

Project 5:
Fine-tuning HIV/AIDS Prevention Documents for Various Target Groups in South Africa



- To test/develop evaluation techniques and instruments to (pre)test HIV/AIDS public information documents
- To determine how cultural variables interact with the content, application, usability and validity of these evaluation techniques and instruments
- Starting point: the development of a text-focused evaluation instrument

An overview of the contributions made

- Primarily by researchers/students from the Netherlands; a few participants from South Africa
- Number of contributions to date: 37 (including 4 students who still have to complete their theses in 2007)

Overview: Topics dealt with


- Development and testing of an evaluation schema/checklist
- VCT, role of values and religion, fear appeals, stigma, risk behavior
- Design process (eg audience analysis), different persuasion strategies (eg use of exemplars), style (slang, funky language, persona), role of graphics, etc.

Overview: Theoretical applications


- Allowed students to engage with different theories
 - Integrated Model of Behavioral Prediction, Elaboration Likelihood Model, Dual Coding Theory, Cue Summation Theory, Stroop Effect Theory, fear appeals, stigma, Accommodation Theory, etc.

Ex 1:

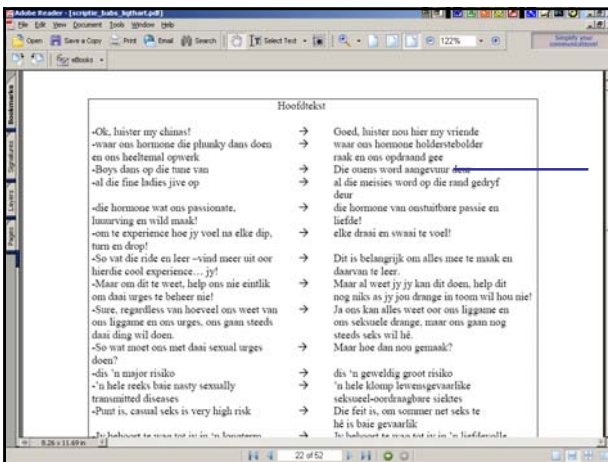
- Annique Laanstra (2005). *Stijl of geen stijl?* Radboud University Nijmegen.
- Babs Ligthart (2005). *Stijl en Cultuur – onderzoek naar het effect van stijlverschillen in een HIV/AIDS voorlichtingstekst bij blanke en kleurling Afrikaans sprekende tieners in Zuid-Afrika*. Radboud University Nijmegen.




- Both focused on the use of “funky” Afrikaans in loveLife documents
- Both: white and coloured youth; one school children, the other students
- Different texts



- For each “funky version” a more neutral, non-funky version was developed and pre-tested




Hooftekst	
-Ok, luister my chinas!	→ Goed, luister nou hier my vriende
-waar ons hormone die pluncky dans doen en ons heeldmaal opneik	→ waar ons hormone holderstebolder raak en ons opstand gee
-Boys dans op die tme van	→ Die onens word aangevuur deur
-al die fine ladies jive op	→ al die meisies word op die rand gedryf deur
-die hormone wat ons passionate, innarving en wild maak!	→ die hormone van onuitbare passie en liefde!
-om te experience hoe jy voel na elke dip, turn en drop!	→ elke drasi en swasi te voel!
-So vat die ride en leer -vind meer uit oor hierdie cool experience... jy!	→ Dit is belangrik om alles mee te maak en daarvan te leer.
-Maar om dit te weet, help ons nie eintlik om dasi urges te beheer nie!	→ Maar al weet jy jy kan dit doen, help dit nog niks as jy jou drange in toom wil hou nie!
-Sure, regardless van hoeveel ons weet van ons liggame en ons urges, ons gaan steeds dani ding wil doen.	→ Ja ons kan alles weet oor ons liggame en ons seksuele drange, maar ons gaan nog steeds seks wil hê.
-So wat moet ons met dani sexual urges doen?	→ Maar hoe dan nou gemak?
-dis 'n major risiko	→ dis 'n geveldig groot risiko
-'n hele reeks baie nasty sexually transmitted diseases	→ 'n hele klomp lewensgevaarlike seksueel-oortraagbare siektes
-Punt is, casual seks is very high risk	→ Die feit is, om sommer net seks te hê is baie gevaarlik.
-In behoort te wees tot in 'n lewens...	→ In behoort te wees tot in 'n lewens...




