Communicating for Development in Botswana
A critical discourse analysis of HIV/AIDS-related IEC/BCC materials

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Abstract
The National Condom Strategy 2012-2016, produced and preceded by the Department of HIV/AIDS Prevention & Care in the Ministry of Health in Botswana, addresses the issue of dated and incorrect IEC/BCC materials available in Botswana. This thesis examines an IEC brochure and a BCC brochure, both available in Botswana, through a multimodal analysis containing critical discourse analysis and visual analysis in order to identify discursive elements causing the overall impression of the brochures to be inapt and dated, and thereby ineffective. By identifying unfocused, inconsistent, and confusing attributes in both brochures, the proposition to ensure that clarity and consistency shapes the brochures, and thereby the discourse and message within, or even choosing a different communicative approach, displays the thesis’ position in the practical field of communication for development.
Table of Contents

INTRODUCTION .......................................................................................................................... 4
   BOTSWANA .......................................................................................................................... 6
   PROBLEM FORMULATION ................................................................................................. 9

THEORY .................................................................................................................................. 10
   GLOBALISATION ................................................................................................................ 10
   COMMUNICATION FOR DEVELOPMENT ....................................................................... 12
      Daniel Lerner .................................................................................................................. 14
      Everett Rogers ............................................................................................................... 15
      Wilbur Schramm ........................................................................................................... 15
   HIV/AIDS IN THE COMMUNICATION FOR DEVELOPMENT AGENDA .................... 17
      Trying to define the problem of HIV/AIDS ................................................................. 18
      HIV/AIDS as cultural problem .................................................................................... 19
      Considerations when approaching HIV/AIDS prevention ........................................ 19

METHODOLOGY ...................................................................................................................... 22
   DATA .................................................................................................................................... 22
   QUALITATIVE APPROACH ............................................................................................... 24
   HERMENEUTIC APPROACH ........................................................................................... 25
   CRITICAL DISCOURSE ANALYSIS ................................................................................ 26
   HOW TO ANALYSE ........................................................................................................... 27
   MULTIMODAL ANALYSIS ................................................................................................. 29
      Visual Space – Composition ....................................................................................... 30
      Colour ............................................................................................................................. 32

ANALYSIS ................................................................................................................................. 33
   ANALYSIS OF “PALLIATIVE CARE – IMPROVING THE QUALITY OF LIFE” .......... 33
   ANALYSIS OF “YOUNG & VIBRANT – THE IMAGE WITHIN YOU” ....................... 42
   COMPARISON .................................................................................................................. 50

DISCUSSION ............................................................................................................................. 52

CONCLUSION ........................................................................................................................... 56

REFERENCES ............................................................................................................................ 58

APPENDIX ................................................................................................................................. 61
   APPENDIX A ....................................................................................................................... 61
      Page 1 .............................................................................................................................. 61
      Page 2 .............................................................................................................................. 62
   APPENDIX B ....................................................................................................................... 63
      Page 1 .............................................................................................................................. 63
      Page 2 .............................................................................................................................. 64
      Page 3 .............................................................................................................................. 65
Introduction
In the world of today humans face several problems that influences their everyday lives in one way or another, and are improbably solved quickly. Climate change, terrorism, pandemics, and issues of world trade, politics, and commerce are problems, which humans are forced to deal with everyday. Human instinct to submit to self-preservation emerges in the search for strategically better ways of living and fighting the problems threatening them. Strategies for development are on the agenda of many donors, agencies, and individuals, but trying to solve these complex problems in short-term has been recognised as insufficient, and the requirement of bold and creative thinking towards actions has been identified as capable of creating sustainability. The World Commission on Environment and Development concluded in 1987 that sustainable development is development meant to meet the needs of the present situation without compromising the ability of the future generation to meet their own needs (Servaes, 2013, p. 2-3). In the work with sustainable development one obstructing problem has been setting the agenda for many donors, agencies, NGOs, programs, groups, and individuals – the pandemic of HIV/AIDS. Numerous methods, tools, means, and strategies have been used to fight the pandemic, but no ‘right’ solution has been developed. In 1986 the first report of The Panos Institute “AIDS and the Third World”, they argued that HIV/AIDS was both a symptom and a cause of underdevelopment, and was closely tied to poverty, exclusion, prejudice, and disadvantage; and proposed that interventions to tackle HIV/AIDS could not be isolated from the underlying causes. Knowledge like this needed to travel among human beings, and by then it had the ability to be the most powerful tool to fight HIV/AIDS (Deane, 2002, p. 11). Founder of Panos London, James Deane (2002) argues that communicating knowledge is not enough, and that further considerations regarding the communication strategy must be made in order to generate appropriate and effective mobile knowledge for potentially fighting and preventing HIV/AIDS (p. 12).

Since it’s origin in the 1950s, the field of development communication has transformed from being associated with a systems model of communication...
used as a science to produce effective messages for top-down programs to a more nuanced and theoretically expanded field of study researching the potential of communicating development. Indicating this transformation are the several other approaches frequently falling under the concept of development communication, such as communication for development, communication for social change, information, education and communication, behaviour change communication, social mobilisation, media advocacy, strategic communication, social marketing, participatory communication, and so forth (Waisbord, 2005, p. 77). Within the spread of approaches to development communication is a common tendency of academics to discuss the differences and similarities, but at field level, the practitioners are less concerned with the distinctions and more concerned with the pragmatics (Ibid., p. 78). The context in which we seek to communicate for development is also shaped by an even wider context where the lives of all people are influenced in one way or another. Globalisation is present in the cultural, economic, social, political, and technological aspects of society, and is referred to by professor of social anthropology, Thomas Hylland Eriksen as “the sociocultural processes that contribute to making distance irrelevant” (Eriksen, 2005, p. 26). Global processes, creating both new opportunities and new forms of vulnerability, affect the local sphere. Risk has become globally shared in the era of the transnational terrorism, pandemics, the threat of the nuclear bomb, and potential ecological catastrophes. One the same note, localities are no longer forced to turn inwards for help in case of distress due to shared concern of the global society. A series of changes and innovations in communication technologies has provided humans with the ability to disregard distance and further unravel several risks and problems to deal with in distant corners of the world - problems that were unknown or not given enough attention though remarkably severe. American Sociologist, Roland Robertson argues that modern mass communication was one of the key technologies that created a more interconnected world of globalisation, where modernisation began to be considered as a way of connecting the Third World with the two other worlds (Roberson, 1992, p. 59). The prominent fusion of ‘globalisation’ and
‘localization’, referred to by Robertson as ‘glocalization’, stresses the dual character of globalisation processes (Robertson, 1995, p. 26). Global is local and local is global. The world is being drawn closer into a common awareness of universalism, leaving the global citizens as a part of a ‘global village’, where citizens unite to fight threats to humanity. The attention of the global community turning towards the developing world began in the 1950s with American President Truman’s Marshall Plan and continued fifty years later with the United Nations stating the Millennium Development Goals in 2000 and restated in 2005 to reduce poverty, inequality, child mortality rates, etc. with 2015 as a deadline (McAnany, 2012, p. 8). The point of departure for the thesis will be an interest in one of the eight MDG’s – combatting the pandemic spread of HIV/AIDS. The vital disease has already taken its toll on the global village, where 97% of people living with HIV/AIDS reside in low- and middle-income countries, particularly in Sub-Saharan Africa (U.S. Department of Health & Human Services, 2012).

**Botswana**

When taking an interest in the fight against HIV/AIDS in the developing world and especially Sub-Saharan Africa, the country of Botswana stands out through its contradictory numbers of economic development and national HIV prevalence rates. Botswana is a country in development since its independence from United Kingdom on September 30th, 1966. Botswana was considered a severely poor country with a GNI (Gross National Income) per capita of about 70 dollars per year. Botswana prospered and rose as one of the fastest growing economies in the world, transforming their yearly GNI per capita to about 13,000 dollars, which leads to a decent standard of living for the Batswana (how they refer to themselves) and places them as the second-highest of the Sub-Saharan countries on UNDP’s Human Development Index (HDI) at number 119 as of 2013 (UNDP, 2013). Author J. Clark Leithe acknowledges and points out the exceptionality of Botswana’s ability to create sustainable high growth rates decade after decade due to not only a rapid growing mineral sector consisting of diamonds and copper-nickel, but also an optimal strategy in government expenditures, where for example savings were
invested in foreign exchange reserves, which served as an economic “shock-absorber” (Leithe, 2005, p. 10).

Various factors have played a part in Botswana’s remarkable climb up the economic ladder leading to development and a well deserved placing on the middle section of the HDI, such as focus on primary school enrolment. With an economic view, the future of Botswana is bright and the development will keep advancing, but there is still a downside when taking a closer look at the country’s HDI ranking. As mentioned above, the GNI per capita is relatively high, and when comparing the GNI per capita to surrounding ranking countries, like Honduras and Guyana with about 3400 dollars per year, the other measures must be included to understand how a country with such a high GNI per capita is ranked among countries with lower GNI per capita. The two measures mean years of schooling and expected years of schooling, representing the educational measure of the index, are for Botswana similar to surrounding ranked countries, which leave us with the third measure – life expectancy. The surrounding ranked countries have a life expectancy of about 68 to 76 years old, but Botswana stands out with a life expectancy of only 53 years (UNDP, 2013). When calculating the three main measures of the HDI – GNI per capita, longevity, and education – for a country like Botswana with a rapid growing and prosperous economy, the HDI value is still relatively high compared to other Sub-Saharan countries, but is held back by the life expectancy of the Batswana.

According to the UNAIDS report on HIV/AIDS from 2010 Botswana is among the countries with the highest level of HIV occurrence in the world. The report reveals that prevalence among the population ranging from 15 to 49 years of age was 24,8%, and 320.000 were living with HIV (UNAIDS, 2010). Since HIV/AIDS was first reported in Botswana in the 1980s the life expectancy at birth of the Batswana has declined. A short rise from 50 years in 2002 to 54 years by 2008 can be detected, but the probability of reaching the age of 50 has by the years 2005 to 2010 more than halved (World Bank, 2010). This large-scale epidemic has not only affected the infected population, but also
demands strategic planning, management, and financing for the government to deal with a problem of this magnitude. Studies of the fiscal cost of HIV/AIDS suggest an estimated rise in cost from 3 billion Pula (Botswana’s currency) in 2010 to 5.5 billion Pula in 2030 (Lule, 2012, p. 6). These numbers include expenditures such as care and treatment, mitigation expenses from dealing with the increasing number of orphans, prevention, and the salary of public servants. Challenges to assess ways of managing the response to HIV/AIDS arise. The government of Botswana is forced to constantly evolve and renew their response strategies in order to continue fighting the epidemic. Botswana’s Ministry of Health has through the Department of HIV/AIDS Prevention & Care (DHAPC) launched a National Condom Strategy in 2012, which will run until 2016 with the goal of improving the quality of life for the people of Botswana by decreasing incidents of HIV/AIDS and unplanned pregnancies through advocating access to and use of condoms (Government of Botswana - Ministry of Health, 2012, p. 8). The strategy indicates many challenges when developing and executing a national strategy to fight HIV/AIDS. In this case, a situational analysis was conducted and from that came several recommendations, where one in particular was noticeable – developing a condom marketing strategy which includes information, education, communication (IEC)/behaviour change communication (BCC) materials (Ibid., p. 9). The strategy elaborates,

“...An extensive number of pamphlets and leaflets on HIV and AIDS have been developed, there is a limited amount of material on correct and consistent condom use and some of it is dated.”

