 737.000, just 2.2% of total adults in South Africa. They readership consists of 56.9% black South African and 50% LSM 5 – 7 and 42.8% LSM 8 – 10 (*Fairlady* Online, 2011).

Magazine	Readership	Demographics				Rates Full Page
		Age	Race	LSM	Gender	
Bona	3.789.000	15-24: 39% 25-34: 26% 35-49: 25% 50+ : 11%	Black: 99% White, Coloured, Indian: 1%	1-3: 13% 4-6: 66% 7-10: 21%	Women: 57% Men: 43%	n.a.
True Love	2.838.000	16 - 24: 32.6% 25 - 34: 32.6% 35 - 49: 26.9% 50+: 7.8%	Black: 95.7% Coloured: 2.7% White: 1.0% Indian: 0.6%	1 - 4: 13.2% 5 - 7: 62.6% 8 - 10: 24.2%	Women: 64.1% Men: 35.9%	R 52.418
Move	2.388.000	16 - 24: 44.5% 25 - 34: 29.6% 35 - 49: 20.2% 50+: 5.7%	Black: 94.7% Coloured: 3.2% White: 1.2% Indian: 0.9%	1 - 4: 14.3% 5 - 7: 63.2% 8 - 10: 22.5%	Women: 70.1% Men: 29.9%	R 24.968
Cosmopolitan	855.000	18 - 34: 52%	Black: 50% White: 29% Coloured, Indian: 21%	n.a.	Women: 76% Men: 24%	R 59.950
Fair Lady	737.000	15 - 24: 18.8% 25 - 34: 22.2% 35 - 49: 34% 50+: 25%	Black: 56.9% Coloured: 13.1% White: 24.8% Indian: 5.2%	1 - 4: 7.2% 5 - 7: 50% 8 - 10: 42.8%	Women: 100%	R 46.760

Figure 3: Characteristics of 5 most circulated Women’s Magazines in South Africa (SAARF, 2011)

In summary, these top five magazines have a large readership and are playing an important role, from a financial perspective but also in terms of social interaction with South African women that will be discussed later on in chapter two.

CHAPTER TWO - LITERATURE REVIEW

This chapter aims to identify the key aspects in which this study is located: the field of mass communication, development communication for behaviour and social change and women's health. An overview of the current debate on women's magazines will be offered, with particular focus on health messages in contradiction to messages on female roles, stereotypes and 'typical behaviour'. The fundament for this discussion will build on research on women's magazines and an increased attention to audiences and their usage, understanding and experiences of magazines. Media and communication theories such as social learning/social cognitive theory will be discussed, and in order to identify the influence on health related behaviour, a link to development communication and theories of behaviour and social change are included. Finally the field of women's health and the high vulnerability of women are discussed to show the strong need for HIV and AIDS campaigns, focussing on this specific topic and the defined target group of women (Lee, 1998; Maizes and Low Dog, 2010; Mayer, Williams and Wilkins, 2004).

Mass Communication, the Media and Culture

"Mass Communication can be considered as both, a 'societal' and 'cultural' phenomenon" (McQuail, 2010). It is characterized by the sending of messages to a large and diverse audience via a formalised process (Asante and Cassata, 1979). The source is usually a person or group, operating within an organizational setting and mass media messages are more complex than interpersonal communication. Mass media can be described "as an aspect of society" and refers to the institutions which provide these messages such as newspapers, magazines, TV, radio, film and the Internet (McQuail, 2010:80). A variety of scholars have identified four basic roles of mass media (Wright, 1986; Straubhaar and LaRose, 2008):

Surveillance – refers to the information role of media. Warning surveillance links to the news media and includes information about threats such as financial crisis or natural disaster. Instrumental surveillance comprises news and popular media and useful information on health news, products and entertainment.

Interpretation – refers to the function of mass media, which guarantee a context for new information and comments about significance and meaning. The goal of the interpretation role of media is the persuasion of the audience.

Socialisation – refers to the transmission of values within a society, especially the modelling of behaviour and attitudes. Health communication campaigns often try to establish this role.

Entertainment – refers to programmes, which are designed for amusement of the audience. These programmes operate as sort of stimulation, relaxation or release.

Women's magazines might be playing each of these roles, depending on the topic and tonality. This aspect will be included within the analysis of reader's reception.

In recent decades mass communication theories have increased and media theories have emerged in the social science and humanistic literature. After the first appearance of the concept of mass communication during the 1930s, Harold Innis and Marshall McLuhan were the first modern scholars who studied “the connection between the means of communication available to a people, and the ways in which their means of communication contribute to shaping the character and scope of their society, its economic life, politics and culture” (Lorimer and Scannel, 1994). Innis focussed on the relationship between media and communication and societies and noted different orientations of media in terms of time or space (1950). McLuhan emphasized the organisation of a society around its medium of communication by claiming “the medium is the message”, which implies the form of a medium contains itself in the message and creates therefore a symbiotic relationship which influences how the message is perceived (McLuhan, 1964).

Starting from this perspective, Innis (1950), McLuhan (1964), Goody (1975) and others differentiate between three types of society based types of media: oral (thought and verbal expression), literate (ability of reading and writing) and electronic (at this time entertainment media, later on digital media such as computers). According to Denis McQuail the theoretical field of media is characterized by divergent perspectives and includes media-centric and society-centric approaches (2002). Media reflects but also influences society and while the

media-centric approach concentrates on the media's own sphere and activities, the society-centric or social-centric approach views the influence of the media on society (Le, 2010). Another perspective of media distinguishes between the interest in culture and ideas (culturalist) and interests in material forces and factors (materialist) (McQuail, 2002). This distinction also includes other important dimensions, described as humanistic versus scientific, qualitative versus quantitative, subjective versus objective. McQuail (1994) identifies a turn towards a more social-cultural approach to the study of media audiences, an approach which departs from structural audience measurement techniques and the behaviourist media effects tradition. The methodology of reception analysis is a result of this turn and will be applied and discussed later on. In summary, based on different scholars and experts, McQuail differentiate media theories into five different types (1994):

- Social-scientific: provides explanations based on systematic, objective, tested and validated observations of mass media and its effects.
- Cultural (scholars such as Hoggart, 2004; Hall, 1980): evaluative, seeking to differentiate cultural artefacts, core component is the culture itself, includes critical concerns on the rise of mass media, focuses on cultural products in form of images, ideas and symbols.
- Normative (scholars such as Baran and Davis, 2010): analyses how media should operate within the working conditions of certain social values.
- Operational: includes practical applications used by media practitioners.
- Common-sense: explains how we all experience media use.

In order to study the effects of mass media one could start from different perspectives. Some scholars focus just on the entertainment role of mass media, while others argue, especially the presentation in form of entertainment means that we are more willing to pay attention to this content and therefore it influences the culture of a group or the audience (Gerbner et al., 1994). This idea links to the entertainment education strategy, which will be explained hereafter.

Entertainment Education

Arvind Singhal et al. define entertainment education (EE) as “the process of purposely designing and implementing a media message both to entertain and educate, in order to increase audience members’ knowledge about an educational issue, create favourable attitudes, and change overt behaviour” (2004: 9). They claim further the purpose of EE is the contribution to social change in two ways: at first it can influence audience awareness, attitudes and behaviour on an individual base and second it can influence the audience’s external environment and create conditions for social change on a community or group level. The crucial idea of this communication strategy is the combination of two trends within mass media: entertainment as a ‘fun-factor’ and education as ‘serious information’. This leads also to some critical voices of scholars who argue that entertainment via mass media provides relaxation and escape from work (Stephenson, 1988).

Singhal et al. (2004) reveal further that EE strategy has been used in over 200 health programmes in over 50 countries addressing educational issues as HIV and AIDS prevention, family planning, environmental health, teenage pregnancy prevention and gender equality. In conclusion EE is the process of developing and implementing an entertainment programme to reach a broad audience and educate them about a social or health issue such as HIV and AIDS and change their behaviour in regard to this issue. EE strategy is mostly linked to electronic media, but according to Singhal et al. it is also relevant for other media forms: “The entertainment-education strategy has been widely invented and recreated in television, film, print, and theatre (2004:144)”. The messages for entertainment-education are often based on theories of behaviour change, especially the social learning/social cognitive theory: “At the heart of understanding the process of entertainment-education is Bandura’s social learning theory, which states that learning can occur through observing media role-models, and that vicarious learning usually is more effective and efficient than direct experimental learning” (Singhal et al., 2004:145).

Development Communication, Behaviour Change and Social Change

Development communication can be understood as “a researched and planned process crucial for social transformation” (Galway, 2012:9). It is based on three different strategies: advocacy (to raise resources and political and social leadership commitment for development goals), social mobilisation (build partnerships and alliances with civil society organisations and the private sector), and programme communication (aims to change and enhance knowledge and attitudes) (Galway, 2012).

Development communication is further refined as a strategic process or intervention including media (print, radio, TV, and the Internet) or education (training, literacy, and schooling) “for the purpose of positive social change” (McPhail, 2009: 3). This change could be economical, personal, spiritual, social, cultural or political and is focussed on developing nations or regions (McPhail, 2009). In the context of development communication “mass media are agents of social change” claims Wilbur Schramm (1964:114). The expected change can be “the transition to new customs and practices and to different social relationships” (Schramm, 1964: 114). It refers to change in behaviour, attitudes, beliefs, skills and social norms.

Development communication used a simple, one-way flow of information from sender to receiver, usually via mass communication. Later on, a two-step flow model emerged, recognizing the significance of social relations and networks. A reaction to the broader application of the modernisation paradigm was the dependency/dissociation paradigm, the development support communication paradigm and as part of early development communication theories behaviour change communication. It includes models or theories as exemplified by the health belief model (Rhodes and Fishbein, 1997), theory of reasoned action (Fishbein and Ajzen, 1975, 1980) stages of change model (Prochaska, 1994), or social learning theory (Bandura, 1995). The health belief model includes key aspects such as perceived susceptibility (individual perception of risk of a disease), perceived seriousness (individual perception of the effects of a disease), perceived benefit of taking action (individual perception towards prevention), barriers to taking action (costs, pain, upset), and cues to action (internal or external indications that desired behaviour is successful) (Edlin and Golanty, 2010).

The theory of reasoned action is based on the assumption that changing health behaviour needs the intention to adopt new behaviour. It includes positive thinking about the new behaviour and the persuasion that others respond positively to the new behaviour (Edlin and Golanty, 2010). The social learning theory/social cognitive theory is closely related to theories such as the health belief model and is based on expectations (e.g., about consequences, outcomes, one's own competence) and incentives (e.g., improved health status, physical appearance). In contrast, it emphasises necessary sources of information for building expectations and it includes the idea of self-efficacy; the belief in one's own capability (Bandura, 1995:2). According to Kar, Alcalay and Alex (2001) social learning theory/ social cognitive theory has great value for planning and explaining how media interventions work.

According to Neill McKee et al. (2000: 72) behaviour change communication (BCC) is a “consultative process of addressing knowledge, attitudes, and practices through identifying, analysing, and segmenting audiences and participants in programmes and by providing them with relevant information and motivation through well-defined strategies, using an appropriate mix of interpersonal, group and mass media channels, including participatory methods”. It focuses on individuals, is a linear process and assumes that information leads to change. According to Paul Leagans (1961), behaviour refers to what an individual knows (knowledge), what he can do (skills-mental and physical), what he thinks (attitudes) and what he finally does (action). The Centre for Communication Programs, Bloomberg School of Public Health, Johns Hopkins University, defines behaviour change communication as a process that motivates people to adopt and sustain healthy behaviours and lifestyles (2008).

BCC, as part of development communication, is founded on behaviour change theories. These theories have built, among others, the base for health communication strategies and programmes. Results of these strategies are models to design effective campaigns and examples of these models are the diffusion of innovations model (Rogers, 1995), the stages of change model (Prochaska et al., 1994), the self-efficacy model (Bandura, 1995:2) and the behaviour change continuum (World Bank, 1996). Within these models, different stages of behaviour change are possible and every programme which aims to change behaviour, needs to identify the stage of their target group. Every stage is characterized by different needs, specific messages and ways of communication.

The acknowledgement of participatory methods links to the next phase of change communication and the integration of participatory approaches. Participatory communication focuses on the empowerment of individuals and communities, and flows both ways between sender and receiver. An approach that brings together the work of a variety of scholars, theories and models is the communication for social change model by Maria Elena Figueroa and Lawrence Kincaid (2002). The philosophy of communication for social change is based on the work of Paulo Freire (1970). He described and understood communication as a dialogue and participation to create and enhance cultural identity, trust, commitment, ownership and empowerment. In order to identify the influence of women's magazines in stimulating discussion within communities as a catalyst for health messages the field of communication for social change will be considered. Communication for social change is defined as "a process of public and private dialogue through which people define who they are, what they want and how to get it" (Gray-Felder and Deane, 1999:15). This communication model is based on the assumption that sustainability is more likely if the individuals and communities most affected are empowered to own the process and content of communication (Figueroa and Kincaid, 2002).

There are many more terms emerging to describe the evolution in methods and approaches in development communication, which have an influence on strategies for development communication and might show the on-going shift of paradigms.

Women's Magazines

Women's magazines are modern and popular cultural forms and part of the average woman's media consumption (Laden, 2001). They explicitly position readers as women and it can be understood as a genre, which addresses 'the feminine', but at the same time 'femininity' has also been influenced by print media, particularly the magazine (Beetham, 1996:3). She described the evolution of this genre as a "feminised space" defined by the women at its centre and by its differences from the masculine world of politics and economics (Beetham, 1996: 3).

Naomi Wolf focuses on the influence women's magazines have in defining self-improvement, particularly with reference to physical appearance, "that contradicts and undermines the overall pro-women fare" (1991: 69). She claims further the extreme dissent between positive and negative elements of magazine content (Wolf, 1991). Laden investigates consumer magazines for black South Africans and considers them as "cultural tools" and incorporated into the routines of people's lives on different levels and visible in different ways (Laden, 2001: 5). She summarises the main concerns regarding consumer magazines as follows: "Why, after all, should consumer magazines be culturally relevant or meaningful [...], given the high rates of illiteracy in South Africa, the high cost of the magazines themselves relative to the earnings of many black South Africans and the fact that they typically promote a range of lifestyle options and commodities that, for all intents and purposes, seems to lie well beyond the reach of most of their target readership?" (Laden, 2001).

In consideration of scholars such as Silverstone, Hirsch and Morely (1992) Laden acknowledges the incorporation of magazines into the routines of people's lives. She comes to the conclusion that magazines might have many functions: "The actual purchase of a magazine does not mean that it will necessarily be 'used' or even 'read' in the ways we assume" (Laden, 2001). It might be purchased and studied in different ways - silently, by one individual or read aloud by a group. It might be paged through for visual rather than verbal gratification. It might be read later or at a certain time and it might act as a status symbol in various social environments (Laden, 2001). She therefore argues that the socio-semiotic contribution of magazines extends way beyond their direct and most apparent use-value and should not be reduced to a "mechanism of cultural imperialism" (Laden, 2001). Anna Gough-Yates relates to the cultural aspect of women's magazines as an industry "that depends heavily on social and cultural processes for its effective operation" (2003).

These perspectives show some views on women's magazines and their interpretation of content, texts and effects. A variety of other studies evaluate women's magazines and content as 'a problem' for women (Hermes, 1995). In their opinion, magazines do not just support gender differences and inequalities but also construct oppressive feminine identities. Constructed images of women within these magazines are "unreal, untruthful and distorted" (Gough-Yates, 2003:7). After a shift of the interpretation of magazines according to their

‘positive’ and ‘negative’ images of women, Louis Althusser, a neo-Marxist philosopher, influenced the perception of magazines as texts which can fix and contain feminine identities and can work ideological manipulative (1969). Later on, a number of feminist authors such as Gloria Steinem (1983), Sheila Rowbotham (1973) or Juliet Mitchell (1984) and with great influence of Antonio Gramsci, stated women’s magazines were not just defined as ideologically manipulative but “as an arena of political contest” and complex space (1971). In search of new ways interpreting the meaning of women’s experiences and consumed cultural artefacts such as magazines, interpretative and ethnographic approaches evolved. The shift is also known as an ‘ethnographic turn’ according to Joke Hermes (1995). Interpretative ethnography offers possible explanations “how particular readers make women’s magazines meaningful in specific social and historical context” (Gough-Yates, 2003: 12). This approach also acknowledges the role of the researcher as enlightened and more informed as the audience. Hermes observed women’s magazines “become meaningful exclusively through the perception of their readers” (1995: 6). The consideration of the context of consumption of women’s magazines is therefore essential and will be included in this study.

Within feminist cultural analysis the discussion on postfeminism can be noticed, without complete agreement on the meaning of it. It is used to signal an epistemological break with second wave feminism (also called The Feminist Movement or the Women's Liberation Movement from the 1960s until the late 1990s), as an historical shift to a third wave or a “regressive backlash” (Gill, 2007). Rosalind Gill understands postfeminism in consideration of all these difficulties as a ‘distinctive sensibility’, including a number of interrelated themes:

- “the notion that femininity is a bodily property and the obsession with the body
- The shift from objectification to subjectification
- An emphasis upon self-surveillance
- Monitoring and self-discipline
- A focus on individualism, choice and empowerment
- The dominance of a makeover paradigm
- And a resurgence of ideas about natural sexual difference” (Gill, 2007).

Angella McRobbie describes these contradictions as 'double entanglement' of feminist and anti-feminist ideas and neoliberal values in relation to gender, sexuality and family (2004: 255). Postfeminism media include a feminist perspective without becoming a feminist; feminist ideas are "incorporated, revised and depoliticized" (Stacey, 1987). Magazines include these contradictory messages and might be described as part of postfeminism: "On the one hand, young women are hailed through a discourse of 'can-do' girl power, yet on the other their bodies are powerfully re-inscribed as sexual objects; on one hand women are presented as active, desiring social subjects, yet on the other they are subject to a level of scrutiny and hostile surveillance that has no historical precedent" (Gill, 2007).

In the context of appearance to readers and reading of magazines as a social practice situated the debate about the status of audience research versus textual analysis is important to acknowledge. According to Brita Ytre-Arne "research on popular genres such as women's magazines has demonstrated that there can be substantial differences between the interpretations made by audiences and the interpretations made by researchers conducting textual analysis" (2011:213). These differences can influence understanding of how audiences use, interpret and experience media texts. In order to combine text- and audience perspectives, Ytre-Arne suggests a form of textual analysis which is reader guided (2011). It means to focus on dimensions that readers define as important and can lead to ambivalences and contradictions, shown in Ytre-Arne's research on Norwegian Magazines (2011). Hermes claims to "reconstruct the diffuse genre or set of genres that is called women's magazines and how they become meaningful exclusively through the perception of their readers" (1995: 6). Later on, she also suggests combining reception of readers with textual analysis (1995). Based on these recommendations the focus of my study is the reception by readers.

Beyond the above mentioned studies, other research aspects can be found, e.g., Marjorie Ferguson's study on production and consumption (1983), McRobbie's 'interdiscursive space' of production (1994) or Rob Nixon's study on retailers, advertisers and magazine producers (1996).

Women's Health

Mass media can play an important role in shaping knowledge on health issues. Even feminist scholars such as Cynthia Harrison (1989) have argued that women's magazines are relevant in shaping women's health discussion, and for many readers those magazines are the primary source of health information (Zuckerman, 1998). According to Mia Consalvo "women's magazines can be criticised for many things, but they are important sources of information about women's health" (1997: 52). The discussion shows although the magazines include messages on women's health, they also cover gender prejudices and especially feminine stereotypes. This study aims to discover the reception of health messages on HIV and AIDS surrounded by controversial messages on femininity and gender stereotypes.

Sub-Saharan Africa, especially Southern Africa has been the region most affected by HIV and AIDS. "In 2007, two-thirds of those living with HIV in the world, or 22 million people, were found in sub-Saharan Africa [...] and women accounted for almost 60 per cent of all HIV-positive adults" (United Nations, 2010). In general, women and girls have specific health needs, physiological and social processes carry health risks (such as pregnancies). It can be more difficult for women to get health care and there are gender based inequalities (e.g., in income and education), which are limiting women in protecting their health (World Health Organization, 2009). The focus within women's health analyses is often on specific life stages of women (e.g., adolescent girls, women of reproductive age) or particular health issues, such as HIV, maternal health, violence based issues or mental illness. My study focuses on adult women, specifically on women of reproductive age (15 – 44 years), based on the definition by the WHO and as the main target group of women's magazines (2009). According to the WHO different criteria's characterize this age group:

- "The risk of premature death varies enormously, from only 6% in high-income countries, to 42% in the African region.
- Infectious diseases, such as HIV/AIDS and tuberculosis take a great toll, especially in Africa.
- Half of all deaths among adult women globally are caused by no communicable diseases.
- Mental health problems (depression, suicide) loom large.
- Violence against women is a major risk factor for ill-health" (Zoysa, 2009: 14).

According to WHO, HIV and AIDS are the leading cause of death and disease in women of reproductive age worldwide, and is mostly noticeable in Sub-Saharan Africa. The probability of infection during unprotected sex is higher for women than for men, less young women than young men have enough information on condom use, women are often exposed to stigmatisation or violence by their partners and younger women are often engaged in sexual activities with older men, who are generally more experienced and more likely to be already infected (WHO, 2009). The following Figure shows the HIV prevalence for women of reproductive age worldwide, including Africa:

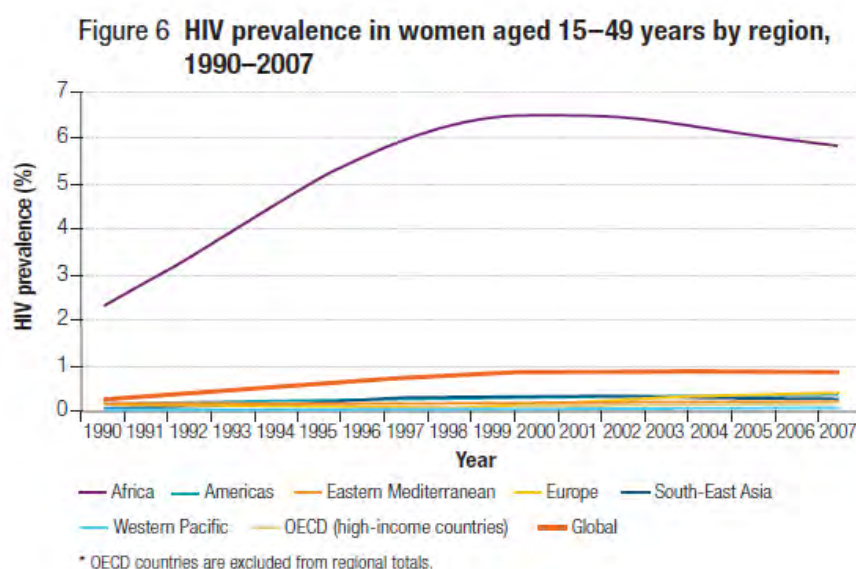


Figure 4: HIV Prevalence in Women, 1990 – 2007 (WHO, 2009)

Based on these facts, it is understandable why research on women’s health, dangers and prevention are so important. According to Alan Radley “health and illness are not abstracted entities, but always occur within the broader context of living and are made tangible when reflected through other realms or spheres of everyday life” (1999: 27). The context in which women’s health research is conducted often includes the relationship to themselves, to others, and to cultural and structural influences. In this context media as part of their personal lives can be a tool for positive learning (as shown within the entertainment education discussion), but at the same time a threat to identities and views on gender roles and body images (as

shown within the feminist media discussion). The reader's context, cultural and social background and personal usage of media, such as women's magazines, are essential to formulate health communication messages. Lagerwerf et al. claim "health communication messages (in multi-layered African societies) have to take account of the possible different ways in which messages will be interpreted and understood within given contexts" (2009: 3).

CHAPTER THREE – THEORETICAL FRAMEWORK

The key aspects in which this study is located are the fields of mass communication, development communication for behaviour and social change. Added to these is women's health as outlined below:

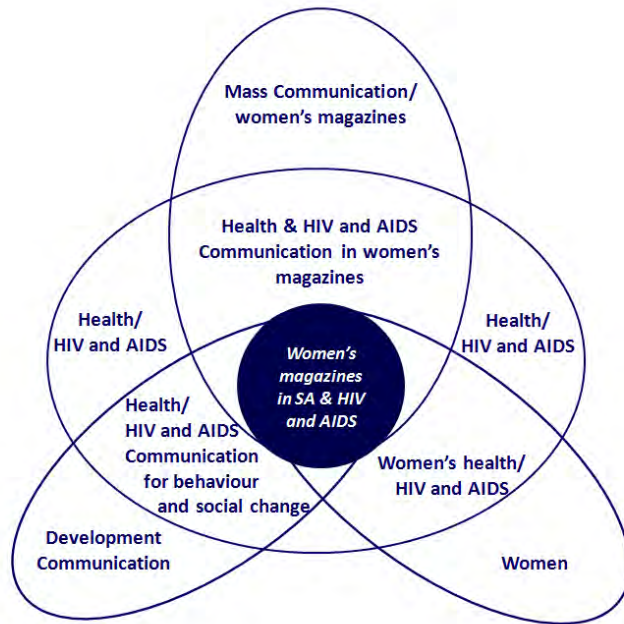


Figure 5: Theoretical Framework by Claudia van den Berg (Modification of model by Cardey, 2011)

This chapter provides an overview on mass communication theories and explanations on why people consume media. A particular focus lies on the uses and gratification theory and its focus on how audiences use the media to gratify their needs (Watson, 1998). The social learning theory/social cognitive theory by Albert Bandura is consulted as an explanation of behaviour and strategies to promote behavioural change (1995).

Mass Communication Theories

A variety of impacts of media on culture are described in different theories and they explain why people use the media and the consequences of the media usage itself. Several important theories are:

- Hypodermic needle theory: means the audience does exactly what media intend. Important representatives of this theory were Theodore Adorno and Max Horkheimer (1972), members of the Frankfurt School of Social Research in the 1970s. Their theory implied that the media is all-powerful and able to inculcate a repressive ideology directly into the powerless audiences.
- Multistep theory (Lazarsfeld, Berelson, Gaudet, 1944): means the audience follows opinion leaders who interpret media. Lazarsfeld and his colleagues suggested that interpersonal communication is much more persuasive than mass communication. Their idea can be also described as 'word-of-mouth' and includes the direct exchange in interpersonal situations.
- Consistency theory (Festinger, 1957): in order to reduce dissonance in their lives, audiences expose themselves to content and information that is consistent with their own ideas, beliefs and cultures.
- Selective process theory (selective exposure) (Festinger, 1957): audiences interpret the content in their own way. This theory is based on the limited effects model of communication and suggested, while media have effects on behaviour, these effects are limited and influenced by interpersonal discussions and opinion leaders. Therefore it includes ideas of the multistep theory.
- Agenda setting theory (McCombs and Shaw, 1972): describes the ability of the media to influence the significance of events. This term is particularly used by Marxist critics of the media, who emphasize the power and omnipotence of the media.
- Conspiracy theory (Berlet and Lyons, 1967): this theory is based on the idea of a small and powerful elite that uses the mass media to persuade audiences according to their agenda. This is often used for political criticism or large media conglomerates.
- Social learning/social cognitive theory (Bandura, 1989): the audience imitate behaviour that is shown in media. This theory is often used to explain the effect of health communication activities and will be therefore applied in this study.

- Script theory (Tomkins, 1962-63): is based on cognitive scenarios of the audience as a result of observational learning and direct experience.
- Cultivation theory (Gerbner et al., 1973): the audience thinks the real world works like the world shown in TV.
- Priming theory (Straubhaar and LaRose, 2008): media triggers related thoughts. This theory is grounded in cognitive psychology and refers to an activated process of filtering information and stimulating of related thoughts. It is therefore linked to Bandura's social cognitive theory (1989).

Although the described impacts and effects vary, all the above theories acknowledge effects to a certain extent: the all-powerful perspective within the hypodermic theory, the criticising theory of agenda setting, the reality replacing ideas of the cultivation theory and the social learning/social cognitive theory with behaviour influencing effects. The above mentioned theories focus on the question what media does to audiences.

Uses and Gratification Theory

There are other models that rather focus on what audiences do with media. This aspect is also part of my study, therefore the uses and gratification theory is of special interest. The theory is understood as a “psychological communication perspective that examines how individuals use mass media” (Stacks and Salwen, 1996). It is an audience oriented theoretical framework based on the assumption that individuals select media in order to fulfil needs (Stacks and Salwen, 1996). Don Stacks and Michael Brian Salwen summarize five assumptions, which form the basis of this theory and are relevant in the context of consumption of women's magazines:

- (1) communication behaviour, including media selection and use, is goal-directed, purposive, and motivated”,
- “(2) people take the initiative in selecting and using communication vehicles to satisfy felt needs or desires”,
- “(3) a host of social and psychological factors mediate people's communication behaviour”,
- “(4) media compete

with other forms of communication” and (5) “people are typically more influential than the media in the relationship, but not always (Rubin, 1994).

This theory shifts attention “from the message-makers to the message receivers” and the main question is how audiences use the media to gratify their needs (Watson, 1998). These needs might belong to four major categories: diversion (escape from routines or ease worries and tension), personal relationships (built relationships to portrayed characters), personal identity (identification with characters, stories and situations) and surveillance (gain information) (Watson, 1998). According to James Watson the uses and gratification approach assumes “people are capable of making their own minds up, accepting some messages, rejecting others, using the media for a variety of reasons and using them differently at different times” (1998: 62).

Uses and gratification research includes six areas: gratifications and media consumptions, social and psychological origins of gratifications, gratifications and media effects, gratifications sought and obtained, expectancy-value approaches to uses and gratification and audience-activity (Palmgreen, 1984). Particularly the areas of consumption, media effects and audience-activities are considered. In order to identify the usage and the effect of women’s magazines, the social learning/social cognitive theory and the uses and gratification theory are applied and explained next. It combines the aspect of effects of women’s magazines and their articles on HIV and AIDS on readers but also helps to understand why and how audiences receive these messages.

