



Journal Homepage: [-www.journalijar.com](http://www.journalijar.com)

INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

Article DOI:10.21474/IJAR01/11681
DOI URL: <http://dx.doi.org/10.21474/IJAR01/11681>



RESEARCH ARTICLE

UNDERSTANDING ADOLESCENT RISK PERCEPTIONS ABOUT HIV AND AIDS IN KENYA: ASSESSING THE EFFECTIVENESS OF THE TRUST CONDOM 'KUWA TRUE' CAMPAIGN

Mercy Chiyumba Khasiani-Omoke

Manuscript Info

Manuscript History

Received: 10 July 2020

Final Accepted: 14 August 2020

Published: September 2020

Key words:-

Risk Perception, Interpretation, Decision Making, Adolescents And Young People

Abstract

In Kenya, approximately 29% of all new HIV infections were among adolescents and young people (15-24). In order to reduce new infections among adolescents and young people, the Fast track plan to end HIV and AIDS among the group identified mass media and social marketing campaigns as evidence-based interventions towards changing their risky sexual behaviour. This study assessed the relationship between effective HIV risk communication, interpretation of meaning and decision making among adolescents by: evaluating the relationship between construction of meaning, interpretation of HIV risk communication messages and decision making among adolescents, establishing what causes the gap between HIV knowledge and HIV safe sexual practices among adolescents, finding out if there is relationship between effective HIV risk communications and how adolescents construct meaning and interpret HIV risk communication messages and finally; determining whether HIV risk communication messages are correctly interpreted by adolescents. The study used cross-sectional survey using self-administered questionnaires, focus group discussions and Reception analysis conducted among 40 in school and out of school adolescents (15-19 years). Also, an in-depth interview was undertaken with PSI Kenya Brand Manager (the manufacturer of Trust Condom). Data was analyzed using SPSS version 20. Cohen's Kappa statistic test was used to measure the level of agreement between the advertiser's message and respondent's interpretation of the advertiser's message. The study findings provide baseline information to guide development of the HIV and AIDS communication strategy for the adolescents and young people and also ensure more effective HIV risk communication messages targeting adolescents and young people.

Copy Right, IJAR, 2020,. All rights reserved.

Introduction:-

Communication as a strategy in the fight against HIV and AIDS was central in influencing individual and social behavior. Research has shown that mass media communication has played a major role in the response to the HIV and AIDS epidemic in developing countries (Bertrand, O'Reilly, Denison, Anhang, & Sweat, 2006). In the early days of the epidemic, HIV risk messages in developing countries targeted knowledge of the existence of HIV and AIDS, modes of transmission and prevention. In recent times, numerous studies have been carried out to understand the influence of knowledge on behaviour (Fabrigar, Petty, Smith, & Crites, 2006).

Reproductive health programs in Kenya have used mass media and other communication mediums to inform and educate the public about reproductive health issues and to promote behaviour change and healthy sexual practices. Several studies have shown that the effectiveness of HIV and AIDS prevention work depended on knowledge and attitudes regarding HIV infection (Noroozinejad, et al., 2013) while others emphasized the relevance of information in achieving effective control over behaviour.

Risk communication was therefore prudent to promote appropriate protective behaviour by those to whom the information is directed. Regrettably, research has shown that there was a gap between level of knowledge and practice among the youth regardless of the intensity of information campaigns (Mberia & Mukulu, 2011; Noroozinejad, et al., 2013; Kwigizile, et al., 2013). A study conducted by Njogu and Castro (2006) on the *“Perception gap between HIV and AIDS knowledge and risk perception among Kenyan Youth”* revealed that one possible explanation for the lack of solid evidence on the link between AIDS related knowledge and reduced risk behavior was the individual's perception of infection as a remote threat (Venier et al., 1998). Once an individual perceives getting infected as a remote threat, then automatically he/she would engage in biased processing of any HIV messages or information that was consistent with their behavior.