(Government of Botswana - Ministry of Health, 2012, p. 30)

Various groups have already developed IEC and BCC materials for male and female condoms, but the strategy underlines the minor amount made and available in the field, and how the actual quality of the few materials varies. The strategy searches to align with the NOP (National Operation Plan for the Scaling Up HIV Prevention 2008-2010), which recognises the promotion of correct and consistent condom use as a strategic communications objective
launched with IEC/BCC materials used to motivate and educate behavioural approaches to condoms. Accessibility of both condoms and IEC/BCC materials is the closest physical link to the Batswana and to the prevention of HIV/AIDS spreading even further, but both strategies acknowledges the significance of the quality of both.

**Problem formulation**
In this thesis, I will focus on the strategic communicational aspect in regards to the quality of the IEC/BCC materials to make available to the population. As acknowledged by both strategies mentioned above, communication and knowledge is vital in the matters of fighting the global threat of HIV/AIDS on the national and local level in Botswana. The dissatisfaction with the currently available IEC/BCC materials generates causal questions regarding the quality of the materials. The DHAPC’s website offers access to their own virtual library, where materials and documents such as the National Condom Strategy, IEC materials, several guidelines, and published research are available for the public. This will give me an opportunity to discursively examine materials available in order to create an archive of data, which could bear the potential of identifying aspects affecting the intended achievement of the materials. Hopefully the clarification can assist them in their continued development of IEC/BCC materials intended to prevent further spread of HIV/AIDS in Botswana.

The questions to answer for the thesis will be:

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How does the discourse of the IEC/BCC materials available in Botswana through the DHAPC and PSI affect the intended accomplishments of the HIV/AIDS communication? And how can this knowledge be considered and applied in future development of IEC/BCC materials for the prevention of further spread of HIV/AIDS in Botswana?
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**Theory**
The theoretical section will reflect my interest in communication for development in relation to the problem formulated in the introduction. The communication for development paradigm has been defined and discussed by many scholars and authors, but basically they are dealing with communication and development in a globalised world, where a combination of these three elements creates new prospects and tools for making a difference in the world.

The hope for mankind to overcome the numerous plagues threatening our very existence has been revitalised in the third millennium with the United Nations stating the Millennium Development Goals in 2000 and restated them in 2005, in the hope of finding cures for HIV/AIDS, tuberculosis, malaria, reducing child mortality and illiteracy, stopping the degradation of the environment, increasing women’s rights, and reducing global poverty, all through an emphasis on development and with a deadline in 2015. The emphasis on humanity and development in the agenda of providing a decent standard of living for all members of the global community surfaced in correlation with American President Truman’s Marshall Plan for the Third World (McAnany, 2012, p. 9). The agenda has not changed in the past 50 years, but the global society, and ‘tools’ and processes applicable to attain the goals have. The new flow information and advancement in communication technologies are vital for the process of eliminating threats to mankind, which several scholars and practitioners highlight in the field of communication for development. First, I will go through the context or setting in which humankind and the advancement in communication technologies have collaborated in the fight to eliminate threats, and from there move to an introduction to the theoretical framework behind the practical field of communication for development.

**Globalisation**
Mankind has entered the third millennium with an even stronger desire to eradicate threats and promote common good for all citizens of the global society. One major influence on this forward motion towards a closer connected society, where concern has become transnational, is identified as
globalisation. The concept of globalisation has found its way into vocabularies around the world. Several definitions by key thinkers with different approaches are collected in British author, Andrew Jones’ book “Globalization – Key Thinkers”. Due to the continuous debate regarding the definition of globalisation, Jones (2010) proposes a broad definition, relevant for all the key thinkers, which is conveyed as, “the growing interconnectedness and interrelatedness of all aspects of society” (p. 4). A broad definition of any kind have the tendency to seem unapplicable in research, but if applied as a framework for understanding why people care about others across borders, seas, and continents, it can serve as point of departure for this thesis. To get an even closer look at the theory of globalisation I will have to acknowledge the existance of different approaches to the theory, as Jones (2010) displays in his content setup, and focus on the approach most suitable to review with a specific interest in communication for development.

One particular scholar is known as having been cited or mentioned an uncountable number of times in the academic sphere. British Sociologist Anthony Giddens is positioned as a key conceptual thinker through his work with what globalisation is, where it came from, and how it is possible to theorise it. Giddens’ ideas are shaped by the three ”founding fathers” of modern sociology – Marx, Weber, and Durkheim – which might explain why his work and influence has spread to such a vivid extent (Ibid., p. 36). In this theis, his theory of globalisation, and in particular his work with the time-space distanciation and disembedding, will stress the importance of understanding how the world have contracted in matters of time and space, and how it will affect social processes in all parts of society. In “The Consequences of Modernity” Giddens (1990) defines this particular part of globalisation, in agreement with Jones (2010), as

“the intensification of worldwide social relations which link distant localities in such way that local happenings are shaped by events occurring many miles away and vice versa.” (Giddens, 1990, p. 64)
The distanciation refers to the conditions under which time and space are organised in order to create the connections and relations, and also the absence of same (Ibid., p. 14). Whereas the disembedding display the ways in which social relations can be taken out of their local contexts and successfully restored across any spans of time and space (Ibid., p. 21). Advancement in technology leaves nation-state bounderies weakened, while global and local social relations intertwine and intensify in the formation of a “global village” exactly as referred to by Marshall McLuhan fifty years ago (McLuhan, 1964). And in this global village, not only the technology has advanced, but the population has advanced with it. People are bombarded with information everyday through an immense information flow, but in these days people are prepared and able to process massive amounts of information. The high rate of information flow is both an instigator and a consequence of our modern globalised media environment. Impacts on culture through the flow of information is considered a consequence affecting the local communities worldwide. At the same time, the impact on culture is reflected in the evolution of human beings capable of processing and keeping the information flow in check by critically handling the sources and messages available (Mohammed, 2011, p. 111). As a global community with access to more information than ever before, people are now aware of the horrific situations in far away localities, such as poverty and disease, and some feel an obligation to intervene in any way, while others see the potential of the advanced communication technology to be a stepping stone for development whereever it is needed in localities far away.

**Communication for Development**

The theory of Communication for Development is not a new concept in the pursuit of establishing a higher standard of living for the citizens of the world. Several titles and definitions have opposed through the past fifty years, where this comprehensive quote provided by Fraser and Restrepo-Estrada turns the attention towards a shift from an emphasis on awareness and action to change and the need for institutions to improve their effectiveness.
“Communication for development is the use of communication processes, techniques and media to help people toward a full awareness of their situation and their options for change, to resolve conflicts, to work towards consensus, to help people plan actions for change and sustainable development, to help people acquire the knowledge and skills they need to improve their condition and that of society, and to improve the effectiveness of institutions.” (Retrepo-Estrada, 1998, p. 63)

Communication for development entails all forms and modes of communication, such as community radio, education programmes, community dialogues, communication technology (ICT) initiatives, etc. The actual quest of practitioners in the field is figuring out how the development initiatives are able to most effectively apply these communicative ‘tools’ to improve practices, to learn, and to assist in achieving sustainable development through participation of the people of concern (Tacchi, 2013, p. 4).

There tends to be a disagreement among scholars, communication researchers, and practitioners about what development really means, yet there is a general agreement that the three communication scholars’ publications – Daniel Lerner’s “The Passing of Traditional Society: Modernizing the Middle East” (1958), Everett Rogers’ “Diffusion of Innovations” (1962), and Wilbur Schramm’s “Mass Media and National Development: The Role of Information in Developing Countries” (1964) – serves as the three pillars or ‘founding fathers’ of early thinkers and texts in the field of communication for development (McAnany, 2012, p. 9). Of course some scholars would disagree, but as Professor of Communication, Emile G. McAnany argues, it is necessary to integrate these early founding texts in the understanding of the current communication for development theory and practice. The context and challenges faced by humankind has clearly changed since the publishing of these three books (the communication for development approach has also changed from a top-down media-centric, quantitative-scientific, effects-oriented, and manipulative-centralised system to
a participatory, empowering, democratising, and sustainable approach), but
development strategies of today still contain the same objectives as they did
fifty years ago (Ibid., p. 10).

**Daniel Lerner**
Daniel Lerner was a rising star in the fields of political science, sociology, and
communication, and was chosen by Paul Lazarsfield to write up a scholarly
book through the analysis of about two thousand interviews performed by
Lazarsfield’s Bureau of Applied Social Research staff from Columbia
University in 1950-51 under the contract of Voice of America (Ibid., p. 16).
“The Passing of Traditional Society: Modernizing the Middle East” from 1958
is not only a book containing theory about modernisation. It also reveals the
inevitable change from old to new ways driven by the dominant media found
in radio, newspapers, film, and television, which was then only at a level of
beginning. Furthermore, Lerner sets out a theory of social change, where the
argument is rooted in a teleological unfolding of modernisation compared to
the European historical developments in the Age of Enlightenment in the
eighteenth century and the industrialisation of the nineteenth century, where a
sequence of factors, such as literacy and schooling, urbanisation, voting, and
mass communication are presented central arguments of a different system of
social interaction (Ibid., p. 17). Lerner also proposes a personal or
psychological model, which he refers to as the ‘mobile personality’, which is a
person’s ability to quickly adapt to the circumstances changing around him or
her. He characterises it as empathy, and clearly states that mass
communication has played a vital role in this process. As an example, Lerner
presents the change to modernisation in developing countries as having
started with the European colonialists, but with the modern processes, such
as mass communication, changes became more intense and a modern
mentality was introduced and attained. He hereby argues for the hypothesis of
the book that “mass media carry the kinds of messages that ‘propagandize’
traditional societies to become ‘modern’” (Ibid., p. 19). “The Passing of
Traditional Society: Modernizing the Middle East” had an impact on the field of
communication for development by indirectly proposing and initiating
university researchers to work on projects using mass communication for development. To carry on this set of thoughts came a young sociologist from Iowa.

**Everett Rogers**  
Everett Rogers’ book *“Diffusion of Innovations”* from 1962 became significant for the theory and practice of communication for development due to its multidisciplinary characteristic dealing with subjects from rural sociology to mass and interpersonal communication. The book was published at a time when the federal government sought to move away from the previous support and utilisation of propaganda, and instead act to improve people's lives. On that matter, the government together with Truman’s fourth point in the Marshall Plan – Technical assistance by improving tools, fertiliser, and seeds for farmers - encouraged to pay attention to the enormous rural mass who were living in developing countries. By the end of the century (1950s) a shift to emphasis on individual behavioural change of farmers had progressed, and *“Diffusion of Innovations”* fitted impeccably in that scenery (Ibid., p. 21). In his book, Rogers outlines a model showing how innovation diffuses among farmers and other groups, such as doctors, educators, and primitive tribes. Additionally, he worked to see how improvements in seed corn, fertiliser, and cropping patterns had been tested and proven valuable, and communicated for farmers to adopt. Though using different methods, Lerner and Rogers made a connection in their enthusiasm regarding new ideas for agriculture and the emphasis on the use of communication for persuasion. Rogers pinpoints that persuasive communication is evident for the diffusion of agricultural innovations, which could help the rural majorities in developing countries (Ibid., p. 22).