Social Learning/Social Cognitive Theory

Social learning/social cognitive theory identifies the interaction of three factors: cognitive, behavioural, and environmental (Bandura, 1994). According to Robert Heath and Jennings Bryant social learning theory explains how we learn from personal experiences as well as by observing, watching and consuming events in the mass media (2000). This theory explains behaviour and explains strategies to promote behavioural change.

According to Bandura there are four states responsible for learning and performance (1977):

- Attention: noticing and being aware of the modelled behaviour.
- Retention: remembering, coding, transforming modelled information and encoding it into memory.
- Production: reproducing and translating of modelled behaviour and self-observation of reproduction.
- Motivation: imitating and performing valued activities with expected positive consequences.

Bandura examines the role of social learning and these four stages in programmes for HIV and AIDS prevention and focuses on the concept of self-efficacy (1995:2). Self-efficacy can be defined as the confidence a person feels about performing a specific behaviour and within the discussion of HIV and AIDS the self-efficacy aspect is often linked to the confidence to insist on condom-use. That in turn is often related to the empowerment of women to negotiate and discuss this issue with their sexual partners. According to Bandura, self-efficacy is defined as a successful outcome, and depends on having a belief in one's own ability (1982). It influences the engagement in a task, the effort and performance and finally the achievement. This study will consider the learning states of the readers (attention, retention, production and motivation) in order to explain the effect of health messages on HIV and AIDS in women's magazines.

Theresa Carilli and Jane Campell relate social learning/social cognitive theory to women's magazines in order to explain how people learn gender behaviour from mediated images of others (2005). Especially within the discussion of the media's contribution to sex role behaviour and sex role stereotypes through identification, the theory is applied in this study. The question of how messages on gender stereotypes in comparison to messages on HIV and AIDS are received by readers is a concern of my study.

CHAPTER FOUR – METHODOLOGY

This chapter describes the methodology applied in this research and foremost the interpretive qualitative and sense-making approach of meaning are chosen. The research design includes a reception analysis using qualitative interviews to generate qualitative data. The selection process of participants is based on purposive sampling and acknowledges the target groups characteristics of women's magazines. For analysing the qualitative data NVivo research software is used.

Theoretical perspective & approach	Interpretive paradigm, qualitative approach Sense-making approach
Research design	Reception analysis of qualitative data
Methods	Qualitative time line interviews
Selection of participants	Purposive sampling
Qualitative data analysis package	NVivo research software

Figure 6: Methodology of Study

Interpretive Paradigm & Qualitative Approach

“Interpretive approaches seek to enrich understanding”, as facts need to be interpreted in context (Carter and Presnell, 1994). The purpose of interpretive research is to understand people's experiences, for this study it is the reading of magazine articles on health issues, such as HIV and AIDS. The overall conclusion of scholars within this paradigm is that reality is constructed based on social context, space, time and personal situations of groups or individuals (Chilisa, 2012). The focus lies on understanding people in everyday settings and how they interpret information and situations in order to create meaning. Interpretive approaches are often associated with hermeneutic tradition, which is focused on seeking deep understanding by interpreting interactions and the resulted meaning. Based on this, meanings of articles on HIV and AIDS for female readers depend on their personal situation, social interactions, place and time of reading and more. “Each interpretive paradigm makes particular

demands on the researcher, including the questions he or she asks and the interpretations the researcher brings to them” (Denzin and Lincoln, 2003: 33). In this context, the interpretive paradigm is linked to qualitative research, as it involves a naturalistic approach to the world and the study of phenomena in their natural settings (Denzin and Lincoln, 2003). According to Norman Denzin and Yvonna Lincoln, qualitative researchers “deploy a wide range of interconnected interpretive practices, hoping always to get a better understanding of the subject matter at hand (2003: 5).

The qualitative approach emphasizes the depth of understanding (Rubin and Babbie, 2009). In order to describe this approach, different scholars have developed various definitions: Anselm Strauss and Juliet Corbin and their description as “any kind of research that produces findings that are not arrived at by means of statistical procedures or other means of quantification (1990: 17)”; John Pauly proposes a definition that includes a five-step process “a) finding a topic, b) formulating research questions, c) gathering the evidence, d) interpreting the evidence, and e) telling the researcher’s story (1991)” or Nick Jankowski and Fred Wester, who said it “refers to an understanding of the meaning that people ascribe to their social situation and activities” (1991: 44).

The overall goal of qualitative research is to access the ‘insider’ perspective of members of a culture (or subculture), to understand the way people think and make meaning within their social context, and how they express these understandings through communication (Priest, 1996: 103). According to Aisha Gilliam’s understanding, qualitative methods are most relevant in order to provide detailed, in-depth information, to describe diversity, to determine the quality of content and interventions, to identify unexpected outcomes, to document interactions, and to create response (2005: 2). The qualitative aspect becomes clear by asking and seeking an understanding of reader’s personal situation, their lifestyles, the context of reading and their individual interpretation of the magazine’s content.

Women-centred Sense-Making Approach

In order to take into account reader’s experiences with magazine content, social backgrounds, personal health situations or involvement in HIV and AIDS through communities or relatives,

the sense making approach will be consulted. This approach has primarily been developed by Brenda Dervin since 1972 and is the outcome of her work in communication research. It is based on the assumption that people are making sense of their world and experiences all the time. There is a relation between sense-making and their behaviour and, in applying this approach, a focus lies on asking people about their individual experiences and their interpretation of it (Dervin, 1989). The core of sense-making is the assumption of discontinuity/ 'gappiness', which is an important aspect of reality – gaps between people, things, spaces and times (Dervin, 1992). In order to overcome these gaps, 'bridges' are needed and each of us must make sense of what we encounter. Information is subjective and sense-making does not deny objective reality or an existing message, instead it focuses on the subjective construction of reality, or the encoding and decoding by individuals (Neill, 1987).

In sense-making "the human is conceptualized as centred and decentred; ordered and chaotic; cognitive, physical, spiritual, and emotional; and potentially differing in all these dimensions across time and across space" (Dervin, 1999). The approach is applied as a methodology for studying the making and unmaking of sense in different communication situations, especially when professionals formulate messages in order to address them to audiences (e.g., readers, users, customers). When applying this approach to research some fundamental assumptions have to be acknowledged and considered (Rice and Atkin, 2001: 72 - 76): (1) "Sense-making is gap-bridging" and understands external information as not sufficient in order to make-sense of here and now for individuals. This must be done by "mind-body-heart-spirit step-takings or singular human entity, consciously or unconsciously, habitually or innovatively, and acting alone or in community". (2) "There are many ways to make sense" and the process of sense-making involves ideas, cognitions, thoughts, conclusions, attitudes, beliefs, values, feelings, emotions, intuitions, memories, stories, and narratives. (3) "Sense-making is anchored in space and time" and it differs between internal situated communicative practices, such as thinking and remembering, and external practices, such as asking and objecting. (4) "Sense-making occurs at the intersection of three horizons – past, present, and future". (5) "Sense-making can be either flexible or inflexible". (6) "Sense-making involves energy [...] – force, power, and constraint" and distinguishes different forms of energy as from within (motivation or resistance), from without (barriers and help from society) or from special circumstances and social influences. (7) "Every sense-maker is inherently a social theorist" because he discusses

connections between past and present, between present and future, between self and others, and self and society.

The sense-making approach has often been applied within health communication to find out, how consumers of health messages make sense of their lives, how they connect health messages to their personal behaviours and social backgrounds (Dervin, 1989). This approach is linked to Bandura's concept of self-efficacy and calls for more promotion of self-efficacy in the media and communication regarding women's health (Dervin, 1989). In this context self-efficacy is the belief that women can achieve control over their motivation, behaviour, and ability to act. If women know they are able to control and influence their health situation and that finding help is possible, there is a greater likelihood that they will benefit from media coverage concerning their health (Parrott, 1996). One can speak of a women-centred sense-making approach, which means that media messages about HIV and AIDS would focus on women's needs, for example tips on communication with their partners on condom use, stories about and by affected women and how they face the challenges of the disease, the importance of testing and possible places for testing – in summary alternative perspectives of women's experiences by individuals or support groups. Based on this, this study's interview guideline will consider the women-centred sense-making approach.

Reception Analysis & qualitative Data

This study will include a reception analysis of reader's experiences and feedback on magazines and articles on HIV and AIDS. It investigates the perceptions of readers as the receiver of the messages, with the role of the audience being understood as 'active'. The notion of the 'active audience' was introduced by scholars such as Stuart Hall, Denis McQuail, John Fiske and David Morley and their interpretation of media use as part of everyday and social life and audience readings as diverse, sometimes resistant, sometimes responsive to media messages (Hall, 1980, McQuail, 1994, Fiske, 1989, Morley, 1980). Hall's theory of encoding/decoding as an example of reception analysis understands the message and the included meaning as encoded by a sender and meaningfully decoded by the audiences with influencing, persuading, emotional, ideological and behavioural effects (Hall, 1980). Another example for a different direction within reception analysis is the inclusion of feminist approaches to popular culture.

This resulted “in a consideration of the mapping of good and bad, ‘masculine’ and ‘feminine’ genres ,[...], cognitive and emotional responses onto high and low culture, and offers instead an alternative set of valuations which mapped primarily onto active and passive audiences, critical and normative readings and open and closed texts” (Livingstone, 1998). Other approaches within reception analysis are interpretation “as a bridge between gratifications studies and cultural studies” (Katz, 1979), the focus on the ‘resistant audience’ as part of the questioning of hegemonic theories (Fejes, 1984) and the combination of cultural theories and popular culture in order to examine the relationship between model and actual audiences (Livingstone, 1995).

Audience reception is the empirical study of the social production of meaning and focuses on investigating what people see in the media and on the meanings which people produce when they interpret media texts (Schroder et al., 2003, Hobson, 1982). In contrast to this, Janet Staiger offers a more general definition and defines reception analysis by not being “a hermeneutics or truth-finding of the meaning of the text” (2005). The following questions have to be considered within a reception analysis: “How does a text mean? For whom? In what circumstances? With what changing values over time?” (Staiger, 2005). In this context, reception analysis can be linked to the sense-making approach. According to Stanley Baran and Dennis Davis “one of its central features is its focus on how various types of audience members make sense of specific forms of content” (2010: 257).

The reception approach includes an emphasis on discourse and reflexivity and, according to Pertri Alasuutari, there has been a shift from an emphasis on audience psychology to audience sociology (1999). In consideration of these diverse views on reception analysis, this minor dissertation follows Sandra Livingstone’s (1998) understanding and her focus “on the interpretive relation between audience and medium, where this relation is understood within a broadly ethnographic context”. It explores media experiences of the readers through the medium of extended talk (Schroder et. al. 2003), more specifically by applying the method of sense-making time-line interviews. The data set, which is used for the reception analysis, will be the result of these interviews with readers. Among others the findings of the reception analysis are summarized in a SWOT analysis, which is ” a form of analysis, resulting in a listing of [...] strength, weaknesses, opportunities, and threats” and is usually applied in order to enable strategic management decision (Bamford, 2010).

Sense-Making Time-Line Interview

In line with the sense-making approach that was chosen for this dissertation, the method of time-line interviews is applied. This interviewing approach is the core technique within sense-making methodology and it can be described as a form of qualitative interviews. Qualitative interviewing is based on conversations, composed of questions asked by researchers and listening and answering by respondents (Kvale, 1996, Rubin and Rubin, 1995). The purpose of most qualitative interviews is rather to discover interpretations and personal experiences, than facts or laws. Within the time-line interview the participants are asked to recall a situation (e.g., reading a women's magazine) and to explain what happened (Dervin, 1999). This technique requires the researcher to ask what happened in a situation step by step in order to find out influences "for each time-line event, in terms of the situation (e.g., barriers, constraints, history, memory, experience), gaps (e.g., confusion, worries, questions, muddles), bridges (e.g., ideas, conclusions, feelings, opinions, hypotheses, hunches, stories, values, strategies, sources) and outcomes (e.g., helps, facilitations, hurts, hindrances, outcomes, effects, impacts)" (Dervin, 1999: 47).

Steinar Kvale lists different steps of interviewing, which are also relevant for my study: thematizing, designing, interviewing, transcribing, analysing, verifying and reporting (1996: 88). As part of the time-line interview the interviewer asks the participant to describe a situation step by step in order to reflect the emotional dimensions, gaps and uses/helps within situation (Dervin, 1999). For this study the time-line interview will be adapted and simplified in order to answer the underlying research questions. According to Michael Quinn Patton (1990) there are six types of question that can be asked in a qualitative research. This paper includes five of them, described as follows and presented in detail in Appendix 1.

Type of question	Example within this study
Background/ demographic question	Descriptive questions on name, age, gender, education
Experience/ behaviour question (strongly influenced by the time-line interviewing approach)	When was the first time you read a women´s magazine? What is happening while reading magazines?
Opinion/ value question	Who do you think the message is directed at? What sense do you draw from these articles personally?
Feeling question	What feelings did these articles provoke in you?
Knowledge question	If you wanted to get information about sexual health, what are your resources? Was there any kind of knowledge, attitudes and practices about HIV and AIDS you getting from the articles?

Figure 7: Overview Types of Interview Questions according to Patton (1990)

These types of interview questions are part of the overall categories within my interview guide:

- General questions – Background, demographic questions
- Health-related questions – In order to link the interviews to health communication and HIV and AIDS, questions on health knowledge, sources for health information and contraceptive methods are included.
- Media-, magazines & HIV and AIDS- and article-related questions – One issue of each magazine *Bona*, *True Love*, *Move!*, *Cosmopolitan* and *Fairlady* are presented to the participants with questioning on recognition and usage, followed by their description of content and target groups. Afterwards five articles (one of each magazine) are shown to the participants and questions on impressions, content, relevance, likes or dislikes and special features are asked.

Purposive Sampling

In order to select participants for the interviews, purposive sampling was applied. “In purposive sampling the researcher selects elements based on his or her judgement of what elements will facilitate an investigation” (Adler and Clark, 2011). Irene Rubin and Herbert Rubin recommend three guidelines for selecting participants by using purposive sampling,

which was applied in this thesis: “[1] Knowledgeable about the cultural arena or situation or experience being studied, [2] willingness to talk, [3] representative of the range of points of view” (2005:66). For my study it is crucial that the participants are living in South Africa, are female, are readers of women’s magazines and are generally interested in magazine’s content. The selection is furthermore linked to the target groups by the selected magazines and can be described as female, largely between 20 – 35 years old, mostly black, but also white and Indian, and relatively educated, as stated by the magazines. The interviews will be recorded and transcribed (see Appendix 3) and a total of ten interviews will be conducted. In qualitative research, the sample size does not have any significant role as the purpose is to study one or a few cases in order to identify the spread of the range. Also, there is no effort to avoid bias; the sample is purposely selected from ‘information-rich’ respondents to provide the necessary information (Kumar, 2011). In this dissertation and with the agreement of the participants, only first names are used in the quotes below.

NVivo Research Software

NVivo is qualitative data analysis computer software produced by QSR International. It helps to organise unstructured information like documents, surveys, and has been designed for rich text-based and multimedia information. It allows the handling, classification and arrangement of the interview data sets and is used for open coding in order to examine the presence of dominant categories and to develop new categories. QSR International, the developer of NVivo recommended five principles in applying NVivo: manage data (to organize and keep track of data such as files from interviews), manage ideas (to organize and provide access to conceptual and theoretical ideas and the data which supports it), query data (to ask simple and complex questions of the data in order to find answers and results), graphically model (to show ideas and concepts based on the data), report from the data (using contents and build a basis for the analysis) (Bazeley, 2007). These principles are applied in the analysis.

Validity, Reliability and Limitations

This research on South African magazines and the coverage of HIV and AIDS contributes to the public discussion on HIV and AIDS, which is of important social concern. The findings of the research may be viewed in light of other research in the HIV and AIDS prevention

communication field and contemporary theory in the health communication field. Therefore, the information gained could serve as input for communication campaigns and programmes, which include print media and are targeted at women. They are qualified for further research on media usage by women and the relevance of women's magazines for health communication on HIV and AIDS.

Reliability will be achieved by involving the supervisors, discussing the topic in research seminars by CCMS and including literature on research and studies related to the main research questions of this paper. The results of the time-line interviews will be carefully reviewed for relevant themes that contribute towards answering the research questions. The data will be analysed by using NVivo software, and the research design, methodology and theory applied are all outlined clearly to ensure rigour and testability of this study.

The limitations of my study lie in the applied methodology itself. Qualitative research requires the process of interpreting and creating meaning and depends immensely on the researcher and his skills of observation, interpretation and analysing. Edwin Black observes that "unlike the quantitative researcher who purges style and supplants passive voice in order to distance the reader, the qualitative researcher tries to engage, even "enchant" the reader" (1965). The sense-making theory suggests not only focussing on the individual's understanding of media messages, but also on how this understanding is constructed within a particular context (Johnsson-Smaragdi, 1999). This requires a detailed overview and understanding of the personal and individual situation of the participants. An overview of personal health, participants' affection by HIV and AIDS and their individual situation of reading and using women's magazines will be considered. This might be a limitation of this study, as there are more factors that influence the interpretation of women's magazines. Further limitations of qualitative reception analyses are related to the relatively small sample size. "Qualitative audience researchers [...] often work with very small samples from which it is not really possible to generalize, although [they] none the less often do" describes Hermes the risk for the researcher (1995: 352). The limitations are taken into account and generalized, universal and irrevocable findings are avoided.

CHAPTER FIVE – ANALYSIS AND FINDINGS

The main aim of this study is to identify the role and influence of women's magazines within health communication, particularly for HIV and AIDS prevention. Readers of magazines were interviewed, their answers analysed, and forms of consumption discussed, in order to find out how, why and when the participants use women's magazines. This consumption behaviour is linked to and discussed in relation to the reception of HIV and AIDS messages. In particular, the effects, contradictions, and the interpretation of HIV and AIDS messages are studied. Finally, the dual character of women's magazines and the relevance of integrated messages, in the light of interaction with others, are analysed.

Profile of Participants & Descriptive Criteria

The ten interviewed women were in the age group of 23 – 33 years and therefore part of the magazines' target age group. They were women's magazine readers, 50% employed in different areas at a Durban based consumer goods company (for example marketing, sales, and administration) and 50% students. The senior students were conveniently chosen at the University of KwaZulu-Natal and professionals were chosen in order to make sure, they can afford the magazine and buy magazines on a regular basis. Fifty-percent of the participants had been in a relationship or were married and 50% were single. Regarding their ethnic background 60% were black (South) African, 20% white South African and 20% Indian South African. Their highest education level ranged from Bachelor to Masters and it can be assumed that their income was above the South African average, especially of those who were employed. In summary, the participants were generally urban, highly educated and had a significant interest in women's magazines and other forms of media. Their knowledge about HIV and AIDS information in a South African context became especially clear during the interviews and influenced their reception of health messages strongly. Overall it can be concluded that there was no significant difference between the answers of singles versus married participants, or students versus professionals. However, there was a difference identifiable between preferred magazines by black or white participants and will be discussed later.

Health Content of South African Magazines

In order to estimate the relevance of HIV and AIDS for magazines as an embedded topic, the content and coverage of health issues, especially of HIV and AIDS, was documented. Issues of the five most circulated magazines over 12 successive months, from July 2011 until June 2012, were viewed and articles on health, respectively on HIV and AIDS documented (Figure 8).

As a result of this content documentation, every magazine issue covered at least one health related topic such as HIV and AIDS, breast cancer, sexual abuse, alcohol and drugs, and smoking and 60% of the magazine issues covered HIV and AIDS. The topic was embedded in personal stories by other women and couples, latest research results, celebrity stories, and more. The genres of storytelling included columns, short stories, human-interest stories, interviews, question and answers. The HIV and AIDS articles were often presented in a current South African context and included, for example, statements by the anti-apartheid activist Albie Sachs; information about a South African AIDS non-profit organisation Thanda; financial aspects and grants for HIV infected people; and general AIDS statistics of South Africa.

Not only were facts and news on the disease presented, but also aspects of everyday life, such as nutrition, supplements and vitamins, kids, family and relationship issues. Different aspects of the disease were discussed, such as condom use, infected partners, stigmatisation, ARVs (antiretrovirals), pregnancy and more. The following Figure provides an overview on embedded health topics:

	FAIRLADY	BONA	TRUELOVE	COSMOPOLITAN	MOVE
07/2011	ADHD (Attention deficit hyperactivity disorder)	Criselda HIV column	Alcohol abuse	Sexual abuse & HIV and AIDS activism story, HIV and AIDS statistics SA	General health issues
08/2011	General health update	HIV couple, social grants, Criselda HIV column	HIV and support systems	The truth about vitamin C, colds, AIDS and cancer	HIV heroes
09/2011	Drug abuse	Criselda HIV column	Rules about sex & HIV, sex worker & HIV	Dangerous sex life & HIV	General health issues
10/2011	Breast cancer, metabolism	Criselda HIV column	Criselda & her HIV story	Breast cancer	HIV celebrities, love matters, HIV heroes, HIV & young people
11/2011	Skin cancer	Criselda HIV column	Drug abuse	Drug abuse, eating disorder	General health issues
12/2011	GAD (generalised anxiety disorder)	HIV activist, HIV pain, Criselda column	Kids, sex & HIV	HIV positive partner	Love matters, Sex & HIV
01/2012	Anti-apartheid activist Albie Sachs and impact of HIV	Counselling, Criselda column	Cancer, allergies	Violence	General health issues
02/2012	Hypochondria & HIV	Teen talk, Criselda column	"Red flag symptoms"	Gastric bypass	Readers HIV advice, sex & HIV Q&A, love matters
03/2012	Most dynamic women of the year & AIDS NGO Thanda	Criselda HIV column	Condom wars & HIV	Polyamory & HIV	Lesego Motsepe & her HIV story, misdiagnose of HIV
04/2012	Sexual Abuse	Supplements & HIV, Criselda HIV column	Vitamins & ARVs	Tough talk/STIs & HIV, HIV-positive celebrity role models	Sexual harassment
05/2012	Dangerous secret sex life & HIV	Weight & HIV, Criselda HIV column	Endometriosis	Cancer warrior, HPV virus	ARVs importance for people living with HIV
06/2012	Inflammation issues	Pregnancy & HIV, Criselda HIV column	HIV story of medical student	Smoking cigarettes, eating disorders, sexual abuse	Symptoms & health problems

Figure 8: Content Documentation of 60 Magazine Issues, July 2011 – June 2012

Based on this documentation of content, it can be assumed that messages on HIV and AIDS are highly relevant for South African women's magazines and have been included in more than half of the magazine issues. The magazine try to educate, inform but also entertain readers by integrating these stories and, because the disease plays such an important role within the health situation of South Africa, it is almost impossible to publish a magazine without integrating this issue. Within the following reception analysis, out of these 60 magazines one article from each magazine (blue marked in the table above) was used in order to identify the perception, interpretation and comments by the participants. The articles were chosen in order to represent all five magazines, offer an article on HIV and AIDS, present different narratives and portray diverse characters. During the interviews participants were asked to choose two articles, read them and summarize the content. Their answers, interpretation and discussion of content became the basis of the reception analysis. Each article covered HIV and AIDS from different perspectives, with different focus areas and by using different ways of storytelling. The content of these five articles is described in Appendix 2.

Based on participants' assessment, True Love was described most positive as “*trusting their content*” by **Gabisile** or “*because it looks mostly at South African black women and I want a perspective on black South African women*” by **Lungelo**, followed by Fairlady and Bona (Gabisile, interview 29.5.2012; Lungelo, interview 18.5.2012). *Move!* was read by the least number of participants and *Cosmopolitan* was especially known for its “*superficial*” content, described by **Ausie** or “*very little serious content*” explained by **Gabisile** (Gabisile, interview 29.5.2012; Ausie interview 30.5.2012) . The following analysis considers the participants interpretation further.

Consumption of Women’s Magazines & Perception of HIV and AIDS Messages

In order to identify the participants’ media and magazine usage several questions were asked. Out of five different forms of media, Internet and women’s magazines ranked in top position and were utilised by nine participants. Also, radio was used by nine participants, but with a lower relevance. TV was used by seven participants and newspapers by six (see Figure 9). All participants were readers of *True Love* and *Cosmopolitan*. *Fairlady* was read by nine participants, *Bona* by six participants and *Move!* by five participants.

Type of media	Used by participants	Average ranking (1 - 5)
Internet	9	2.2
Women’s magazines	9	2.2
TV	7	2.4
Newspapers	6	3.2
Radio	9	3.3

Figure 9: Media Usage by Participants, 2012

The most interesting topics for the participants in women’s magazines were fashion, which was named by seven participants, followed by health and personal stories, named by six participants. Finally, articles on celebrities, and success and motivational stories were named by four participants. Asked in form of an open question what kinds of topics were also relevant, a broad spectrum was further mentioned and is shown in Figure 10. These interests can be

linked to the uses and gratification theory and apply to different forms of gratification motives (Watson, 1998). Especially within the field of ‘personal relationship’ and ‘personal identity’ topics on work-life-balance, advices, ‘how to’ and ‘things that help me through my life’ were mentioned by readers, see Figure 10.

Topics of Special Interest	Gratification Motives
<i>Celebrities, gossip, recipes, food sections</i>	<u>Diversion</u> : the need to escape personal problems, and the need for emotional release
<i>Relationships, love, "feature articles about work-life-balance" and "bringing up your children in today's day and age" by Justine, advice, self-help by Nomvelo, "how to" by Marlini (Justine, interview 24.5.2012; Nomvelo, interview 24.5.2012; Marlini, interview 29.5.2012)</i>	<u>Personal relationship</u> : the need for companionship and help in social interactions
<i>"Things that help me through my life, women topics" by Lungelo (Lungelo, interview 18.5.2012)</i>	<u>Personal identity</u> : the need for self-understanding and reassurance of one's role in society
Technology, politics, economy, development, outlooks, local, African economy, opportunities, SA politics, <i>"political landscape of SA"</i> and <i>"issues in the SA media of social-political nature"</i> by Gabisile , HIV, business (Gabisile, interview 29.5.2012)	<u>Surveillance</u> : the need for information about factors that might affect or help one

Figure 10: Relevant Topics for Readers related to Gratification Motives according to Watson (1998)

When asked, where and why participants read women's magazines, different scenarios were identified. These scenarios have had a strong influence on all the other items discussed, such as negative features of women's magazines and interactions with others, and are therefore explained in detail. Within all answers six groups of magazine consumption dominated and correlated with the reception of messages on HIV and AIDS. These forms of consumption do not happen exclusively for one participant but can appear parallel, depending on the reader's situation, time available to spend with the magazine and general interest in magazines content. The six in this study identified forms of consumption, based on participant answers, are:

1. ‘Consumption for relaxation’: In this predominant consumption mode, magazines served as a means to relax and unwind. Magazines were used by the participants to escape from

everyday life, to distract and to immerse into lighter topics. The participants were usually in a relaxed mood and spent a relatively long time reading the magazine. Laden has also identified this function of magazines and described it as “designed to evoke pleasure and enjoyment and relaxation rather than to provide ‘serious’ reading matter” (2001:8).

Statements by **Justine**, who said *“I really like looking at them, so normally I read them evenings or weekends at home, if I go on holidays I read a lot of them, because it is relaxing”*, **Nzokuhle** *“I also buy them and I read them after hours when I am relaxing just before going to bed”* and **Gabisile** *“it is an effective relaxation method for me”* confirmed this function of women’s magazines (Justine, interview 24.5.2012; Nzokuhle, interview 23.5.2012; Gabisile, interview 29.5.2012).

These readers preferred topics such as fashion, personal stories and advice, and if a health message was embedded in an entertaining story, they would have read it as well. If the reader was generally interested in health related topics, the article needs a positive and more personal perspective in order to get the reader’s attention. Real cases and experiences by women and couples were especially interesting for participants and could carry the HIV and AIDS prevention aspect. This conclusion can be linked to Singhal’s discussion of EE: “If the attention of the target audience were to be caught and held, especially if the audience is not spontaneously interested in health messages, it is no longer sufficient to rely solely on the rationality of the message. More emotionally appealing and popular communication aspects must be brought into play” (Singhal et al., 2004: 228). **Nzokuhle** described this aspect as: *“if there is a nice balance between information and like I say the human aspect or entertainment or just an emotional appeal... if it’s not too biological”* (Nzokuhle, interview 23.5.2012). **Nomvelo** confirmed: *“I think it depends how it’s like, I think what’s more interesting are real-life stories about HIV and AIDS because I think people are aware of the medical side of it, you know how you get it and what’s it about but it’s more how it’s affect people, I think that is more important and that is what gets to me”* (Nomvelo, interview 24.5.2012).

2. ‘Consumption to bridge’: In this mode, which was also often recognizable, magazines were used to fill time or in between different activities. Ytre-Arne comes to a similar conclusion and described this reading mode as “reading ‘between other tasks’ or ‘skimming’ in a free moment”, which means fragmented reading, especially at busy places (2011: 219). This was confirmed by the participants, who mentioned places like the doctor’s office, during travel

periods on the train or airplane and at grocery stores. The time that was spent on reading the magazine depended on the situation; it was more during travel periods than, for example, at the doctor's office. The reader's mode could be relaxed but she was usually more focused on the end of the waiting period and bridge over rather the content of the magazine. **Varona** described the magazine as an "*intermediate thing*" and **Caitlin** choose a magazine "*usually if I am waiting somewhere*" (Varona, interview 23.5.2012; Caitlin, interview 23.5.2012).