Methodology

- Between subjects design
- 120 school children and 117 students
- Questionnaires
- Tested for likability, comprehensibility and persuasiveness




Results: School children

- White and coloured children do not evaluate versions differently
- No effect of cultural group and style choice on likability, comprehensibility of persuasiveness
- Problem with methodology...




Results: Students

- White students find non-funky version more likable and persuasive; coloured students find funky version more likable and persuasive
- Group as a whole: On average non-funky style more likable and persuasive



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- No significant effects on comprehensibility
- Whites evaluated the source of both texts less favourably



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Ex 2:

- Lize Vorster (2006). *Mental Models are a Cultural Phenomenon – Fact or Fiction?* Stellenbosch University.

The study

- FACT
- Problem
 - Who's mental model?
 - Logic of the information architecture of FACT
 - Diverse target audience:
 - Do different ethnic groups have different mental models?
 - How strong is the level of agreement of these models (are these models shared?)
- Method: effective in a SA context?


FACT web site



The screenshot shows the FACT website interface. On the left is a vertical navigation menu with items like 'Home', 'Contact Us', 'Site Map', 'FAQ', 'Stellenbosch University & HIV', 'Services', 'Fact or Fiction?', 'How can I become infected?', 'Testing & Treatment', 'How AIDS affects', 'Flaps', 'Your Rights', and 'Prevention'. The main content area features a header for 'The 2006 HIV/AIDS March Campaign - Grow Up and Get Tested!' and a 'SUPPORTING' section with an image of hands shaking. A sidebar on the right contains a 'News' section with dates from February 2006 to March 2006.

Analysis

- Menu system (therefore IA) problematic
 - Main menu not transparent e.g. unconventional titles
 - does not predict underlying content
 - Submenu only visible when you click on it



The screenshot shows the FACT website's navigation menu. The 'Fact or Fiction?' item is highlighted, and a submenu is visible below it, containing links for 'What is HIV and AIDS?', 'History of AIDS', 'Myths about infection', and 'Statistics'. Other menu items include 'Home', 'Contact Us', 'Site Map', 'FAQ', 'Stellenbosch University & HIV', 'Services', 'How can I become infected?', 'Testing & Treatment', 'How AIDS affects', 'Flaps', and 'Your Rights'.

Card sorting

- Structure/content of cards

<p>Student health services</p> <p>Student health services offer, among other things, a free Voluntary HIV Counselling and testing service to students and staff from the University of Stellenbosch.</p>	<p>South African statistics</p> <p>Statistical data about the prevalence and existence of HIV/Aids in South Africa.</p>	<p>Basics on anti-retroviral drugs</p> <p>Anti-retroviral (ARV) drugs stop the replication of the virus, keeping the viral count in the blood stream down to below 50 copies of HIV RNA per millilitre of blood, which is undetectable in tests.</p>
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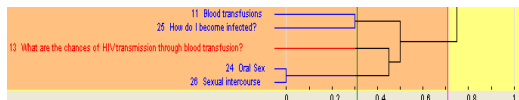
- Method
- Result

Reasons for clustering

3. Function (E.g. FAQ)



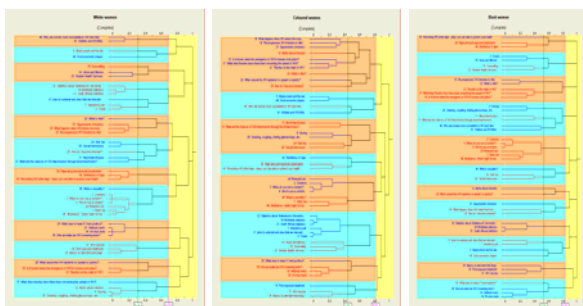
Warning: Semantic relationship does not imply a strong relationship