**Wilbur Schramm**  
While Roger’s model of diffusion was mainly focus on the agriculture and used both interpersonal and mass communication, countries needed a broader approach that dealt not just with development in agriculture, but in the entire country. This is where American communication researcher and publisher for UNESCO Wilbur Schramm’s book *“Mass Media and National Development:}*
The Role of Information in Developing Countries” from 1964 enters the picture. Not only was Schramm’s book directed at the government planners and politicians arguing for the importance of mass media in generating a better life for their citizens, and in it using a wide range of research in economics, political science, planning, education, anthropology, and agriculture, but it was a great contribution to the field of communication for development and a text with a even greater sense of power due to the main publisher, UNESCO, and co-publisher, Stanford University. The institutional power of UNESCO as global development agency working with almost all of the independent developing countries, and those being decolonised at the time, and a rising research university as Stanford had great significance for the popularity and the power of the book in its quest, just as the work of UNESCO, to promote media infrastructure and educational media as means of improving the lives of people in developing countries (Ibid., p. 25). By addressing governments of developing countries Schramm indirectly implies that development should be in the hands of the government, and therefore supports a centralised, top-down approach for development, namely through fifteen recommendations in his final chapter. Considering that the control of the mass media was in the hands of the central authorities in most of the developing countries, the centralisation was already a given, and the case had to be made to the governments since they had to make the decisions and investments in mass media that could improve the lives of the people (Ibid., p. 26). The enthusiastic and persuasive nature of the text and the overall book convinced many different people, academics, politicians, and government leaders in developing countries that mass communication is a significant tool for achieving change and has a vital role in the future of any country, which is why scholars regard it as one of the three ‘founding’ books in the field of communication for development.

To sum up, these three ‘founding’ books all share the belief that the power of mass communication, in all levels of society, must to be recognised and applied in the work for development around the globe. In addition, they all acknowledge the importance of the changing society, opening up for all
people to view and visit distant corners of the world, and expanding the possibilities of civilians, politicians, governments, etc. to actually do something for those in need of assistance to gain a better and satisfactory standard of living, whether it is through innovations in agriculture, behaviour change communication, or other practices of development in developing countries.

The change mentioned above does not only take place in society, but in health communication as well, where a shift from focussing on the medium, such as how to deliver messages about optimal practice and policy, to a focus on the processes of dialogue and discussion have occurred. It leads to the practitioners paying closer attention the social and political sphere in which people live, and the influences of those specific conditions have on social and behavioural change (The International Bank for Reconstruction and Development/The World Bank, 2007, p. 11). Communication has become much more than just a tool or a technology to apply for the individual. It is a process with the potential to change the lives of many – especially those threatened by the various ‘evils’ of today. The scale of the HIV/AIDS pandemic and the behaviour change communication used to fight it indicates a mismatch, where a need to look beyond the individual issue (not that it should be ignored) and to dig deeper to identify the root causes that initiate further spread transforms the communication for development agenda. As presented in the problem formulation, a new set of eyes on previous published and distributed HIV/AIDS materials and documents could clarify issues and potentially induce a change of view in HIV/AIDS communication, indicating social change is needed in order to combat the pandemic.

**HIV/AIDS in the Communication for Development Agenda**
Communication for development is a comprehensive field of both theoretical and practical considerations in approaching the ideal of making the world a better place for its citizens. One of the main obstacles to this ideal and the subject of matter in this thesis is the threat of HIV/AIDS and how someone can combat a threat of this magnitude. The history of trying to deal with HIV/AIDS through communication is close to disastrous when looking at it
from a result-favoured point of view. Researchers, scientists, doctors, politicians, governments, etc. has been trying, decade after decade, to figure out how to combat this infectious killer virus, but with lack of any remarkable results with the potential of preventing further spread. Professor in Media & Communication Studies Thomas Tufte proposes in a section of the book “Media & Glocal Change: Rethinking Communication for Development”, several aspects and issues in the battle with HIV/AIDS through communication to help understand the practice of communicating for the prevention and fight against the disease (Tufte, 2005, p. 105-119).

**Trying to define the problem of HIV/AIDS**

Understanding and defining the issue at hand becomes relevant when fighting a massive pandemic like HIV/AIDS. Whether it is a health problem, cultural problem, socio-economic, or a bit of each will determine what efforts can be made and how to organise them in order to solve the problem. Tufte suggests that HIV/AIDS must be considered a multidimensional development problem containing dimensions of culture, gender, policy, spirituality, and socio-economic conditions (Ibid., p. 110). For many years, HIV/AIDS was considered a health problem that could be dealt with through biomedicines and public health solutions that focused on access to health services, voluntary counselling and testing, treatment, care, and support. The problem was prioritising between treatment and prevention, where treatment was a main objective, but today, a need for prevention, care, and support has been acknowledged. In practice many still deal with HIV/AIDS as a health problem, where the objective is to avoid contracting the virus, learning to live with, and, of course, treat it. The broader socio-economic aspects of the pandemic still remain to be incorporated into development programs, and the influence of the processes of globalisation on HIV/AIDS programs still needs be further clarified (Ibid., p. 111). Globalisation has, as mentioned in the introduction of this theoretical section, also influenced and changed the world of today, but at the same time, when linking globalisation and HIV/AIDS, there is a downside to this transition. A flourishing new economy can also become an instigator for marginalisation, and the porosity of national borders allows the disease to be
carried around the globe (Ibid., p. 113). It is important to acknowledge the different aspects when dealing with a problem of this magnitude.

**HIV/AIDS as cultural problem**

HIV/AIDS can also be considered a cultural problem, and in particular an issue concerning safe sexual behaviour being obstructed by culture on both a local and global level. HIV/AIDS is mainly a sexually transmitted disease, where HIV/AIDS communication efforts have been targeted at changing sexual behaviour. Campaigns against sexual practices, such as sugar-daddy practices, initiation rituals, prostitution, child abuse, gender-inequality, etc., has been organised due to the recognition of these as cultural practices hindering safe sex, and therefore they had to change. In the reality of a fast changing world, where cultural practices for some people have become issues to battle for others, many find themselves in conflict between tradition and modernity. Instead of mainly viewing culture as an obstacle, it can be transformed into a resource to clarify the context in which the fight against HIV/AIDS will take place, whether it is on a local level concerning local cultural practices or on a global level in matters of global cultural discourses of HIV/AIDS spoken in all kinds of media (Ibid., p. 111).

**Considerations when approaching HIV/AIDS prevention**

Practicing communication for development will require practitioners to consider what approach is suitable in order to reach the goal of the practice, and this is where two communication paradigms tend to oppose. First, behaviour change communication (BCC), which leaves the practitioner to attend to the individual level of change, where practices such as the early entertainment-education and social marketing used in HIV/AIDS communication are highlighted in prevention efforts. Second, the participatory paradigm refers to the alternative method of communicating in the efforts of grassroots, social movements, and NGOs, which focus on the principle of dialogue, is community based, and recognises participatory processes as empowering and as the objective of pursuit in communication practice (Ibid., p. 116-117). Several institutions take a stand on how to deal with HIV/AIDS and are oriented towards one of these paradigms in their approach. For instance,
the Centre for Communication Programs at Johns Hopkins University in Baltimore is mainly oriented towards behavioural change communication, while the PANOS Institute is oriented towards participatory paradigm (Ibid.). Matching an appropriate approach to the desired outcome is of utter importance when communicating for development.

An international debate concerning HIV/AIDS communication, prompted at the International Roundtable on Communication for Development in Managua, November 2001, has in the latest years centred the discussions on three different approaches. These are behaviour change communication (BCC), advocacy communication, and communication for social change (Ibid., p. 117). 

*Behaviour change communication* is, as mentioned earlier, an approach aiming at change at the individual level. It is based on theories of diffusion and the understanding that problems occur due to lack of information, which initiates large scale media campaigns meant to spread information anticipating that if people know more, they will change behaviour. Studies in several countries show that even though many people acquire a high level of accurate knowledge of HIV/AIDS, it does not lead to change of behaviour. 

*Advocacy communication* handles the more specific task of advocating the rights and problems of HIV/AIDS, which for example is advocating the rights of people living with HIV/AIDS, orphans, and mistreated children. 

*Communication for social change* is recognising the underlying causes of HIV/AIDS, such as poverty, gender inequality, unemployment, social heritage, etc., and approaching HIV/AIDS communication with the ambition of addressing the structural determinants that incite these situations. In addition, it is often embedded in participatory processes where empowerment and human rights are issued to be dealt with (Ibid.).

The broad diversity of these approaches displays the many facets of HIV/AIDS communication and how it is vital for the wanted results of no or limited further spread of HIV/AIDS. The field of communication for development is complex due to its theoretical and practical nature, where a better connection between theory and practice is needed, and with a social
change agenda, the practitioners are forced to carefully consider how they choose to approach the problem at hand (Ibid., p. 118). Tufte argues that the spread HIV/AIDS and many of these root causes are tied to the processes of globalisation, where the development of an efficient response to the problem requires more than sharing information of appropriate sexual behaviour (Ibid., p. 108). The need for broader strategies to empower people to handle the conditions of everyday life with or with the threat of HIV/AIDS in the light of the opportunities and challenges of globalisation is emphasised. Successful HIV/AIDS communication will, according to Tufte, be communication for social change.

This theoretical section is considered my theoretical framework for examining the approach chosen by the Ministry of Health in Botswana in their effort to prevent further spread of HIV/AIDS through the IEC/BCC materials presented as insufficient and dated in the National Condom Strategy 2012-2016. I will apply my theoretical knowledge to the following methodological section as a prior understanding that will affect the choice of methods for analysis and the further analytical deductions.
Methodology
Choosing an appropriate research design or method to answer the question formulated is highly important for the outcome of the research. One must think of how useful a specific approach will be in terms of exploring the chosen research topic (Silverman, 2006, p. 15). First, I will present the choices made during the data collection, and then I will elaborate on how to examine the data with an appropriate philosophical stance and relevant methods in order to reach the results or knowledge useful for the further development of IEC/BCC materials and prevention of HIV/AIDS spreading, as suggested in the problem formulation.

Data
The online world of today leaves the researcher with an unbelievable magnitude of potential sources. Today, the range of different technologies is immense and allows the researcher to produce, access, stock, and engage with a massive amount of materials in various forms. In current research practice, the technologies of the printing press, camera, tape recorder, photocopier, video camera, computer, and of course the Internet are key elements for accomplishing results (Rapley, 2007, p. 8). Author Tim Rapley (2007) suggests generating a research archive, where the researcher either divide the sources between “researcher-generated data” and “already existing data” or simply choose one type of data (p. 9). When generating data instead of using pre-existing data for research, assumptions of a more active role as researcher are quite common, but both cases the actions of discovering the data, physically collecting it, decisions about which sources to collect and which to ignore are active and important measures to take in producing the materials as data for the research (Ibid.). In this thesis, I will concentrate on generating an archive of already existing data collected by the use of the Internet and the “public domain”, which Rapley refers to as an easier archive to generate, but with the same active choices and actions to take (Ibid., p. 10). This choice reflects the interest in analysing the discourse of IEC/BCC material available in Botswana and online, as referred to in the introduction. At the same time, it leads to leaving out researcher-generated data, such as
interviews and observations, and recognising it as an active choice that affects the course of the thesis.