HIV and AIDS Situation In Kenya

Kenya saw a decline in HIV incidence rates among adults aged 15- 49 by 15% nationally from 105,000 in 2000 to 77,647 in 2015 possibly due to the scale up of various prevention and treatment programmes (National AIDS Control Council & National AIDS and STI Control Program, 2014). Nevertheless, Kisumu County was among the top five counties contributing to 50% of new infections in Kenya. According to the Kenya HIV Estimates, this county recorded 12,233 new infections in 2016. This depicted an increase in incidence of HIV between 2013 and 2016 from 10,349 to 12,233 new infections and from a prevalence of 17.4% to 19.2% (NACC & NASCOP, 2016).

The 2015 Kenya AIDS Progress Report revealed a nineteen percent (19%) decrease in new HIV infections in the country (National AIDS Control Council, 2015). According to Kenya's Fast track plan to end AIDS and stigma, “adolescents and young people still bore the brunt of the HIV epidemic (NACC, 2015, p. 1). Similarly, in 2015 adolescents were reported to have contributed 51% of the adult HIV new infections, a rapid increase from 29% in 2013. Incorrect perception of HIV risk and limited knowledge on risky sexual behaviour were identified as the factors advancing the alarming rate of new infections.

Risk in the context of HIV was defined as the probability that a person may acquire the HIV virus. Certain behavior can create, enhance and perpetuate such risks (UNAIDS, 1998). Such behavior included; sharing needles while injecting drugs, unprotected casual sex and multiple concurrent long term sexual partners with low and inconsistent condom use (UNAIDS 2007).

The Trust ‘Kuwa True’ Campaign In Kenya

Kenya had an estimated television household penetration of 32 percent against 8.03 million households (Kenya National Bureau of Statistics (KNBS), 2010; Nyabuga & Booker, 2013). In a bid to respond to the HIV and AIDS epidemic, Kenya through the Ministry of Health partnered with PSI Kenya in the late 1990s to develop the Trust Condom Campaign with an objective of promoting the Trust Condom as a choice for safe sexual practices (Evans & Haider, 2008). Distinctively, the advert focused on the condom as a symbol of healthy lifestyle choice and not as a commercial end in itself. An evaluation carried out by PSI Kenya to establish if the campaign influenced personal risk perception and positive attitude towards condoms revealed that not only did the campaign promote condom use as an attractive lifestyle choice, but also increased the audiences HIV risk perception conducive to the adoption of condom use (Agha, 2001).

Similarly, there was a continued decline of HIV prevalence in the adult population from the late 1990s to date (NACC & NASCOP, 2014). HIV incidence rates declined significantly from 0.62% in 2000 to 0.44 in 2013, approximately 15% decline nationally. However, this was not the case for adolescents and young people between the age of 15 and 24. Despite the many programmatic and political commitments in Kenya, young people (15-24 year) particularly contribute to the high HIV burden in the country (National AIDS Control Council, 2015). In 2015 alone, they contributed to 51% of adult HIV infections, a rapid increase from 29% in 2013.

PSI Social Marketing Technical Advisor Hermann (2015) stated that between 2011 and 2013 the Trust Condom lost its appeal and the attention of the youth. A decision was made in 2014 to rebuild Trust through the Trust

Condom 'Kuwa True' campaign with the slogan 'Show Your True Colors'. The new Trust Condom 'Kuwa True' Campaign was sponsored by PSI Kenya with the objective of increasing sales and condom use among the youth between the age of 15 and 39. By positioning a life style of condom use as the preferred alternative to unsafe sexual behaviour, the campaign leveraged on five pillars of the Youth culture: Music, Fashion, Technology, Entertainment and Sports (Mutungu, 2015, p. 5). According to PSI Kenya, an independent, locally-registered non-governmental organization (NGO) that specialized in Behaviour Change Communication and social marketing of health related products, the advert resonated with the targeted audience by incorporating youth culture characterized by party life depicted within the advertisement.