Readers in this consumption mode seemed generally less aware than others of HIV and AIDS as magazine's content. They preferred more entertaining and visually appealing content, and in order to attract their attention, it helped to work with pictures, graphics or other eye-catching elements. During the interviews there was almost a moment of surprise, when participants realized the extent to which these messages are included. *Cosmopolitan* especially astonished **Caitlin**, who indicated "*that's what I didn't expected, (these kind of article) to be in the Cosmo*" and **Marlini** confirmed to get inspired "*mostly on content through that is sparkling your eyes*" (Caitlin, interview 23.5.2012; Marlini, interview).

3. 'Superficial consumption': In this mode, identified equally as often as the previous mode, participants did not spend much time with the magazine. They just paged through or focussed on looking, rather than reading, pictures were more important than the actual story and eye-catching elements were necessary to draw their attention. They spent the least amount of time reading the magazine. These participants consumed magazines almost in a passive way; they didn't reflect much on the content. **Nomvelo** consumed magazines "*in the evening or the weekend, just to page through and look*" (Nomvelo, interview 24.5.2012). **Gabisile** utilized them "*generally if I just want to switch off my brain and go through fashion, pictures and the occasional gossip*" and described the magazine "*like a no-brainer kind of indulgence*" (Gabisile, interview 29.5.2012). In this context, Ytre-Arne comes to an interesting reflection: because the magazine can be read superficially and do not require too much concentration it is suitable for readers who just need a short moment of distraction or entertainment; "it is easy to slip in and out of the world of the magazine" (2011: 220). Also Camilla Nielsen comes to a similar conclusion and describes readers' behaviour with a "pick-and-mix attitude and very selective in their choice of articles" (2008: 34).

Readers in this mode of consumption were generally interested in HIV and AIDS, but their interaction with the magazine content was so limited and their expectation to the magazine so basic, that the article or story itself will not get their attention, except when combined with an eye-catching element, confirmed by **Gabisile**: *“there has to be something on the cover or topic on the cover that is really attention grabbing for me in particular”* (Gabisile, interview 29.5.2012). **Nomvelo** emphasised the importance of visually attractive content as *“I’ll read through articles that catch my eyes”* (Nomvelo, interview 24.5.2012).

4. ‘Belated consumption’: This mode of consumption, identified occasionally, means participants did not read the magazine immediately and it was usually combined with one of the other modes. Sometimes the participants kept the magazine for later and would read it after a few days or even weeks. Their interest in the magazine was high, but they did not have enough time to read it immediately. These women were often mothers or had a demanding job. **Gabisile**, a working mother, explained *“if I buy magazines it would be probably with the groceries and it would sit around for probably two to three weeks before an opportunity arrives for me to actually page through it”* (Gabisile, interview 29.5.2012). Participants in this mode of consumption also tend to read earlier editions again and therein laid the difference to newspapers for **Lungelo**: *“you can read an issue from 2009 and it is still be relevant. That’s what it makes a difference from newspapers for me.”* (Lungelo, interview 18.5.2012)."

In relation to the reception of HIV and AIDS messages readers did not expect stories with a high novelty value. They were generally interested in the content and waited for an appropriate moment where they could spend enough time to read the magazine, as mentioned by **Ausie**: *“it takes me about 2 days to read it, it is usually over the weekend”* (Ausie interview 30.5.2012). **Marlini** added: *“it is an article that I am interested in, then I am marking it and keep it at my bedside and read it more in depth without any distraction”* (Marlini, interview 29.5.2012). They usually spent more time with the magazine and, because of this; it was likely they also read an article on HIV and AIDS.

5. ‘Consumption to enhance femininity’: The participants, who consumed magazines in this frequently mentioned mode, appreciated the focus on women and, because of this focus, they spent time reading magazines. From their perspective, it was a special moment to

relax and interact with topics that are relevant for women. In this context, Deidre Donnelly considers women's magazines as a genre created by and for women, because these magazines are often produced by a team of women and it "add a sense of an 'imagined community' to it" (2001:15). **Lungelo** described this sense as "*women's magazines are on women and how women should stand for themselves*" and **Caitlin** assessed magazines "*are about what women in South Africa are interested in*" (Lungelo, interview 18.5.2012; Caitlin, interview 23.5.2012). The participants could identify themselves with the magazines content and this can be linked to the 'retention' stage, explained within the social learning/ social cognitive theory as remembering, coding, transforming modelled information and encoding it into memory (Bandura, 1977). They described it further as a form of treat when reading a magazine. For Emily Norval "describing something as a 'treat' implies a desire for it to be in some way special" (2011: 37). This is what **Justine's** discovered as „*it is me-time [...] I feel like I've got some quality own time*" and also **Marlini** felt "*it is like your time, that you can engage with the magazine*" (Justine, interview 24.5.2012; Marlini, interview 29.5.2012).

Personal stories by other women, who explained and shared their experiences in life, got the attention of these readers in order to support the idea of a female community. In the context of HIV and AIDS topics, readers in this consumption mode were generally not that interested in the newest medical developments or statistics but would pay attention to stories that included relationship aspects, personal experiences and individual journeys. **Nomvelo** observed "*I think it depends how it's like, I think what's more interesting is real-life stories about HIV and AIDS*" (Nomvelo, interview 24.5.2012). **Nzokuhle** preferred stories "*if there is a nice balance between information and like I say the human aspect or entertainment or just an emotional appeal... if it's not too biological*" (Nzokuhle, interview 23.5.2012).

6. 'Exaggerated consumption': This occasionally identified consumption mode seemed to be the enhanced level of the previous mode. In this mode, participants interpreted the magazine as something very special and, in their eyes, the content was highly relevant and worthy of incorporating into their daily lives. **Ausie** compared the magazine with a friend: "*You feel like talking to a friend in a way*". For **Nzokuhle** it is not just a magazine but "*it feels like a book to me as well*" (Nzokuhle, interview 23.5.2012). Finally, **Lungelo** compared "*as a women's magazine it is probably mostly like a bible*" (Lungelo, interview 18.5.2012).

Because the magazine's content was so believable and interesting for them, readers were also highly receptive to embedded messages on HIV and AIDS. They used magazine content for getting advice, inspiration and examples how certain situations can be handled. For them, the stories were always credible and used as a guideline in their own lives, described by **Prestage**: *"the magazine becomes a messages, it becomes more than the True Love message – it becomes a lifeline because someone somewhere will get saved by reading 'condom wars', by reading 'dating an HIV positive man' (the discussed articles), so it transforms into a life message"* (Prestage, interview 23.5.2012). **Gabisile**, who showed earlier signs of a superficial and belated consumption, found a strong sense within the articles on HIV and AIDS *"in a sense that I could probably council somebody else facing a similar situation as a result of these articles"* (Gabisile, interview 29.5.2012).

The identified consumption modes show a diverse interaction with the magazine and were influenced by participants' interest in the magazine itself, their social lives, time available, personal interests, and relevance or influence by others. Therefore, the form of consumption could constantly change. The following overview shows, which consumption mode per participant was noticeable.

Participant	Consumption for relaxation	Consumption to bridge	Superficial consumption	Belated consumption	Consumption to enhance femininity	Exaggerated consumption
Ausie	X			X		X
Caitlin		X	X		X	
Gabisile	X		X	X		X
Justine	X	X			X	
Lungelo	X			X	X	X
Marlini	X	X		X	X	
Nomvelo	X		X		X	
Nzokuhle	X			X	X	X
Prestage	X					X
Varona		X	X			

Figure 11: Summary of Participants' Consumption Modes

Effects and Contradictions of Women's Magazines

In order to explain how health messages in women's magazines are perceived and interpreted, effects by women's magazines are of special interest. For that, the participants were asked to read and retell two articles on HIV and AIDS. The social learning/social cognitive theory offers the concept of observational learning in order to explain effects by media and to describe how media can teach, reinforce and portray behaviour (Bandura, 1989). This theory includes the idea of observing others and their behaviour and subsequently imitating them, also described as 'modelling' (Bandura, 1977). The concept was initially applied to communication research on effects of TV, but can be used in the context of health communication and the effects by print media as well, as role-models are involved and their behaviour is shown (Gochman, 1997: 153). Social cognitive theory outlines the key conditions that are necessary to enable behaviour modelling. The aim was to see whether or not the participants are generally able to do so. Therefore, these stages are applied to the participants in order to identify their learning behaviour and, based on that, their interpretation of the magazine content on HIV and AIDS. In accordance with Bandura, and as a result of the interviews, these learning stages were (1995):

- Attention: In order to replicate behaviour that is modelled in a magazine article, the reader must notice the magazine and pay attention to the content. Within my study, this stage was a precondition in order to identify the effects. All of the interviewed participants were readers of women's magazines and paid attention to the content to a different extent, explained in the paragraph above on consumption.
- Retention: This stage outlines the way in which the reader needs to be able to remember and encode the modelled behaviour. During the interviews the participants were asked to retell the stories of the magazine articles they had chosen. All of them were able to tell the story in their own words and summarize them. **Lungelo** felt sympathy with the women described in *True Love* and stated "*it's kind of about women standing their ground and not being tricked by men in not using a condom*" (Lungelo, interview 18.5.2012). **Nzokuhle** discovered the challenges living with HIV and AIDS and described the story: "*they've gone through together in terms of informing the family and the support that she's had from her friends and what they have to deal in the relationship physically and sexually etc. and how their relationship is good even though the man is HIV*"

positive, they make it work” (Nzokuhle, interview 23.5.2012). All the participants were able to identify the embedded information on HIV and AIDS but some of them indicated they would not have read the article in the first place, because they felt already informed enough about HIV and AIDS. Some participants stated further that the presentation of the article did not draw their attention. This was especially the case for readers who tend to consume the magazine in a superficial way or to bridge time.

- **(Re)Production:** In this stage the reader needs to be capable of performing the behaviour. In the context of HIV and AIDS prevention, this requires personal strength and the belief in one’s own capability, also known as self-efficacy (Bandura, 1995:2). Readers have to translate the message into actual behaviour (e.g., they should protect themselves during sexual intercourse) but they must also have the ability to reproduce the behaviour (e.g., the strength to negotiate prevention methods and to insist using condoms). During the interviews, it became clear that the participants were aware of the disease and could reproduce information on transmission, process and impact of HIV and AIDS. If a magazine article just repeated this information, there would be no added value for the participants. They did not show a deeper interest as indicated by **Caitlin**: *“but when it comes to actually read about it, no, I would browse over because I feel I heard so much and so many times”* (Caitlin, interview 23.5.2012). **Gabisile** added *“If it’s just about using a condom, stick to your partner, be faithful ... I probably skip through that message because I feel that is a message that is well-received and well communicated by now”* (Gabisile, interview 29.5.2012).

In order to reproduce the described behaviour, it needed a story with a different view on the disease, described by **Nomvelo**: *“more how it’s affect people, I think that is more important and that is what gets to me, because then it’s people you can relate to and situation you have been in and would be more interesting about HIV and AIDS than the actual disease itself”* (Nomvelo, interview 24.5.2012). An interesting aspect could have been a personal story that implicated family, partnership or everyday life. Also, embedding these issues into more positive topics such as celebrities, diet or success stories about women, helped to reproduce the described behaviour. In this context **Lungelo** thought *“I become more interested if it’s a celebrity”* (Lungelo, interview 18.5.2012).

In order to get an idea of participants' self-efficacy, and therefore the ability to reproduce the shown behaviour in the article, their answers to health related questions helped. Most of them showed a strong awareness of health. They were confident about having a positive effect on their health through sport activities, healthy eating or medical check-ups, confirmed by **Nomvelo**: *"I think I am healthy, I am aware of it, I look after myself, I try and eat healthy, I try to make good and healthy eating choices, and I try to go to gym once a week"* (Nomvelo, interview 24.5.2012). **Nzokuhle** stated: *"I think my health is good, because I try and eat healthily and I exercise quite often, so I'd say that my health is good"* (Nzokuhle, interview 23.5.2012).

In terms of prevention during sexual activities, especially among the participants who were single, they stated to use condoms and other prevention methods. Also the participants, who were married or in a long-term relationship, answered to use condoms, but some of these participants showed a contradiction in their answers later on. They admitted not using condoms in their marriage or relationship anymore, although it might be reasonable and their last HIV test was long time ago. These aspects provoked a guilty conscience in **Gabisile**, an otherwise trusting married women, who admitted: *"Me included, I don't want to disclose too much personal information but I have been married for 10 years now and I can safely say I am more inclined to trust my husband and not insist to use a condom during sexual intercourse than I would have in the past"* (Gabisile, interview 29.5.2012). This identified feeling of guilt offers an interesting parallel to the social cognitive theory. According to Ross Thompson, "guilt is viewed as a conscious process, in which a well-developed self structure is required for the reflective self-awareness and self-critical function" and can therefore be classified as another sign of self-efficacy (1988: 200). Overall, the participants were confident about caring for themselves and indicators for self-efficacy were visible. For some participants the articles even helped to strengthen their self-efficacy in form of empowerment, stated by **Nomvelo**: *"I think the examples that are given, give me skills that you empowered yourself to say no, you are more convinced to say no and not take the risk"* (Nomvelo, interview 24.5.2012).

- **Motivation**: Finally, in this stage the reader needs to be motivated in order to imitate the modelled behaviour. This requires internal or external reinforcement in form of desired results and rewards. For all the participants, the need for prevention was clear, the outcome worthwhile and they had shown motivation to care for themselves, ensure

protection and stay healthy. If the participant was not affected by HIV and AIDS in their families or communities, the interest in this topic was much lower. Also the fact that all participants were widely informed about HIV and AIDS reduced motivation. In that case, the article or story needed a special or new aspect, in order to get the attention and provoke motivation to reproduce the behaviour as described by **Lungelo**: *"I also think it is interesting to not just look on one person, who is HIV positive, but if a story is about a couple that is infected or affected by HIV and AIDS or a family that is fighting or living with HIV and AIDS that would be interesting rather than looking at only one person. (Lungelo, interview 18.5.2012)"*

Numerous times the need for stories on and by other women was mentioned, in order to construct sympathy and relate to them. If an article was able to enhance this 'relatedness', the motivation to read the article on HIV and AIDS was much higher than without.

Jennings Bryant and Peter Vorderer describe 'relatedness' as a human need that helps to strengthen intrinsic motivation and evolves for example, between friends, peers or teachers (2006).

The women-centred sense-making approach applied within the interviews, also helped when analysing how the female participants connected embedded health messages to their personal behaviours and social backgrounds, and how they made sense of them. According to Ronald Rice and Charles Atkin, there are many different ways to make sense, and this became noticeable through the participants' answers (2001). There was a variety of personal interpretations and experiences as women, influenced by relationships, friends, family and community. Within that, there was again the demand for articles and content, focussed on women. **Prestage** asked for more women-centred information, especially in the context of HIV and AIDS: *"so I think they need to be more on us, because it is our lives, our decisions, our choices, rather than making it a man thing and the guys give us excuses and we always give in"* (Prestage, interview 23.5.2012). She criticized the tonality of many articles that mainly focussed on male behaviour and how to protect as a woman rather than speak to women as independent and able to make their own decisions.

Ausie came from a different perspective, and influenced by her relationship status as single, she emphasised the possibility of meeting somebody, as was discussed in the article in *True Love*: *"You don't have to be infected, but you could meet somebody and they disclose their status, how do you*

deal with it, you know” (Ausie interview 30.5.2012). **Justine’s** conclusion was influenced by her marriage and by lives and experiences of her female friends: *“I think from the Fairlady one, because I am in a long-term relationship, I might think oh my gosh, what does it mean? But at the same time I know my husband so well... But I think the one thing for me is that we’ve got a lot of friends, who have got divorced or getting divorced and there are a lot of affairs going on. So it is probably closer to home, than you actually realize”* (Justine, interview 24.5.2012). The influence of community and family became clear within **Nzokuhle’s** evaluation of the *Cosmopolitan* article (Nzokuhle, interview 23.5.2012). She was affected by HIV and AIDS within her family: *“There is a lot of sense, because I do have a male relative who is involved with an HIV positive woman and they have a child that is HIV negative and I can relate because he hasn’t told, I am the only one that knows, he hasn’t told his family. I do not know how their family it will take it. So it is a very relevant issue that I see in my everyday life”* (Nzokuhle, interview 23.5.2012). **Prestage**, being affected by HIV and AIDS within her community, observed: *“There is sense; these issues are real, like for instance the lady who speaks about her HIV positive partner, and she is HIV negative, only that she already know when going into this relationship that he is HIV positive and I know many relationships where women don’t know if they are positive or not, and it is always a struggle to get people to go for testing and by the time they are ready to go for testing, they are through the condom wars that are being talked about in True Love. So they are really real, I can identify with this”* (Prestage, interview 23.5.2012).

Finally **Lungelo**, as a black South African woman, explained her choice of the magazine *True Love* during the interview: *“because it looks mostly at South African black women and I want a perspective on black South African women because I am a South African black woman”* (Lungelo, interview 18.5.2012). Within the interviews, especially the *True Love* got very positive feedback by the black participants. This corresponds with Laden’s description of the *True Love* magazine that “provides a benchmark for assessing some of the ways consumer magazines for black South Africans have effected changes in the socio-cultural dynamics of contemporary South Africa” (2003:14). She argues that the producer of *True Love* has been committed to a “broader agenda of socio-semiotic change in South Africa”. By integrating routines, representative black South African women and their beliefs, practices and identities the magazine becomes relevant as a “cultural tool” (Laden, 2001:14, Even-Zohar, 1994).

Sense-making not only considers experiences as a determined factor, but also reflects the importance of past, present and future. Some of the participants connected the messages to situations that happened in the past, were currently relevant or will occur in the future. Their personal situation influenced the sense making of one and the same story. **Justine**, who grew up with lots of information on HIV and AIDS at school and university, used the news aspect of the article to determine her sense-making: *"But a lot of time it is the same, like you need to check your partner's status, and use of contraceptives. I had so much of that when I was at school and even at university and also in a full-time committed relationship; maybe I don't think it is as relevant"* (Justine, interview 24.5.2012).

Ausie was influenced by recent experiences of her friends: *"But drawing from my own experience I've had a friend, whose partner is positive, but she is negative. So, I would say I am sure these articles somehow render truthfulness in it which means research was done. It may seem like a story, but I am sure something like that happens"* (Ausie interview 30.5.2012). **Lungelo**, who will finish university soon, thinks about her future: *"When I read a magazine, I feel like ok, when I finished my master what car I am going to get, what are older women thinking, how do they connect their life, what gym do they go to, all that stuff, yeah I just think of live as a women and what your life would be and I see other women in the magazine and I think ok this is one that I would like to be or I wouldn't want to be"* (Lungelo, interview 18.5.2012).

The sense-making approach also emphasis the involvement of energy, which means motivation or resistance from within, barriers and help from external or other special circumstances. The acknowledgement, that motivation is needed for sense-making, corresponds with the idea of observational learning and the learning stages. Motivating the participants in order to make sense of a story often seems to fail because of the amount of repetitive information in magazine articles on HIV and AIDS. Without any new, personal or surprising aspects the article does not really get their attention, as stated by **Caitlin**: *"It depends if they put it in a way that is new and exciting"* (Caitlin, interview 23.5.2012). **Nomvelo** offers some examples for a more interesting aspect and confirms again the importance of personal experiences that help to relate to the story: *"I think what's more interesting is real-life stories about HIV and AIDS, because I think people are aware of the medical side of it, you know how you get it"* (Nomvelo, interview 24.5.2012).

The above discussed results include a lot of positive implications for female readers generated by women's magazines, but these effects are not without contradictions. On one hand magazine offer themselves as a "self-contained women's space", focused on women and their issues, questions and lives. On the other hand, it is defined by men to a large extent (Burton, 2005). Men are often the centre of the story and "provide the motive for many of the activities drawn out" (Burton, 2005: 142). These contradictions could also have been found in participants answers. **Prestage** questioned the responsibility shift towards men: *"I don't understand how they can shift the blame to men and say because they persuade us, because they told us"* (Prestage, interview 23.5.2012). A need for the presentation of women as independent and self-reliant was evident.

The idea behind magazine messages on health are based on a combination of entertaining and educational content therefore the concept of EE helps to explain the effect of these messages further. EE aims to foster behaviour and social change and the social learning/social cognitive theory is often applied to explain the process of EE. According to this concept, learning can occur through observing media role-models and protagonists and their experiences (Singhal et al., 2004). The aim was to find out if there was an educational effect on the participants within the entertaining character of the magazines. Most participants found both aspects within the articles discussed and their feedback might be explained in the light of William Elwood's summary of six elements of popular culture, which EE focuses on (2009: 244). The first one is "pervasiveness - because entertainment and media are everywhere". This was confirmed by participants' answers on their media usage. All of them used at least three different types of media daily out of TV, print (magazines and newspapers), radio or Internet.

The next focus was "popularity – because most people enjoy being entertained", as confirmed by **Prestage**: *"I am just interacting with them because they are fun, they are written in such a way I can identify myself with some of the stories"* (Prestage, interview 23.5.2012). **Justine** added: *"I really like looking at them, so normally I read them evenings or weekends at home, if I go on holidays I read a lot of them, because it is relaxing"* (Justine, interview 24.5.2012).

Another focus that could be identified through the participants' answers was a "personal focus – because readers of these texts are moved to share the experiences of the characters". In this

context **Lungelo** admitted: *“I would talk to my sisters about the Fairlady one [...] we talk about things and I would tell them because it is interesting and because of the family, what happens in the family also... yeah I think I would talk to my sisters about that”* (Lungelo, interview 18.5.2012). **Caitlin** stated that *“I would discuss the Cosmo one with my friends if it comes up in a conversation, because often people get reaction when they hear about something like oh he has HIV and then I would bring that up like I have read an article”* (Caitlin, interview 23.5.2012).

The fourth focus was on “persuasiveness – because media messages and characters can sway audience members in a variety of ways” and this was manifested in the feedback on the *Cosmopolitan* article by **Caitlin** who understood the article as encouragement to deal with HIV and AIDS: *“and the Cosmopolitan one was like it is ok, hey its fine. Like don’t have such a stigma about it, this is something you can deal with, like normal life and it is fine”* (Caitlin, interview 23.5.2012). In contrast **Nomvelo** thought about being personally affected: *“I think the first one (Cosmopolitan), that I was reading was like: wow, she is brave. It makes me think about, what I would do in this situation”* (Nomvelo, interview 24.5.2012).

The next focus was “profitability - because EE programmes can attract the necessary commercial support to fund educational messages”, which could not be confirmed by the participants’ answers. Nevertheless, it can be assumed that the messages in women’s magazines are part of EE strategies which might have been supported by the publishing house or the magazine itself through free integration of the messages on HIV and AIDS. Laden’s belief, the magazine producer of *True Love* which has been committed to a “broader agenda of socio-semiotic change in South Africa” might confirm this finding (2001).

Finally, the focus “passion – because these messages can stir strong audience emotions about prosocial issues” became visible in the participants’ statements. **Nzokuhle** felt support and companionship: *“reading a magazine helps me to feel like I am not alone with having certain problems and issues and also for entertainment things; sometimes it is just entertaining to read”* (Nzokuhle, interview 23.5.2012). In contrast, **Gabisile** felt more informed and educated: *“sometimes magazines and other media can be informative in a sense that they can educate us/ me on what to look for, science that can tell you that there is an issue here, which is HIV and AIDS related. How can you then support that person or approach this person in order to be able to help them”* (Gabisile, interview 29.5.2012). **Justine**

expressed anger and irritation towards the story: *“I think in the True Love one maybe a little more kind of anger and that it was very much like that these women having to defend themselves against these men or like HIV and diseases and it shouldn’t be like that”* (Justine, interview 24.5.2012). In consideration of these results the participants were not just the passive audience, they could be motivated to discuss the embedded issues and became part of the debate.

Laden’s discussion of the functions of South African consumer magazines on three different levels underpin the contradictions and help to give an explanation. She defines them as ‘material goods’ that are a product of the print industry. Magazines advertise the consumption of products, but at the same time they are part of “cultural production of collective meanings in which they also construct a range of identity options for communities of individual readers” (2001:15).

Interaction with others

The relevance of interaction in order to change behaviour is part of the social learning/social cognitive theory. Bandura explains the effectiveness of social models in influencing another to change behaviour, beliefs or attitudes through processes such as observation, experience and social interactions (1977). Peter Jarvis points out the subjective reception by individuals and the transmission in form of interaction with others: “Individuals actually modify what is received and it is the changed version that is subsequently transmitted to other people in social interactions” (1987: 14). Because of this, it was my special interest to identify whether or not magazines were able to influence social interactions by the participants. In this context, **Prestage** shared not just the content with others but the magazine itself: *“in most cases we share ideas, we share information so when I read about condom wars I want my friend to read about it, so I’ll give them my magazine”* (Prestage, interview 23.5.2012). **Ausie** confirmed: *“Oh yes, (I discuss) things like this with my neighbours, we talked about like I read about this... especially with my friends, we talk about anything although it is not easy for people to come out in an open setting”* (Ausie interview 30.5.2012). It seems the magazine and its content was able to influence conversations, but just if the content was memorable and relevant for the participants.

There was no difference between participants, who had more critical points or read the magazine in a more superficial way when it came to sharing the content. If they had found the article on HIV and AIDS, it was highly possible that they would share the content if relevant and the situation appropriate, as suggested by **Caitlin**: *“yes, I would discuss the Cosmo one with my friends if it comes up in a conversation”* (Caitlin, interview 23.5.2012). **Gabisile**, who already shared an article that was discussed during the interview, stated: *“in fact, incidentally my husband and I talked about the article in the True Love magazine. We talked about it because we were exactly discussing the same thing I just said that your logical brain receives the messages about protect yourself, yes be truthful to your partner but also use the protection while having sex”* (Gabisile, interview 29.5.2012).

It seems that even if the magazine did not completely fit the participants' idea of valuable and gender-appropriate content, the health message reached the participants anyhow. In their eyes, HIV and AIDS was so relevant for South Africa that messages were accepted in women's magazines and would have been read if written in an interesting and stimulating way. Laden has mentioned the “large ‘pass-on’ readership” that was noticeable in her research on consumer magazines for black South African and which can be also interpreted as an interaction with others (2001:7). Almost all participants, when asked what happened to the magazine itself, stated to pass on the magazine to mothers, sisters, friends, domestic workers or colleagues:

Ausie: *“I don't throw it. I've got a cupboard, if somebody wants it, can take it and read it”* (Ausie interview 30.5.2012).

Justine: *“All my magazines get read by a lot of people and Bona, Move and True Love get passed onto my domestic worker and I know she passes them on to her friend”* (Justine, interview 24.5.2012).

Nomvelo: *“I'll have a friend over and they read it, my little sister, she often wants to read it”* (Nomvelo, interview 24.5.2012).

In this context it can be assumed that women, who would not buy a magazine by themselves, get in touch with the messages anyway. And the women who pass the magazine on, become a reference for the magazine: when they read the magazine and pass it on, it must be a relevant medium and interesting to read.

With regards to interactions, presented in women's magazines, Graeme Burton claims "the interactions represented in women's magazines are circumscribed, obviously with relation to roles. Interactions are referred to within the home, in leisure situation, in relation to children and beloved males, in relation to friends, in relation to professionals who are helping them with health issues chiefly [...]" (2005). This was also identified by the participants and described as stereotypes, typical roles or middle-class characteristic. **Lungelo** described the character in one magazine: *"from the Fairlady the character I would say is a typical married woman with children who thinks of her family even when the husband has done something wrong, so like what would the kids say and she is very forgiveness driven and compassionate in a sense also, so she's more motherly"* (Lungelo, interview 18.5.2012). She thought about the characters and her personal behaviour: *"That's what the Fairlady one actually has taught you. Yea, if I would be in a relationship, I would go for a test every year, just to know your status"* (Lungelo, interview 18.5.2012).

In this context, Laden identifies the construction of South African consumer magazines as "a shared repertoire of everyday experiences, lifestyle options and social practices, which is best described, from a Western or European standpoint, as typically middle-class or bourgeois" (2001:7). It can be assumed that the strong identification of the participants with the magazine content might be based on these portrayed everyday experiences and social practices. But within the presentation of everyday experiences and common social practises lies another contradiction. If women always have been portrayed in this way, they might accept common gender-roles and stereotypical behaviour and do not question their own responsibility and possibilities, which became clear in some participants' statements. The representation of women in media is also subject of Abebe Zegeye and Richard Harris' discussion on South African media (2003). They pointed out the need for a more nuanced picture, which is of special interest for women's magazines: "if the media is simply there to reflect reality, then there seems little we can do about this situation, and little means of changing the 'conventional' gender roles. But if the media is seen rather as a catalyst for change, and a creator of realities [...] then it is important that it does not report in ways that may reinforce old stereotypes" (Zegeye and Harris, 2003: 125). By extension, various participants expressed the wish for reworking the presented female roles in women's magazines.

Conflict of Interest with Women's Magazines

A variety of positive effects such as creating awareness and providing important information for women and enabling motivation, relaxation or inspiration were mentioned earlier.

However, there were also noticeable negative effects. Gender stereotyped pictures exert an especially negative effect on body image and body satisfaction, resulting in lower self-worth (Cusumano and Thompson, 1997; Garner et al., 1980; Posovac et al., 1998). My study does not analyse these effects, but considers them. In the context of HIV and AIDS related questions during the interviews, the participants criticized different aspects of women's magazines. Their critique was not so much on body images or appearances of integrated models, but more on female roles and behaviour of female protagonist, presented in the articles.

For some participants, it seemed too easy to shift the responsibility just to men and leave the women as either victims or seductress. The focus of most magazines on fashion or sexual tips was too superficial and put women in a passive role in order to attract men. The participants asked for an even stronger focus on women, and their possibilities to act and take responsibility. "Media tend to present women not just in South Africa in this manner, but also worldwide", as pointed out by Zegeye and Harris (2003). This is especially in situations of social conflict, which is applicable to HIV and AIDS in South Africa "the situation is often even worse, with women being portrayed almost exclusively as victims or demons" (Zegeye and Harris, 2003: 124). With regards to this conflict, **Justine** recognized the presentation of women as always the "weaker sex" (Justine, interview 24.5.2012). **Prestage** considered: *"They shifting the blame from us to the guys, yet we have to negotiate for safe sex because after all it is our lives. So I think they need to be more on us, because it is our lives, our decisions, our choices, rather than making it a man thing and the guys give us excuses and we always give in"* (Prestage, interview 23.5.2012).