The source of my data is the Department of HIV/AIDS Prevention and Care’s website, and through the virtual library available for the public as referred to in the introduction, I locate material suitable for analysis (Department of HIV/AIDS Prevention and Care). The initial interest in HIV/AIDS communication in Botswana is linked to the governmental HIV/AIDS communicational strategy regarding HIV/AIDS prevention, which lead my to Botswana’s governmental website and through a link to the DHAPC website. I will build up an archive of materials to analyse and place them in the appendix to which I shall refer to in the course of the analysis. The DHAPC virtual library is limited in matters of the quantity of data, the newest materials and documents available are from 2012 (most are older). In addition, there are only IEC materials about palliative care available and no behaviour change communication materials. I will use a brochure regarding palliative care produced by DHAPC for analysis of IEC material, which can be found in Appendix A, and include data (BCC material) from another group who is not linked to the government of Botswana. This choice is made in order to maintain the focus on the insufficient IEC and BCC materials available in Botswana (not just materials produced by the government), which the National Condom Strategy states as an issue to attend to.

The second brochure “Young & Vibrant – The Image Within You” is produced by Population Service International (PSI), which is an international NGO concerned with global health that works to improve the health of people in developing countries. PSI has worked in Botswana for the reproductive health of women since 1993 and has turned its attention to HIV/AIDS prevention in efforts of contributing to the national response the threat HIV/AIDS (Population Service International). The website offers resources available for the public through their behaviour change communications catalogue, such as stories of interpersonal communication as a way to share the message of behaviour change, but most importantly (for this thesis) they provide access
BCC material available in Botswana in the form of a brochure (Population Service International – Behaviour Change Communications Catalogue). The brochure is placed in Appendix B, and together with the analysis of the DHAPC’s IEC brochure it will supply the thesis with an insight in the discourse of HIV/AIDS communication materials available to the Batswana and follow the course that the problem formulation demands the thesis to take. As referred to in the problem formulation, the analysis of this combination of data can allow several aspects interfering with success of using IEC/BCC materials for HIV/AIDS prevention and care to be revealed through a discursive analysis of more than just materials those produced by the DHAPC.

**Qualitative approach**

When approaching the data chosen for analysis I will have to consider an appropriate analytical method that will direct the path of the thesis and still follow the problem formulation. I choose to approach the problem presented in the introduction qualitatively with a combination of epistemological interpretivist and constructionist position with the purpose of exploring the discourse of HIV/AIDS prevention with the perspective that the reality and how it is spoken of is socially constructed and must be interpreted in context (Silverman, 2006, p. 154).

I will analyse text, which can allow the researcher to reach an understanding of the categories or representations submitted by the participants of the text, whether it is the author or people and groups referred to in the text. When referring to text, it is a reference to a whole. The whole of the brochures includes embedded discourse in both written and visual text (Ibid., p. 19). I will examine the discourse of the brochures to reveal potential aspects or representations that restrict the success of the IEC/BCC materials in Botswana. The intent of analysing to find features that restrict the intended achievement of the brochures also leaves the analysis to be restricted. So by acknowledging the context’s impact on the discourse and the analysis of it, and by being aware of the risk of omitting positive aspects when purposely identifying negative aspects, I recognise the entirety and various facets of the
discourse. Studying discourse suggests an interest in how the language is used in certain context. The context might range from a specific situation to a certain historical period, but all will affect the production of oral and written language. Language is performative and functional, and must never be treated as neutral, transparent means of communication (Rapley, 2007, p. 2). Researchers focus on how language is used to construct a particular version of the world, or identity, or meaning of anything by describing it in one way or another, and how choices exclude other alternatives of describing something (Ibid.). Since the problem formulation suggests applying the knowledge acquired through examination of discourse and identification of aspects affecting the success of the IEC/BCC material in further development, the choice of approaching the research through qualitative methods’ soft, flexible, subjective character could encourage innovative behaviour, which matches the ambition of the thesis (Ibid., p. 35).

Hermeneutic Approach
Using analysis of discourse in studying the topic of HIV/AIDS communication can reflect both the interpretivist and constructionist position by applying a hermeneutic approach to the analysis. ‘Hermeneutics’ was first developed in ancient rhetoric and later explained by German philosopher Friederich Schleiermacher in the nineteenth century as a notion that refers to the nature and methods of interpreting a text (Schwandt, 2007, p. 133). By approaching the analysis with a hermeneutic position, I refer to the two conceptions of the hermeneutic circle – methodological and ontological. When applying the hermeneutic circle as a method of interpretation it deals with the process of understanding that the meaning of an entire text and the meaning of the individual parts of the text are interdependent practices (Ibid.). In the analysis of the brochures, I acknowledge that the interpretation depends on my understanding of the meanings of the parts in order to understand the entire text, and that the meaning of the entire text will help me understand the parts of the text.
The other notion of the hermeneutic circle is given an ontological interpretation in the work of philosophers Martin Heidegger and Hans-Georg Gadamer (Ibid., p. 134). In their conception, the circular movement of interpretation is not only a methodological principle, but also a fundamental feature of all knowledge and understanding. Every interpretation relies on other interpretations. In that sense, all understanding relies on the interpretive efforts of all humans to understand, and all of these efforts always occur within a background and prior understanding, which cannot be exceeded (Ibid.). I acknowledge my role as the interpreter in the work to examine the discourse of the brochures, my background and prior understandings brought into my interpretations, and the need to recognise the context of the discourse when analysing, in order to include the prior interpretations (socially constructed understandings) that lead to my interpretations.

**Critical Discourse Analysis**

Figuring out when qualitative research is appropriate is debatable in any individual case of research. Knowing that quantitative research supplies the researcher with exact statistical answers is a clear advantage, but it still excludes opportunities of including other variables or factors of social processes that might contribute to the result. The strength of qualitative research is found in the ability to study a phenomenon or problem at hand through more flexible methods that reveal variables unattainable for quantitative methods (Ibid., p. 43). One of these methods is to study the discourse by the use of CDA – Critical Discourse Analysis.

I apply Norman Fairclough’s approach to CDA as my methodology for analysis. I apply his linguistic ‘tools’ for analysing the report and brochures in order to identify features that could have influenced or restricted the success of the IEC/BCC material regarding HIV/AIDS prevention in Botswana, as suggested in the problem formulation. These tools will be described in the following section on how to analyse. In Professor of Applied Linguistics Ruth Wodak’s chapter about CDA in the book “Qualitative Research Practice” (2007), she explains that CDA has never tried be or to provide one specific
theory. It is interdisciplinary, derived from different theoretical backgrounds, and oriented towards different data and methods of analysis. It allows the researcher to examine the problems of society that are too complex to only be studied from one perspective (p. 186-187). I acknowledge Fairclough and Wodak’s understanding of discourse from their section “Critical Discourse Analysis” in T.A. van Dijk’s “Introduction to Discourse Analysis” (1997) as a form of ‘social practice’ and link it to my constructionist position. This notion of discourse implies a relationship between the specific discursive event and the situation(s), institutions, and social structures that surrounds it. The authors elaborate, “The discursive event is shaped by them, but it also shapes them” (p. 258). Discourse is socially conditioned as well as socially constitutive – it can establish situations, objects of knowledge, social identities, and relationships between people or groups of people. Acknowledging the power of discourse is of utter importance for analysing the brochures. Discourse is never random. It will always emerge from the producer’s perspective of a particular event, situation, phenomenon, person, etc., whether it is done deliberately or not. Fairclough’s methodology of CDA stresses that all types of phenomena and discourse can to some extent be studied through critical discourse analysis, such as political discourse, power relations in discourse, identity, organisational discourse, social change, etc. Through the interest in communication for development and the choices made in the problem formulation on how to examine the problem presented, I integrate an understanding of Wodak and Fairclough’s approach to discourse and CDA in my method of analysing the discourse in the data. As displayed in the problem formulation, I will identify and examine any relevant discourse within its particular context and remember that there are no random decisions in the production of text and therefore no contingency in discourse.

How to analyse
In this section, I introduce a ‘toolbox’ of analytical tools presented by Norman Fairclough in his book “Discourse and Social Change” (Fairclough, 1992). The tools are all displayed here in order to create a larger range of tools applicable in the analysis and to remove the limitations generated from only focusing on
certain aspects of discourse, as for example metaphors and vocabulary. The tools will be applied when appropriate, which means that some might be used in my analysis and others might not. The texts will dictate the course of the analysis and the tools applied to examine the discourse.

**Vocabulary** – How specific words are selected and applied instead of others. Looking into alternatives in use of words to represent particular persons, events, terms, etc., or if specific areas of interest are emphasised by vocabulary choices (Ibid., p. 190).

**Word meaning** – Dealing with the potential meaning of a word, which is defined by the social practice of its production. By choosing a specific word in a particular textual and social context, the producer has the opportunity to select the word’s meaning and interpretation (Ibid., p. 185).

**Transitivity** – How events and processes are connected to particular objects and subjects in order to see if some are emphasised. You also look at how the actors are connected to activities and who or what the text focuses on (Ibid., p. 178).

**Modality** – Deals with the producer’s affinity to a statement or argument presented in the text, and what consequences it has. There are four terms to work with: 1. Modal auxiliary verb: can, must, may, might, will, shall. 2. Indication of time: using present tense to fully support statement. 3. Modal adverbs: Maybe, of course, etc. 4. Reservations/conditions: some, a little, a bit, etc. (Ibid., p. 158).

**Grammar** – Looking at how meaning and reality is constructed and constituted through the formation of sentences and subordinate clauses. It is also capable of directing or redirecting focal points in text through the creation of active or passive sentences (Ibid., p. 75).

**Cohesion** – How parts or full sentences connect with other sentences or larger textual structures. Looking at the use of words from the same semantic
system, use of near synonyms, and repetition of words to generate associations, connection, make sense, or an entity of text (Ibid., p. 77).

**Text structure** – Examining the textual structure and style, the ‘architecture of text’ (Ibid., p. 77).

**Politeness** – Dealing with the producer’s strategical use of politeness in the construction of social relations, which generates dominance relations in text. The term ‘face’ is used in both a negative and positive manner. If the producer applies politeness to be respected, admired, or cared for, it is called ‘positive face’. Whereas display of unfriendly manner – ‘negative face’ in text - can be regarded as a dominance strategy to shut down other opinions or points of view (Ibid., p. 162).

**Metaphor** – Can be applied strategically to persuade the reader. Metaphors are expressions, which display how the producer perceives and constructs reality. An example: The typical teenager’s room is a disaster area (Ibid., p. 194).

**Ethos** – The construction of identities and subject positions through discursive and non-discursive features in text (Ibid., p. 166).

**Intertextuality** – Incorporating history into text, and text into history. How text can be built of texts from the past, while it establishes its own place in history. Two terms are distinguished. ‘Manifest intertextuality’ draws directly from other texts, whereas ‘interdiscursivity’ relates to text that refers to other discourses (Ibid., p. 101).

**Multimodal analysis**
As referred to above, applying more flexible methods of analysing qualitative data has the potential of revealing more variables and aspects of the problem or phenomenon being researched. The second method I apply as a method for analysis will not serve as a second method. It will compliment Fairclough’s CDA and the toolbox displayed in the previous section in examining the discourse of the entire brochure, which means written text and visual elements. I will add a set of tools for visual analysis to my toolbox for analysis.
These emerge from Gunther Kress and Theo van Leeuwen’s book “Reading Images – The Grammar of Visual Design”. The authors see their book as a descriptive framework applicable as a tool for visual analysis and as contribution to a broadened critical discourse analysis, which in practice matches the choice of using critical discourse analysis for examining the brochures (Leuween, 2006, p. 14). The theoretical framework of the book is set within the theory of social semiotics, where the ‘sign’ or rather the sign-making is the key notion, and “signifiers” such as colour, perspective, lines and shapes, and how these are used to realise meanings in the making of signs (Ibid., p. 6). In sign-making a process of creating representations of some object or entity appear, where the actual interest in the object, when making the representation, is complex due to its origin from the cultural, social, and psychological history of the sign-maker. The interest affects the selection of what constructs the object and to what extent the representation of the object is suitable or acceptable in a given context. The criterial aspects constructing the object is, to the sign-maker, what seems as the most appropriate and reasonable fashion at the moment of sign-making, thereby setting the most appropriate and reasonable representational mode in their own given context (Ibid., p. 7). Taking this approach into consideration for the practice of visual analysis, I will now continue by presenting the tools to be applied in the analysis of the brochures.