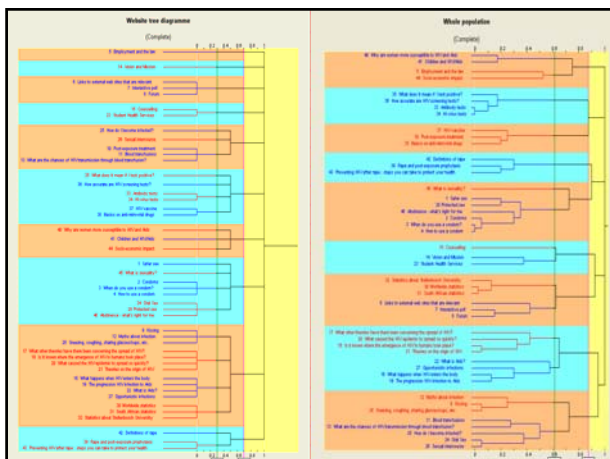
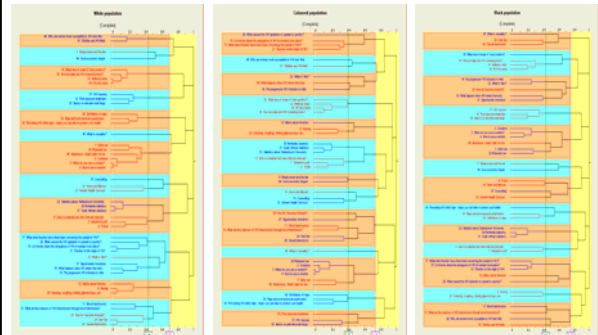
Conclusion

- The white and coloured men's mental models are quite similar, which means that:
 - the two groups are culturally closer together than for instance the white and black men; or
 - cultural differences do not have such a big role to play in the forming of mental models. It could be that experience (apart from culture) have a big role to play; or
- The black men's mental model is not as strong (more elongated clusters/lower level of agreement). Reason:
 - that language proficiency influenced the understanding of the cards and have a bigger role to play than cultural differentiation.

Women



White vs. Coloured vs. Black



Conclusion

- White and coloured groups in general stronger level of agreement
- Typically a lot of overlap between white and coloured
- Mental models of group do not fit the assumed model of the existing website
- Results are only a guideline, not statistically analysed

Critique of the method

- Many of the participants in the study reported that it took a lot of cognitive energy to complete the task. Some found the content too diverse to be able to structure it.
- Other participants, particularly some of the black women, struggled with the difficulty of the language. A title like "Post-exposure prophylaxis" may have caused them to spend more time on trying to decipher what it means than what was necessary.

- Some items difficult to place in a category (can fall under more than one topic).
- Most problematic category: the "What of Aids". The cards concerned are:
 - "What is Aids?"
 - "Is it known where the emergence of HIV in humans took place?"
 - "Theories on the origin of HIV"
 - "Opportunistic infections"
 - "What other theories have there been concerning the spread of HIV?"
 - "The progression of HIV infection to Aids"
 - "What happens when HIV enters the body?"
 - "What caused the HIV epidemic to spread so quickly?"
 - "How do I become infected?"
- Cards sorted in various combinations with other cards. Could indicate:
 - participants' difficulty with task
 - these titles should be accessible from more than one place in the web site