The focus on sexual aspects leads to further critique and questions the credibility and realistic approach of the integrated story. Despite most of the participants' believing that the stories were generally true, they criticized exaggerated elements. The core idea of the story seemed to be appealing, but then it drifted off and the participants could no longer connect. **Justine** questioned the extent of presented sexual activities: *"with the Fairlady one the only thing I find there is a lot of these articles, those like my partner lives a dangerous secret sex life, and that lets it sometimes sound too far away. I know my husband it not going to have a dangerous sex life, I really do believe that but*

sometimes they can have an article like your partner had a one night stand and this is the result, because that is more realistic” (Justine, interview 24.5.2012). **Marlini** missed certain aspects of the disease: *“But it doesn’t tell you what it is that you are getting and how bad it really is, it just said use a condom to not get HIV but do people really know what it is? Do they really know the extent of what the disease is and what impact it will have on your life?”* (Marlini, interview 29.5.2012).

For **Lungelo** *Cosmopolitan* did not connect to the lives of black South African women and, in particular, the focus on sexual stimulating topics revoked its relevance as a serious social situation: *“The question that I have with Cosmo is I think, they’re not really focusing on black people with HIV and AIDS, they focus on how or the best position while having sex, they wouldn’t say anything about HIV prevention and with Cosmo I think is it really relevant to South Africa?”* (Lungelo, interview 18.5.2012). Not just the relevance was sometimes questioned, but some participants missed new information or information presented in a new way, as mentioned before. They criticised the predictability of stories and the unappealing presentation of already known content.

Varona commented: *“it is just generally that most magazine formats are very foreseeable, so even while you are reading, you know more or less, what’s to be expected, because it follows the set regime of categories”* (Varona, interview 23.5.2012). **Justine** mentioned: *“But a lot of time it is the same like you need to check your partners status, and use of contraceptives. I had so much of that when I was at school and even at university and also in a fulltime committed relationship; maybe I don’t think it is as relevant”* (Justine, interview 24.5.2012).

In particular the discrepancy between sexual advice and the need for prevention are part of this conflict in which most of the participants found themselves: they enjoyed reading magazines, but questioned and critiqued them at the same time. This can be linked to the discourses on the “double-edged” nature of women’s magazines (Winship, 1987) or the “contradictory consciousness” discussion (Damon-Moore, 1994) that reveals the dual character and the conflict of interest encoded within the magazines. Based on the interviews with the participants it can be gleaned that the stronger the conflict, the less the influence of the magazine on readers’ lives and personal experiences. Norval (2011:10) identifies this conflict and describes it as “simultaneous attraction and rejection towards women’s magazines; on the one hand finding pleasure their escapist quality and recognising their mass popularity, but on the other, feeling a strong sense that to be a feminist, one must reject the construction of

womanhood put forward by most popular women's magazines". This links again to integrated stereotypes and Laden's definition as 'material goods' and 'cultural tools' at the same time (2001).

According to the participants' answers, it can be summarized that magazines suffer from stereotypical messages and sex-focused content but surprisingly the relevance of health messages did not suffer the same criticism. Most of the participants accepted messages on HIV and AIDS in the context of stories about sexual activities, relationship challenges or advice about fashion, make-up and lifestyle. **Gabisile**, who criticized aspects of the magazines earlier, still found credibility in the embedded health messages, even in the context of controversial messages on sex: *"Yes, I do because I think you can still enjoy a healthy adventurous sex life but still protect yourself. The key is knowing how to protect you, knowing how to deal with HIV as a topic but as a topic that is subservient to trying to live a healthy sexual lifestyle"* (Gabisile, interview 29.5.2012). **Prestage** pointed out the balancing function of these messages *"I think is good that these articles [on HIV and AIDS] are put in, at least somewhere you're balancing it out"* (Prestage, interview 23.5.2012). The dual character of women's magazines seems to substantially influence the interaction with them: enjoyment versus rejection, entertainment versus education, female focus versus male influence, and sexual inspiration versus need for protection. This characterizes the conflict that the reader might experience and which are unique for this medium.

CHAPTER SIX – CONCLUSION

The study discovered the relevance and reception of HIV and AIDS messages in women's magazines in the context of health communication. The primary emphasis was on media reception and the way in which women made sense of women's magazines. Therefore, the study focussed on media consumption, influences of women's magazines and personal interpretation of embedded messages. As an overall result the analysis reflects a positive picture and interpretation of women's magazines by the participants, but it also shows their dual character. Contradictions and critique on content were expressed, positive and negative features were identified, female stereotypes and at the same time the enjoyment of reading was noted.

With regards to health messages the participants' reception was predominantly positive and various content elements seemed to be relevant for them. Because HIV and AIDS in a South African context is of such importance, the integration of messages influenced the overall acceptance of magazines in a positive way. Not only do HIV and AIDS influence the South African perspective on women's magazines, but also participants' social lives, interactions with others, reasons for interest in the magazine, cultural diversity, financial and educational differences and gender roles and stereotypes. As a result, South African women's magazines cover these aspects in different ways and thus provide the basis for both critique and praise by the participants. The participants in turn consumed the magazines differently in terms of length and intensity of reading, which influenced the reception of HIV and AIDS messages significantly. A highly influential factor in stimulating motivation to read women's magazines and interact with the content on HIV and AIDS was identified. This can be described as 'relatedness' in accordance to self-determination theory (Bryant, Vorderer, 2006). It describes the participants' connection to the magazine itself, their protagonists, incorporated role models and narrative themes of magazine articles.

Women's Magazines in a South African Context

The participants' consumption occurred in different ways and correlated directly with the reception of HIV and AIDS messages. The different forms of consumption are confirmed by the uses and gratification approach, which states that readers use the media for a variety of

reasons and in completely different ways (Watson, 1998). The participants used the women's magazine differently in order to gratify their needs. Based on these needs, they accepted some messages (e.g., the educational health message) but simultaneously rejected other messages (e.g., the gender-stereotyped message on lifestyle or relationships). This is, according to Watson, the core concept of the uses and gratification theory (1998). The participants not only consumed the magazine differently, they also have shown different needs underpinning why they consumed the magazine. These needs might be relaxation from everyday lives, distraction from work or housework, self-affirmation as a woman or creating a sense of community with others.

The following illustration shows the correlation between consumption and reception of HIV and AIDS messages, and classifies the identified forms of consumption. The 'superficial consumption' can be described by a low intensity of magazine reading and therefore a restricted reception of HIV and AIDS messages. 'Consumption to bridge' depends on the length of the waiting situation but can also be described by a lower intensity and restricted reception. 'Consumption for relaxation' and 'belated consumption' are characterized by a higher intensity in terms of reading and reception. 'Consumption to enhance femininity' and 'exaggerated consumption' included most intense reading and resulted in higher reception of HIV and AIDS messages than the other forms of consumption (see Figure 11). These modes are influenced by the social lives of readers and can change of the basis of available time, personal interest, relevance of content or influence by others.



Figure 12: Consumption of Women's Magazines and Reception of HIV and AIDS Messages

Not only did consumption occur in different ways, there were also many ways to make sense of embedded messages. Sense-making by the participants was strongly influenced by their personal lives, social interactions and backgrounds. The relevance of the magazine for participants, and therefore the consumption, was also influenced by the representation of women in the magazine. Certain participants critiqued the presented female roles, others accepted or ignored them. Overall the presentation of women influenced the acceptance and the appreciation of women's magazines as a "feminized space" and Zegeye and Harris's conclusion on media's role matches the participants' opinions and point out the importance "that South Africa recognizes the role of women in its peace process and in the continuing struggle against social problems such as poverty, HIV-AIDS and sexual violence" (2003: 127). If magazines want to be part of it, it is necessary to shift the presentation from (stereo)typical pictures of women towards more contemporary roles and embrace female self-consciousness and responsibility. In this context the magazine *True Love* seems to be the best example for well-balanced content. Although it covered a similar range of topics, the tonality of stories, the balance of entertaining and educational aspects, interesting twists within the articles, and embedded characters and protagonists were very positively assessed by the participants.

The participants' assessment of the five most circulated and, therefore most read magazines in South Africa, was different. *True Love* and *Fairlady* were preferred by all readers, in which *True Love* was preferred by black readers and *Fairlady* by white readers. *Bona* and *Move!* were assessed as being the most strongly focussed on South African people, but *Move!* seemed to be more for lower income target groups, as discussed by the participants and confirmed by the magazines' target group description. *Cosmopolitan* was the magazine with a high appeal because of its inclusion of celebrities and 'glossy' character, but at the same time the content was ranked as superficial and only capable of entertaining. In the context of health messages on HIV and AIDS *True Love* and *Fairlady* seem to be best suited to embed stories and messages and the results show different ways how people make sense of the magazine's content.

In the Context of Entertainment, Motivation and Relatedness

Women's magazines aim to entertain and inform, as discussed and confirmed by the participants. According to Bryant and Vorderer "someone who is seeking entertainment usually does so for its own sake, that is in order to experience something positive, such as enjoyment, suspense, amusement, serenity and so on" (2006:6). These reasons matched the participants' statements, who seemed to consume the magazine exactly on this account. The reader is not reading the magazine because of the entertainment she is already experiencing, but because of the entertainment she is expecting. Therefore, Bryant and Vorderer describe entertainment as "intrinsically motivated response to certain media products" and the state of motivation is crucial in order to consume the magazine (2006).

Motivation was discussed earlier and is identified as an important stage, according to social cognitive theory, in order to enable behaviour modelling (Bandura, 1995). The participants have shown motivation to a different extent and this extent can also be linked to the form of consumption. The more the participant was motivated to read the magazine, the more time she spent with the magazine and read its content. In this process, motivation was influenced by certain reasons such as expecting novelty value of the article, being entertained and relaxed, experiencing a moment of escape, getting visually stimulated and interested, being able to link personally to the story and the protagonists, or experience understanding of personal needs as a woman. Bryant and Vorderer describe them as an "appeal of novelty, [...] challenge, [...] or aesthetic value" and later on they consult the so-called self-determination theory, which can be described as the next stage of the social cognitive theory (2006: 6). The highly interesting aspect of 'relatedness' is mentioned within this theory. This seems to be a crucial factor for the motivation to read women's magazines. Originally it is identified as a third human need that helps to strengthen intrinsic motivation and evolves for example between friends, peers or teachers (Bryant, Vorderer, 2006).

Based on participants' statements and their synonyms for magazines such as 'friend' or 'bible', or the confirmed entertaining-educational character of the magazine, 'relatedness' seems to be important in inducing motivation. It can be applied to the context of health messages. With regards to HIV and AIDS messages, it might appear in form of relatedness to the protagonist (e.g., a woman, of the same age and ethnic background), relatedness to the social situation (e.g.,

married, working mother, large family), relatedness to the social problem (e.g., confrontation within family, argument with partner, discussion with friends), relatedness to cultural values (e.g., self-realization, representation of women, seek marriage, satisfy partner) and relatedness to visual representation (e.g., ethnic identity, age, status symbols).

The extent of motivation therefore varied from participant to participant, but two general conclusions can be made: Firstly, the participants stated to have been very informed about HIV and AIDS and this reduced the interest in stories on aspects they already knew about. In this case a novelty factor was missing. In order for women's magazines to get participants' attention, a more detailed, new, special, surprising or different perspective is necessary. If that happened, their attitude towards women's magazines would be so positive that the message would come across better. Secondly, the affectedness of the participants influenced motivation. If the participant was not affected by HIV and AIDS in their families or communities, their interest in this topic was much lower. This confirms the idea of 'relatedness'; the participants could not relate much to the story as they did not feel 'situationally related'. The concept of relatedness in the context of health communication messages seems to be an interesting aspect for future research, especially in the context of entertainment education, motivation for behaviour change and the self-determination theory.

Duality of Women's Magazines and Female Community

The dual character of women's magazines, also discussed as "double-edged" nature of women's magazines (Winship, 1987), the "contradictory consciousness" discussion (Damon-Moore, 1994) and the "simultaneous attraction and rejection' towards women's magazines" (Norval, 2011) was identified and confirmed. It describes an on-going conflict, which the participants experienced, between the pleasure and entertainment of reading a magazine and the consciousness of reprehensible stereotypes and female roles, embedded in health messages. Laden explains both these sides of interacting with women's magazines based on the character of being 'material goods' and 'cultural tools' at the same time (2001). Although the general assessment of the magazine suffered from stereotypical messages, the participants could still find sense in most of the embedded health messages. Because they were aware of the duality of women's magazines, they accepted dual messages on sexuality as well: pleasure and experiences

on one hand and protection and risk of HIV and AIDS on the other hand. In the light of entertainment education, the effectiveness of health messages is based on various factors, which might be relevant for women's magazines as well. Kimani Njogu, who discussed EE with regards to Africa, identified these factors and, in particular, the demand for "cultural sensitivity and appropriateness", "constructing effective stories [...], powerful stories that have twists and turns at times quite unpredictable" and "creating powerful female characters" are crucial for women's magazines (2005:54).

Donnelly considers women's magazines as a genre produced by and for women and it "adds a sense of an 'imagined community' to it" (2001:15). This sense was confirmed by the participants and not just the production by women, but also women's concerns, interests and experiences as the centre of the integrated stories, were highlighted by the participants. Ferguson compares this focus with a cult or religion and from her perspective the editors of the magazines are extremely important as 'custodians' of the 'feminine cult' and by setting the 'feminine agenda' within the 'scripture' of women's magazines (1983). Therefore, the magazine should be aware what kinds of stories are embedded and messages transferred in order to serve their 'female community'. Laden suggests in this context that "to consider printed artefacts not simply as sources for ideas and images, but as both indicators of and contributors to social relations" (2001: 7). Because women's magazine include 'local knowledge', which means shared ideals, values and knowledge by everyone in a given culture, a sense of community for the participants can arise (Laden, 2001: 7).

Educating Educators

As a result of the interviews, based on women's magazines target groups, the average price of magazines and in the light of the 17,5% illiteracy rate in South Africa, women's magazines seem to be an exclusive media channel in comparison to, for example, TV or radio (UN, 2005). In accordance with this, magazine readers tend to be above average in education, usually with a higher income, and based on the participants' profiles, socially active and interested in interactions with family, friends and colleagues. Their role can be described as a form of 'opinion leader'. According to Sven Windahl et al. "these are people who tend to consume more media output, discuss certain themes with others, and participate more in organizations

than others do in their immediate environment” (2009: 70). They play a role as “experts for others, mediating information gathered in the media” (2009: 70). Opinion leaders translate their own interpretations and perceptions and pass them on to ‘followers’ (Windahl et al., 2009).

The findings indicate that the participants were already aware of risks, transmission and effects by HIV and AIDS and more interested in background information, impact of the disease, case studies on other women, support for affected people and so on when considering this information as they interact with others. It seems that they might adopt the role of an ‘educator’ and source of support for others and act according to the role as an opinion leader. The role of opinion leaders is further described in the two-step flow approach that connects mass and interpersonal communication. The approach suggests that “the audience is composed of social beings who communicate among themselves” (Windahl et al., 2009: 72). This was confirmed by the participants and the integration of consumed health messages on HIV and AIDS in their interaction with others. As a consequence of ‘talking to opinion leaders’, women’s magazines need to consider their integrated health messages in order to gratify the specific needs of the readers for on-going new information. The discussion and verification of opinion leader communication by the magazines might be an additional aspect for future research, considering the two-step flow theory.

SWOT Analysis of HIV and AIDS Messages in Women’s Magazines

Overall the discussion about women’s magazines was characterized by contrasts of positive and negative features, feedback and opinions. The following table summarizes them and underpins the need for a strategic decision if, how and when women’s magazines become part of health communication campaigns for HIV and AIDS. According to Charles Bamford a SWOT analysis is “a form of analysis, resulting in a listing of [...] strength, weaknesses, opportunities, and threats” and is usually applied in order to enable strategic management decisions but also helps to summarize substantial findings of my study (2010):

Strength of women's magazines in the context of HIV and AIDS messages	Weaknesses of women's magazines in the context of HIV and AIDS messages
<ul style="list-style-type: none"> • Enable pleasure and relaxation • Can create a feeling of 'relatedness' • Custom-made messages for women • Create a sense of 'female community' • Talk to an important target group in order to spread the message, readers are 'opinion leaders' • Medium fits into EE strategies and enables entertainment and education at the same time • 'Cultural tools' and integration of 'local knowledge' (Laden, 2001) 	<ul style="list-style-type: none"> • Dual character of women's magazines (pleasure of reading versus consciousness and rejection of female stereotypes) • Presentation of women often as passive and influenced by male perceptions • Responsibility shift to men • Portrayal of women often as "victims" • 'material goods' and therefore a strong focus on advertising and profit (Laden, 2001) • Often unrealistic elements of messages and exaggerated presentation of sexual activities
Opportunities of women's magazines in the context of HIV and AIDS messages	Threats of women's magazines in the context of HIV and AIDS messages
<ul style="list-style-type: none"> • Reach women in a relaxed mode and the reception of embedded message is more likely • "Female community" character helps to focus on women within health messages • Women's magazines target groups are suitable to pass on the message to friends, family, colleagues • Background stories, case studies of other women, advise, and stories with a high novelty factor are likely to be read by women 	<ul style="list-style-type: none"> • Readers do not take the magazines seriously because of controversial messages on female and gender roles • The embedded message get lost within the entertaining content • Readers are more interested in entertaining content on fashion or beauty, and do not read the health message • The magazine is too expensive in order to reach a broad audience

Figure 13: SWOT Analysis of HIV and AIDS Messages in Women's Magazines

The interviews have shown a strong desire by the participants for more detailed stories and information and, in order for health messages on HIV and AIDS to get their attention, it

might be important for magazines to expand their thematic fields of stories. Beth Schneider discusses, with regards to women, various major psychological communication issues of HIV and AIDS. They could be interesting to consider and to enhance the relevance of included stories (1995). In the light of readers as opinion leaders and their participation in social interactions, the following extract includes interesting aspects for further stories (Schneider, 1995:129):

- Dealing with denial of the seriousness of HIV and AIDS by friends, colleges or family
- Decision making about life changes of HIV positive people (nutrition, sport activities, job)
- Coping with denial, anger, depression or preoccupation of HIV positive people
- Possibilities of an active public role regarding HIV and AIDS (counselling, volunteering, spokesperson)
- Helping, counselling, supporting partner/ friends/ family to cope with HIV and AIDS
- Finding information or giving information about HIV and AIDS (study results, organisation, research activities, websites)
- Dealing with the anticipated death of a partner/ friend/ family member
- Talking to a child about the disease and risks.

In conclusion, the decisive factors for health messages on HIV and AIDS in women's magazines, identified in my study, are: **motivation** as an important stage according to social learning/social cognitive theory in order to enable behaviour modelling; **relatedness**, originally identified as a third human need within the self-determination theory, which helps to strengthen intrinsic motivation; the **dual character** of women's magazines as an on-going conflict between the pleasure of reading a magazine and the consciousness of reprehensible stereotypes and female roles; the **sense of female community** and finally, the role of readers as **female opinion leaders**. These results present women's magazine as a multifaceted medium and might influence future research and programmes for health communication on HIV and AIDS prevention.

Because the content on women and the different perspectives on it is so important, a deeper insight might be relevant for future research and could highlight who and how the content of South African magazines is decided, what kind of information is used and from what source.

Especially in the context of HIV and AIDS, it is of special interest what kind of feedback reaches the magazine and how participants respond.

Generally, women's magazines are able to participate in health communication for HIV and AIDS, especially in dialogue with women. There is a strong need coming from participants for focused, relevant and sense-full content in order to induce motivation and stimulate reception, interpretation and exchange of embedded messages.

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APPENDICES

APPENDIX ONE: Interview Questions

General Questions

Name	
Age	
Occupation	
Gender	
Highest education	
Ethnic background	
Place of living/ location	
Relationship status	

Health Related Questions

1. In general, how is your health?
2. In the past month, how often has a health or emotional problem occurred?
3. If you wanted to get information about sexual health, what are your resources?

Friends		Family	
Newspapers		Magazines	
Television		Internet	
Books		Hotlines	
Public health campaigns		Health provider/ clinic	
Other:			

4. Are you affected by HIV and AIDS within your community or family?
5. Do you use contraceptive methods? Which one(s)?

Media related Questions

6. What kind of media do you usually use?

TV		Newspapers	
Women's magazines		Internet	
Radio		Others:	

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

Bona		True Love	
Move!		Cosmopolitan	
Fairlady		Others:	

8. When, where and why do you read women's magazines?
9. When was the first time you read a women's magazine?
10. Describe a typical situation of when you are reading a women's magazine.
11. What is happening (to you) while reading magazines? Do you have any questions while reading?
12. In your opinion, which magazine is the most interesting?
13. What kind of topics are you interested in and what information are you looking for?

Fashion		Health	
News		Sport	
Celebrities		Travel	
Make-up		Weight	
Personal stories by women & girls		Success and motivational stories	
Others:			

14. After reading the magazine, what happens to the magazine itself?

Magazines & HIV and AIDS Related Questions

15. Which of these health related topics have you ever discovered in a women's magazine?

Fitness or exercise		Sexually transmitted diseases, e.g., HIV and AIDS	
Cancer		Heart diseases	
Diet/ nutrition		Mental health issues	
Sexual abuse		Physical abuse	
Alcohol use		Drug use	
Sexual activities		Contraception	
Pregnancy		Medicines/ Pharmaceuticals	
Smoking cigarettes		Violence	
Others:			

16. Why do you think these topics are included?
17. How interested are you in articles on health, particularly on HIV and AIDS?
18. Do you pay attention to HIV and AIDS messages?

Article Related Questions

Please have a look at these five articles on HIV and AIDS and choose two. Please read those two articles.

19. Why did you choose those two articles?
20. What the specific issues are being talked about in these articles? Do you think these articles are true?
21. Who do you think the message is directed at, and why do you say so?
22. What sense do you draw from these articles personally (if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles “suffer” from articles on sex/sex life tips etc.?
23. Is it worthwhile it having such messages?
24. What feelings did these articles provoke in you?
25. Was there any kind of knowledge, attitudes and practices about HIV and AIDS you got from the articles? Was there something new for you?
26. Has reading these articles helped you in understanding HIV and AIDS?
27. Would you discuss these articles with your friends or family?
28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?
29. Is there anything in these articles that you find educational or entertaining?
30. What have you learnt from the characters in the article (if a character is introduced)?
31. Do these articles give you skills to deal with similar issues in your real life?
32. Does the included information help you? How, why or why not?

THANK YOU.

APPENDIX TWO: Magazine article used during interviews

Fairlady, no. 05/2012

Title of article: “My partner led a dangerous secret sex life”

Content of article: This article is written in form of a “human-interest article”, which starts with an anecdote and is chronically organised (Pawlik-Kienlen, 2008). It deals with relationship issues, infidelity, betrayal, and HIV and AIDS as a consequence, described from the perspective of a married woman. She believed having a long-term and reputed stable relationship, but is confronted with her partner's HIV positive status and his secret extramarital sexual activities in the form of orgies, sex with different partners, sexual fetishes and pornographic activities. She described her journey from getting to know each other, his wealthy and privileged background, the moment of finding out about his status, her test and negative result, talking to their children, and more. She has to deal with different emotions, is scared by the disease and how he put her at risk but finally decides to forgive and support her husband and start a new chapter in life. After month of therapy and discussions she must face that her husband is not able to change and still involved in hazardous sexual activities. Eventually she ends the relationship and starts to move on.



Bona, no. 01/2012

Title of article: "HIV Q&A: Dear Criselda"

Content of article: The article is presented as a Q&A and covers a column by Criselda Kananda, a South African celebrity (radio DJ, motivational speaker, counsellor and ex-nurse). She has been diagnosed as HIV-positive and since then she has been actively involved in HIV and AIDS prevention campaigns, programmes and activities such as this monthly column in Bona. The January issue includes questions on the impact of the virus, support groups, transmission incorporated in personal stories.

HIV Q&A

Dear Criselda



HIV or Aids-related question? Lonely and confused? Don't despair! Radio and TV personality Criselda Kananda is here to answer your questions.

Whether or not HIV will be what causes someone's death, might not be clear. It's possible to have HIV and die from something else, because people with HIV are still vulnerable to other causes of death, such as cancer or even a car accident. This is probably not a cheerful thought, but just a reality check.

ANY QUESTIONS?
Write to: Criselda at HIV Q&A, PO Box 427604, Parklands, 2101. Your questions go to info@positive.co.za

WILL YOU KILL ME?
I was diagnosed with HIV eight years ago. I started asking questions then and learned how to live with this infection. I've never been ill or hospitalised. My friends and relatives don't believe me – I have to show them my results to prove I'm HIV positive. My CD4 count remains high. I eat well and do exercise three days a week at home. Even though my health is good, I would like to know if HIV infection always leads to death.
Sydney, Buffalo City

DEAR SYDNEY: I would like to commend you for making your health your responsibility. I wish more South Africans can view HIV infection as you do. Since there is currently no known and recommended way to get rid of HIV from the body once someone is infected, most people with HIV or any viral infection will probably still have the virus when they die.

ANY THERE LESBIAN IN SUPPORT GROUPS?
We are a lesbian couple; one of us is HIV-positive and one partner is not. We stay in Gauteng and wanted to find out if there are any HIV centres where people gather to talk about HIV-related topics and where we can get support or counselling?
Prinzi and Steph, Johannesburg

DEAR PRINZI AND STEPH: Congratulations for managing your status as a couple. You can decide whether you want to join a counselling group as a lesbian couple or as a couple wanting information about managing HIV. Choosing to join a group specific to lesbian challenges would help you deal with other issues too.

As a lesbian couple, among other topics, you should be concerned with treatment of opportunistic infections and maybe enquire about surrogacy should you want to have children. Belonging to a support group would also strengthen your resilience to some of the stereotypes lesbian couples face.

For more information, contact Gay and Lesbian Memory in Action (GALA) on 011 717 4239 or info@gala.co.za.

MY HUSBAND CALLED ME AN IDIOT
I'm a 40-year-old married woman. In May last year I went for an HIV test which was positive and I immediately informed my husband via SMS. His response was: "I'll support you." However, when he got home I was surprised to discover he has already been on HIV treatment for two years. What makes me angry is the fact that he knew he was HIV-positive while having unprotected sex with me for all those years. I need counselling because I don't talk to anyone about it.
Christina, Limpopo

DEAR CHRISTINA: I sympathise with you and can almost say I know how you feel. Despite your anger and bitterness these feelings will not rid you of HIV. The best thing you can do for yourself is to let go of the blame and anger, and take responsibility for your own health.

Research has shown that once you are on ARVs and your viral load is undetectable, the risk of re-infecting your partner is minimal. This means that if his viral load is undetectable, you are his biggest health risk because the more stressed out you are the more sick you will become.

You're right you do need counselling. Change your negative outlook to a positive one by asking a counsellor questions that will help you live positively with HIV.

Contact National Counselling Line on 0801 322 322 for more information.

POSITIVE TALK: Criselda Kananda's CD Positive Talk explains why it's important for you to know your status. She gives simple explanations of the medical terms used when it comes to HIV/AIDS, and suggests treatment options. The CD also includes the song, Beautiful Woman, celebrating inner beauty.

For more information or to order the CD, you can contact Criselda at:
E-mail: info@positivetalk.co.za
Fax: 086 877 5480
Web: www.positivetalkservices.co.za

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True Love, no. 03/2012

Title of article: "Condom Wars"

Content of article: The article includes anecdotes and quotes by different women, some with a humorous touch. It covers the aspects of negotiation and protection during sexual activities, condom use, includes gender perspectives and situation where different opinions of women and men are common. Especially the tricks used by men to not wear a condom and convince their partners, as described and discussed by nine different women. It explains the risk for women in giving in and shows different responses to their partner's refusal to use a condom. Tricks and common statements on skin on skin experiences, more pleasure and trust are included and ways for women to say no are shown.



Title of article: "What it feels like to date an HIV-positive man"

Content of article: This article can be described as an "inspirational article" and offers a moral message (Pawlik-Kienlen, 2008). It talks about a relationship between an HIV positive man and a HIV negative woman. It described her perspective, her journey and the situations she is dealing with in her community, family and partnership as a result of their status. It specifically deals with moments such as deciding about dating this man, creating a trustful and loving relationship despite the disease, informing the family, support by friends, discussion with doctors and concrete sexual practices. The story shows the possibility of living with HIV and AIDS.



Title of article: "Positive heroes: Finding love and healing"

Content of article: This "human-interest" article describes the journey of a sero-discordant couple (where one partner is HIV positive and one negative) (Pawlik-Kienlen, 2008) including medical aspects and procedures. Specifically, the question of whether or not it is possible to have a child together in this situation is explained. Aspects such as new procedures, medication, and doctor's guidance are combined with the story of a "real couple". The couple discovered that the man is HIV positive after their first child. The woman who is HIV negative left at first but decided later on to continue the relationship despite the disease. The reunited couple decided to have another child and discover different possibilities such as artificial insemination.

positiveheroes

Finding love and healing

By acknowledging his status and learning all about HIV, Andile was able to add value – and another child – to his family, writes **Katleho Khoaele**

Is it possible for a sero-discordant couple (where one partner is HIV positive and the other is HIV negative) to safely have a child together? Yes, it is. With the help of new procedures, medication and a doctor's guidance, many couples are able to conceive without transmitting the virus to each other, or to their unborn child.

Andile's story
Andile Madondile (33) was born at Sticksport in the Eastern Cape, but he's currently living in Khayelitsha in Cape Town.