**Visual Space – Composition**

When studying the composition of multimodal texts, three interrelated systems of composition can be applied to reveal the representational and interactive meanings of the image. (1) **Informational value.** Placing elements to provide them with the particular informational values attached to the various ‘zones’ of the image – left and right, top and bottom, centre and margin (2) **Salience.** Elements are made to attract the viewer’s attention to certain degrees by placing them in the foreground or background, in relative size, through contrasts in tonal value or colour, difference in sharpness, etc. (3) **Framing.**
The presence or absence of framing devices connecting or disconnecting elements of the image shows that they do or do not belong together (Ibid., p. 177).

I choose to highlight the tool for examining the informational value of elements in an image illustrated by Kress & van Leeuwen as figure 6.15 “The Dimensions of Visual Space” in their book (Ibid., p. 197):

![Figure 1](image)

Starting with the informational value of the left and right, a tendency among pictures or layouts to make significant use of a horizontal axis positions some of the elements of the left and others right of the centre. The elements on the left are presented as **Given**, which means that they are presented as information already known to the viewer, such as familiar or general information commonly agreed upon. The elements on the right of the centre is presented as **New**, which means something that is not yet known or agreed upon, and therefore suggests that the viewer pay close attention to it (Ibid., p. 181). Shifting to the informational value of top and bottom displays a vertical axis creating an **Ideal** and **Real**. If the visual composition display the constituent elements in above the vertical axis, in the upper part of the image, and other, less constituent, elements are placed in the lower part, then the **Ideal** is identified as the elements of the top part and the **Real** is found in the elements placed at the bottom (Ibid., p. 186). The opposition between Ideal
and Real can also structure text-image relations. If the top of the image is occupied by text and the bottom by pictures, the text plays the lead role, and the pictures are placed to support it. If reversed, the message is communicated visually through the pictures at the top and the text at the bottom serves to elaborate on it (Ibid., p. 187). The last illustrated aspect of informational value in an image is concerned with the informational value of Centre and Margin. In short, if a visual composition displays a significant use of the centre by placing one element in the middle of the image and other elements around it, then the central element is referred to as Centre, and those around it as Margins. When an element is presented as the Centre it is presented as the core information, and all other elements are in one way or another subsidiary to it (Ibid., p. 196).

**Colour**

Kress and van Leeuwen refers to linguist Michael Halliday’s three metafunctions – *ideational, interpersonal, textual* – when discussing how colour is related to affect and therefore, in accordance to Halliday, as an aspect of the interpersonal metafunction. At the same time, they propose that the communicative function of colour is not limited to affect, but also a method in its own right (Ibid., p. 228-229). In the ideational function, colour can be used to denote people, objects, and places, as well as classify people, things, places, and general ideas. Colour is also used to convey interpersonal meaning, in the sense that it can be used to do things to or for others, such as impress, intimidate, relax, energise, and warn. And at the textual level colour is used to either create coherence or distinction between parts, by for example the use of a distinct colouring in headings, section headings, or the body of text (Ibid., p. 229-230).
Analysis
This section will contain the analysis of the to brochures from my data archive (Appendix A and B) as referred to in the methodology section. The order of the appendix directs the order of the analysis in analysing one text at a time – Appendix A and then B. The analysis will be a multimodal analysis, where analysis of text and visuals will operate as a complementary method consisting of the CDA toolbox and the methods for visual analysis displayed in the methodology section. A section for summarising and comparing the findings will be presented after analysing the two brochures.

Analysis of “Palliative Care – Improving the Quality of Life”
The first brochure for analysis “Palliative Care – Improving the Quality of life” (Appendix A) is produced and distributed by the Department of HIV/AIDS in the Ministry of Health in Botswana. As a first look at the brochure, the context of the text must elaborated in order to examine the discourse within its context. Page 1 states that it deals with palliative care, which does not match the introduction focus of exploring the preventive measures of HIV/AIDS communication. Since it is produced within a branch of the government of Botswana, most likely distributed by the government as well, and was the only IEC material available from the government, I will examine brochures for the potential of getting insight in how the government of Botswana expresses issues of dealing terminal illness, such as HIV/AIDS, as means of promoting the suggested behaviour. It can demonstrate how the government displays and expresses behaviour change communication in IEC material.

The title of the brochure “Palliative Care – Improving the Quality of Life” is repeatedly presented on page 1. The full title is centred under three round frames of images, where the frame includes the text “Palliative Care” and “Quality Life for All”, and in the two minor texts at the bottom right and left the words “palliative care" and “improving quality of life” are also present. The title is transformed into the key words or catch phrases of the brochure through the repeated use and display. Palliative care is a medical term for caring for people with terminal or chronic illness, and the idiomatic expression “quality of life” becomes the object to strive towards improving even when quality of life
can be interpreted as a highly subjective matter. Connecting the objective of improving the quality of life to the medical term palliative care displays a medical discourse associated to the means of reaching the goal. Continuing to the two minor texts, the left bottom corner text says:

“Rule of thumb for palliative care:

There is no palliative care without effective management of pain and relieving distressing symptom.

Patient is to be as pain free as possible!” (Appendix A, p. 1).

The idiomatic expression “rule of thumb” serves as an indicator of importance of following the rules regarding their perspective of palliative care. The brochure sets out with a causal and informal language, which could indicate a strategic use language to engage all kinds of people. The use of informal language reveals an interesting and somewhat paradoxical communicative strategy, since the sender and producer of the informal language is a formal source, the Ministry of Health, with a serious message reflected in the choice of using the medical term palliative care to express the need for improving the lives of those struck by a life threatening disease. The casual tone of language subsequently shifts and modality appear. The author’s full commitment to this statement is displayed through the indication of time in the present tense verb “is” and also by ending the text with an exclamation mark (!), which, by adding the full “is to be”, reveals an imperative function ordering the sender to comply. The combination of declaring that it is a rule of thumb and ordering the reader to agree leaves an impression of a sender that is really passionate about the message. The text also serves as an alternative version of a subhead or an appetiser, which proposes that the reader continue the reading because of its importance. It indicates that the sender needs to lead the reader to read the brochure even though the text contains important informational and educational communication (IEC), which reveals a paradox. It might not be a given that people will be interested in reading it even though it could contain valuable information for improving the quality of life for people with terminal
illnesses, which supposedly seems important since there are about 350,000 living with HIV/AIDS in Botswana. The second body of text, which the reader goes to after finding out that the sender is the Department of HIV/AIDS in the Ministry of Health, is situated below the government shield and says,

“Today palliative care is an urgent, unavoidable humanitarian need to improving quality of life of terminally ill patients and their families”
(Ibid.)

First, the text shows that it is taken from WHO (World Health Organization), but it connects with the previous statement through the use of the time indicator “is” and its pleading characteristic. In this matter, the choice of words used to present the urgency and character of care of terminally ill persons as an, “urgent, unavoidable humanitarian need” display a strategic use of a sequence of adjectives. The sender constructs a category that not only describes the issue as a pressing matter, which must be dealt by appealing to the reader’s human compassion, but it also presents the reader with an issue connected to issues of global concern by using a combination of a quote from WHO and the word “humanitarian” that appeals to the concern for others and actively helping to improve welfare and happiness for other people. Additionally, the use of the noun “need” serves as a request to the reader to take action and, again, read the brochure. The message of urgency and significance of a higher quality of life for terminally ill people is quickly established through the discourse and by placing it on the front page. Second, the two texts refer to people living with HIV/AIDS as “patients” instead of people. This representation supports the medical discourse identified in the headline and theme of the brochure presented on page 1, and it can be interpreted as a term used to associate to illness and the hardship it involves, and at the same time categorise people living with HIV/AIDS. HIV/AIDS is put into a box with other illnesses that cause people to die. It is not named here, but readers understand that it is the main ‘killer’ in this category of “terminally ill” people. This approach and choice of wording to describe and categorise people infected with HIV/AIDS can be interpreted negatively as some sort of
death sentence appointed by the sender even though the evolution of the medical world today allows for people to live with HIV/AIDS for many years through antiretroviral therapy (ART). In addition, this second text adds “families” to the category of those inflicted by terminal illness. It gives the reader even more people to sympathise for, thereby increasing the magnitude of the problem, and draws on the feelings towards the reader’s own families, which indicates a use of rhetoric to appeal to the reader’s emotions. Philosopher and rhetorical theorist, Aristotle refers to this strategic use of rhetoric as ‘pathos’, which is a form of appeal to emotion used persuasively in or as a form of argument (Brinton, 1988, p. 207). The use of emotions in connection to the inclusion of families to the people suffering because of the life threatening illnesses is also presented in the picture within the three identical round frames hovering above the title:

![Palliative Care Quality Life (R)](image1)

*Image 1*

A family is depicted in a situation of caring for each other, where the tray of food carried by what is probably a child on the right and the gentle touch or stroke on the face of the bed resting family member represents palliative care and quality life for all as the text above and below the picture says. Again, a paradox appears. Image 1 reflects how the care of people living with a life threatening illness carried out by the family is very important for improving the quality of life for all, but the discourse of caring families in connection to quality
of life collides with the use of “palliative care” and “terminally ill patients”, which creates a medical category including medical discourse portraying the act of caring and a medical representation of those living with a life threatening disease. Even though two contradictory categories of discourse are present of the first page and in the same message, the emphasis of humanitarianism and improving the lives of these people still breaks through. Returning to the quote from WHO which is placed on the first and front page of the brochure is consistent with the interpretation of the discourse as an argument or attempt to persuade the reader to keep reading by referring to a state of urgency and need for compassion towards those inflicted by terminal illness, by referring to it as a “humanitarian need”, and by appealing to the emotions of the reader when referring to families in connection with care and improving quality of life through text and pictures. Even the layout of the first page implies the importance and ideal of families caring for its members when illness threatens them:

Image 2
The information value of the top and bottom of image 2 is reflected in the visual composition, where the three visual elements (image 1) situated in the
top half represent the Ideal - families caring for each other - and the lower part presents the Real, which is the action that needs to be taken in order for the ideal to become reality, such as seen in the imperative functions present in “Patient is to be as pain free as possible!” as previously elaborated. The opposition between the Real and Ideal is displayed by pictures occupying the top of Image 2 and the text at the bottom, which means that the relationship between text and images places a emphasis on the ideal and the message image 1 portrays, and the text serves to elaborate on it. By dividing the visual space even further by adding a horizontal line, which will show the centre of image 2, the triptych is applied to reveal what the visual composition signifies:

Image 3

The centre undoubtedly holds the message or catch phrase of the brochure – improving the quality of life, but it is interesting how the central composition of the message in image 3 is somewhat polarised from the other elements due to its smaller font size compared to the text directly above in the round frames (image 1). In the margins, the message is repeated in the top right margin as a new ideal, which indicates a causal relationship between palliative care and
improving the quality of life by placing “Improving the quality of life” as a subhead to “Palliative Care”. The reader is informed about the ideal of palliative care, which will improve the quality of life for people suffering from life threatening disease, and will have previously met the message in the centre or be drawn to it afterwards. It spurs the repetitive affect causing assurance and memory of the message. The space of the given ideal is somewhat empty when comparing to the placement of the new ideal, which means the present is interpreted as empty as well - empty of knowledge, information, and action regarding palliative care. The right bottom margin presenting the new real contains the setting of the problem by creating an urgency in the present by explaining how palliative care is a urgent and humanitarian matter in the world of today. This serves as a request for the reader to deal with the new reality and urges for action by referring to a need for action in both palliative care, and first and foremost getting the reader to continue reading the brochure.