Problem Statement

HIV and AIDS communication campaigns in Kenya have not been successful among the youth given that majority lack understanding of the communicated messages (Muturi, 2005; Khasiani C. M., 2016). HIV and AIDS communications campaigns in Africa tended to concentrate on the individual rather than the context that shaped the individual. According to Glozah (2015), the psychosocial context of family, friends and school played a crucial role in the construction of health and wellbeing by adolescents. Communication was at the center of the response to HIV and AIDS and played a key role in supporting HIV programs. It was recognized as being necessary but not sufficient for preventing HIV (UNAIDS, 2001).

Condom use was one of the most effective strategies for combating the spread of HIV (KNBS & ICF Macro, 2014). The Kenya Demographic Health Survey (2014) reported that only 26 percent of women and 64 percent of men between the ages of 15-19 reported to have used a condom in their last sexual encounter. The Trust Condom 'Kuwa True' campaign was a communication initiative that aimed at promoting condom use among young people since sexual transmission accounted for 93.7% of all new HIV infections in Kenya (NAS COP & NACC, 2014).

According to Mutiso-Mbuvi (2015), the 'Kuwa True' campaign, a swahili/english phrase for 'Be true to yourself' can be translated figuratively as 'show your true colors or be comfortable in your skin'. The campaign aimed at encouraging young people to put the Trust Condom back into their sexual plan. As expressed by Heath & Bryant, (2000), language influenced thought, judgement and how meaning was constructed. If this assumption was true, then the swahili/english phrase of 'Kuwa True' and 'Be true to yourself' would elicit different thoughts, meanings and judgement from the targeted audience as expressed by Sapir (2014), when he stated that language had a certain effect on the way people think.

Literature Review:-

Understanding How Adolescents Perceive Risk related to HIV

Risk perception was central to any decision made that involves risk. According to Ropeik (2002) there were certain characteristics of risk that influenced risk perceptions regardless of our demographic differences. Fear of contracting the HIV virus for example, was higher in some areas more than others based on the level of awareness, familiarity with the disease and the certainty or uncertainty of contracting it. In addition, risk perception was influenced by how chronic or serious the disease was perceived to be, based on what the individual knew about it and what the state or government dictated or imposed on the citizens. Similarly, risk perception also depended on whether the risk outweighed the benefits considerably to outbalance these factors. Ropeik (2002) emphasized that these factors were dynamic in nature and change with time and hence understanding these factors could help health communicators develop public health campaigns that evoked emotional aspect of risk that appealed to the audience.

The decision making process depended on information processing and interpretation of acquired knowledge by the recipient. According to Radden, Kopcke, Berg and Siemund (2007), construction of meaning was a cognitive process determined and influenced by the social setting implying that the meaning of a text was derived from its context. Research has shown that meaning was socially constructed and for information to have value in a decision making process, it required a social and subjective interpretation (Miranda & Saunders, 2002). When there was no interaction, construction of meaning became an individual subjective process where recipients enforced their biased meaning to the message.

Interpretation and Meaning Making

Heath and Bryant highlighted four perceptions from different scholars on the definition of meaning. According to the first perception, meaning was a product of the communication process and was derived from the words of the sender and based on the response produced by the receiver. This perception of meaning implied that the meaning of

words was not static but dependent on an individual's interpretation. It depicted meaning as something that can be exchanged.

The second perception assumed that meaning was as a result of thought and objects of thought. Scholars from this school of thought believed that people's outlook of the world was dependent on their experiences. The third perception highlighted by Heath and Bryant (2000) described meaning as the impact of idioms on perception and actions of people. According to this definition words had different meanings both figurative and literal, and therefore interpreted meaning became that which the individuals had a shared understanding. This perception depicted meaning as the product of interaction. The last perception of meaning focused on the intentions that motivated people to say what they said and how they said it. According to this perception, scholars believed that meaning emerged when 'rules guide the selection and use of language' (Heath & Bryant, 2000, p. 95). This definition according to Grossberg (1982) described meaning as a concept that was vital to people experiencing their way of life.