He met his partner Axoliswa in 1999 and they were blessed with a baby girl in 2001.

He later started getting sick, losing weight and suffering from diarrhoea, not knowing that he was HIV positive.

A good friend suggested he go for a test, and that's when his life took another turn. He was diagnosed with HIV in 2004. It was a shock to both Andile and Axoliswa.

"I tested positive and didn't believe the results," he recalls. "I was in denial for the longest time. I didn't attend counselling because I didn't believe that I was carrying the virus. It was the hardest time of my life because my partner left me to care for our three-year-old daughter alone and I was hurting."

"At the time, I was working as a hair-stylist and had to also disclose my status to my boss because I was always absent from work so I had to go for check-ups at the clinic."

He was fired because his boss told him he could not have someone who was HIV positive working for him. According to the Employment Equity Act, it's illegal for an employer to fire

an employee for being HIV positive. Andile says: "I tried committing suicide, but I was saved by my daughter."

Seeking a cure
Although he told his partner and his boss, Andile told no one else for fear of embarrassment. But after a few months, he disclosed to his mother. She suggested he go to Welkom to seek help from a man who could cure HIV.

"I went there to meet this man whom my mother believed could help me. While waiting for him to attend to me, I watched TV. It was then that I saw the documentary about Zackie Achmat, the HIV activist and founder of the Treatment Action Campaign. Right then and there I decided to go back to Cape Town."

He started taking his ARVs in 2005 and joined a support group. "I was often told that I wouldn't live for long

because my CD4 count was too low."

"But joining the support group was the best thing I could have done for myself because I learned so much about the virus. I became a TAC member and a peer educator at clinics."

Things start looking up
He was feeling better and had gained weight. His ex-partner called him after seeing him determined he was to change his life.

"She apologised and told me she wanted to help me. The reason she left in the first place was because she was scared. I took her back and we started living life positively."

In 2007, they decided to have another child. Andile's CD4 count was 495 and the doctor told him he could have a child.

"I was given an option of doing a sperm wash (when the sperm is separated from the seminal fluid and is used for artificial insemination) because I didn't want to infect my partner. But the procedure was expensive." Luckily, they found sponsors who helped them make their dream come true.

There's always hope
The couple had to go to the doctor and confirm their status. Axoliswa was pronounced HIV negative and allowed to undergo the procedure.

"We didn't have sexual intercourse to become pregnant because it was not necessary," explains Andile. "My sperm was artificially inserted into my partner during her time of ovulation. Both mother and child are HIV negative."

These days, Andile is happy with his family. He wants to educate more people about HIV.

Happy times: Andile Madondile and his wife Axoliswa



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APPENDIX THREE: Transcripts of Interviews

Transcript A: Caitlin W.

Date of Interview: 23.05.2012

Length of Interview: 33,5 min

Location: University Office

Information about Interviewees

Name	<i>Caitlin W.</i>
Age	<i>24</i>
Occupation	<i>Masters student</i>
Gender	<i>Female</i>
Highest education	<i>Honours</i>
Ethnic background	<i>White SA</i>
Place of living	<i>Durban, Morningside, shared living, in a distance relationship</i>

1. In general, how is your health?

CW: I am pretty healthy. I mean I have some intolerances but otherwise yeah pretty healthy.

2. In the past month, how often did a health or emotional problem occur?

CW: My boyfriend is living overseas, so emotional problems are there all the time. In terms of health I think twice and a mini stress breakdown once in the past three month but nothing to report on or going to the doctor.

3. If you wanted to get information about sexual health, what are your resources?

CW:

<i>Friends</i>	<i>2</i>	<i>Family</i>	
<i>Newspapers</i>		<i>Magazines</i>	
<i>Television</i>		<i>Internet</i>	<i>1</i>
<i>Books</i>		<i>Hotlines</i>	
<i>Public health campaigns</i>		<i>Health provider/ clinic</i>	<i>3</i>
<i>Other:</i>			

4. Are you affected by HIV and AIDS within your community or family?

CW: My boyfriend's uncle has HIV and AIDS and our domestic worker, she was with our family for 30 years, when she passed away from HIV and AIDS.

5. Do you use contraceptive methods? Which one?

CW: Yes, condoms and the pill.

6. What kind of media do you usually use?

CW:

TV	3 twice a week	Newspapers	2 once a day
Women's magazines	4 when I come in contact with them	Internet	1 all day
Radio	5 daily	Others:	

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

CW:

Bona		True Love	x
Move!		Cosmopolitan	x
Fairlady	x	Others:	

8. When, where and why do you read women's magazines?

CW: It depends if either my sister or my mom has bought one or my friends, you know they've bought one, it is lying around, and I would page through or from waiting somewhere at the doctor's office or the dentist then I page through it, waiting in the line sometimes in the shops I pick up a magazine, I hardly ever buy a magazine. I think just because I can't wait to read it and somebody is always having a magazine, so when I am waiting around I read magazines.

9. When was the first time you read a women's magazine?

CW: Probably midteens, between 14 and 16 somewhere there. I didn't buy it but my mom she used to read Fairlady, so I picked it up then but I wouldn't have really interested in, even my older sister, she used to read Cosmo and I paged through the pictures but didn't be really interested or speak about it. Yea, so midteens....

Cosmo was always known for their sex advice and that was interesting, when we had no idea of anything. I remember that from Cosmo, not from Fairlady.

10. Describe a typical situation reading a women's magazine.

CW: Usually if I am waiting somewhere, so either I would be at a friend's house or with my mom, she would have gone out and I'll be waiting around, so it would be a timefiller, sitting on the couch and browse through it. Usually go from the back to the front, I think how to see, how the articles are ending, like how long and whether they are interesting and then I browse through it and only articles that I read are from Fairlady. Cosmo I would literally just browse through it because I am usually not that interested. So usually I am waiting around somewhere.

11. What is happening while reading magazines? Do you have any questions while reading?

CW: Interested, time goes faster, so be interested in and relaxed I suppose. I don't think I have ever read a magazine, when I have been stressed, because this is always a time, when you are in a hurry. I'd feel more relaxed. I'd feel there was anything to do, except reading the magazine. Sometimes bored or a bit of a letdown, especially with the Internet, the Internet has actually ruined my reading of magazines, because I usually read the information they have talked about already, so

either I read other thing where they got information from, so for example the media, I am following a lot of blogs and by the time I am reading the article I am like: oh yeah, I saw this you know like I have read about that...

Sometimes questions come up, why they write about something. When I am reading it, I look back on the cover and asking who are they targeting and why are they writing this article, I am just interested usually from a media perspective how their actually write the article, questions like that come up. Why have they chosen that angle? But questions I would research further not really. Because I read the article that I come in contact with I had the information before, so usually I just look at the angle.

12. In your opinion, which magazine is most interesting?

CW: I have to say Fairlady.

13. What kind of topics are you interested in and what information are you looking for?

CW:

Fashion	3	Health	
News		Sport	
Celebrities		Travel	
Make-up		Weight	
Personal stories by women & girls	1	Success and motivational stories	2
Others:		Politics Recipes	1

14. After reading the magazine, what happens to the magazine itself?

CW: I put it back where I have got it from, I don't know what they actually do with them, my sister and mom. My mom donates them like at the school or library. I think they will get reused.

15. Which of these health related topics have you ever discovered in a women's magazine?

CW:

Fitness or exercise	X	Sexually transmitted diseases, e.g., HIV and AIDS	X
Cancer	X	Heart diseases	X
Diet/ nutrition	X	Mental health issues	X
Sexual abuse	X	Physical abuse	-
Alcohol use	X	Drug use	X
Sexual activities	X	Contraception	X
Pregnancy	X	Medicines/ Pharmaceuticals	X
Smoking cigarettes	X	Violence	-
Others:			

16. What do you think, why are these topics included?

CW: Because they are about what women in South Africa are interested in and they are looking for information about these things and even if they not looking for information these are the topics that they talk about and topics that women are being interested in and have conversations about and need more information about, they affect women.

17. How interested are you in articles on health, particularly on HIV and AIDS?

CW: I am interested like when they come with new developments for it and communication strategies about it, so if there are any adverts promoting or they talk about their media strategy promoting talking about HIV and AIDS, but when it comes to actually read about it, no I would browse over because I feel I heard so much and so many times, so when I am seeing an article about it I just browse over it.

18. Do you pay attention to HIV and AIDS messages?

CW: I'd say it depends how it's put across. It depends if they put it in a way that is new and exciting, I know that sounds terrible, but if they put it in a way that it lets me think about it and not just like: it is there, watch out. Because if it something I already know then I don't pay attention but if it's something I would feel that's everybody needs to be aware of it... there is still the personal bubble that you think: oh no it is not going to happen to me, you know. So it's all about the position... so unless it is a new tack on it I haven't read before so maybe people now living with HIV can still live their live, they got through it and this is not prevention but what happened... I would be interested in.

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

CW: Cosmopolitan & Fairlady

Because these are the magazines that I am reading across often, quite often. And I am I suppose their target...

20. What are the specific issues that are being talked about in these articles?

CW: In the Cosmo one it was on dating a man with HIV and AIDS and what happened to them and in the Fairlady one I think it also included HIV and AIDS but I think it was more about the shock of someone you could be dating could have a sex fetish. And HIV and AIDS was more sort of... it came from it but that wasn't the main reason for talking about it.

21. Who do you think the message is directed at, and why do you say so?

CW: The Cosmo one automatically I was thinking young, Joburg you know like business clothes, Yuppier, you know like and also if I hate the term, but the black diamonds, that range, so maybe 25 to 35. And the Fairlady I think they were targeted to older women, who have been... not old but from 30 upwards, been in a relationship for a long time so kind of: this could happen to you. Like middleclass, or upper class, so this could happen no matter where you are in the world or how great a person is or how wealthy he is or you know all these stereotypes. I felt the second one although they're both stories the Fairlady one was more like a story like I thought there is no way that this is true, because of the way it was telling.

22. What sense do you draw from these articles personally? (if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles suffers from articles on sex/ sex life tips etc.?

CW: The Fairlady one, I would say you can image it was a shock like, this can be your husband, like he could be living a secret life. And watch out! But it wasn't anything on HIV. And the Cosmopolitan one was like it is ok, hey it's fine. Like don't have such a stigma about it, this is something you can deal with, like normal life and it is fine. But I also find, this is a story, there was no emotion really, just what happens and it is fine like he can live with HIV. I get a very relaxed feeling of the Cosmo one, like there is something that is in our country and you come in contact with and that's it. Don't go mad about it. It's like a perfect world, where everyone spokes about it. I think a lot of strategies are now on make people think they can speak about it, it is fine, don't make it a secret, it is fine and like everybody knows about it and deals with it and understand each other.

Credibility: That's what I didn't expected, (these kind of article) to be in the Cosmo. I would have expected it the other way around (these kind of article in the Fairlady). For me these stories are unbelievable, because of the target market... these writers... where have they found these people and get this story? But believable? Because they do encourage sex and even if they say, sex without condoms isn't an option on the other hand they say hey its fine if you doing other things without condoms. So I think it is right, it should be there because you expect stories on sex and people expecting it. And then you feel comfortable reading these other stories as well. So it just fit in it...

23. Is it worth it having such messages?

CW: Yes I think it is, because otherwise you don't think about it. And also what I was saying before, how it was just telling me about HIV I am not paying attention, so these stories are helpful. Although I find the Fairlady one patronizing, I don't know, but otherwise I would still read it instead of just telling the facts. Because it also brings it into life, like the Cosmo one it brings it into normal life, like now, if I hear now some of my friends would stating that he has HIV I think hey it is fine, like in the story. But before like answer the question we wouldn't actually talk about. They told you things, you should ask about it. So I think it is useful.

24. What feelings did these articles provoke in you?

CW: I think of the words... the Fairlady one I thought it was a bit silly, like the way it was written, like oh my gosh! I didn't feel serious about it. The Cosmo one, although it was about... or it couldn't be truer... I felt although it wasn't true it could have been true, and I was more interested.

25. What kind of knowledge, attitudes and practices about HIV and AIDS are you getting from the articles?

CW: The Fairlady one was very scary and is associated with dodgy people, with people who don't do the right thing and then they get HIV and AIDS. But Cosmo was on that it could happen to anyone, it didn't say anything about the character. It didn't put a negative stigma to it. It's more about health effects...

26. How has reading such articles helped you in understanding HIV and AIDS?

CW: Yeah, Cosmo let me think about like the part when he gets stressed and what happened then, so it is not only affects your health, but also what you should eat, taking HRVs, eating vegetables, eating healthy, but things will still happen to him and he has to live with it...

27. Do you discuss these articles with your friends or family?

CW: Yes, I would discuss the Cosmo one with my friends if it comes up in a conversation, because often people get reaction when they hear about something like oh he has HIV and then I would bring that up like I have read an article... and maybe as a joke.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

CW: No it wasn't like that... the Cosmo one a bit more because even she told how much they are in love and that they will live forever she still has to be always very careful... the other one, no.

29. What is it that is in these articles that you find educational or entertaining?

CW: Yes, the Cosmo one there was a story how they met, what they do like as an entertaining part but also what they need to do, how they should behave... The Fairlady one not so much educational, I suppose they are going more the entertainment way with the fluffy handcuffs.

30. What have you learnt from the characters in the article (if a character is introduced)?

CW: Yes, actually from both. From the Fairlady one you can just let somebody go, she is not gonna change it like I am still with this person, even if he did these things... I learnt that in terms of relationships, that it is possible. And the Cosmo like that can be done. Like he can live with HIV and still have a life.

31. Do these articles give you skills to deal with similar issues in your real life?

*CW: Yes, The Cosmo one would if I came in contact with a situation like this like a friend is dating someone with HIV and AIDS or someone I know who is HIV positive it reminded me that you get it from coughing on you and someone can live a normal life.
Skills from the Fairlady one.... No. It's just funny the link to the Comrades marathon, everybody reading that will think oh maybe he is the guy... and now he's got this.*

32. Does the included information help you? How, why or why not?

CW: Yes, the Cosmo one did help me, in the Fairlady one no.

Transcript B: Ausie L.

Date of Interview: 28.05.2012

Length of Interview: 27,52 min

Location: University Office

Information about Interviewees

Name	<i>Ausie L.</i>
Age	<i>26</i>
Occupation	<i>Administration Officer</i>
Gender	<i>Female</i>
Highest education	<i>3 year degree</i>
Ethnic background	<i>Black SA</i>
Place of living	<i>Durban, single, lives by herself</i>

1. In general, how is your health?

AL: It is perfect. Well, I've got asthma...

2. In the past month, how often did a health or emotional problem occur?

AL: Beside some flu here and there I am fine. I haven't been hospitalized in a long time.

3. If you wanted to get information about sexual health, what are your resources?

AL:

<i>Friends</i>	<i>Family</i>	<i>4, sometimes</i>
<i>Newspapers</i>	<i>Magazines</i>	
<i>Television</i>	<i>Internet</i>	<i>1</i>
<i>Books</i>	<i>Hotlines</i>	
<i>Public health campaigns</i>	<i>Health provider/ clinic</i>	<i>3</i>
<i>Other:</i>	<i>Books from the library</i>	

4. Are you affected by HIV and AIDS within your community or family?

AL: I think HIV affects all of us, you know... friends, family – it impacts all of us.

5. Do you use contraceptive methods? Which one?

AL: When I am active, yes. I use the pill and condoms.

6. What kind of media do you usually use?

AL:

TV	1	Newspapers	
Women's magazines	2	Internet	5
Radio	4	Others:	3, Sometimes Billboards while driving

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

AL:

Bona		True Love	2
Move!	1	Cosmopolitan	3
Fairlady		Others:	

8. When, where and why do you read women's magazines?

AL: I try to get them every month, especially True Love. True Love talks about a lot of things, relationships, health, and Move to be honest, I just get it for gossip. And the Cosmopolitan for my clothes and what's hot in the latest TV and celebs...

Usually I read it... most time at the weekends. So I get it every month, when I am doing my groceries and I read it... it takes me about 2 days to read it, it is usually over the weekend.

9. When was the first time you read a women's magazine?

AL: I think I was still in high school. And I wanted to find out like maintaining my weight and things like that. I can't remember what magazine it was, but I was captured by a story about a lady who was overweight and that's struck me and I thought ok there is more in it... That's why.

10. Describe a typical situation reading a women's magazine.

AL: You feel for example... sometimes there are stories that you think they apply to you and to distract you. You feel like talking to a friend in a way. It is more relaxed, it shouldn't be done in a rush, so I feel very relaxed like reading a book.

11. What is happening while reading magazines? Do you have any questions while reading?

AL: The I think, wow ok similar situation happened and this is how... for example recently I bought True Love and there was an article about women's hygiene, you know STI's and things like that and I think you become aware of it and it tells you what is STI, discharges and things like that. So even if it happens to you, you can remember I read it on the book, so for some reason it stays on your mind. And also tragedies and things like that...

12. In your opinion, which magazine is most interesting?

AL: I would say True Love. True Love is more realistic, Cosmopolitan is more superficial. In True Love you get personal stories, everyday stories, doctor's advice and people stories and a true perspective, what people are and what is happening out there.

13. What kind of topics are you interested in and what information are you looking for?

AL:

<i>Fashion</i>	x	<i>Health</i>	
<i>News</i>		<i>Sport</i>	
<i>Celebrities</i>	x	<i>Travel</i>	
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>		<i>Success and motivational stories</i>	
<i>Others:</i>		<i>Relationships, Love, Gossip, Technology</i>	

14. After reading the magazine, what happens to the magazine itself?

AL: *I don't throw it. I've got a cupboard, if somebody wants it, can take it and read it. And then my mom would come and ask, are you done with that. I feel I paid for it... and I'd give it to somebody rather than throw it.*

15. Which of these health related topics have you ever discovered in a women's magazine?

AL:

<i>Fitness or exercise</i>	x	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	x
<i>Cancer</i>	x	<i>Heart diseases</i>	x
<i>Diet/ nutrition</i>	x	<i>Mental health issues</i>	-
<i>Sexual abuse</i>	x	<i>Physical abuse</i>	X
<i>Alcohol use</i>	x	<i>Drug use</i>	X
<i>Sexual activities</i>	x	<i>Contraception</i>	X
<i>Pregnancy</i>	x	<i>Medicines/ Pharmaceuticals</i>	x
<i>Smoking cigarettes</i>	x	<i>Violence</i>	x
<i>Others:</i>			

16. What do you think, why are these topics included?

AL: *I think they are included to alert, that why. Because as I said people experience different things, you know. For example in a women's magazine you will find a piece about health consciousness, exercising and maybe it is to get the reader. As the reader gets as much information as you can, it increasing their own sales. And just having knowledge about certain things, you know... because you never know when it will affect you.*

17. How interested are you in articles on health, particularly on HIV and AIDS?

AL: *To be quite honest, having worked in a CCMS department, which was the health department I became more and more wanting to read about it, because if there is something I don't understand*

because I've had a few of people close to me, who have had symptoms, I would look... you know sometimes you tend to look like ok if they're ill, what causes it, what is it, so it is the society around you when they see somebody having some sort of symptoms they characterize that person with this sort of disease. But I've read so much about it...

18. Do you pay attention to HIV and AIDS messages?

AL: Not specific... you know it is good to know. When one of my family members died from it and at that time we didn't know that she... you're only assuming. So had I known the information I do now, I feel like you know you need to be supportive to that person, it is not a death sentence and see ways how to... even with friends, friends who would be, that they are scared to go to test, I would try to encourage them, yes you have to go. Or relationship... I mean a physical abuse relationship, not necessarily AIDS and HIV but when my aunt passed away, that actually opened a lot of gaps of what I didn't know about it, because she just kept to herself, maybe it was because she was ashamed and then it gave me questions like what if would get infected, would I shut down, would I talk about it, would I want to get treatment, you know... turning those questions around, trying to answer these question that maybe going through her head that would think me, maybe my first perception of the illness, especially when I was growing up and hear about HIV and AIDS I thought to myself I would call suicide. That is the honest truth... but after reading about it and after seeing her suffer I thought people are living, people are living 20 years, 30 years, although it is like a burden, you need to be conscious of your health, you mustn't drink, you must eat healthy and what not, you are actually taking care of your life better, I mean more, what you eat, what you drink, what you do than somebody who was negative.

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

AL: Bona, True Love

20. What are the specific issues that are being talked about in these articles? Do you think these articles are true?

AL: They are both HIV and AIDS related.

(True) I don't know. But drawing from my own experience I've had a friend, whose partner is positive, but she is negative. So, I would say I am sure these articles somehow render truthfulness in it which means research was done. It may seem like a story, but I am sure something like that happens. As well, sometimes you will date somebody they will not tell you, that's why I am saying you just question the society and honesty, but at the same time, when you meet somebody and you disclose you status, is it now for them just too of the run? Does that really happen? Those are things that I really like to find out. Does anybody who got this illness after meeting somebody just discloses the statuses? It must be brave.

21. Who do you think the message is directed at, and why do you say so?

AL: I think it is directed to people who are affected by it. You don't have to be infected, but you could meet somebody and they disclose their status, how do you deal with it, you know.

True Love: She met somebody, who disclosed that he is HIV positive and she didn't let it deter having a relationship, but there was stigma attached by her family and friends.

Bona: One of the short paragraphs here is that a wife found out that her husband is HIV positive and she finds out that the husband is on treatment for two years, so even if you want, how do you live with that? It is betrayal, you know. In a relationship how can you go through things like this? Because once you start having intercourse with someone who is on treatment what happens to your own health? Because you're at a terminal stage and that treatment will not work, this husband I think was very unfair.

I never really read Bona (and don't know Criselda).

22. What sense do you draw from these articles personally (if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles suffers from articles on sex/ sex life tips etc.?

AL: They are both tragic in they own different ways. It just questioned the society we live in. In all times it either to be abstained or protect ourselves because if you can't trust your own husband... that is what I personally think, but it doesn't mean that all people actually like this, there are good people may support you and there is counseling, there are group for help... How would I expect to react? I think there is more reason for us to educate ourselves and those around us to try, although we're not councilors, although I may not be strong enough to go through the same thing.

23. Is it worth it having such messages?

AL: I really think it is. Because this is everyday life we go through. HIV and AIDS are real and we need to try to combat it as best as we can. It is real, that is all I can say.

24. What feelings did these articles provoke in you?

AL: Sadness, because you start like I am saying hating this person for bringing the disease into your life? Or you meet somebody and you have to judge them by what's their health situation? If I meet somebody who is telling their condition, how do I react? Do I stigmatize them?

25. Was there any kind of knowledge, attitudes and practices about HIV and AIDS you getting from the articles? Was there something new for you?

AL: ---

26. Has reading these articles helped you in understanding HIV and AIDS?

AL: I may not understand it 100%. These people, one partner is negative, one is positive, that I still like to learn more because it seems there is a gap. But reading such articles does actually broaden our mind and makes us learn.

27. Would you discuss these articles with your friends or family?

AL: Oh yes, things like this with my neighbors, we talked about like I read about this... especially with my friends, we talk about anything although it is not easy for people to come out in an open setting, by the way, this is what happened to me. Somebody will come to me in confidence and then you just sort of... you can only just give them not advice but be supportive.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

AL: Yes. Firstly if you live with that your life doesn't become simple anymore. You need to have treatment every day, you need to take care of yourself, try not to let anything stress you, because you may lose your life. And be faithful to your partner, but at the same time you have to ask is he faithful?

29. Is there anything in these articles that you find educational or entertaining?

AL: These for me have become educational. Not educational per se but it is a reaffirmation that these stories are actually happening. They are very, very educational... That is nothing that is funny about it, it is reality.

30. What have you learnt from the characters in the article (if a character is introduced)?

AL: --

31. Do these articles give you skills to deal with similar issues in your real life?

AL: It just gives me a new perspective about life and I don't know how I would deal with it in my own sense but it does open... or give me a lot of reality, but if I could deal with it, I don't know.

32. Does the included information help you? How, why or why not?

AL: Yes, I think so...

Transcript C: Gabisile N.

Date of Interview: 29.05.2012

Length of Interview: 37,64 min

Location: Company Office

Information about Interviewees

Name	<i>Gabisile N.</i>
Age	<i>32</i>
Occupation	<i>Accountant</i>
Gender	<i>Female</i>
Highest education	<i>Masters</i>
Ethnic background	<i>African</i>
Place of living	<i>Durban, married for 10 years</i>

1. In general, how is your health?

GN: I'd say good. I do experience opportunistic infections sometimes like flu or a cold and obviously stress runs me down sometimes but generally good.

2. In the past month, how often did a health or emotional problem occur?

GN: Once in the recent past. I developed pain and a lumpy feeling in my left breast; I went so see my gynecologist who did a physical examination and she picked up abnormalities in the texture of the breast and she recommended that I see a specialist surgeon who initially prescribed antibiotics. But after two weeks of no improvement in my condition I'll returned to see him and he recommended a biopsy of the lymph nodes and it turned out to be a virus and not cancer. But other than that no...

3. If you wanted to get information about sexual health, what are your resources?

GN:

<i>Friends</i>	<i>4</i>	<i>Family</i>	<i>4</i>
<i>Newspapers</i>		<i>Magazines</i>	
<i>Television</i>		<i>Internet</i>	<i>2</i>
<i>Books</i>		<i>Hotlines</i>	
<i>Public health campaigns</i>		<i>Health provider/ clinic</i>	<i>1) Gynaecologist 2) Pamphlet in a doctor's office</i>
<i>Other:</i>			

4. Are you affected by HIV and AIDS within your community or family?

GN: Yes I am. I have four family members who are living with HIV and in my community I obviously know people who know people who know people.... Who are living with HIV.

5. Do you use contraceptive methods? Which one?

GN: *The intravenous loop.*

6. What kind of media do you usually use?

GN:

TV	5 PDR decoder	Newspapers	2
Women's magazines	3	Internet	1
Radio	4 (listen to talk radio every day 3 hours)	Others:	

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

GN:

Bona	Once in a while	True Love	1
Move!	never	Cosmopolitan	2
Fairlady	Once in a while	Others:	

8. When, where and why do you read women's magazines?

GN: *Generally not very often, I must be honest. If I buy magazines it would be probably with the groceries and it would sit around for probably two to three weeks before an opportunity arrives for me to actually page through it and I would read it generally if I just want to switch off my brain and go through fashion, pictures and the occasional gossip and so one but it is not a serious source of information for me, let's put it that way, it is more **like a no-brainer kind of indulgence.***

9. When was the first time you read a women's magazine?

GN: *Yes and I would probably say pre-teens stage like senior primary school and it was mostly Fairlady because my grandmother bought an issue without fail every month and she also bought Your Family for the recipes and the household tips.*

10. Describe a typical situation reading a women's magazine.

GN: *Where... I'd say it is typically in the bath. How I am feeling, it's probably after a long stressful day. I want to distract my brain and switch off from work related topics or even serious personal topics and I just want to a no-brainer, like I said, flip through pages... if there is an article of interest maybe I take the time to read it but that would be skim reading.*

11. What is happening while reading magazines? Do you have any questions while reading?

GN: *Actually relax, you know. Quite well, it is an effective relaxation method for me because I find I can then get lost in either the fashion or the celebrity gossip or the deco ideas and start thinking about more let's say life related topics rather than work related topics, which is a great way to unwind.*

More often it is not questions but opinions. Sometimes I read an interesting article or a comment that a columnist or the editor has made about a certain topic and it is usually a serious topic like the economy or politics, something like that, and I usually have an opinion on what the person has said in the article and almost wish I could engage in a discussion or debate with the individual, but can't... like: oh come on please what about this what about that... and I enjoy that stimulation, and

that is why I spent so much time listening to talk radio, when I am driving along on my way from the school run or to work and I am like: oh come on don't be silly... you know!

12. In your opinion, which magazine is most interesting?

GN: Without being unfair I'd say True Love because I think for me it fulfills a nice balance of needs, the need for stimulus through serious topics, but it also fulfills the relaxation need with less serious topics like fashion and deco.

Fairlady I hardly ever read. There has to be something on the cover or topic on the cover that is really attention grabbing for me in particular. But I wouldn't go to the shelf and pickup Fairlady. So I can't really judge if it is interesting or not.

Cosmopolitan I do read more often than not but that one has very little serious content. It has a lot of celebrity gossip and stuff about sex and men and so on, which every girl needs to look in terms of eye-candy, but it is not a magazine, that I take seriously.

Move I have never read.

Bona is interesting, in the sense that it does tend to deal with topics that are very pertinent to particularly black African reader. Because it does cover topics about psychological distress, HIV and AIDS, financial challenges that a lot of average South Africans face, so that one is interesting as well, it is just sometimes the level of topics or the level of content in the magazine maybe not pitched at somebody with my background and line of work. So I wouldn't necessarily go to the shelf but if I get Bona I would read it, there are usually stories about people that touch me, especially when it comes to personal stories or real-life stories.

13. What kind of topics are you interested in and what information are you looking for?

GN:

<i>Fashion</i>		<i>Health</i>	<i>Cooking, recipes</i>
<i>News</i>	<i>Movies, Books, Music (reviews)</i>	<i>Sport</i>	
<i>Celebrities</i>		<i>Travel</i>	
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>		<i>Success and motivational stories</i>	
<i>Others:</i>		<i>Economy, Development, Outlooks, local, African Economy, Opportunities, SA politics, political landscape of SA, issues in the SA media over social-political nature</i>	

14. After reading the magazine, what happens to the magazine itself?

*GN: More often than not it gets thrown away or recycled by my housekeeper, so she would take a batch home with her, **her kids then use the pictures for either scrapbooking or covering their schoolbooks, so they put brown paper on the book on the outside and pictures on top... it***

makes their schoolbooks more interesting. Because I suppose the pictures in the magazines are aspirational... material things like cell phones, cars, models and fashion that youngsters inspire these days. So it is a way to keep your eye on the bone... I did these things as a kid and understand where they're coming from.