Page 2 reveals a larger body of text in relation to the previous page. This page holds five sections under headings regarding the what, who, why, where, and strategy of palliative care. The sections are set up with bullet points illustrated as red crosses. The red crosses do not only symbolise medical service, where the red cross is, under the Geneva Conventions, placed on humanitarian and medical vehicles, building, and personnel in armed forces to protect them from military attack, which connects to the medical discourse on page 1. At the same time, they also display intertextuality. The red cross is the emblem of the International Committee of the Red Cross, where the use of a symbol can be interpreted as an effort to create a connection between the humanitarian work of the Red Cross and the “humanitarian need” for palliative care.

The first section of text is placed in the heading “Definition of Palliative Care”. A definition seems appropriate since the term ‘palliative care’ has been presented several times as the means to reach the goal (improving quality of life) or the message of the brochure on the first page without having been defined or explained. In addition, there is a chance that the reader simply does not know or understand the term due to the fact that it is medical terminology.
This indicates a targeted reader as outside the medical field and as more of a common Batswana, and is coherent with the focus on family care through visuals and family discourse on the first page. The definition of palliative care goes:

“Palliative care is a strategy that improves the quality of life of patients and their families facing problems associated with life threatening illnesses, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychological, and spiritual (WHO 2002)” (Appendix A, p. 2)

The first two lines before the comma is a mostly repetition of discourse from the first page. After the comma, discourse of what the strategy strives for and what palliative care actually entails is presented. This is the first time ‘improving the quality of life’ is elaborated on, by relating it to “prevention” and “relief of suffering”. These represent two opposite strategies, where prior precautions and actually preventing people from contracting these life-threatening illnesses is only mentioned this one time, and is not coherent with the message of palliative care as means of improving the quality of life after contracting the disease and relieving suffering. Choosing to include “prevention” as a goal for the strategy and as a part of the definition, which placed for the reader to read first, generates inconsistency in the semantic system of palliative care and information about palliative care presented previously of the first page. Palliative care is represented as the effect of care provided by families as well on the quality of life of people with life threatening illnesses, and prevention is probably a part of palliative care, but in this particular semantic system and discourse presented, it does not fit in. Another interesting choice of word is the use of the adjective “impeccable” to describe the condition of the assessments and treatments. It promises a high standard and therefore even higher expectations will emerge. Taken that this definition is from WHO, like the quote taken from WHO displayed on the first page, it makes sense that an organisation of that size demands high standards, but it
is peculiar that the Ministry of Health cannot set their own standards and definitions. It can be interpreted in two ways. Either these standards are accepted as universal by the Ministry of Health or deemed fitting for their strategy, which is why they apply it in the brochure, or it can be seen as the easy or lazy way out, where the definition and high standards is just promises.

In the following section “Central to Palliative Care Strategy”, the first two bullet points repeat topics of how to carry out palliative care from the definition above. It seems somewhat excessive, and even useless. When reading the nine bullet points of this section and continuing to the next section, “Why is Palliative Care Important?” the two opposing discourses from the front page appear again – medical and family. On the front page, both appear as intertwined. The message of care carried out by family is bound to the medical discourse of “palliative care”, where people needing care are represented as “patients”. By setting up the two opposing discourses of these two sections of page 2, an opportunity to reveal the level of lexical coherence in the text of the brochure, which might indicate whether the message of the text is clear or ambiguous.

<table>
<thead>
<tr>
<th>Medical</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early and systematic identification,</td>
<td>Community caregivers</td>
</tr>
<tr>
<td>assessment, and treatment of pain</td>
<td></td>
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<tr>
<td>Client</td>
<td>Community</td>
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<tr>
<td>Caregivers</td>
<td>Interdisciplinary care and support</td>
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<td>Interdisciplinary care and support</td>
<td>Community Home Based Care</td>
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<tr>
<td>Health and HIV/AIDS Support System</td>
<td>Cultural values, beliefs and customs</td>
</tr>
<tr>
<td>Services</td>
<td>Family-based services</td>
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<tr>
<td>Vertical medical management</td>
<td>Family and loved ones</td>
</tr>
<tr>
<td>Terminal stage</td>
<td></td>
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</tbody>
</table>

Figure 2

After illustrating the opposing discourses applied in a text used as IEC (Information, Education, and Communication) material to inform about the importance of the palliative care strategy when improving the life of people with
a life threatening illness, it is noticeable how some of the same keywords appear in both columns of figure 2. “Caregivers”, “Support”, and “Services” are present on both sides, but attain different positions in the illustration due to the context providing each word with a specific meaning. For example, “caregivers” are located two places in the text. One is connected to the medical discourse present in “client and Caregivers” through the relation to “client”, and the other is used as “community caregivers”, where “community” relates to the family discourse. Using the same term for the people, family or medical staff, executing the palliative care once again displays an intertwining of two opposing discourses, which has the potential to create confusion or even lack of interest in the material. It is expected that the information and educational material handed out to ‘ordinary' people and medical staff would be different in addressing their targeted group and therefore the discourse of palliative care would appear different as well. The brochure might be too family-oriented for medical personnel or it might be too medically focused for an ordinary Batswana to understand it. And it generates questions of whether this brochure is handed out to both groups, or which one, causing the material to be uninteresting or unsuccessful in one or both targeted groups. Either way, the message of this brochure to apply the palliative care strategy to improve terminally ill peoples lives becomes ambiguous due to the combination of discourses concerning who and how to execute the care and support.

**Analysis of “Young & Vibrant – The Image Within You”**

The second brochure for analysis “Young & Vibrant – The Image Within You” (Appendix B) is produced by the Young & Vibrant Crew within the global health organisation PSI. The brochure is categorised as behaviour change communication, giving it a suggestive characteristic. The first page reveals only the title and author displayed on a background of visual elements including images of sunflowers and people, and framing created by a smaller red box containing the title and the box containing the image of the male and female indicates that they are standing in front of a poster, where a “Y”, presumably referring to the ‘y’ in the title “Young & Vibrant”, and sunflowers are printed on it. The repetitive use of the title and sunflowers suggests an
emphasis on the words “Young & Vibrant” and how it connects to the sunflower. Another reason to suggest a connection is seen in the way the sunflowers of the top frame and the two persons in the centre break their frames. The male and female are characterised by the adjectives ‘young’ and ‘vibrant’ through the connection made to the title and the visual evidence of their smile and embrace. The sunflower acts a background to both the title in the top frame and to the male and female as well. Therefore, the symbolism related to always turning towards the sun to get maximum sunrays, and how that is symbolic for spiritual faith because people follow their belief system, like the sunflower follows the sunrays, acts as background information that shapes a religious discourse. The sunflower carries various symbolic meanings and representations. The sunflower also represents peace and serenity, like they were used in the 1960s and 1970s Western society, and in Native American symbolism, the sunflower is used in late summer festivals celebrating harvest and provision, and represents the sun and thus a life-giving force reinforced by Father Sun and the gods. The yellow colour of the sunflower was also linked to vitality and symbolic for energy related to fertility in Native American societies (Owusu, 1997, p. 61). The connection between two young Africans and the western symbolism of the sunflower might not be completely valid, but the fact that the whole is constructed of the minor parts of discourse from the first page, generates several interpretations depending on the context of the reader. It indicates that either the theme of the brochure presented on the first page is somewhat indistinct, or the reader, which is known to be the Batswana, needs to unite the spiritual and religious discourse to the life-giving discourse of fertility related to sexuality. This interpretation and connection depends solely of the reader and is presumably hard to reach through a quick look at the first page and meeting sunflowers and happy people, which basically supplies the first page with a welcoming face asking the reader to keep reading.

On page 2, three themes divided into sections are presented. These are an introduction to Young & Vibrant, peer pressure (negative and positive), and dieting. The first section is presented by a headline that says, “What’s up!” (Appendix B, p. 2). The contracted phrase, coming from “what have you been
up to", is commonly used in the English language as an informal greeting to politely start out a conversation by asking what the other person has been doing lately. The use of politeness by politely greeting through informal language introduces discourse initially creates social relations or attracts young people, but at the same time, it could lead to the absence of a serious angle to the issue about to be presented. The first line of text of this section is the question, “Are you a lively, energetic, vivacious young person?” (Ibid.) Through the sequence of adjectives representing and asking for the intended reader, the discourse of young and vibrant people is once again applied. But this time, by following the question with, “If you are then [logo] is for you” (Ibid.), the author is concentrated on announcing who they are by using their logo to substitute text, relating the adjectives of the logo to the characteristics of the reader, and simultaneously creating a memorable logo and catch-phrase through recurring visual stimulation. In the course of this section, the logo is used four times in total to replace text, making it a common thread in the discourse referred to and by young people. Another interesting use of repetition is seen in the repeated use of the personal pronouns “you” or “your”. It suggests an effort to reach out to the readers and assure that they are the beneficiaries, if they keep reading. In the last sentence, before repeating the title, the pronouns “we” and “our” appear.

“This is a brand new way for young people “jaaka nna le wena” to show what we can do for ourselves, our community and our country.” (Ibid.)

Instead of focusing on the needs and benefits of the reader, as was just before this sentence, the use of “we”, “our”, and “ourselves” constructs a category of young people including the author. It no longer revolves around what ‘you’ and ‘I’ can do, but what ‘we’ can do for “ourselves, our community and our country”. Establishing a unity or representation where author and reader are equal creates a connection between the parties and therefore lead the reader to keep reading and feel included. There is also a risk of invalidity or unreliability seen in the paradox of young people giving advise about young people
experiencing peer pressure - people telling people what to do. The effort to create relations is also seen in sections use of the national language Tswana (Setswana) intertwined in the official English language, as displayed in the sentence above using “jaaka nna le wena”. By using both the official and national language of Botswana the ability of the text to include a wider range of recipients expands simultaneously with an emerging sense of nationality, which relates to the discourse about unity – a group of young people, a community, and a country.

Another use of informal language is shown at the bottom of the page in a bright yellow quote, which relates to the salient yellow colour of the sunflower, below the picture of a group of young African people, who are all looking out of the frame in the same direction, as if they are paying attention to something or someone. The quote says, “If you want to thrive, and be vibrant, start now! Coz this column is for you!” (Ibid.). First, the two sentences are ended with exclamation marks giving them an imperative function ordering to do as told. Second, the use of “coz” is not only informal language, but also a shortening of the conjunction ‘because’, where ‘cause’ and ‘cos’ is commonly used in direct language. This particular spelling (using ‘z’) presents the reader with an informal order, which once again supplements the less serious and youth-oriented discourse representing the reader and author, which in this first section ironically tells the reader what to do, and then directly continuing to the second section, which explains that peer pressure is bad.