Theoretical Framework

This study used the Stuart Hall reception theory and Framing theory to understand how effective the Trust Condom 'Kuwa True' campaign was by examining the impact of the advert on adolescents in relation to their decision on condom uptake. The Media reception theory was developed in 1980 by Stuart Hall, a cultural theorist from the original work of Hans-Robert Jaussin. The Encoding/Decoding model was developed by a group of critical scholars at the Birmingham University Centre for Contemporary Cultural Studies in England. Stuart Hall's reception theory was based on the second component of the encoding/decoding model, the reception of the message by the audience (what Hall refers to as the '*decoding process*'). According to this theory, the meaning of a text was not inherent within the text itself, but was created by the reader from the text. It emphasized that individuals interpret texts in different ways and when a message was sent out, not one understanding was received.

Hall emphasized that there was always a chance of various "degrees of understanding and misunderstanding" in any communication exchange. In his view, this was as a result of the structural differences of relation and position between broadcasters. (Sullivan, 2013, p. 141). Hall argued that these contrasts (influenced by numerous factors including life experience, age, culture, beliefs, gender and mood at time of receipt) caused a difference in the orientation of the message resulting to a mismatch between the producers intended meaning and meaning received by the audience.

To help us understand why the audience interpreted text messages in different ways, Hall (1993) introduced the concept of polysemy and three subject positions. Since text was polysemic and audiences approached texts with different experiences and cultural knowledge of signs, different viewers were able to interpret text in different ways. In addition to this, Hall identified three 'hypothetical positions' from which media decoding could take place. The dominant hegemonic position, negotiated position and oppositional position. Based on these positions, the audience would either accept the transfer of packaged meaning without any reflection or they would interpret the message by partly accepting the packaged meaning and partly filtering the media content through the lens of their individualised experiences and world views or they would interpret the message by exclusively focusing on the contextualised understanding in order to raise a conceptual contest against the message or its producers (Sullivan, 2013).

Framing as a theory on the other hand can be traced back to Goffman in his book *Frame Analysis* (1974), where he argued that people "locate, perceive, identify and label" events and occurrences and that people comprehended information based on how information was presented to them. Entman (1993) built on this definition by adding that to frame means to select and package a communicating text to "promote certain facets of a 'perceived reality' and make them more salient in such a way that endorses a specific problem definition, causal interpretation, moral evaluation and/or a treatment recommendation" (p. 51). The framing theory focused on how information was presented to an audience. According to Goffman, the choices that people made were directly influenced by how a message was presented or framed. This presentation was believed to influence the recipients' perception of the message as it was construed to impact on the audience opinion of what was being communicated. Scheufele (1999) classified framing approaches along two dimensions, type of frame examined and media frames vs audience frames and the way frames are operationalized, independent or dependent variable. In this view, Scheufele argued that there was need to differentiate framing from media effects as proposed by McQuil (1994). The idea here was that framing partly selected certain aspects of realities which were then given prominence so that interpretation was based on the selected aspects of reality.

Entman (2007) also introduced the word ‘culling’ in the definition of framing arguing that framing involved selecting a few facets of what was comprehended as reality and constructing an account that draws special attention to the link between them with the intention of promoting a particular interpretation. In a nutshell, framing was about how text was presented to the audience and the inherent manner in which the presenter of the text wanted it interpreted. According to this theory, the lens through which we viewed a particular situation, in this case the risk of being infected with HIV, would largely depend on the type of frame used to communicate HIV risk.