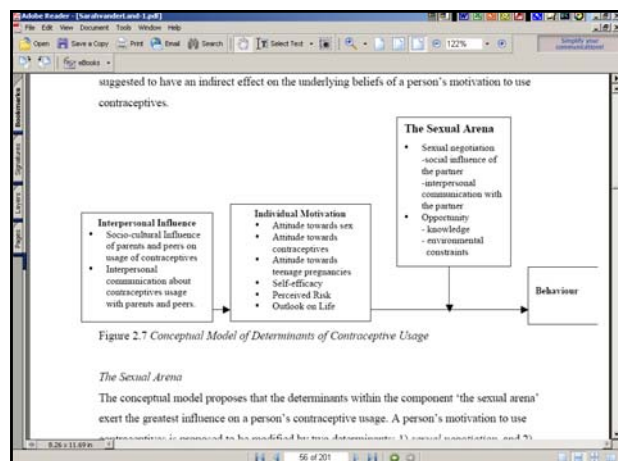
Conclusion


- Very usable method
- Results subjective, but gives a clear indication of mental models

Ex 3:

- Sarah van der Land (2006). *Trust, Lust & Latex. A participatory Audience Analysis Approach in the Design Process of an HIV/AIDS Prevention Document Targeted at young Africans in South Africa.* Radboud University Nijmegen.

"In this thesis we demonstrated how participatory audience analysis helped us to gain a better understanding of the audience's perspective. Especially where matters of life and death are concerned in designing HIV/Aids prevention interventions, it would only seem sensible for document designers to go beyond using an authoritarian 'top-down' approach and to investigate the information needs and communication preferences of the 'real' members of the audience. After all, it is such user-centred interventions that reflect the essence of participatory audience analysis, and that is what we believe will stand a greater chance in motivating the audience to change unsafe sexual practices."

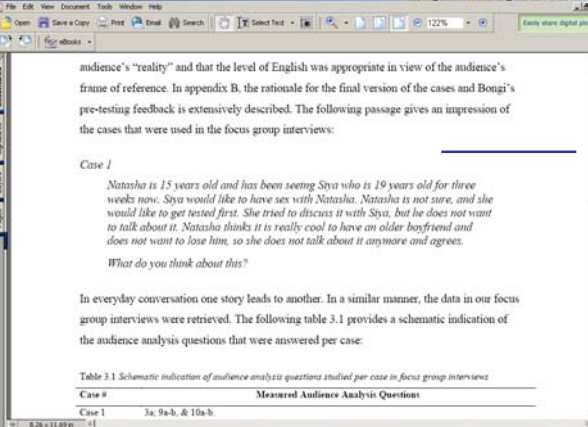




Understanding the audience's perspective

- Need to know factors that influence contraceptive usage and communication preferences
- Focus group method
- Combined with the use of role model stories
- Short questionnaire

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audience's "reality" and that the level of English was appropriate in view of the audience's frame of reference. In appendix B, the rationale for the final version of the cases and Bongzi's pre-testing feedback is extensively described. The following passage gives an impression of the cases that were used in the focus group interviews:

Case 1

Natasha is 15 years old and has been seeing Siya who is 19 years old for three weeks now. Siya would like to have sex with Natasha. Natasha is not sure, and she would like to get tested first. She tried to discuss it with Siya, but he does not want to talk about it. Natasha thinks it is really cool to have an older boyfriend and does not want to lose him, so she does not talk about it anymore and agrees.

What do you think about this?

In everyday conversation one story leads to another. In a similar manner, the data in our focus group interviews were retrieved. The following table 3.1 provides a schematic indication of the audience analysis questions that were answered per case:

Case #	Measured Audience Analysis Questions
Case 1	3a, 9a-b, & 10a-b


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Gained knowledge on ...

- The role of social influence
- Interpersonal communication about contraceptives
- Attitudes towards sex, contraceptives, pregnancy, sense of self-efficacy, perceptions of risk, outlook on life, etc.