The second section is divided into two minor section of negative and positive peer pressure divided by red coloured headlines. The red headlines marks a distinction between the two different perspectives of peer pressure and create visual coherence because of the red colour used to frame this part of the page, but the red colour is also used to highlight a question in the first section about negative peer pressure, “Do you let yourself be manipulated? Mpolelele!” And in the next section about positive peer pressure, the condom brand “LOVERS PLUS!” is marked with red as well. In visual communication, colour used to highlight and create certain distinctions or coherence is common tool, but in
these to sections it seems sort of misplaced. Looking at the text surrounding the two highlighted lines, there are other similar marks being made, such as the other two questions before the red highlighted question, which are equally important for the message of not letting other people make decisions for you. And also, the bold highlighted words before the red highlighted condom brand, such as “Teenage Pregnancy”, “AIDS” (twice), “no cure”, “abstain”, “protect”. The use of bold letters indicates that a need to pay attention to these words in regards to the message about the dangers of peer pressure regarding sexual behaviour, but there is no indication as to why the condom brand needs to be highlighted in bold, capital, red letters since the other words are part of the same lexical chain.

| Negative peer pressure leads to teen pregnancy and AIDS, for which there is no cure, so people need to abstain or protect themselves by using condoms like Lovers Plus. |

If Lovers Plus is the end of the chain of events in the suggested behaviour, it indicates that the message of the brochure is to use condoms and protect yourself at any time, but by mentioning a certain condom brand and highlighting it to such an extent, it appears more like a product placement than a good advice or suggestion. The discourse concerned with creating relations between young people by creating representations of a unity that can help each other is the main object of these two bigger sections. And when looking closely into this narration, it displays another communicative strategy.

“For example, if Dineo hangs out with peers that respect the fact that she isn’t ready for sex, she will not be influenced into having sex early. This because of her interaction with peers that understand she isn’t ready. This is a form of positive peer pressure. When Dineo meets other boys and girls, who are already having sex, she will not feel “stupid” because they are having sex and she isn’t” (Ibid.)
The narration adds to the creation of a figure and representation with moral ideas to share, but it also stands out, as this is the only narration in the brochure. The repeated use of the modal auxiliary “will not” and time indication by using present tense “is”, and the same contraction of ‘is not’ “isn’t ready” displays the producer’s affinity to the statement, or in this case, the moral or message of the story. It concurrently generates a feeling of having a story told by a young person, who unintentionally keeps repeating the same words by the lack of a broader vocabulary, like with young children telling a story. If the choice of using this narration and repeated use of modality is intentional, then the message will be passed on and reliability is established, but since it also sets of a vibe of being told by young person, it could result in the narration having a negative effect by decreasing the reliability, because the reader might wonder how a young producer can serve as an expert and lecturer. It contradicts the relational discourse identified several times in the brochure. An animated, smiling, African girl, who presumably is the main character Dineo, once again shows the authors willingness to use different strategies to construct and uphold the relations between author and reader. Even though the animation seems misplaced in the section of negative peer pressure, the relation between the animation and the narration about Dineo is reinforced. The creation of a steady, visual representation of Dineo allows the reader to concentrate on the message of the narration, but the fact that it is an animation, and a picture of real life girls were presented in the previous section, could make the reader question if the narration is authentic. In addition, the use of mixed styles of images displays aesthetic shortcomings reflected in the lack of coherence.

The next section displays exactly that lack of overall coherence. Not only is it about dieting, but it also presents an orange coloured headline and sub header beneath. Using a different colour and font for a new style of headline creates the distinction presumably intended by the author, but the abrupt transition and change of style once again supplements to the lack of overall coherence. In addition, the discourse of dieting with the headline “Goodies (Tse Mnandi)”, where the informal noun ‘goodies’ can be interpreted as both a treat, as in food,
or a treat, as in an extra benefit or reward for the reader, giving a equivocation that causes the headline to appear humorous and well thought through. This is contradictory to the inconsistency of presenting several themes shortly and not in depth, a focus on constructing social relations between the reader and producer, using different communicative and visual strategies and styles, and an indistinct front page with several options for interpretation about what the brochure is about.

On page 3, the short presentation of different themes continues. The headline of the first section reads, “Who are you?” (Appendix B, p. 3). The rhetorical question can be read as a less solemn version of an apostrophe, which addresses the reader in order to break the fictional character of the reader and the relation to the reader by asking a relatively ‘large’ question that is hard to answer. This approach is related to the headline of the first section asking, “What’s up!” (Appendix B, p. 2). The next sections continues the style of headline by asking, “Wanna look good?” and “Where is it gonna be?” (Appendix B, p. 3). Even though the use of informal language through the assimilation turning the written speech acts ‘want to’ and ‘going to’ into “wanna” and “gonna”, and use of directed questions, display some sort of consistency in style, which has not been a force of this brochure so far, the topics within these headlines enhance the impression riding a ‘thematic rollercoaster’. The reader is first presented with the sensitive theme of peer pressure; then dieting, where the author contradicts him or herself by adding the following text below the section on how to loose weight, which says that beauty comes from within. Next is the topic of self-awareness, figuring out who you are, and using it as strength in life, where the following sections focuses on how to dress to look good and to spread the message of where to go out. And after suggesting appropriate behaviour for young people in several aspects of life by generating a relation and a unity, where both reader and producer is included, the next topic presented is about two male singers. The potential of confusing the reader section by section due to the choice of presenting contradictory discourses shortly and without thematic coherence, and simply loosing the reader's interest is relatively high.
The composition of page 3 reveals a high visual and thematic density, where the illustrations connected to the different texts occupy more of the visual space than the actual texts do.

Image 4

Image 4 displays an interesting use of visual space, where visual elements, such as pictures, coloured and enhanced headlines, advertising for a radio show and the “Songs of the month” by a local singer, and information of the producer(s) occupy more space than the written text for behaviour change communication. The repeated use of the sunflower as either a symbol left for various interpretations depending on the reader’s context, or simply a brand or token used as consistent décor with no purpose increases the confusion. The
lack of consistency has been a major flaw in the visual aspects of the brochure, and the few consistent features that do appear, such as page 2 also presenting advertising in the form of highlighting the condom brand “Lovers Plus”, or the use of the red colour seems unnecessary for behaviour change communication and actually increases the perplexity. Even the entire section “What’s in what’s out?” acting like a news feature in the musical sphere is redundant, because the necessity of reading about the male singer R. Kelly being sued by the mother of a 14 year-old girl is questionable in relation to behaviour change communication, and might only add to the relational discourse. By placing even emphasis on the elements not related to behaviour change communication, the risk of overshadowing the behaviour change-related message(s) increases, and the style of tabloid or magazine adds to the level of inconsistency and confusion. The intended focus on behaviour change discourse is lost in the excessive use various of visual elements that distracts the reader instead complementing the message, and also in the discourse concerned with generating and upholding representations of the reader and the producer in order to create relation and unity.

**Comparison**

After analysing the two brochures interesting similarities and differences appear. An important common aspect is the lack of consistency, whether it is textual or visual. The first brochure displays a choice of words and visuals that produce two opposing discourses – medical and family discourse – which both produce different intended recipients. The intertwined use of both discourses generates ambiguousness regarding the intended recipient of the message, where one or the other will have different understandings in light of their own and different contexts. It creates a greater risk of losing the message in the confusion, or a simple lack of interest in the brochure due an unspecified choice of direction and intended recipient, leaving the brochure to be insignificant for trained medical staff and incomprehensible for the common Batswana dealing with terminal illness in one way or another. Coming to understand the intention behind the intertwined use of both discourses is not impossible. The inclusion of two different groups of recipients through the use
two different discourses about the same topic has the potential to generate a broader and larger unity of potential recipients, but in this case, it becomes the weakness of the brochure.

In the second brochure, the inclusion of the reader in a unity, where the relation between reader and author is more than rhetorical by making suggestions to how to behave in this group of young people and addressing the reader becomes the main objective, instead of producing and presenting in-depth or thorough texts for the topics. By going through them, in which seems like a hurry, it becomes hard to take something concrete or useful from the brochure and apply it to real life. And when actual behaviour change communication is presented, such as the example of discourse of peer pressure and how the discourse not only makes suggestions, but also tells the reader how to behave, it loses reliability and opportunity to share this important message due to poor textual and visual choices. The exaggerated focus on the creating a relationship between the reader and the producer through various visual and textual strategies ends up removing the focus of the message towards problems of young people and how do deal with it, and instead leaves the reader with ‘weak’ discourse in a brochure presenting several shallow, unfocused, and useless pieces of advice for young people.

To summarise, the intended strengths of both brochures causes unnecessary perplexity and confusion through inconsistent use of textual and visual discourse to present the messages, and ends up becoming the actual weaknesses of the brochures.
Discussion

Following the analytical section of the thesis, where the first of the two questions of the problem formulation has been covered, a section for discussing the second question will now be presented. The second question – *And how can this knowledge be considered and applied in future development of IEC/BCC materials for the prevention of further spread of HIV/AIDS in Botswana?* – is formulated to initiate a discussion about applying the knowledge attained through the analysis in further considerations and work with HIV/AIDS communication and IEC/BCC materials in Botswana. This type of discussion will reflect my interest in the field of communication for development, and by applying my achieved knowledge to suggest future considerations in the production of IEC/BCC materials it thereby fulfils the practical aspect of field.

The National Condom Strategy identifies a need for IEC/BCC materials about correct and consistent use of condoms that is not dated like those currently available in Botswana. After discursively analysing two accessible brochures from Botswana, issues of overall inconsistency and lack of focus due to inapt strategic communicative ambitions. It is arguable that the context of the reader might provide different interpretations as to this matter, and that the form of the data – the brochure – should match the expectations for the outcome. A smaller brochure, as with the two brochures analysed, implies that the message dealt with will not be thoroughly processed, and instead awareness is the key object. It does not justify the unfocused, mixed, and short and shallow texts displayed in the brochures, where funding or ability to communicate compromise positive results. But with a brochure, such as the first analysed, funded, produced, and distributed by the Ministry of Health in Botswana, it easily presumed that the quality of the brochure matches the ambitions of the government, and when the ambitions regarding the size of the targeted group and strategies applied becomes more of an obstacle, then this brochure sets the standard for IEC/BCC materials in Botswana. Even the second brochure generates obstacles for conveying the message of the
behaviour change discourse through overly ambitious use of different visual and textual strategies, amplifying the inconsistency and removing the focus. With both brochures sharing the common attributes lack of focus or clarity and inconsistency, they also share the risk of having the recipient interpreting them as complacency or laziness. Leaving an interpretation of the whole or any elements of the brochure with the risk of turning negative is clearly not desirable, which is why the removal of this kind of risk must be highly prioritised in the future production of IEC/BCC materials. The text produced and visual elements applied to the brochure generate discourses open for interpretation, and it is at the interest of the producer to steer the reader in direction towards the message without loosing either the reader or the message along the way. Strategic choices prior to the production regarding focal point (topic and message), intended recipients, visual elements, and layout style are either absent, exaggerated, inconsistent, or vague. These requirements should be fulfilled and clear when initiating the process of producing IEC/BCC materials.