15. Which of these health related topics have you ever discovered in a women's magazine?

GN:

<i>Fitness or exercise</i>	X	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	X
<i>Cancer</i>	X	<i>Heart diseases</i>	X
<i>Diet/ nutrition</i>	X	<i>Mental health issues</i>	-
<i>Sexual abuse</i>	X	<i>Physical abuse</i>	X
<i>Alcohol use</i>	X	<i>Drug use</i>	X
<i>Sexual activities</i>	X	<i>Contraception</i>	-
<i>Pregnancy</i>	X	<i>Medicines/ Pharmaceuticals</i>	X
<i>Smoking cigarettes</i>	-	<i>Violence</i>	X
<i>Others:</i>			

16. What do you think, why are these topics included?

GN: *Probably because all of those issues affect women more directly than male. And secondly I find women are more receptive to those messages to a certain extent, because they are willing to talk about their story of sexual abuse, violence, drug abuse... that type of thing and put it in a national women's magazine like a celebrity, she spoke about a drug abuse problem and shared it with the whole world. There aren't very much men that I am aware of that are willing to do that. So I think that would be one of the key reasons, women are more willing to share but secondly like I said in the beginning I believe and I experienced the fact that women tend to suffer the consequences of all of those topics, especially around the abuse. Women have to then either carry others who are suffering from that abuse or they are direct recipients of the abuse and sometimes the women are abusers themselves. So it makes sense to put these kind of topics in women's magazines. A Men's Health would be about sex, women, gadgets, sports and that type of thing.*

17. How interested are you in articles on health, particularly on HIV and AIDS?

GN: *Interested I would say. But I have to be honest as somebody, who is not living with HIV personally, not very interested. I do want to be informed on how to protect myself, which is message that is already available and also included in magazines, protect my family and partner but also I do want to be informed on how to support members of my family who are living with HIV and AIDS and there are also topics around living with HIV and AIDS in some communities, in particular in my community and my family where people don't talk openly about their condition and therefore cannot receive the support and help that they need. So sometimes magazines and other media can be informative in a sense that they can educate us/ me on what to look for, science that can tell you that there is an issue here, which is HIV and AIDS related. How can you then support that person or approach this person in order to be able to help them. Other times though I do look for specific types of information with respect to HIV and AIDS especially when it comes to that a person has full-blown AIDS. How am I supposed to care for them? Should I send them to facilities that are specialized to care for people at that stage of the disease or is it more compassionate to*

keep this person at home surrounded by loving family and friends and things that they know, so that they can die with dignity. So information like that that I am directly looking for... If it's just about using a condom, stick to your partner, be faithful ... I probably skip through that message because I feel that is a message that is well-received and well communicated by now.

18. Do you pay attention to HIV and AIDS messages?

GN: Yes, at least a glance to check what is the content about.

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

GN: True Love, Cosmopolitan

I am familiar with them, which means I feel more comfortable trusting their content and I know what to expect.

20. What are the specific issues that are being talked about in these articles? Do you think these articles are true?

GN: The True Love article is about the risks that women put themselves in or allow themselves to be exposed to by partners who refuse to use condoms and them not insisting that condoms being used through sexual intercourse. There a vary responses and reader in the article who had responded differently to their partners refusal to use a condom or even their partners tricks of getting away with not using a condom without declaring that they not using a condom, which shows the kind of person you dealing with.

The Cosmopolitan article is about a woman who is living in a relationship where the partner is HIV positive and she is HIV negative, going through the challenges that their relationship face as a result of that.

(True or based on true stories?) Yes, I do.

21. Who do you think the message is directed at, and why do you say so?

GN: I think it is definitely targeted at women like these women, women like me... who are maybe in stable relationships or are still in dating phase and trying to find somebody for themselves, Mr. Right but obviously then have to deal with the HIV issue in the course of doing that. But I think the more important message is actually the one that is in the True Love magazine, because that is a very real situation that women face even in stable relationships like marriage where a partner may not be willing to use protection during sexual intercourse because the argument is: we are married, don't you trust me... So I like it and I can relate to it more directly than the other article, which is a more hypothetical situation for me.

22. What sense do you draw from these articles personally (if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles suffers from articles on sex/ sex life tips etc.?

GN: The Cosmopolitan article gave the impression of putting a positive spin on HIV and living with it and the implication it has for relationships in general. But it puts the spin on top of it, where one partner is not HIV positive but the other is and their relationship itself almost has to play second fiddle to the one partner's HIV status. In this particular instance this woman chose to deal with it positively, chose to choose her partners personality and who he is as supposed to her partner's HIV status. My sense of this one is a very positive one.

The True Love article, my sense of it is it is an educational article that is trying to demonstrate how common the condom wars are. And it is actually a topic that isn't general conversational with a glass of wine with your girlfriends type of thing but we all experience it. It's like thrush, nobody talks about thrush but all get it. So my sense of this one it is factual, emotionless, but informative article designed to say everyone faces this scenario but don't be silly, protect yourself because HIV is real and it is there but these tricks are also real they are also there, just be conscious of it and put your life first.

Credibility: Yes, I do because I think you can still enjoy a healthy adventurous sex life but still protect yourself. The key is knowing how to protect yourself, knowing how to deal with HIV as a topic but as a topic that is subservient to trying to live a healthy sexual lifestyle.

23. Is it worth it having such messages?

GN: --

24. What feelings did these articles provoke in you?

GN: The Cosmopolitan one invoked let's say softer emotions, I almost wanted to cry almost, in a sense that it's like a beautiful love story almost like in any relationship where two people just want to be together, they love each other but there is this obstacle that they need to overcome, which is not necessarily them but HIV that is put between them. So this one evoked very warm fuzzy feeling, even it is a serious article.

The True Love one like I said is more educational, it is more about using real life situations to inform and showing the possible consequences of making certain choices along the way. There was a little bit of annoyance, especially in the first part of it, there are women who allow their partners to put their life at risk and don't take responsibility for their own protection, so I am like "are you stupid" but it is a tool to educate, so in the end I really liked it.

25. Was there any kind of knowledge, attitudes and practices about HIV and AIDS you getting from the articles? Was there something new for you?

GN: No, *nothing new.*

26. Has reading these articles helped you in understanding HIV and AIDS?

GN: The True Love article yes in the sense that I now understand how almost illogical human beings can be, because everybody knows HIV and AIDS is there, nobody can profess to not know the consequences of contracting it and how to protect yourself but for some reason they still don't protect themselves. Me included, I don't want to disclose too much personal information but I have been married for 10 years now and I can safely say I am more inclined to trust my husband and not insist to use a condom during sexual intercourse than I would have in the past. Even I don't be with him 24/7 for fact that any number of things can happen that would result in a change of his HIV status... human nature...

27. Would you discuss these articles with your friends or family?

GN: Yes I would. In fact incidentally my husband and I talked about the article in the True Love magazine. We talked about it because we were exactly discussing the same thing I just said that your logical brain receives the messages about protect yourself, yes be truthful to your partner but also use the protection while having sex. It is the only way you can be sure that you are protected as an individual, but as a couple especially when you are together for a long time and you put trust and you put the emotional heart first response, before you put the logical response. It doesn't really help you in the end; you almost have to be reprogrammed as a human being to put your person first before you put anything else.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

GN: --

29. Is there anything in these articles that you find educational or entertaining?

GN: *Educational yes, entertaining no.*

30. What have you learnt from the characters in the article (if a character is introduced)?

GN: *Yes actually. Not the True Love characters, the Cosmopolitan one though is new for me, something I've learned that you can actually have a successful sustainable relationship with an HIV positive person, even though you are not HIV positive, logically I would imagine there are a lot of practical issues that are difficult to deal with and that there be challenges that need to be overcome in a relationship but this article basically says it is possible, you can do it. These people have been together for a year, so that was new...*

31. Do these articles give you skills to deal with similar issues in your real life?

GN: *Maybe not directly, but yes in a sense that I could probably council somebody else facing a similar situation as a result of these articles or if I would face a situation like that anytime in the future I could have this information to draw on, whether directly or indirectly.*

32. Does the included information help you? How, why or why not?

GN: *Yes I would say so. Maybe not directly, actually I lie, directly as well. Because of the condom wars topic or the how to relate to an individual who is in a bi-status relationship they have helped me, because I have learned something from both of them for different purposes, information that can be used in different context. But I have learned something from both of them. It is unlikely that I would have read the Cosmopolitan article... I probably would have skimmed over it, because it's Cosmopolitan. But the True Love one I had read probably the first time around, it is most likely I do it anyway.*

Transcript D: Justine K.

Date of Interview: 24.05.2012

Length of Interview: 34,16 min

Location: Company Office

Information about Interviewees

Name	<i>Justine K.</i>
Age	<i>33</i>
Occupation	<i>Shopper & Customer Marketing Manager</i>
Gender	<i>Female</i>
Highest education	<i>University degree</i>
Ethnic background	<i>White South African</i>
Place of living	<i>Durban, married, 2 kids</i>

1. In general, how is your health?

JK: Can I say excellent?... Probably good because I don't think I am as fit I am should be.

2. In the past month, how often did a health or emotional problem occur?

JK: None.

3. If you wanted to get information about sexual health, what are your resources?

JK:

<i>Friends</i>	<i>Family</i>	
<i>Newspapers</i>	<i>Magazines</i>	<i>2</i>
<i>Television</i>	<i>Internet</i>	<i>1</i>
<i>Books</i>	<i>Hotlines</i>	
<i>Public health campaigns</i>	<i>Health provider/ clinic</i>	
<i>Other:</i>		

4. Are you affected by HIV and AIDS within your community or family?

JK: No.

5. Do you use contraceptive methods? Which one?

JK: Yes, I've got an interutus devise.

6. What kind of media do you usually use?

JK:

TV	1	Newspapers	
Women's magazines	3	Internet	4
Radio	2	Others:	

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

JK:

Bona	x	True Love	x
Move!	x	Cosmopolitan	x
Fairlady	x	Others:	Marie Claire, Essentials, Ideas, Glamour, Woman@home

8. When, where and why do you read women's magazines?

JK: It is part of my job and means that I have to look at them but I really like looking at them, so normally I read them evenings or weekends at home, if I go on holidays I read a lot of them, because it is relaxing. And why I read them because I am interested in kind of the fashion articles and it is me-time, like for me what's nice is sitting with like a cup of tea on a Saturday afternoon on a couch with my magazine and I feel like I've got some quality own time.

9. When was the first time you read a women's magazine?

JK: No. (It was probably) from friends. As a teenager one friend of mine had an older sister and we used to read a lot of her magazines like Seventeen or teenage kind of ones and also a lot of surf magazines because it was very cool to have like Zigzag or Roxy...

10. Describe a typical situation reading a women's magazine.

JK: Most probable it's a weekend, a Saturday or Sunday, if it is a Saturday it will be an afternoon, after all the other things that happened, 9 times out of 10 I would be sitting on a couch with tea, if it's later in the afternoon I probably have a glass of wine or otherwise on a Sunday morning actually in bed, so I kind of make tea, go back to bed and then I like to read magazines.

11. What is happening while reading magazines? Do you have any questions while reading?

JK: For me it is kind of like me-time, relaxing and I don't want to be disturbed. If children are fighting it is not that they killing each other, I don't get up. It is just the feeling of having a bit time out, relaxing and kind of unwinding.
(Questions) No, not really.

12. In your opinion, which magazine is most interesting?

JK: Fairlady.

13. What kind of topics are you interested in and what information are you looking for?

JK:

<i>Fashion</i>	<i>3 (more for your body shape, how to make the most of ...)</i>	<i>Health</i>	<i>2</i>
<i>News</i>		<i>Sport</i>	
<i>Celebrities</i>	<i>Actresses, international</i>	<i>Travel</i>	<i>X (hot places)</i>
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>		<i>Success and motivational stories</i>	
<i>Others:</i>		<i>Feature articles about work-life-balance, bringing up your children in today's day and age, food sections</i>	<i>1</i>

14. After reading the magazine, what happens to the magazine itself?

JK: *All my magazines gets passed on, none of them go into the dustpan. Deco and food magazines gets kept, I am trying at the moment to cut out the actual recipes I actually like because otherwise I have towers of them and they never go anywhere. All the kind of essentials, your family gets passed on to my mother and she passes them to my sister-in-law. All my magazines get read by a lot of people and Bona, Move and True Love get passed onto my domestic worker and I know she passes them on to her friends...*

15. Which of these health related topics have you ever discovered in a women's magazine?

JK:

<i>Fitness or exercise</i>	<i>X</i>	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	<i>X</i>
<i>Cancer</i>	<i>X</i>	<i>Heart diseases</i>	<i>X</i>
<i>Diet/ nutrition</i>	<i>X</i>	<i>Mental health issues</i>	<i>X</i>
<i>Sexual abuse</i>	<i>X</i>	<i>Physical abuse</i>	<i>X</i>
<i>Alcohol use</i>	<i>X</i>	<i>Drug use</i>	<i>X</i>
<i>Sexual activities</i>	<i>X</i>	<i>Contraception</i>	<i>X</i>
<i>Pregnancy</i>	<i>X</i>	<i>Medicines/ Pharmaceuticals</i>	<i>X</i>
<i>Smoking cigarettes</i>	<i>X</i>	<i>Violence</i>	<i>x</i>
<i>Others:</i>			

16. What do you think, why are these topics included?

JK: I think some of them because they are interesting to women, like the more about emotional wellbeing or health and things like that and some of them because there is almost a duty for magazines to kind of make people more aware of issues like domestic abuse or violence or alcohol abuse, because I think sometimes there is a really interesting article I read the other day about why lot of people drinking alcohol and how it's become so normal for people to drink all the time, that they are actually almost functioning alcoholics and it is part of magazines responsibility.

17. How interested are you in articles on health, particularly on HIV and AIDS?

JK: I wouldn't say very interested. I think because 9 times out of 10 it is not that there is any new info. (new) If there was some kind of medical breakthrough in antiretrovirals or if there was something about percentages on how many people are being affected, it is slowing down, is it increasing, or that kind of thing. But a lot of time it is the same like you need to check your partners, status, and use of contraceptives. I had so much of that when I was at school and even at university and also in a full-time committed relationship; maybe I don't think it is as relevant.

18. Do you pay attention to HIV and AIDS messages?

JK: --

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

JK: True Love, Fairlady

Because they are magazines that I normally read... I like the kind of articles and the way that is written.

20. What are the specific issues that are being talked about in these articles? Do you think these articles are true?

JK: First one in the True Love basically about the whole debate, or not debate but kind of thing, that men don't like to wear condoms and that they come up with every reason why they shouldn't and generally they turn it around into an emotional thing, don't you trust me, it doesn't feel nice or having an excuse why this time they don't use one.

In the Fairlady magazine was an article about having a long-term partner in a stable relationship, but that partner actually has a double life where they got obviously kind of sexual relationships with other people and that partner doesn't know about it. And then the husband is HIV positive.

(True) Yes.

21. Who do you think the message is directed at, and why do you say so?

JK: I think of the Fairlady one the target group is more for people in committed relationships where you feel that you can completely trust the person and therefore you are not using protection but in the Fairlady one that wife clearly didn't know what the husband was actually up to. I think in the True love one it is more for younger women who are sexually active, not necessarily in a committed relationship but it might be a new relationship where there is a lot of pressure that the couples having sex and it needs to suddenly like ok we are committed you don't need to use any protection, but don't actually really know that person as well or maybe it is not as committed.

22. What sense do you draw from these articles personally?

JK: I think from the Fairlady one, because I am in a long-term relationship, I might think oh my gosh, what does it mean? But at the same time I know my husband so well... But I think the one thing for me is that we've got a lot of friends, who have got divorced or getting divorced and there are a lot of

affairs going on. So it is probably closer to home, than you actually realize. But still, it doesn't make me question whether I can trust my husband or not, but because I think I can.... But maybe I am being stupid. The sense from the True Love one is no matter how advanced we are women are in a workplace, we have more rights, we work and we've got our own money at the end of it still comes down to men not respecting the choices or the requests (by women). And all of these women seem to be asking to use protection and the men come across, whether it's real or not, as very much manipulative and kind of for their own satisfaction not wanting to use one, regarding the consequences and maybe feeling that there are no consequences. I am not sure that this is necessarily... on one hand I think it definitely does happen but I think it also in a way paints women in a very... it makes them very much appear as the weaker sex. But there are women in this article who definitely say I am still saying no and I stop, so encouraging women to say it is ok to say no.

23. Is it worth it having such messages?

JK: Yes, definitely. I think for articles for both of them it is about making sure people thinking about the relationships you are in, they're quite different articles. But for the Fairlady one it is about kind of realizing all the time do you really have an understanding of the person you are with, do you have the same feeling about protection or things like that but definitely for the True Love one it is about making women to understand it is your right to say no if you want to use condoms and the other person doesn't. And that is very nice that they have written about a lot of things where the woman says how halfway through he decided to take it off and she say that's it now, stop. So I think that is really important, because there are a lot of women out there who still like kind of feel bad...

24. What feelings did these articles provoke in you?

JK: I think in the True Love one maybe a little more kind of anger and that it was very much like that these women having to defend themselves against these men or like HIV and diseases and it shouldn't be like that.

(Fairlady) this one, was more a feeling of sympathy for the woman involved. She doesn't know that this was all happening and she is living her happily life with her children, all seems so perfect and then everything falls apart and for me what is really sad that... I felt a lot of sympathy and also then a little bit of anger towards the end where she had accepted that he done these terrible things and try to make it work again and then he ended up again doing this. He hadn't changed at all or understood the sacrifice that his family had made.

25. What kind of knowledge, attitudes and practices about HIV and AIDS are you getting from the articles?

JK: I don't think it is necessarily something new, because... I think the one thing it's not something new, but distressing it still that people look at people and oh you look healthy and therefore you are not HIV positive and it came across in this article again, where she said no and then a few month later she had find out that the person was HIV positive. She protected herself by not continuing having sex, but it is still that kind of thing and even like my own husband has that. Like well the person is not sick, because normally when somebody is HI+V positive they get very thin, like a sliming disease, so it is still that idea that you can tell when somebody has HIV, what you can't.

26. How has reading such articles helped you in understanding HIV and AIDS?

JK: I would say that the one in True Love helps in the understanding of the transmission of it, but not necessarily with if you are HIV positive now, what happens to you. There is a lot that's done about, not just in these articles but in all magazines, not contracting it but I am not sure, there is enough, there should be more articles on from people who are HIV positive and now what happens to you, how does it affect your body, life... I think that would make people understand the implication. They all don't want to be HIV positive but now why, yes you die, but before...

And also they sometimes have articles about I am HIV positive and I am living a good life, I am still achieving in my job and I am healthy but that sometimes makes people think, if I am get it I am still gonna be ok. It shouldn't be like that.

27. Do you discuss these articles with your friends or family?

JK: Yes, not with my family, my mother is not that type of mother. But I talk to my husband and I would definitely talk about in my book club with my friends.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

JK: No.

29. What is it that is in these articles that you find educational or entertaining?

JK: I think educational wise it is... this one (True Love) giving a lot of examples what men would say and this is educational because sometimes people don't realize they are manipulated through it and also a little of entertainment because you kind of laugh and think oh yes I heard that one before...

30. What have you learnt from the characters in the article (if a character is introduced)?

JK: I think for me in the Fairlady one the one thing that I found quite interesting was when they broke the news to the children and the children were just so accepting, like they spoke about it and the children never questioned why, it was just accepted that it happened and you need to support the person, so for me that was really interesting. I've found that really interesting but also inspiring in a way because it is so often with these kind of things hear about this and people are like how could you do it, how could this happened and people get so angry and here those children were just there for their dad.

31. Do these articles give you skills to deal with similar issues in your real life?

JK: For this one (Fairlady) I hope I don't need it, I don't like to deal with this kind of thing... I think the True Love one maybe not now because my daughter is so small, but if I had an older daughter, who was kind of teenager it would be really helpful. By the time my daughter is 15 I hope I am still married and then you kind of have forgotten these kind of things that would be... what they are be facing. And also funnily enough we had a similar discussion about this probably about three years ago in my book club. Because one of the girls in our book club had just met a guy very recently and like 6 weeks later they decide they both want to have a baby and I got into trouble with my friend because I went berserk like how can you be so irresponsible, it is one thing to get pregnant, but what if you get something else along with that like HIV and also that is completely irresponsible...

32. Does the included information help you? How, why or why not?

JK: Probably yes. I think probably the True Love more in terms of being able to talk to friends who maybe are facing things like that or also one of my friends has a 20 year old daughter that is quite interesting to talk about...

With the Fairlady one the only thing I find there is a lot of these article those like my partner lives a dangerous secret sex life and that lets it sometimes sound too far away. I know my husband it not going to have a dangerous sex life, I really do believe that but sometimes they can have an article like your partner had a one night stand and this is the result, because that is more realistic. You kind of think o shame she really married a worst person.

Transcript E: Lungelo D.

Date of Interview: 18.05.2012

Length of Interview: 63,41 min

Location: University Office

Information about Interviewees

Name	<i>Lungelo D.</i>
Age	<i>23</i>
Occupation	<i>Masters student</i>
Gender	<i>female</i>
Highest education	<i>Honours</i>
Ethnic background	<i>Black South African</i>
Place of living	<i>Durban, lives with her sisters, single</i>

1. In general, how is your health?

LD: In percentage I would say 72%. Yes I feel healthy, but I have like in terms of some allergies... and weight problems as part of my health.

2. In the past month, how often did a health or emotional problem occur?

LD: Maybe in a week maybe an emotional.... Not problem, but circumstance. Once a week... or twice a week emotionally. And then health wise... not really, not really. Once a month or twice a month.

3. If you wanted to get information about sexual health, what are your resources?

LD:

<i>Friends</i>	<i>1. X</i>	<i>Family</i>	
<i>Newspapers</i>		<i>Magazines</i>	
<i>Television</i>	<i>2. X</i>	<i>Internet</i>	<i>3. X</i>
<i>Books</i>		<i>Hotlines</i>	
<i>Public health campaigns</i>		<i>Health provider/ clinic</i>	<i>X</i>
<i>Other:</i>			

LD: Personally who I would ask if I had a sex problem? Professional or just anyone? I would say, I speak mostly to friends than family. I wouldn't go directly to my family. Friends... and I would probably... there is a lot that happens on TV and sometimes you might have a specific program but you might have... I think I watch a lot of Dr. O. There are so many things I get from Dr. O like sexual things, food, that you should eat or something that even helps for your sexual life, but I don't really have sexual issues.

Family not so much...

Newspapers and magazines... I wouldn't say there is a newspaper that I normally read, but I am acquainted to it, because my family buys it: "Elanga". But I never read it, but most of the time, you get like funny stories in the paper and it is not mostly on sexual health, but mostly on behavior such as immorality.

Internet ... yes I do.

Hotlines ... no.

Public health campaigns ... they informative, but I haven't really seen them like now at my age, I haven't really watched a campaign such as Love Life. When I was a teenager growing up that was part of... I would be part of sexual conversations at this area, but now, I am not really. Maybe I am affective in a way...

Clinic or health provider ... yes. My mom works as an HIV counselor. I am exposed to a lot of sexual things like how to use a condom or so.

4. Are you affected by HIV and AIDS within your community or family?

LD: Yes. Explaining it further would actually lead to explain where the problem is... My mom is an HIV counselor, every single day, when I at home she would come and say "Ah a person came and this is what happened and then people cried and whatever and then he like..." Every single conversation I had with my mom includes HIV and AIDS topics. I know it's not even politically correct, but my mom would look at someone like "Does this person have HIV and AIDS?" And I like "Mom, please." But she has to deal with it every day and how are the virus affect people... For her she could see, identify... not all the time, but quite often.

5. Do you use contraceptive methods? Which one?

LD: No. There is no need to.

6. What kind of media do you usually use?

LD:

TV	3. X	Newspapers	
Women's magazines		Internet	1. X
Radio	2. X	Others:	

LD: In terms of reading stuff I wouldn't necessarily buy a newspaper or magazine. But if is around I would read it, actually sometimes I would buy it.

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

LD:

Bona	X	True Love	X
Move!	X	Cosmopolitan	X
Fairlady	X	Others:	People magazines

8. When, where and why do you read women's magazines?

LD: Mostly ... Just when I... When I buy these magazines I read it, when I get home. It wouldn't be a time... when I buy it I'll just read it at that point. When I get home, I'll read it; look at the pictures, if there is an interesting picture, read article and then put it aside. Most of the time I would just get over and done with, and then put it aside and sometimes when I thought I am going back to it and read it... I would read some more. I read it, oh gosh; I don't know how to say it... I read it, when I

feel like it. I don't have a timetable that I give myself in reading them. I would not spend 1 hour on a magazine.

I read people magazine, because of the whole celebrity market, I would read Move or Bona when I feel like ok let's see what's happening in South Africa and a South African context and stars in South Africa and maybe there is a story going on a musician in South Africa... The only reason I read Bona is because when I was in grade 1 my school, they took a picture of us and we were one of the stories in Bona. Because that happened it will be always on my mind, like let me just read it and not put it on the side, but I wouldn't read most of the time, I prefer reading Move. I think this is because it has more valid stories and is more for lower class, but it's getting up, but it's still for lower class.

9. When was the first time you have a women's magazine?

LD: True Love was the first magazine, I have read because my sister would always buy this magazine. She is five years older than me, so when I was 10 she was 15 and was going into teenage years. Because of her I became aware of True Love and the things it has in it and... yeah, mostly things about women and it didn't have anything about girls or something, it is only on women. Because she read it, I read it also.

10. Describe a typical situation reading a women's magazine.

LD: I'd say maybe it will be excitement. Maybe I wanted to see, what is inside. Mostly, when I am bored I wouldn't want anything to read. When I am in a slightly happier mood I would read a magazine. When I feel like I am woman... when I feel like I am a lady today... I would read it.

11. What is happening while reading magazines? **Do you have any questions while reading?**

LD: When I read a magazine, I feel like ok, when I finished my master what car I am going to get, what are older women thinking, how do they connect their life, what gym do they go to, all that stuff, yeah I just think of live as a woman and what your life would be and I see other women in the magazine and I think ok this is one that I would like to be or I wouldn't want to be.

When you first open the magazine and you see the editor you think because it's a women's magazine is it that mostly women working there or men and women and how do they get to this position and all of these things. I think Cosmo is controversial; I already have this idea what Cosmo is driven by and it is driven by how women dress and how they please their partners and mostly I am thinking maybe I am not the person or women to read this magazine because I am not really that extreme.

The question that I have with Cosmo is I think, they're not really focusing on black people with HIV and AIDS, they focus on how or the best position while having sex, they wouldn't say anything about HIV prevention and with Cosmo I think is it really relevant to South Africa? But in terms of people wanting to construct their own identity maybe it is one of the magazines that people want to read and to explore things.

Fairlady... I read Fairlady maybe once in six months. It is not a magazine, that I read a lot. Fairlady is more on an adult woman. And cosmopolitan is more on the wild woman....

12. In your opinion, which magazine is most interesting? And why?

LD: Cosmo is most interesting. I think it is the way, Cosmo presents itself and the cover and it will get your attention even though you are not that type of person.

13. What kind of topics are you interested in and what information are you looking for?

LD:

<i>Fashion</i>	1. X	<i>Health</i>	
<i>News</i>		<i>Sport</i>	
<i>Celebrities</i>		<i>Travel</i>	
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>	4. <i>Personal stories, e.g., breast cancer...</i>	<i>Success and motivational stories</i>	2. X (<i>Women who are making it in life, business women</i>)
<i>Others:</i>	3. <i>Hot guys but not sex</i>		

14. After reading the magazine, what happens to the magazine itself?

LD: *I put it aside... And then when I feel like reading it again, I read it. I wouldn't throw it away. No I wouldn't. Because... I think it is the way of package and you know that a women's magazine it is probably mostly like a bible. You read it until you get bored. You can read an issue from 2009 and it is still be relevant. That's what it makes a difference from newspapers for me. The newspaper is like what happened today and the magazine is more personal.*

15. Which of these health related topics have you ever discovered in a women's magazine?

LD:

<i>Fitness or exercise</i>	X	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	X
<i>Cancer</i>	X	<i>Heart diseases</i>	X
<i>Diet/ nutrition</i>	X	<i>Mental health issues</i>	No.
<i>Sexual abuse</i>	X	<i>Physical abuse</i>	X
<i>Alcohol use</i>	X	<i>Drug use</i>	X
<i>Sexual activities</i>	X	<i>Contraception</i>	X
<i>Pregnancy</i>	X	<i>Medicines/ Pharmaceuticals</i>	X
<i>Smoking cigarettes</i>	<i>Just advertising</i>	<i>Violence</i>	X
<i>Others:</i>			

16. What do you think, why are these topics included?

LD: *Because they are part of real life, because of people's situations and circumstances magazines want to give aid in like how you can get help in some situation. I think it's mostly to be able to self help yourself and how to deal with things as a woman alone, yeah how to deal with situation and where to get help.*

17. How interested are you in articles on health, particularly on HIV and AIDS?

LD: I think I become more interested if it's a celebrity. Not that I don't read black normal peoples stories but when celebrities, especially in Move magazine an article on that lady who's acting in soul city, she disclosed her status and she is sending mixed messages because she thinks she is HIV positive and said she doesn't take ARVs. I got interested in that article because I wanted to know why HIV is linked to her. I think I would read mostly on HIV because it is part of... like a lot of people are affected and infected by HIV, so it is also something that you should learn how other people think of it and why. I think, in True Love was also that article on a young lady. She told her story how she got infected and make me realize not all people get infected because they were careless but because of the situation that happened to them. I think it gives you a perspective how people who are HIV negative think and how people who are HIV positive think. I believe that. But sometimes I do get tired of HIV and AIDS because it's always around.