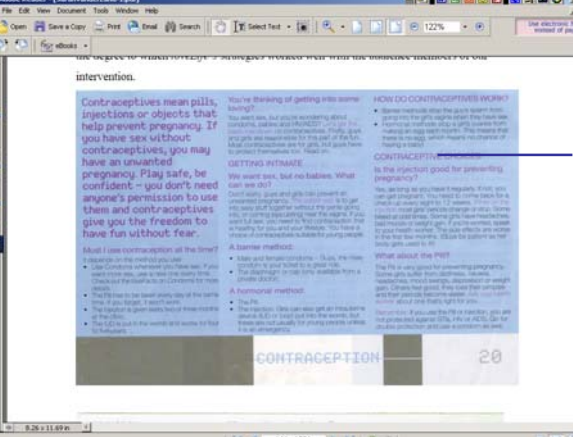
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Feedback on existing document

- LoveFacts
- Chosen because
 - inclusion of target audience
 - no audience analysis done
 - unconventional "cool" style
 - lots of information on different methods

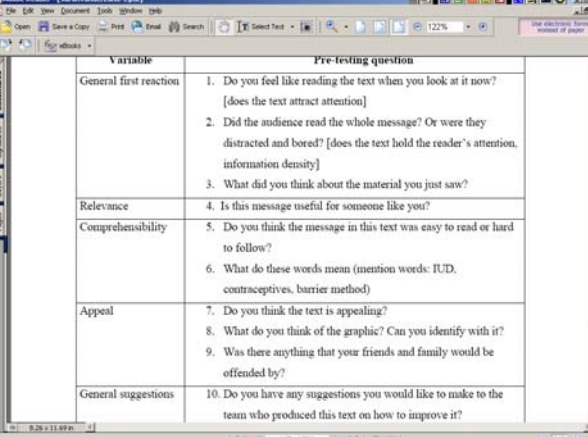
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CONTRACEPTION


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VARIABLE	Pre-testing question
General first reaction	1. Do you feel like reading the text when you look at it now? [does the text attract attention]
	2. Did the audience read the whole message? Or were they distracted and bored? [does the text hold the reader's attention, information density]
	3. What did you think about the material you just saw?
Relevance	4. Is this message useful for someone like you?
Comprehensibility	5. Do you think the message in this text was easy to read or hard to follow?
	6. What do these words mean (mention words: IUD, contraceptives, barrier method)
Appeal	7. Do you think the text is appealing?
	8. What do you think of the graphic? Can you identify with it?
	9. Was there anything that your friends and family would be offended by?
General suggestions	10. Do you have any suggestions you would like to make to the team who produced this text on how to improve it?

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Some results

- Not very appealing in general
- Not always relevant
- Liked informal language – contributes to understanding
- Difficulty with understanding
- Like being addressed
- Not visually appealing

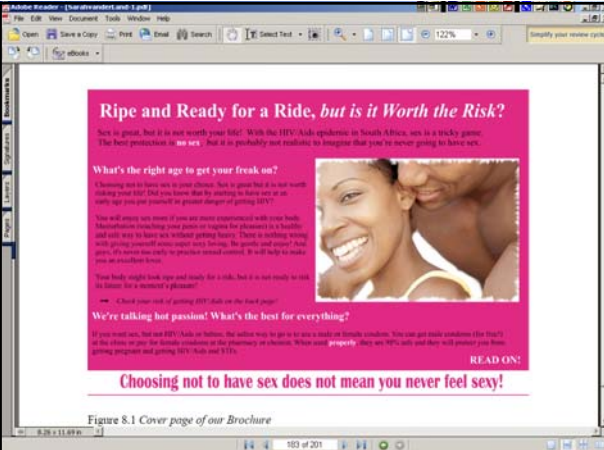



Figure 8.1 Cover page of our Brochure



General problems with research

- Fixed fallacy effect (Meuffels & Van den Bergh 2005) – generalising on the basis of a single case/document
- Measuring culture
- Usability of methodology



Where are we headed now?

- Research and literature survey on heuristic formation
- “Studying the studies”
- Developing heuristics for HIV/AIDS documents
- Book