Another point of departure in the production of IEC/BCC materials is also a debateable improvement. As presented in the introduction of the thesis, three communicative strategies of HIV/AIDS communication leaves the promoter faced with several options when approaching the issue at hand. As of today, the DHAPC promotes the Behaviour Change Interventions and Communication (BCIC) strategy as the most common approach in the fight against HIV/AIDS (Department of HIV/AIDS Prevention and Care, 2). The DHAPC acknowledges that the strategy needs to be constructed by a combination of several strategies, where behaviour change communication is mentioned as the important, added collaborative strategy to the information strategies (IEC). They even set up bullet points of elements that the effectiveness of the BCIC strategy depends on. The top bullet point reads,
“Communicating accurate and relevant information about how to prevent HIV infection and delay the onset of AIDS in a manner that is easily understood by and emotionally comfortable for the intended audience.” (Ibid.)

The relationship between the prioritising of efforts made to create an effective strategy and the actual IEC material analysed is disjointed. Believing that this broadened strategy is comprehensive and prone for success is one matter. Following through is another. If the DHAPC believe that a versatile strategy is the way forward for in the struggle against HIV/AIDS, then the notion could be taken to higher level, where other HIV/AIDS communication approaches are considered or mixed with the preferred behaviour change communication approach. Behaviour change communication targets HIV/AIDS at the individual level, where positive results and change rely on the individual’s willingness and ability to apply the information acquired to life, which presumably leaves pitfalls for the producers to manoeuvre around. Applying another HIV/AIDS communication approach in a mix of approaches in the communication strategy to fight HIV/AIDS potentially enhances the chance of success. Social change communication is concerned with change on a larger scale with a tendency to focus on the community as the unity of change, where particular harmful cultural practices, societal norms, and structural inequalities most be taken into consideration in order for behavioural change to occur. So if the process of change has its point of departure in the transformation of the way society is organised, within political and social institutions, and in the distribution of power within those institutions, the setting for behaviour change is improved. And if the communicating for social change approach is followed or supplemented by the behaviour change communication approach, the chance to achieve significant change and success in the fight against HIV/AIDS will presumably increase. This way the producer of the strategy will not only have to choose and apply one approach, but instead utilise the opportunity of targeting more than one level of the problem with HIV/AIDS. By removing the distinction between the behaviour change communication paradigm and the participatory paradigm, and instead employ the strengths of
both in a new hybrid of HIV/AIDS communication, an opportunity for proposing new and create initiatives for long-term change and sustainable development could emerge in the fight against HIV/AIDS, which is in need of increasing positive results.
**Conclusion**

For the last and conclusive section, the two questions from the problem formulation will be answered in accordance to the knowledge attained through the analysis and discussion. The questions are,

*How does the discourse of the IEC/BCC materials available in Botswana through the DHAPC and PSI affect the intended accomplishments of the HIV/AIDS communication? And how can this knowledge be considered and applied in future development of IEC/BCC materials for the prevention of further spread of HIV/AIDS in Botswana?*

The first question is answered through analysis of the two brochures representing IEC and BCC materials in Botswana. The analyses display how an overly ambitious communicative strategy generates a lack of consistency in textual and visual expressions, which constructs weak and unclear discourse representing the message. Shallow and unclear discourse concerning serious issues of HIV/AIDS and unnecessary perplexity throws the brochures and strategies of course. The absence of clarity in both layout and images applied, and deeper descriptions or propositions about proper behaviour when dealing with the presented issues, creates a risk of unintended incorrect interpretations and representations of the messages, and affects the desired accomplishment of the brochures.

The knowledge acquired through the analyses regarding negative influence of the strategic choices of text and visual discourse presented to convey the messages of the brochures leads to answer the second question of the problem formulation. The currently preferred and widely used approach for HIV/AIDS communication in Botswana behaviour change communication shows potential in the fight against HIV/AIDS. But when the materials produced display an incoherent relationship between intended achievement and efficiency of the produced communication materials, then it indicates that a different and more versatile approach could improve the chance for success.
Adding the communication for social change approach to the behaviour change communication approach and creating a mixture or hybrid of both approaches that combats HIV/AIDS on more than one level, enhances the potential for success and change. In the fight against this devastating pandemic, the producers of communication strategies, including DHAPC and PSI, need to utilise any opportunity possible for success and acknowledge that the fight reaches several levels, where underlying causes like poverty, gender inequality, unemployment, social heritage, etc. must be attended to in order to generate change and improvement.
References


Appendix A

Rule of thumb in palliative care:

There is no palliative care without effective management of pain and relieving distressing symptoms.

Patient is to be as pain free as possible!

For Further Information
Please Contact
Department of HIV/AIDS
Ministry of Health
P.O.Box 5451
Gaborone, Botswana
Tel:3632000

"Palliative care is an essential, economically beneficial, cost-effective intervention that improves the quality of life of terminally ill patients and their families." (WHO 2002)
**What is Palliative Care?**

**Definition of Palliative Care**

Palliative care is a strategy that improves the quality of life of patients and their families facing problems associated with life threatening illnesses, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychological and spiritual (WHO 2002)

**Central to Palliative Care Strategy**

- The holistic provision of physical, psychological, social care, spiritual and bereavement support.
- Early and systematic identification, assessment and treatment of pain, symptoms and other physical and psychological problems.
- Patient autonomy, access to information and choice.
- Emphasis on building respectful and trusting relationships between client and caregivers.
- Support for the care and support of the family and community caregivers as well as the client.
- Interdisciplinary care and support (formal and non-formal members/staff) approach working with the individual, family and community during the course of the disease.
- Integration with the existing health and HIV/AIDS support systems at all levels of care and support with special emphasis on Community Home Based Care.
- Evaluate and respect cultural values, beliefs and customs.
- Affirmation that life and death are normal processes.
- Palliative care strategy is a continuum of services going beyond the vertical medical management to delivering comprehensive family-based services (WHO 2002).

**Why is Palliative Care Important?**

- As much as efforts to prevent HIV/AIDS, cancers and other life threatening conditions are carried out, most would still progress to a terminal stage of the illness where they will need palliative care.
- Provides relief from pain and other distressing symptoms.
- Provides a support system to help the family and loved ones cope during the person’s illness and/or bereavement.
- Facilitates the attainment of a dignified death with minimal distressing symptoms.

**Who needs or qualifies for Palliative care?**

Anybody diagnosed with a terminal or debilitating illness. Palliative Care commences immediately after diagnosis throughout to bereavement stage.

**Palliative Care within the Continuum of Care**

- Therapy to prevent life or modify disease
- Hospice
- Palliative Care
- Diagnosis
- Death
- Bereavement

NB: Palliative care starts at the same time the diagnosis of the incurable disease is made but its intensity increases as the disease progresses.

**Where is Palliative Care provided?**

Palliative care can be provided in a home, at community level and in any health settings e.g in Clinics, Mobile Outreach Facilities, Hospices, Referral centers, Patients’ day care centers, Clinics, Hospital.
What's Up!

Are you a lively energetic, vivacious young person? If you are then why be stagnant?

Young@Heart is a pamphlet that talks about issues of interest to the youth. It is for those in their teenage years just starting out with love and relationships or experimenting with life.

Young@Heart is a resource guide to help you in solving your problems. It provides a place for you to share your problems and get answers to some of your questions.

This is a brand new way for young people "to talk nice in words" to show what we can do for ourselves, our community and our country.

If you want to thrive and be vibrant, start now! Cos this column is for you!

Who is in Charge Here! Dealing with Negative Peer Pressure

It can be as simple as your classroom asking you to copy your homework and as difficult as friends wanting you to cry drugs for the first time. Negative peer pressure takes place when someone who knows you tells you things you don't want to hear or do. It's wrong and unhealthy if you do.

Work can hurt; friends can make you feel so pressured into doing something you feel you have no choice but to go with the flow. After all, who wants to be called "bitter"? They might tell you, "it's no big deal" or, "Every body is doing it."

The bottom line is if you do something because of what your friends say it's in control of you! So who's in charge? Do you let yourself be manipulated? No, don't.

Life is about making decisions and each decision you make will lead you down a different path.

Positive Peer Pressure

One should know that peer pressure is not a bad thing. We are all influenced by our peers, both negatively and positively. It helps define who we are and how we feel about ourselves in our lives. Basically, the difference between positive and negative peer pressure is the outcome.

For example, if Dino leaves out with peers that respect the fact that she isn't ready for sex, she will not be easily influenced into having sex early. This is because of her interaction with peers that understand she isn't ready. This is a form of positive peer pressure. When Dino needs other girls and boys who are already having sex, will not feel stupid because they are giving sex and she isn't.

If Dino feels she's ready to have sex, she will be properly prepared because she knows that teenage pregnancy and AIDS exist.

She also knows that AIDS is a killer and because there is no cure, the best thing to do is to abstain and when she feels ready, she should protect herself. Protection means using condoms like lovers plus.

Through positive peer pressure, young people can help one another overcome negative pressures like having sex when you are not ready or drinking alcohol (beer) because your friends say it's the in thing or that it's cool. Young people can then focus on helping one another in making wise career decisions or engaging in positive activities like attending youth jam sessions and being a"Cool" youth.

Goodies (Tse Mnandi)

"A woman who Louisiana not me afraid! A man's challenge for her in love."

If you want to start, try some of these tips:

1. When it comes to eating your meal, eat the same food as everyone else.
2. O ka igwe go pa to biscuits once in a while. Mina a galingome go you want to lose weight for good but not just for a couple of months. So if you eat biscuits make sure you also exercise.
3. The other thing you can do is to try to lose weight in other, instead of taking a walk from school, just take a walk with someone, it does help because me, Pope Biko died. You chew it, yet thinks chips is magic!
4. By doing the above changes you can slowly adopt your lifestyle and feel healthier as well as driven. Be galingome go this advice is for long term and not a program for quick weight loss.

Please remember that with this advice you see results in the long term rather than fasts.

Happy slimming but please, remember that the person on the inside is more important than what the person on the outside looks like... so be happy that you are who you are and don't worry how others see you.
Who are you?

Who you think you are dictates what you do and what you feel about yourself. A positive self-image is your defence against negative messages and thoughts. It helps you gain confidence in everything you do. A strong person is one who knows what they want and they know that to make decisions means weighing the advantages against the disadvantages. Are you the exact opposite of this description...and do you need someone to talk to?

Write to us at:
Young and Vibrant
Private Bag 90455
Gaborone
Botswana

Wanna Look Good?

Choose those clothes you have at home and try to combine the colours; your friends will even think you have bought new ones. Even the seshweshwe (dikkiba) work these days.

DON'T MISS
YOUNG + VIBRANT
EVERY FRIDAY ON RB2
& AT 4:00-5:00PM.
CALL IN AND BE PART OF
THE SHOW

Where is it gonna be?

NIGHT CLUBS WHICH ROCK YOUNG PEOPLE

Do you feel on top of the world when you have gone there?
Tell more young people about dance tips & sharps in your area, dance tips go outwards ko sleeves.
Write in and let us know about it.

What's in what's out?

For 3 albums Robert Kelly (R. Kelly) released another hit album TP2.COM, which had vibes like "storm is over" but lately the storm hasn't been over for him. Apparently a mother of a 14 year old girl is suing the singer for making a porno video of him having sex with the teenager.

They say local is lekker and guess what...our own local singer
Frank Lesokwane A K A Franco has released yet another album
called "Ba natola". In a recent interview Franco said that he sold his first ten thousand copies the same day he received them.
So what are you still waiting for? Get your own copy now!

Songs of the month

• Franco - Ba natola
• Ski & Fresh - Topondo

AYA BOTSWANA

DO YOU WANT MORE? CONTACT US!
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