18. Do you pay attention to HIV and AIDS messages? What would get your attention specifically?

LD: Yes, but sometimes I think I already know that. I think an article would get my attention if there was an article on people who were HIV positive, how they would eat like a diet for them. That would be interesting and I would definitely read that article because in as much as it healthy for people who are HIV positive it will also be healthy for a person. Because of my weight issues I would look at their diets. And I think if it would be more innovative I'd read it. I also think it is interesting to not just look on one person, who is HIV positive, but if a story is about a couple that is infected or affected by HIV and AIDS or a family that is fighting or living with HIV and AIDS that would be interesting rather than looking at only one person. If you are looking at only one person as an individual but when it's like a collective I'd respond to it even more.

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

LD: Fairlady, True Love

19. Why have you chosen these two articles?

LD: True Love – because it looks mostly at South African black women and I want a perspective on black South African women because I am a South African black woman. Fairlady is more interracial, that why I took it. It is not just black people or white people of Indian people, it is like cross-cultural.

20. What are the specific issues that are being talked about in these articles?

LD: True Love article is on condom use, condom wars and how a couple would argue whether to use a condom or not and how women should stand their ground and not fall into the trap that men or the tricks that man have in terms of not using condoms and want to have skin on skin experience and how you end up thinking oh no if he wants to have he is probably not sick, so he wouldn't say don't use a condom if he is sick. If he asks you if you trust him and that you definitely should trust him and that stuff and then these thoughts just go downhill when you actually realize that not using a condom might be the worst mistake of your life. It's kind of about women standing their ground and not being tricked by men in not using a condom. I think True Love is not really personal, it's generalizes it's for all women. It's generally how women should say no.

Fairlady is more personal because it's someone's story. A woman who had been married to her husband and trusted her husband so much and she would never have thought that he would have cheated or anything. And then she finds out that he is HIV positive and she is HIV negative. She realized from there that the guy was cheating and her life went from this amazing dream into a

nightmare. I think it is mostly on how do you have relations with person who are HIV positive when you are HIV negative and how would you treat them also and finding out that they are HIV positive would you treat them any different? And why would you be different... She also talks about how her children actually never said anything bad about the father but they were thinking of support him instead of how he gets HIV and AIDS in the first place because he was cheating... It is mostly on how if you find out that someone you loved has betrayed you also is sick then how do you deal with that.

21. Who do you think the message is directed at, and why do you say so?

LD: I think for True Love the article on condom wars is probably for young women who are in a relationship but not already married and who are sexually active with their partners and who need to take precaution, still in trusting the guy that you are in you have to take precaution. For Fairlady it's directed to women who are in a relationship, who are married to that person and how to deal with issues around a marriage and HIV and AIDS and problems when your partner is HIV positive and you are HIV negative. It happens most of the time that you find one partner not been infected, so how they to deal with those things... And also safe sex. If he is still the same person and if you still want to have sex with him... to take extra precautions for not contracting that virus.

22. What sense do you draw from these articles personally?

LD: I draw a sense of women taking charge. Because women's magazines are on women and how women should stand for themselves and how and creating that patriarchal sense and how women should stick together in fighting not just against the virus but also men who are deceiving. I think it's mostly on men deceiving women. When the Fairlady article starts it was on the lives of Jessie James and Tiger Woods and all of those things, guys that cheat just like this, sex-driven guys cheating on their wives. And True Love is mostly on guys not wanting to use condoms. It is based on gender inequalities and fighting against these inequalities even in your secret place, which is bed.

23. Is it worth it having such messages?

LD: It is worth it. Because, in as much as it said that women are stronger than men, it is that women are emotionally driven. So reading these magazines, it seems like there is another person or another friend that they have but they don't have contact with that friend, but the friend is like an inner voice that speaks to you in situations. I think, women have that dependency on magazines and magazines help them to make decisions, so magazines are really important to women and they are effective.

24. What feelings did these articles provoke in you?

LD: While reading I was feeling oh gosh is there any man who is actually trustworthy... like oh my goodness! But it also made me think maybe there are. But mostly wow... it was like guys actually cheat. And the whole thing that HIV exists and it's not part of your own imagination or something... it is something that is there and that just awakens "be aware"!

25. What kind of knowledge, attitudes and practices about HIV and AIDS are you getting from the articles? Was there something new?

LD: Yes. Not extremely new but that opened my eyes was in the Fairlady article. She talks about how she wanted to know more, that there was something that her husband not wanted to tell her. And all of the sudden all of these things come out about him having sexual orgies and all that stuff with guys and women just wanting to experience things. And then I am like... You know, you hear about people doing this but then it is your husband who has orgies with different people and strangers and it wasn't that if he was cheating like with one mistress, it was him wanting to

experience things like not just one partner but a sexual drive. It wasn't emotionally; it was just the drive, the sexual drive. That was kind of like scary me.

26. How has reading such articles helped you in understanding HIV and AIDS?

LD: Maybe in the sense that a person who is HIV positive can have a normal live. The understanding that you can't tell if a person is HIV positive or not and that only when they tell you they are, you can like ah ok. The Fairlady article was mostly on that and the True Love article also... it kind of shows that if your spouse wants to have sexual intercourse with you and you don't use a condom it is like you wouldn't have spotted out that he's like HIV positive and want not to tell you... And also condom use with the whole intersexion thing, because they talk about intersexion, just one hiccup can actually lead to contracting the virus.

27. Do you discuss these articles with your friends or family?

LD: I would discuss it with my friends. Because me and my friends would probably just talk about guys and talk about how guys think and even how you know if a guy likes you or not... all of these things. And I think if you would discuss the opposite sex you would also include things that affect you along the line, so I would talk to my friends about it. And I would talk to my sisters about the Fairlady one, but I wouldn't talk to my mom about it. Maybe if she asks me... I would talk to my sisters because they may be the only ones in the family I would talk to... I wouldn't go to my cousins and say oh this and that... but to my sisters because we live together, we talk about things and I would tell them because it is interesting and because of the family, what happens in the family also... yeah I would think I would talk to my sisters about that.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS? And what?

LD: Yes, I do have a reason. It gives me an aspect what I should do, not entirely the only thing you should do to prevent HIV and AIDS. It is mostly on a specific thing, sexual mostly. It doesn't include all the sharing needle things and all these other things that you need to know, so it's not entirely.

29. What is it that is in these articles that you find educational or entertaining?

LD: The Fairlady one was a bit... like... entertaining in terms of the first paragraph, when she talks about the celebrities when they cheat on their wives and all that stuff, that made me want to read more. Maybe I haven't read enough to see the educational part, but in True Love I think it is educational about the whole condom use thing. So I would say, the True Love one is educational on condom use and even the picture that they used was quite entertaining also like how with the condoms, covered by condoms... so that way that they presented the article.

30. Have you learnt something from the characters in the article (if a character is introduced)? What?

LD: I have learnt that this character is would mostly be feminist in True Love. She has a feminist sense in her writing; she is very firm like this should be what we have to do as a woman, to protect ourselves for these guys. From the Fairlady the character I would say is a typical married woman with children who thinks of her family even when the husband has done something wrong, so like what would the kids say and she is very forgiveness driven and compassionate in a sense also, so she's more motherly.

Yes, I have learnt something, even with a partner you should go for a test every six month, go to a test. Not because you don't trust the person, but because you just need to find out and it is good to know. Maybe every year go for a test, not every after six month that is too much, maybe every year you should go on a test. That would keep you aware also, even though you get tempted, maybe the testing thing that is going to be next year will ruin everything, so you stay away from things that you

would have done if you weren't testing. That's what the Fairlady one actually has taught you. Yea, if I would be in a relationship, I would go for a test every year, just to know your status.

31. Do these articles give you skills to deal with similar issues in your real life?

LD: I would say with the Fairlady one... I don't if it is a skill... but the way you address an issue, not just seeing something that is happened, I am not gonna talk to this person, I am not gonna do, just make rushed decisions like without thinking, it allows you to just sit down and see what you can do to make the situation better in life. Maybe that is what I learned... when I am stressed or something how I then give myself space to rationalize everything first and then make a decision. The True Love one just emphasizes mostly on following your gut, it's more an emotional thing.

32. Does the included information help you? How, why or why not?

LD: I think the articles helped me understand how other women think of HIV and AIDS and themselves and as much as you think that you wouldn't be bullied by any situation... it just teaches me they would, not they will be but might be a situation where you would be abstained. It's mostly on decision-making.

Transcript F: Marlini G.

Date of Interview: 29.05.2012

Length of Interview: 24.53 min

Location: Company Office

Information about Interviewees

Name	Marlini G.
Age	30
Occupation	Brand Manager
Gender	Female
Highest education	Postgraduate
Ethnic background	Indian SA
Place of living	Durban, married

1. In general, how is your health?

MG: Good. I was asthmatic as a child, so I do take chronic medication.

2. In the past month, how often did a health or emotional problem occur?

MG: I had the flu once, no serious emotional problems.

3. If you wanted to get information about sexual health, what are your resources?

MG:

<i>Friends</i>	<i>Family</i>	
<i>Newspapers</i>	<i>Magazines</i>	
<i>Television</i>	<i>Internet</i>	<i>1</i>
<i>Books</i>	<i>Hotlines</i>	
<i>Public health campaigns</i>	<i>Health provider/ clinic</i>	
<i>Other:</i>		

4. Are you affected by HIV and AIDS within your community or family?

MG: No.

5. Do you use contraceptive methods? Which one?

MG: I am on the pill and I use condoms.

6. What kind of media do you usually use?

MG:

TV	2	Newspapers	5
Women's magazines	3	Internet	4 (blogs, magazine websites)
Radio	1	Others:	Outdoor, mall advertising

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

MG:

Bona		True Love	3 sometimes
Move!		Cosmopolitan	1
Fairlady	2	Others:	

8. When, where and why do you read women's magazines?

MG: At home, before I go to bed, at the beach or a park, when I go for a picnic...

9. When was the first time you read a women's magazine?

MG: I think it was the Seventeen magazines of my sisters.

10. Describe a typical situation reading a women's magazine.

MG: It is usually for inspiration, so I look at it for fashion and stuff. And it is two times: once while I do something else, like watching TV and I am flipping through it or it is an article that I am interested in, then I am marking it and keep it at my bedside and read it more in depth without any distraction.

11. What is happening while reading magazines? Do you have any questions while reading?

MG: Later one I think than it is happening nothing else, but usually the TV is on, I might work... I think it is quite nice, because you have a personal... it is like your time, that you can engage with the magazine. I find that certain magazines obviously relate to me more, so it is more personalize, it is like my kind of thing and that is quite nice. **It is always nice to have customized content that seems to be written just for you.**

(Questions) Sometimes, general questions... it depends if there is something... mostly on content through that is sparkling your eyes and giving you an idea, like reading something like I can't remember the magazines but world types and for my own knowledge I needed to know which one is the new one, the anxious one, the natural one, so I go Online and check it.

12. In your opinion, which magazine is most interesting?

MG: None of my favorite magazines are here, but I like Cosmo because mostly for the fashion. The articles I find sometimes a bit frivolous, superficial. So I don't read it from cover to cover but skim through it and then it is fine. And probably the Fairlady...

(Favorite magazines) Marie Claire, Cleo, psychology magazine, Elle.

13. What kind of topics are you interested in and what information are you looking for?

MG:

<i>Fashion</i>	1	<i>Health</i>	3 (diet)
<i>News</i>		<i>Sport</i>	
<i>Celebrities</i>		<i>Travel</i>	
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>	2	<i>Success and motivational stories</i>	2
<i>Others:</i>		<i>How to handle work life balance, things that help me through my life</i>	

14. After reading the magazine, what happens to the magazine itself?

MG: *I usually give it to my husband, because he is a dentist and keeps it in his praxis. He recycles it and sometimes I pass it on to my mom or my sister.*

15. Which of these health related topics have you ever discovered in a women's magazine?

MG:

<i>Fitness or exercise</i>	X	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	X
<i>Cancer</i>	-	<i>Heart diseases</i>	X
<i>Diet/ nutrition</i>	X	<i>Mental health issues</i>	X
<i>Sexual abuse</i>	-	<i>Physical abuse</i>	-
<i>Alcohol use</i>	X	<i>Drug use</i>	-
<i>Sexual activities</i>	X	<i>Contraception</i>	X
<i>Pregnancy</i>	-	<i>Medicines/ Pharmaceuticals</i>	X
<i>Smoking cigarettes</i>	-	<i>Violence</i>	X
<i>Others:</i>			

16. What do you think, why are these topics included?

MG: *I think because they are relevant for me. I wouldn't read something or pay attention if it is not really relevant. For like heart diseases my dad has heart problem, so I probably read it because of that, alcohol use my brother-in-law is alcoholic and I like to read how it affects the family because I have some nephews and everything else is for my own use for fitness, health being... And because just how certain topics are related to me most of readers relate them to their lives and with their family and friends.*

17. How interested are you in articles on health, particularly on HIV and AIDS?

MG: *Not really, unless it is like statistics which is always very interesting to me like how much it is grown in terms of incidence rates and things like that. But generally... just to know the facts because I read so many in my life, I know how it's done, I know how it's contracted, I know how it is, what it stands for, what it is... So basically a lot of it is rehashed for people to read, it is not new information for me.*

18. Do you pay attention to HIV and AIDS messages?

MG: No.

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

MG: Fairlady, True Love

I chose the Fairlady because they usually have some nice articles and the True Love just for some variety.

20. What are the specific issues that are being talked about in these articles? Do you think these articles are true?

MG: The True Love one was about how women are forced or tricked into not wear a condom during sex and the other Fairlady article was about a lady who was in a nine year relationship with a man who should always being faithful but he had a different life and he was HIV positive. I do (think these articles are true).

21. Who do you think the message is directed at, and why do you say so?

MG: I think the True Love one is directed at young women or young girls because I think a lot of them are in these kinds of situations where their partners and I read a lot of articles about, where the women kind of say you know you can trust me, I don't want to wear a condom and I think it is just a message to say it is fine, you need to stand your ground because your life is more important kind of thing.

The Fairlady one I think the message is that you can't trust anyone! You never know what kind of hidden secrets are out there.

22. What sense do you draw from these articles personally (if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles suffers from articles on sex/ sex life tips etc.?

MG: I think not so much from the first one (True Love) because I am married and I don't really have several partners but I think.... Not real sense, but an eye-opener to what the world is. You know, we are living in our little bubble and think everything is happy and butterflies and whatever and then it is nice to get a sense of reality and what's true and what's out there, a reality check.

(Credibility) Yes, I think to a certain extent (they interfere with the sex articles). I think it would be nice, if every article also highlights the danger of HIV and AIDS because it is such a big epidemic in this country and I think magazines need to be cognizant that sex isn't just a fun thing you can do with everybody, there are certain precautions you have to take, I wouldn't say we shouldn't have these articles (on sex) but there should be a little disclaimer or whatever just to say, whatever the case is always use protection or something because there are a lot impressionable young people out there who to look at this and "oh yea I wanna test this out" and they are sometimes not very well educated so they take it very literally, which is also a problem.

23. Is it worth it having such messages?

MG: I do, because not everybody is actively going to search this kind of information, so putting it in these environments where people are reading it and packaging it in a nice and writing it in a nice

and easy to read, understandable and still getting the serious message across, I think that is quite nice about these articles. It is interesting to read, sometimes in a light-hearted way but you still get the seriousness of the message, it still goes along with the tone of the magazine but it doesn't take away credibility of that message or importance.

24. What feelings did these articles provoke in you?

MG: Mostly anger... The True Love one especially... for the guys but also for females, women, how they put their life in risk all the time and I think with HIV it just becomes so normal that people don't realize the extent of it, like o yes, I get the status and I have to take the medication it just becomes like another thing like cancer, like oh she's got HIV apparently... It is not a big thing anymore.

25. Was there any kind of knowledge, attitudes and practices about HIV and AIDS you getting from the articles? Was there something new for you?

MG: No, not really.

26. Has reading these articles helped you in understanding HIV and AIDS?

MG: Yes definitely. I think just reading sometimes people experiences is nice to understand the extent of it, like I said I love reading about statistics and how these generalizations about HIV like its only with black people and whatever and showing article that show it is actually not just about black community or the gay community for instance...

27. Would you discuss these articles with your friends or family?

MG: Yes, I probably would. Maybe the one with the lady finding out that her husband have a second life, maybe I'd discuss that... because it is quite interesting and more than what we are having for dinner. It was quite something new, the other one have and read it before; that is quite a nice story just because it is different.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

MG: No, well if I didn't know... is just says why to use a condom to not get it and the other one says how a man had it and he wasn't looking really ill. But it doesn't tell you what it is that you are getting and how bad it really is, it just said use a condom to not get HIV but do people really know what it is? Do they really know the extent of what the disease is and what impact it will have on your life?

29. Is there anything in these articles that you find educational or entertaining?

MG: I think the True Love one is... educational, maybe not. It just highlights it... for me it is not really relevant. The other one it was a little entertaining in the fact she is so stupid to take him back but educational no I wouldn't say so...

30. What have you learnt from the characters in the article (if a character is introduced)?

MG: I think for the Fairlady one like I said, because I never do that, not so much HIV or whatever he did, but the fact that she and her daughter could forgive somebody... forgiveness is one of the hardest things maybe for anybody but for me as well, to forgive somebody is so hard and in the way how she could do that it is actually admirable that she was willing to forgive him because of the love they shared and give him a chance and support him through this time.

31. Do these articles give you skills to deal with similar issues in your real life?

MG: Yes. I can't really relate to the True Love so much but the Fairlady one tells me you can't trust people, you can't trust anyone, you must keep people on their toes.

32. Does the included information help you? How, why or why not?

*MG: Yes I think so. Living through other experiences, reading it, and their experiences can make you a better person, not a better person but it gives you richer way of looking at things, **so you don't have to necessarily experience something to have this experience.***

Transcript G: Nomvelo N.

Date of Interview: 24.05.2012

Length of Interview: 25,63 min

Location: Company Office

Information about Interviewees

Name	Nomvelo N.
Age	29
Occupation	Brand Manager
Gender	Female
Highest education	Bachelor
Ethnic background	Black South African (Zulu)
Place of living	Durban, lives by herself, single

1. In general, how is your health?

NNg: I think I am healthy, I am aware of it, I look after myself, I try and eat healthy, I try to make good and healthy eating choices, and I try to go to gym once a week.

2. In the past month, how often did a health or emotional problem occur?

NNg: Emotional would be like stress-related? Probably in the past month quite a bit, just work-related... in terms of health not really.

3. If you wanted to get information about sexual health, what are your resources?

NNg:

Friends	Family	1) X sister
Newspapers	Magazines	
Television	Internet	2) Google
Books	Hotlines	
Public health campaigns	Health provider/ clinic	3) doctor
Other:		

4. Are you affected by HIV and AIDS within your community or family?

NNg: I don't personally know anybody who has HIV and AIDS, oh yes actually my sister's helper has HIV and that is probably one of the few people who ever like disclosed, because she told my mom, she is HIV positive and if that is an issue. Besides that I am not really affected, we know people who are kind of affected.

5. Do you use contraceptive methods? Which one?

NNg: Yes, I am on the pill and if I am sexually active I do use condoms.

6. What kind of media do you usually use?

NNg:

TV	2	Newspapers	5
Women's magazines	1	Internet	3
Radio	6	Others:	Social media on my phone

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

NNg:

Bona	X	True Love	X regularly
Move!	X	Cosmopolitan	X regularly
Fairlady	X	Others:	

8. When, where and why do you read women's magazines?

NNg: When they come out...and in the evening or the weekend, just to page through and look and depending what attract me most it's like fashion, stock latest news and I read the articles inside. Why... to see what are the latest trends, to see different styles and also because of news, it is not the latest news, but its news that's happening.

9. When was the first time you read a women's magazine?

NNg: Yes, I was in high school, grade 7, Blush magazine, like a teen kind of young magazine. I can't remember how much it was...it was a monthly magazine. And after that I grew up a bit, and then it was Cosmo. Cosmo was always a little bit older than I was at that time.

10. Describe a typical situation reading a women's magazine.

NNg: I am at home... at first I will get the magazine at work, then I page through it. Then at home, I am on my couch, the TV will be on as well and I am paging through it, it is in the evening or at the weekend, so I am relaxed. I've got time to actually read it. I'll read through articles that catch my eyes, I'll look at the clothes, the styles...

11. What is happening while reading magazines? Do you have any questions while reading?

NNg: Well, I won't read it if I haven't time... so I am relaxed or I would try to become relaxed. I am calm I guess... I mean sometimes I see something I would have a look at it later like restaurants and I write it down, it is not a very active period while I am reading, I am kind of chilled... Sometimes they have like a real-life story, interesting situation and it may take me make notes and I'll share it, maybe I'll send a message to my sister or my friends: have you seen the new Cosmo, but it doesn't happen often. Sometimes it'll just remember and talking about it later.

12. In your opinion, which magazine is most interesting?

NNg: Interesting is a subjective word... I'd say these two are most interesting (True Love and Cosmopolitan) probably in terms of content I'd say True Love. With Cosmo I don't do a lot of reading, I do looking... I would read one or two articles here, while I read here (True Love) a lot more.

13. What kind of topics are you interested in and what information are you looking for?

NNg:

<i>Fashion</i>		<i>Health</i>	
<i>News</i>	5	<i>Sport</i>	
<i>Celebrities</i>	4 peoples stories	<i>Travel</i>	2. local travel, local place
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>	1 real life stories	<i>Success and motivational stories</i>	
<i>Others:</i>	<i>Glamour rubric: Hey its ok</i>	<i>Advice, self help, how to</i>	

14. After reading the magazine, what happens to the magazine itself?

NNg: *It stays on my coffee table until the next one comes, so I'll have a friend over and they read it, my little sister, she often wants to read it. After a while its get discarded.*

15. Which of these health related topics have you ever discovered in a women's magazine?

NNg:

<i>Fitness or exercise</i>	X	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	X
<i>Cancer</i>	-	<i>Heart diseases</i>	-
<i>Diet/ nutrition</i>	X	<i>Mental health issues</i>	X
<i>Sexual abuse</i>	-	<i>Physical abuse</i>	X
<i>Alcohol use</i>	-	<i>Drug use</i>	X
<i>Sexual activities</i>	X	<i>Contraception</i>	X
<i>Pregnancy</i>	X	<i>Medicines/ Pharmaceuticals</i>	X
<i>Smoking cigarettes</i>	-	<i>Violence</i>	-
<i>Others:</i>			

16. What do you think, why are these topics included?

NNg: *Because they're topical, people want to know more about them and these are topics, that people... it is not like everyday conversation. So if people are interested in those topics, it is important to include them.*

17. How interested are you in articles on health, particularly on HIV and AIDS?

NNg: *I am interested, but not just on HIV and AIDS but other sexually transmitted diseases as well.*

18. Do you pay attention to HIV and AIDS messages?

NNg: *Yes and no. I think it depends how it's like, I think what's more interesting is real-life stories about HIV and AIDS because I think people are aware of the medical side of it, you know how you get it and what's it about but it's more how it's affect people, I think that is more important and that*

is what gets to me, because then it's people you can relate to and situation you have been in and would be more interesting about HIV and AIDS than the actual disease itself.

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

NNg: Cosmopolitan & True Love

I am reading these two magazines, I like the stories in them and the perspectives they get.

20. What are the specific issues that are being talked about in these articles? Do you think these articles are true?

NNg: Well, the one story (Cosmopolitan) is about a girl who dates a man, who is HIV positive and disclose his status prior to their relationship and the other one (True Love) is about real situations when women find themselves when men don't want to use condoms.

Yes, I do (think these articles are true).

21. Who do you think the message is directed at, and why do you say so?

NNg: These messages are both directed at women... the first one (Cosmopolitan), where the man is HIV positive is for society in general and young people in society, because it is a topic that can come up but I think it's more on dating an HIV positive and people's response that people have towards those kind of situation of a couple and the other one (True Love) is directed at women, to kind of stand their ground and is actually a real issue that is around and needs to be taken seriously.

22. What sense do you draw from these articles personally? (if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles suffer from articles on sex/ sex life tips etc.?

NNg: I think the first one (Cosmopolitan), that I was reading was like: wow, she is brave. It makes me think about, what I would do in this situation. The second one (True Love) about the couple was quite funny, because it is so true. It just reminds you of things, you know like, it's something you all know, but this kind of situation reminds you how real it is.

(Sex articles) I don't really think so (there is a contradiction), because this back to reality article (in Cosmo) comes first, before you get to the (sex) quiz article and the Cosmo is kind of known for these articles. I don't think it takes away; in fact the real life article (on HIV and AIDS) seems to be just a little bit out of place in the Cosmo, it makes it no lighter as a magazine, but it doesn't take away the fact that is true.

23. Is it worth it having such messages?

NNg: Definitely. Because it is important to remind women of the reality of these situations and also gives them ideas or perhaps something like how to get out of this situation because sometimes it is still in society that women think they can't say no, they can't stand up for themselves. They don't know what to do in these situations, they can relate to it or what could have been done. I think it's important to still empower women.

24. What feelings did these articles provoke in you?

NNg: A little bit of shock, I felt a little bit guilty because of judging in terms of the girl in the Cosmo article how could she, but at the same time I thought how she felt in the relationship and how she handles it and then just aware, a little bit more reluctant.

25. Was there any kind of knowledge, attitudes and practices about HIV and AIDS you getting from the articles? Was there something new for you?

NNg: New? She (in the Cosmopolitan article) said that they'd spoken to her doctor and they can have oral sex without like any protection and that is fine... I didn't know that. And I still don't know if I can believe it. Otherwise (the True Lady article) was entertaining; I liked how it's written and how he comes up with excuses...

26. Has reading such articles helped you in understanding HIV and AIDS?

NNg: Yes, I think it helped keeping it top of mind and being aware. Yes, and sometimes it does help answering some upcoming questions.

27. Would you discuss these articles with your friends or family?

NNg: Yes, I would do that. I have more these kind of questions, ah discussions with my family, talking about news or politics and these kind of topics would come up. With my friends maybe it might come up with the guys and the condoms because this is something my friends have maybe gone through this and we talk about that, but the other article (in Cosmopolitan) more with my family.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

NNg: More of how... I think the why is kind of a given, it is more how and the different situations that are a risk, that you do find yourself in, it is not ok to do it one time. It kind of reminds you this happen to somebody and this works, especially for me, because I like real-life, so the facts are kind of worked in.

29. What is it that is in these articles that you find educational or entertaining?

NNg: Entertaining is the fact that it is true, different situation that are true; like someone can say this is what happened to me and it is been written in a funny way and funny example they've chosen. Educational the couple, who went through it, consulted a doctor and what the doctor said that brings new information. Of course whether you believe it or question it later, but it brought something new from a credible source.

The educational aspect (is more important), I think. Because in the one story the girl... he tried to take the condom off and whatever and then she meets him a couple of weeks and month later and he was looking sick. Because at first she thinks no he looks healthy, so I'll take the risk, so I think that is more important that the funny excuses she was making before. That's what you take away when you like think you can't just base it on how a person looks like. I think that is the educational message.

30. What have you learnt from the characters in the article (if a character is introduced)?

NNg: I guess so. I think I am more reminded than before. Yes.

31. Do these articles give you skills to deal with similar issues in your real life?

NNg: Yes, I think the examples that are given give me skills that you empower yourself to say no, you are more convinced to say no and not take the risk. It is like when someone tries to convince you that he wants to do something that is wrong it is actually not so wrong. But actually it is very wrong, there is no grey area. Yes, more empowered to see this. And I think that is important, just to remind or being reminded of that risk that is real.

32. Does the included information help you? How, why or why not?

NNg: Yes, in terms of being reminded or to get another look at the way that people contracts HIV and AIDS, it is not that you're careless, but in real situations of real couples and the kind of dynamics that go in there is sometimes difficult.

The article about a women who dates an HIV positive man, I don't feel quite I can relate because looking at these I don't feel I would put myself in, so just to get her perspective, how she feels and people react to her, but I do feel a bit out of that situation.

Transcript H: Nzokuhle N.

Date of Interview: 23.05.2012

Length of Interview: 31,35 min

Location: University Office

Information about Interviewees

Name	<i>Nzokuhle N.</i>
Age	<i>31</i>
Occupation	<i>Masters student</i>
Gender	<i>Female</i>
Highest education	<i>BA Honours</i>
Ethnic background	<i>Black SA</i>
Place of living	<i>Westville, lives by herself, in a relationship</i>

1. In general, how is your health?

NNx: I think my health is good, because I try and eat healthily and I exercise quite often, so I'd say that my health is good.

2. In the past month, how often did a health or emotional problem occur?

NNx: I have had an apses, that has been troubling me for a few months but now it is finally healing. I think another month and it will be completely healed. Otherwise I've been healthy generally. No other issues or problems.

3. If you wanted to get information about sexual health, what are your resources?

NNx:

<i>Friends</i>		<i>Family</i>	<i>Brother, because he is a gynaecologist</i>
<i>Newspapers</i>	<i>X</i>	<i>Magazines</i>	<i>X if a headline catches my eyes</i>
<i>Television</i>		<i>Internet</i>	<i>X, Google</i>
<i>Books</i>		<i>Hotlines</i>	
<i>Public health campaigns</i>		<i>Health provider/ clinic</i>	
<i>Other:</i>			

4. Are you affected by HIV and AIDS within your community or family?

NNx: Definitely. I have had quite a few family members that have passed away from AIDS. Especially the younger ones, my cousins at my age, I've had quite a few of them pass away. It is difficult watching someone who gets thinner and weaker and dies, so yes it has been difficult. But the funny thing is that is it not all the time, that people say they have HIV and AIDS when they sick, sometimes you discover after they passed away that they were HIV positive.

5. Do you use contraceptive methods? Which one?

NNx: Yes I do, on the pill and it is called Qulara... and condoms.

6. What kind of media do you usually use?

NNx:

TV		Newspapers	4 online
Women's magazines	2	Internet	1
Radio	3	Others:	

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

NNx:

Bona	X	True Love	X
Move!	X	Cosmopolitan	X
Fairlady	X	Others:	

8. When, where and why do you read women's magazines?

NNx: I read them in waiting rooms like in doctor waiting rooms or wherever and I also buy them and I read them after hours when I am relaxing just before going to bed.