Research Methodology:-

The researcher carried out an audience reception analysis to find out how adolescents’ responded to the ‘*Kuwa True*’ Trust Condom Advert. According to Jones (2013), reception studies provided an analysis of how audiences perceived, associated with, derived meaning from, related to and got satisfaction from a certain media message. In order to find out how effective this advert was in relation to influencing adolescents’ decisions on condom uptake the following questions were asked:

1. RQ1. How does risk perceptions of HIV and AIDS influence adolescent decisions on condom uptake?
2. RQ2. How effective is the ‘*Kuwa True*’ Trust Condom campaign?
3. RQ3. What is the relationship between interpretation of the ‘*Kuwa True*’ Trust Condom Advert and effectiveness of the campaign?

Sampling

The researcher used convenience sampling to select two schools located in the rural and urban areas within Kisumu county that were convenient to the researcher in terms of time, money and accessibility. A cross-sectional survey using self-administered questionnaires and supplemented by focus group discussions (FGD) and Reception analysis was conducted among 40 in-school and out-of-school adolescents (15-19 years). In-school adolescents were selected randomly using a school register while out-of-school youth were identified using a non-random approach of snowball sampling.

Study Methods:-

This study sort to understand adolescent HIV risk perceptions and how effective the ‘*Kuwa True*’ Trust Condom advert was in relation to influencing adolescents’ decisions on condom uptake. This study took a mixed method approach and looked at both qualitative and quantitative data to understand the influence of adolescent interpretation of the Trust Condom Advert (Independent variable) on decision making and effectiveness of the ‘*Kuwa True*’ Trust Condom Campaign (Dependent variable). A three-stage approach was employed to examine the audience reception of the ‘*Kuwa True*’ television advert. In the first stage, a survey questionnaire used to determine HIV risk perceptions of the study population was administered to participants. In the second stage, participants expressed written reactions to the ‘*Kuwa True*’ advert that was displayed on a computer screen using an open-ended questionnaire. Finally, a Focus Group Discussion (FGD) was conducted so as to collect views that generated a rich understanding of how participants’ interpreted the Trust Condom Advert and the influence of experiences and beliefs (Gill, Stewart, Treasure, & Chardwick, 2008) in their interpretation. Data was analyzed using SPSS version 20. Cohen’s Kappa statistic test was used to measure the level of agreement between the message conveyed in the Trust Condom advert and the respondent’s reception of this message as a means of assessing the effectiveness of this public health campaign. Nvivo version 11 was used to analyse qualitative data from the FGD and reception study.

Data Collection Process

Stage One: The Survey

A structured questionnaire was used in the survey to collect data on HIV risk perceptions and interpretation of the Trust Condom Advert. An open-ended structured questionnaire was used to assess adolescents’ reception of the ‘*Kuwa True*’ campaign. Whereas the questionnaire was self-administered for adolescents that were in school, those that were out of school were administered by the researcher as they did not have the ability to interpret the questions based on their educational level. In such cases, Mugenda and Mugenda (2003) advised that ‘the researcher reads the items and categories to the subjects and the responses are written down’ (p. 80). One in-depth interview was also carried out with the Brand Manager of PSI Kenya to establish the thinking behind the ‘*Kuwa True*’ Campaign.’

Stage Two: The Reception Study

In order to examine the audience reception of the Trust Condom Advert, the researcher played the Trust Condom Advert on a computer screen for participants to watch. They were then requested to provide feedback on the advert using an open ended questionnaire. The questionnaire required participants to explain what the advert was about, give an interpretation of the producers intended meaning and capture the audio/visual features of the Trust Condom Advert that drew their attention.

Stage Three: The Focus Group Discussion

A Focus Group Discussion was conducted among the four groups (Urban in and out of school adolescents and Rural in and out of school adolescents) in order to provide more information on the participants understanding of the Trust Condom Advert. The group discussions were guided by a moderator and an assistant moderator who were responsible for facilitating the discussions. After playing a 1 minute 6 seconds video clip on the Trust Condom Advert, the moderator presented the focus group participants with a series of questions. The assistant moderator took notes and also recorded the Focus Group Discussion sessions using a voice recorder.