9. When was the first time you read a women's magazine?

NNx: No, I guess it would have been home a magazine from my mother. I think probably would have been the Cosmo or True Love, maybe Elle.

10. Describe a typical situation reading a women's magazine.

NNx: A typical situation when I read a magazine... I think lately at waiting rooms, like my doctors waiting room. I haven't bought a lot of magazines lately but when I go shopping sometimes I pass through the magazine and something will catch my eye a person on a cover or one of the headlines on the cover and then I'll buy it, but I have my magazine that I buy regularly and that is O Magazine and Women's health and Shape. O Magazine I buy whatever the headlines are but the other ones... if I buy a True Love it really depends on the cover and what's on the cover.
At home... I would probably have a meal at the table because I live by myself or I would be in bed just before going to sleep just paging through the magazine, or maybe on the weekend when I wake up first thing in the morning when I am still in bed I read it and page through.

11. What is happening while reading magazines? Do you have any questions while reading?

NNx: I feel informed or especially with the O Magazine, there are some stories that will be covered or that people write articles about what they have gone through and stuff that I can relate to, so I feel like I am not alone and feel certain things or in a certain way and I feel supported because they come up with solutions for how to handle different situations in your relationships or your health. Reading a magazine helps me to feel like I am not alone with having certain problems and issues and also for entertainment things, sometimes it is just entertaining to read.
I also don't read a magazine very critically or very academically, so I don't question a lot. It is almost like watching TV when you just want to unwind a bit.

12. In your opinion, which magazine is most interesting?

NNx: *Out of these 5 generally... It really depends what I am in the mood for and what's on the cover... I can't say... But I'd say between the Cosmo and the True Love.*

13. What kind of topics are you interested in and what information are you looking for?

NNx:

<i>Fashion</i>	x	<i>Health</i>	x
<i>News</i>		<i>Sport</i>	
<i>Celebrities</i>	x	<i>Travel</i>	
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>		<i>Success and motivational stories</i>	
<i>Others:</i>		<i>Relationships</i> <i>friendships</i> <i>Food, recipes</i>	

14. After reading the magazine, what happens to the magazine itself?

NNx: *I don't throw them away. I sit with them at home, but I really consider throwing it away now because they are too much of them. I find it difficult to throw a magazine away... sometimes I go back to old issues and I read an issue from 2 years ago and I still find it relevant, it feels like a book to me as well. So, I find it difficult to throw it away.*

15. Which of these health related topics have you ever discovered in a women's magazine?

NNx:

<i>Fitness or exercise</i>	x	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	X
<i>Cancer</i>	x	<i>Heart diseases</i>	X
<i>Diet/ nutrition</i>	x	<i>Mental health issues</i>	=
<i>Sexual abuse</i>	x	<i>Physical abuse</i>	X
<i>Alcohol use</i>	x	<i>Drug use</i>	X
<i>Sexual activities</i>	x	<i>Contraception</i>	X
<i>Pregnancy</i>	-	<i>Medicines/ Pharmaceuticals</i>	-
<i>Smoking cigarettes</i>	-	<i>Violence</i>	x
<i>Others:</i>			

16. What do you think, why are these topics included?

NNx: *I think because these are issues that women have to deal with, that are relevant to them and if in magazines are relevant issues then women buying these magazines, I guess.*

17. How interested are you in articles on health, particularly on HIV and AIDS?

NNx: I am interested in health issues, but in terms of HIV and AIDS I don't really want to read about it in a magazine because unless it is covering the human aspect and some experiences of the disease and how it affected them. But in terms of how it happened and how it's contracted and use condoms and all that no, I don't want to read that. Because some of this information is very repetitive, I heard it a lot of times before and I don't want to hear it again.

18. Do you pay attention to HIV and AIDS messages?

NNx: If they are not to... about... like if there is a nice balance between information and like I say the human aspect or entertainment or just an emotional appeal... if it's not too biological. (a good example) I think I remember a celebrity that was talking about a friend that has passed away from HIV and AIDS, I think it was Oprah. She was talking about her friend that has passed away from the disease, it was a while ago and at this time there was still a lot of stigma attached to it and how far we have come and what that person had to deal with, that is the one I remember.

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

NNx: Move & Cosmopolitan

I've chosen Cosmo because out of the 5 it is the one that I am used to reading. The True Love I have seen before so I don't want to read it again, Fairlady I don't like the title, it has a lot of negative connotations to me and Bona I don't often find very interesting that why I've chosen Move!.

20. What are the specific issues that are being talked about in these articles?

NNx: In the Cosmopolitan it is about a woman that's having a relationship with an HIV positive man and the challenges that they've gone through together in terms of informing the family and the support that she's had from her friends and what they have to deal in the relationship physically and sexually etc. and how they relationship is good even though the man is HIV positive, they make it work. And then in the Move magazine the article is about a couple that discovered that the man was HIV positive after their first child and the woman left and came back later because she had been scared and he had been fired from work but now they've had their second child and they did it through artificial insemination and it tells how you can still have a child even though one of the partners is HIV positive.

21. Who do you think the message is directed at, and why do you say so?

NNx: I think it's about addressing the stigma of the disease and make the woman know that they can still be involved with partners that are HIV positive and that is doesn't have to be a deal breaker in the relationship and that life can go on, you can still have HIV negative children and you still can have sex that is safe and you can still enjoy your relationship.

22. What sense do you draw from these articles personally? (if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles suffers from articles on sex/ sex life tips etc.?

NNx: There is a lot of sense, because I do have a male relative who is involved with an HIV positive woman and they have a child that is HIV negative and I can relate because he hasn't told, I am the only one that knows, he hasn't told his family. I do not know how their family it will take it. So it is a very relevant issue that I see in my everyday life.

Credibility: Yes it is a bit weird (to have sex articles side by side to HIV articles), actually when I was reading it (the Cosmo article), and I closed the magazine I looked back to make sure it was really

Cosmo, because the article is so un-Cosmopolitan but I think the way that its told is nice because as much as they talk about how to be more attractive it is a love story and those are the type of issues in the Cosmo. It is not too rigid, it still quite has the same feel and the same smooth as the sex articles, it is just that it has this educational aspect, but it is not too educational and you don't feel like being schooled, it still feels like a love story, so I think it is ok in the context of this magazine. It is still believable.

23. Is it worth it having such messages?

NNx: Yes, I think it is definitely worth it. Because some of the.... When HIV negative people think about their love lives, generally they don't see themselves getting involved with an HIV positive person. I know it is not something that I considered, it is scary because it means a lot more cautiousness and how you relate physically and ... yes, I think its relevant because it can change your mind set about HIV positive people.

24. What feelings did these articles provoke in you?

NNx: The first one in the Cosmopolitan I think it made me... I don't know it was touching in a way that a woman would get involved with an HIV positive man and not care about his status and see him as a person you know more than just the disease, so it was touching for me. The second one (Move) was a little less emotional than the Cosmo but it was also touching just not that much than the Cosmo.

25. What kind of knowledge, attitudes and practices about HIV and AIDS are you getting from the articles?

NNx: What I didn't know that I learned from the article is that you can have oral sex with somebody that is HIV positive at low risk of contracting HIV. I thought if you have oral sex with somebody who is HIV positive you definitely need a condom or some sort of barrier, so I learned that. I also didn't know that a women who is HIV positive can breastfeed and pasteurize the milk for making it safe for the child. I thought it has to be bottled milk all the way – so I definitely got some new knowledge. Attitudes.... No I don't change in attitudes and practices... I don't know ... nothing...

26. How has reading such articles helped you in understanding HIV and AIDS?

NNx: I think they helped me also to deal with my relative I told you about, because it helped me to understand, ok he is not crazy, there are other people out there, that are involved with HIV positive people although I worry about him contracting it from her as well.... But it helped me in that way. It kind of made me feel like, ok he is not as in danger as I think he is. He can stay HIV negative.

27. Do you discuss these articles with your friends or family?

NNx: Yes, I might... if I read this article and are sitting with friends I might ask them how they felt about being with an HIV positive man. Yes, I probably ask them something like that. Family... it depends which family. As I said, I do have some HIV positive people in my family and it is not something that spoken about, somehow, I don't know if they are lying to me, but somehow everybody confined it to me, everybody is surely about their status, I don't know if I want to discuss thing about HIV before people are open about discussing it.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

NNx: No, I think I knew already. I don't they're given me extra reason... actually they haven't me given extra reason but maybe I definitely feel the disease more, because I realize how much it is a physical thing it goes into every other area of your life: work, the guy that was fired, family, the other

women that could not understand why she is with an HIV positive man, I guess the fear might help me to be more careful, yes it definitely make me feel the disease a bit more.

29. What is it that is in these articles that you find educational or entertaining?

NNx: Educational, I think the artificial insemination was educational and the breast milk feed was educational there was something about ARVs if the CD four counter is on a specific amount then they must take ARVs – that was educational. And also I didn't know that kids take ARV syrup in the first few years or month; that was educational. So yes, there was definitely educational knowledge. Entertaining... I guess the way the Cosmopolitan article were written was a bit entertaining, because it was a life story more than about the disease, the romance side of it was entertaining.

30. What have you learnt from the characters in the article (if a character is introduced)?

NNx: No, I don't know. Not more, than I knew before.

31. Do these articles give you skills to deal with similar issues in your real life?

NNx: Definitely like I said with my relative, it helps that the fact that he is involved with an HIV positive woman a little bit better that there are other people in the same situation and still continuing the relationship.

32. Does the included information help you? How, why or why not?

NNx: Yes definitely. Emotionally it does.

Transcript I: Prestage M.

Date of Interview: 23.05.2012

Length of Interview: 26,7 min

Location: University Office

Information about Interviewees

Name	<i>Prestage M.</i>
Age	<i>28</i>
Occupation	<i>Student</i>
Gender	<i>Female</i>
Highest education	<i>Bsc. Honours</i>
Ethnic background	<i>African</i>
Place of living	<i>Durban, Campus residence, single</i>

1. In general, how is your health?

PM: I would say I am in a good condition; I have occasional headaches and stuff but nothing ever serious, that I have to go to a hospital.

2. In the past month, how often did a health or emotional problem occur?

PM: I'd say twice. Because I am coming from Zimbabwe and I have to get used to the climate. When I came it was very hot. I was drinking lots of water; I was not used to this. And now it is so cold, especially at night, Jesus. It takes getting used to it.

3. If you wanted to get information about sexual health, what are your resources?

PM:

<i>Friends</i>	<i>2</i>	<i>Family</i>	<i>2</i>
<i>Newspapers</i>		<i>Magazines</i>	
<i>Television</i>		<i>Internet</i>	<i>1</i>
<i>Books</i>		<i>Hotlines</i>	
<i>Public health campaigns</i>		<i>Health provider/ clinic</i>	
<i>Other:</i>			

4. Are you affected by HIV and AIDS within your community or family?

PM: Yes I am. Actually I have about six relatives who passed away because of HIV and AIDS. So it does really affect me. I also have my aunt who lives positively.

5. Do you use contraceptive methods? Which one?

PM: No I am not using anything.

6. What kind of media do you usually use?

PM:

TV		Newspapers	
Women's magazines	1	Internet	2
Radio		Others:	

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

PM:

Bona	x	True Love	x
Move!	-	Cosmopolitan	x
Fairlady	x	Others:	Drum

8. When, where and why do you read women's magazines?

PM: *To be honest I read most of them to past time like when I am traveling or when I am sitting, when I have nothing else to do. Or when I see somebody who has it I ask if I can read it. I don't consciously buy, because I know something, I don't.*

9. When was the first time you read a women's magazine?

PM: *I am 28, long ago. I don't remember, but I think I'd say I have had a real interest in them when I started doing my first degree because I did a degree in Journalism. So I do interact with the magazines, how their write they stories... So I'd say my interest and a more intimate relationship with magazine developed since 2005.*

10. Describe a typical situation reading a women's magazine.

PM: *Have the time I am buying when I am traveling. So if I am traveling tomorrow I'd buy them today and then I am reading it on a plane, wherever I am going just to pass time.*

11. What is happening while reading magazines? Do you have any questions while reading?

PM: *Sometimes you don't buy because there is nothing you want read but when you start reading you come up with something fascinating and then you follow it up... I am just interacting with them because they are fun, they are written in such a way I can identify myself with some of the stories; I can identify other women I know in some of the stories. And then it gives me a personal feel, the Drum magazine, even the Cosmopolitan they have a section where they let the readers tell their own story, how the magazines are changing their own life, how they use them... it is nice that way.*

(Questions) *Yes, I do. Because I can't read a text without asking questions. Sometimes I even question the authenticity of the story, because sometimes I am thinking that can't be true. In those instances I wanted to follow it up, what happened... because I have noticed one thing with these magazines. If one story is published the other magazines usually have a follow up or something with that story. So then I am interested to see if other magazines have the same story or if it's going to appear next month in the letters to the editors or something or the reaction of the other people, then I am reading it. So I do interact, I do question like I remember when Kelkumalo came out about her drug things and her struggles and I said to myself this is not true. She is milking us for attention because she has a record coming out, why does she come out now when she knows she is about*

to give us an album. Why didn't she come before, when she was doing it? So I question such things.

12. In your opinion, which magazine is most interesting?

PM: I'd say True Love and Cosmopolitan.

13. What kind of topics are you interested in and what information are you looking for?

PM:

<i>Fashion</i>	x	<i>Health</i>	x
<i>News</i>		<i>Sport</i>	
<i>Celebrities</i>		<i>Travel</i>	
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>	x	<i>Success and motivational stories</i>	x
<i>Others:</i>		<i>Business, breast cancer issues, HIV, women topics</i>	

14. After reading the magazine, what happens to the magazine itself?

PM: Have the time for example when I am on a bus I read and by the time I get to whoever, someone has asked for it. I never have it at the end of the day, someone has always asked for it. But if there is something I really want to keep that I explain to the other person and keep the page and follow the story up.

15. Which of these health related topics have you ever discovered in a women's magazine?

PM:

<i>Fitness or exercise</i>	X	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	X
<i>Cancer</i>	X	<i>Heart diseases</i>	X
<i>Diet/ nutrition</i>	X	<i>Mental health issues</i>	X
<i>Sexual abuse</i>	X	<i>Physical abuse</i>	X
<i>Alcohol use</i>	X	<i>Drug use</i>	X
<i>Sexual activities</i>	X	<i>Contraception</i>	X
<i>Pregnancy</i>	X	<i>Medicines/ Pharmaceuticals</i>	X
<i>Smoking cigarettes</i>	-	<i>Violence</i>	X
<i>Others:</i>			

16. What do you think, why are these topics included?

PM: Because these are the issues that affected us, women. You can't help but be affected at least one of these. So I guess by including them, they know at least one of the readers can identify with at least one of these things so by doing so they are covering their targets.

17. How interested are you in articles on health, particularly on HIV and AIDS?

PM: I am very interested because it is always important to get new information, is there a breakthrough in a certain way, so it's always interesting to read or what's going on. The disease is changing in the way that affects us and how we react to it. So it is always interesting to read what is happening in the science world and how we identify ourselves and place ourselves in that discourse.

18. Do you pay attention to HIV and AIDS messages?

PM: Sometimes, sometimes I don't. The certain adverts if they going to say abstain or condomise and they leave it at that I wouldn't pay attention because I've heard that. But if they would bring it in a new way, I want to read, even if they just say, speaking about condomizing or it is all about abstaining but they would put it in a different way, I'd read it but if the title is just abstinence I wouldn't. It needs to be packaged in a different way.

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

*PM: Cosmopolitan, True Love
Because it is out of familiarity. I am used to reading them more than any other magazine on the table. Like I said, even if I am buying them I would always buy True Love and Cosmo.*

20. What are the specific issues that are being talked about in these articles?

PM: Condom use and HIV. In True Love they are talking about how people in relationships stop using condoms at a certain period and their excuses not to use a condom. And then the other one on Cosmo the lady is sharing how she is dating an HIV positive man and how does it changed her life and her family and how she is staying negative despite of everything.

21. Who do you think the message is directed at, and why do you say so?

PM: To the women, because the magazines are meant for women but it is also for men, who read our magazines, that they become also part of the audience.

22. What sense do you draw from these articles personally (if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles suffers from articles on sex/ sex life tips etc.?

PM: There is sense; these issues are real, like for instance the lady who speaks about her HIV positive partner and she is HIV negative only that she already knows when going into this relationship that he is HIV positive and I know many relationships where women don't know if they are positive or not and it is always a struggle to get people to go for testing and by the time they are ready to go for testing they are through the condom wars that are being talked about in True Love. So they are really real, I can identify with this.

(Credibility) They are believable, I believe it. Because as I said before, we've got friends and family who go through these things, so you know for real this can be true. Just sometimes for instance with the Kelkumalo you ask yourself why now? That can't be true. But there are stories, especially

when they're giving them a human feel like the story (in Cosmo) it becomes more like somebody is already telling you, the individual rather they're telling the whole Cosmo audience.

23. Is it worth it having such messages?

PM: Yes, it is. Because in most cases like we are always painted like the weaker sex, and in most cases we share ideas, we share information so when I read about condoms wars I want my friend to read about it, so I'll give them my magazine and once she has read it... **the magazine becomes a messages, it becomes more than the True Love messages – it becomes a lifeline because someone somewhere will get saved by reading condom wars, by reading dating an HIV positive men**, so it transforms into a life message.

24. What feelings did these articles provoke in you?

PM: The Cosmo I felt sorry for the girl, because in as much as she says the guy has control he want have unprotected sex, they will sleep together without condoms and she is already at risk now. Because she talks about oral sex and going to the doctor... which can be risky to begin with, so I feel sorry for her. And then the condom wars, sometimes I think women are so relaxed in the name of love, they say oh I love him, let's have unprotected sex. We're putting ourselves at risk, because you don't know him and his sexual history in the first place, so I don't know how the True Love story makes me feel... they say, we are not to blame. They're shifting the blame from us to the guys, yet we have to negotiate for safe sex because after all it is our lives. So I think they need to be more on us, because it is our lives, our decisions, our choices, rather than making it a man thing and the guys give us excuses and we always give in. Why can't we fight?

25. What kind of knowledge, attitudes and practices about HIV and AIDS are you getting from the articles?

PM: I wouldn't say there is anything new, but such stories cement the knowledge I already have and cementing the perceptions I already have towards the issues because for instance, I don't know if its relevant, I am doing my research on teenage pregnancy and condom use, so I can identify with the True Love story, the condom wars because it cements everything else that I am reading on. So it does have some relevance.

26. Has reading such articles helped you in understanding HIV and AIDS?

PM: I don't say it helped me in understanding because I already have my subjective perceptions, but it cements and makes such things like a lady dating an HIV positive man more real. This is possible, people doing it and they are still negative. And it also makes me realize that discrimination goes beyond us, it goes also into relationships.

27. Do you discuss these articles with your friends or family?

PM: Yes, I would definitely. All of us get affected, one or the other; I might have friends, who are going through condom wars. I might have friends who are dating HIV positive people or who are thinking about it or even I might be going through condom wars and thinking about dating. So I would definitely discuss it with friends.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

PM: Yes sure, they have. I already have my own subjective ideas on the subject. So when I read such stories, you know, they might shift it a bit but not in a big way. But they still remain on the same thing, we need to protect ourselves and protect the one we love. It would make me feel bad if one of my friends say I am positive because I couldn't negotiate for safe sex and I had information that would have saved her life. So, me not sharing would not be good at all.

29. What is it that is in these articles that you find educational or entertaining?

PM: For me in particular the condom wars was educational, because it realized to help yourself, it is helpful in that regard. I didn't get the entertaining factor.

30. Have you learnt anything from the characters in the article (if a character is introduced)?

PM: The Cosmopolitan woman really strikes a court; she is strong to take such a stand. The True Love one like I said I don't understand how they can shift the blame to men and say because they persuade us, because they told us... I don't understand that part. You have a choice, you can't allow yourself to be persuaded to that level and taking such a big risk. I don't understand that part. But the Cosmo lady really strikes the court, because I wouldn't even think about it.

31. Do these articles give you skills to deal with similar issues in your real life?

PM: Yes they do, especially the condom wars. If I had to react in a situation like that, then I would... because at the end of it all we need to do this, we need to stay our ground, we need to...

32. Does the included information help you? How, why or why not?

PM: Yes, it does, despite the fact that I already have my own ideas it does help me... in True Love if would date an HIV positive person or if one of my family members would date, because they talk about affects such a relationship the family as well, so it would help me to deal with either dating an HIV positive person or within my family to accept an HIV positive person.

Transcript J: Varona S.

Date of Interview: 23.05.2012

Length of Interview: 21,8 min

Location: University Office

Information about Interviewees

Name	Varona S.
Age	24
Occupation	Student
Gender	Female
Highest education	Honours
Ethnic background	Indian SA
Place of living	Durban, lives with her family, single

1. In general, how is your health?

VS: *Good health.*

2. In the past month, how often did a health or emotional problem occur?

VS: *I've just think I've got flue in the last couple of month. No emotional problem, stress with the master thesis is stress all the time...*

3. If you wanted to get information about sexual health, what are your resources?

VS:

Friends	2	Family	
Newspapers		Magazines	
Television		Internet	1
Books		Hotlines	
Public health campaigns		Health provider/ clinic	
Other:			

4. Are you affected by HIV and AIDS within your community or family?

VS: *I would say within the community, there has been incidence of people contracting AIDS.*

5. Do you use contraceptive methods? Which one?

VS: *No.*

6. What kind of media do you usually use?

VS:

TV		Newspapers	1
Women's magazines	1	Internet	2
Radio	3	Others:	Electronic, mobile

7. Please have a look at these magazines (showing of five magazines: Bona, Move!, True Love, Fairlady, Cosmopolitan). Which of these women's magazines have you ever read?

VS:

Bona		True Love	x
Move!		Cosmopolitan	x
Fairlady	x	Others:	

8. When, where and why do you read women's magazines?

VS: *Generally because it is just lying around the house and I come across. I wouldn't necessary buy for myself. But if my auntie or my mom have them, then I read it, browse through it. Just in between during other activities as an intermediate thing...*

9. When was the first time you read a women's magazine?

VS: *I probably got them just from my mom or aunt... their magazines. It has being around the house. (I was) about 14 years old...*

10. Describe a typical situation reading a women's magazine.

VS: *It would be a very relaxed setting, informal, at home probably, on the sofa... just sitting around. Usually there are other people around...*

11. What is happening while reading magazines? Do you have any questions while reading?

VS: *Probably I am being informed, usually entertained, because you read the entertaining, the gossip column at first and then the informative part. Well, it is just generally that most magazines formats are very foreseeable, so even while you are reading, you know more or less, what's to be expected, because it follows the set regime of categories. The same content or the same themes more or less those go across all magazines that are just recycled according to different month, like February will be valentine's stuff, Christmas will be how to handle the in-laws, and you know that kind of thing. There are similar themes according to time of year or month or festive.*

12. In your opinion, which magazine is most interesting?

VS: *I think Fairlady is most interesting because it is entertaining as well as being informative in terms of touching on aspects such as human trafficking and breast cancer and a lot of stuff. Maybe Cosmo is a bit to frivolous; they don't really touch on stuff like that, but Fairlady.*

13. What kind of topics are you interested in and what information are you looking for?

VS: *Well, if you look at the context in which I am reading it – I just read it out of boredom like a timefiller thing, so I wouldn't specifically be searching out for information from in, but if I do come across health issues or human interest issues, then I will read the article.*

VS:

<i>Fashion</i>		<i>Health</i>	x
<i>News</i>		<i>Sport</i>	
<i>Celebrities</i>		<i>Travel</i>	
<i>Make-up</i>		<i>Weight</i>	
<i>Personal stories by women & girls</i>	x	<i>Success and motivational stories</i>	
<i>Others:</i>		<i>A bit of everything</i>	

14. After reading the magazine, what happens to the magazine itself?

VS: *I just leave lying where I have found it. Eventually it gets into the big box and it's thrown away or somebody else takes it, like another person.*

15. Which of these health related topics have you ever discovered in a women's magazine?

VS:

<i>Fitness or exercise</i>	x	<i>Sexually transmitted diseases, e.g., HIV and AIDS</i>	x
<i>Cancer</i>	x	<i>Heart diseases</i>	X
<i>Diet/ nutrition</i>	x	<i>Mental health issues</i>	X
<i>Sexual abuse</i>	x	<i>Physical abuse</i>	X
<i>Alcohol use</i>	-	<i>Drug use</i>	X
<i>Sexual activities</i>	X	<i>Contraception</i>	X
<i>Pregnancy</i>	X	<i>Medicines/ Pharmaceuticals</i>	X
<i>Smoking cigarettes</i>	x	<i>Violence</i>	x
<i>Others:</i>			

16. What do you think, why are these topics included?

VS: *I think these are very common topics that women are faced with, like maybe emotional problems or health problems, its universal things, not confined to a race group or income group.*

17. How interested are you in articles on health, particularly on HIV and AIDS?

VS: *I read it in passing, but I wouldn't necessarily seek out, but if it happens to me I read it.*

18. Do you pay attention to HIV and AIDS messages?

VS: *Yes, definitely.*

Please have a look at these five articles on HIV and AIDS and choose two. Please read these two articles.

19. Why have you chosen these two articles?

VS: *True Love & Fairlady*

These are two magazines that I am most familiar with, so out of familiarity.

20. What are the specific issues that are being talked about in these articles?

VS: *Ok, well in the Fairlady article it was the problem of infidelity as well as the problem with AIDS. I'd say, even though AIDS was the focus of the article on HIV and AIDS, the infidelity aspect came through very strongly. Because as a female like the emotion thing which the lady went through, you could feel the pain as a woman, being betrayed first and foremost. The first betray was the infidelity for her, the second betray was the HIV and AIDS.*

In the second article, the True Love article, they just spoke about how men try to negotiate and coerce their partners into not using condoms during sex.

21. Who do you think the message is directed at, and why do you say so?

VS: *I think in the Fairlady to an older woman, more established person, somebody who is married with children... to an older audience, which is also correlated with the audience of the Fairlady. And then with the True Love maybe a younger audience, maybe 20s, 30s...*

22. What sense do you draw from these articles personally? (...if there is any sense for you)? Do you find these articles believable? Does the credibility of these articles suffers from articles on sex/ sex life tips etc.?

VS: *Personally the one about the condom one didn't really... I never had such experience... And then the Fairlady I just suppose the infidelity aspect was very sad for me.*

I think it's believable, definitely. Especially the one on people living double lives... you never know somebody who seems so respectable within society standards can be different and nobody knows it.

(Influence of sex articles) I think it is kind of contrasting, because on one hand you're promoting a very vibrant violent adventurous sex life, which would be reflected in the guy's previous sex life (of the Fairlady article) but on the other hand you not promoting a conjunction of save sexual practices and saying if you are engaging in this lifestyle, you have to take precaution. I think is good that that these articles (on HIV and AIDS) are put in, at least somewhere you're balancing it out, but I also think it is a contradiction at the same time because you preaching one thing and you're promoting another.

23. Is it worth it having such messages?

VS: *Yes definitely, they serve as a popular forum to get women speaking about this. They're not just read it and keeping the information for themselves; they may read it in a room with other women and discuss it and say: look as this incident of this guy who had prevent sex for example and who else could be part of this kind of behavior, which will lead to HIV.*

24. What feelings did these articles provoke in you?

VS: *I think fear, firstly, both articles on fear, sickness, disease of HIV and AIDS... For most people it is kind of an uncomfortable topic this stuff, they wouldn't really bring it out into normal conversation.*

25. What kind of knowledge, attitudes and practices about HIV and AIDS are you getting from the articles?

VS: *Oh yeah, the practice of safe sex... always using condoms to prevent HIV transmission and also with the Fairlady article the idea of fidelity and one partner in a monogamist relationship to prevent HIV.*

I just think the Fairlady article in terms of the way it is presented in a narrative form. I have found that way... it was an article but it wasn't put across as information. It was written from an emotional aspect and more as a story and you were drawn into reading it like somebody's failed love interest or somebody's failed marriage. And within that story they put the HIV aspect in.

26. Has reading these articles helped you in understanding HIV and AIDS?

*VS: Ya, suppose. I don't know which aspect in particular. I guess, **how pervasive it is**, even within socio-economic backgrounds and racial backgrounds, or even gender related, because this guy in the Fairlady article, he was actually having homosexual relations as well. HIV doesn't discriminate what person is getting infected anyway...*

27. Do you discuss these articles with your friends or family?

VS: I would if my friends were around. Family... it depends on which family, not the mother, probably with your sister, your peer age people, not older people.

28. Have the articles given you a reason or an understanding of why you should prevent HIV and AIDS?

VS: Yes, because it showed the wide influence, HIV and AIDS can have on people's lives. It is not just an illness matter for the body, harm the body, it will have wider consequences.

29. What is it (if there is anything) that is in these articles that you find educational or entertaining?

*VS: It wasn't entertaining, it was more educational. It was just the idea, like I said, people seeming to be one sneaky, even the most respectable people can have double life and that would be like the educational aspect.
Entertaining... as I said earlier with the narrative aspect... but not really entertaining, it made you read further, not have been presented in the usual dry manner as a pamphlet or something... it made somebody read further along.*

30. What have you learnt from the characters in the article (if a character is introduced)?

VS: ...that you have to negotiate in your sex condom use and stuff like that. You can't just be forced but get into action.

31. Do these articles give you skills to deal with similar issues in your real life?

VS: I suppose, the stories it serves as a teaching mechanism. If you would be in that situation, you have options of how to handle the situation.

32. Does the included information help you? How, why or why not?

VS: Yes, I'd say definitely it is helpful. I think just basically like life skills... it broadens your knowledge of how to behave in certain circumstances.