Data Analysis

The researcher used actual text recorded by the assistant moderator and voice records of the participants from the Focus Group Discussions for analysis. Transcription of the audio recorded information was done by the researcher. Together with the assistant moderators notes, the researcher grouped the information into small units and attached codes to these units. Using Nvivo version 11 software, the researcher was able to group these codes into categories and identified themes that expressed the content of each focus group.

Results:-

Key findings

To determine the effectiveness of the new Trust Condom 'Kuwa True' campaign, we compared adolescent risk perception against interpretation and meaning acquired from the advert.

Demographic Analysis and Risk Perception of Adolescents in Kisumu County

The study was carried out among in school and out of school adolescents in Kisumu county between the age of 15-19 years. Of the total number of participants, majority (54%) were in school adolescents while 46% were out of school adolescents. Similarly, a bigger proportion of the respondents (60%) were male while 40% were female. Adolescents between 15 and 16 years of age accounted for 18% and 19% respectively of the participants. Those that were between 17 and 19 years accounted for 20%, 21% and 22% respectively. In order to identify associations between demographic variables (age and level of education) and the main variables of interest (Risk perception, interpretation of meaning and decision making), a series of preliminary analyses were conducted.

Table 1 represents findings based on education level and ever seeing the 'Kuwa True' Trust Condom advert before the study.

Table 1:- Education Level and whether respondent had ever seen or heard the 'Kuwa True' Trust Condom Advert.

Variable	Have you seen or heard the Kuwa True message		Total	P-value
	No	Yes		
Respondents education status				0.006*
In school	3 (15%)	17 (85)	20	
Out of school	11 (65%)	6 (35%)	17	

*Significant at $\alpha=0.05$

Table 1 shows that there was a significant difference in the proportion of respondents who had seen/heard of the 'Kuwa True' Trust Condom Advert before the study and between respondents who were 'in school' and those 'out of school' (p-value=0.006). Among the respondents who were 'in school,' 17 (85%) had heard or seen the 'Kuwa True' Trust Condom Advert compared to 6 (35%) of those who were 'out of school.' The demographic variables were excluded from further analysis.

HIV Risk Perception and Decision Making

Results from the study revealed that most of the participants (70%) felt that they were at risk of contracting HIV. However, a significant proportion at 30% felt that they were not at risk even though 86% of the respondents agreed that HIV was a serious problem in Kisumu County.

These results agree with those of Khasiani (2013) even though the proportion of those who do not see themselves at risk has significantly dropped from 43% in 2013 to 30% in 2016. In response to the question 'Have you ever had sex?' slightly below half of the respondents (46%) had indulged in sex with 12% of them admitting that they did not use a condom. 6% did not respond to this question. During the reception study, participants were asked what decision they are likely to make after watching the 'Kuwa True' Trust Condom advert. Some of the responses captured from the Focus Group Discussion were far-fetched. They included:

- Respondent 2: Have good friends and shun pretence
- Respondent 9: To have true love
- Respondent 12: Say directly what you want
- Respondent 13: Have the ability to socialize
- Respondent 19: Show true colors when around people
- Respondent 21: Condom is stressful
- Respondent 22: Influence from drugs and alcohol
- Respondent 23: Condom protects from sexual satisfaction
- Respondent 24: I can't take sweets with its cover
- Respondent 28: Sex is for the upper class

Interpretation of the 'Kuwa True' Trust Condom Advert

Figure 1 shows adolescents' interpretation of the Trust Condom 'Kuwa true' advert. Majority of the respondents were of the opinion that the intended meaning of the producer of the advert was to 'encourage sex with the use of condom for sexual protection' as a significant number of respondents had other different interpretations such as being free, genuine or truthful, when girls see condoms they give in to sex and other interpretations that could not be classified into common themes. Focus Group Discussions with in and out of school adolescents confirmed that majority of their interpretations were far-fetched and pegged on past experience and world views that lack serious thought. Some of these responses include:

- Respondent 1: The life of youths and how they behave;
- Respondent 2: The advertiser tries to help youths on how to be self-dependent in their day to day activities and should not be discouraged;
- Respondent 3: The funny shaving of the women symbolizes the digital (the new styles/modern ways of living);
- Respondent 4: People should be free with their partners;
- Respondent 7: A guy with the Kuwa True condoms can get to any girl and she is assured of being safe;
- Respondent 9: The advertiser is trying to inform and tell the individuals to be realistic in life;
- Respondent 11: It interprets the entertaining by the long haired man and acrobats;
- Respondent 12: My interpretation based on the advertiser's interpretation is that, all that lures girls is how the boys dress and the action they portray when they are together and that make them happy, same to boys feelings towards girls;
- Respondent 21: Youths should have a decent dressing code;
- Respondent 24: The moment the girls sees the condom he gives in

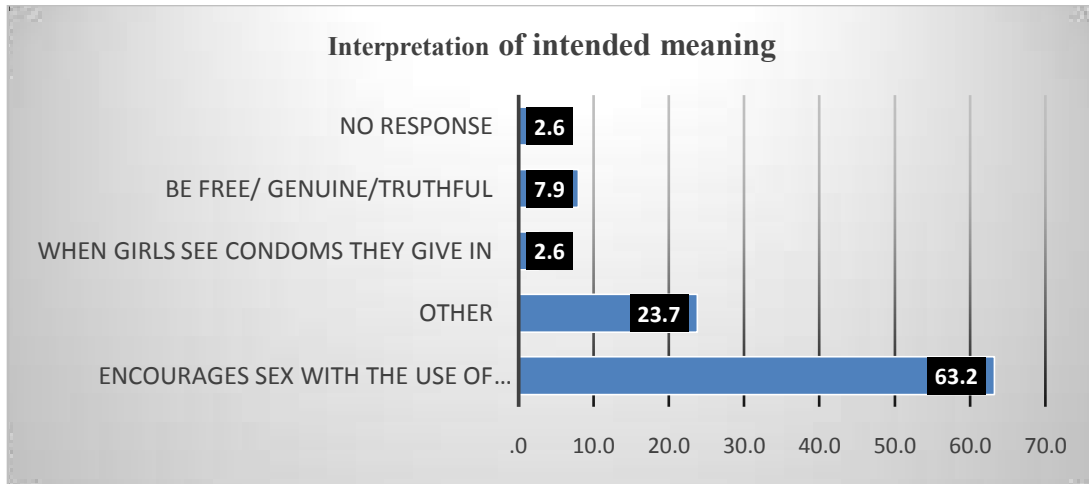


Figure 1:- Interpretation of Kuwa True Message.

This finding is in agreement with Stuart Hall’s emphasis that ‘there is always a chance of various “degrees of understanding and misunderstanding” in any communication exchange’ (Sullivan, 2013, p. 141). According Hall (1993), the different interpretations perceived by television producers and viewers are based on structural differences of relation and position between broadcasters and audiences.

These differences can also be attributed to semiotics. According to French scholar of linguistics Ferdinand de Saussure (1857-1913) the process of human communication is dependent upon the creation of signs. In his opinion, of importance is what the sign points to and what it is associated with in the mind (Sullivan, 2013). If the audience is not familiar with the structure or syntax of the language, then they will be unable to ‘decode’ the sign and form a mental picture of the actual referent in the mind. Saussure argues that ‘the connection between the signs and referents is not given or “natural” but is instead the result of human social relations and the rules of particular symbolic codes’ (Sullivan, 2013, p. 138). From this revelation, we discover that a proportion of the audience was able to challenge the producers intended meaning of the Trust Condom Advert because of what Stuart Hall referred to as disparity between the surface meaning of an image or text and what one infers from the text based on specific sets of cultural codes and experiences.

Figure 2 below represents finding from the reception analysis on the participants response when asked what the ‘Kuwa True’ Trust Condom advertisement was about.

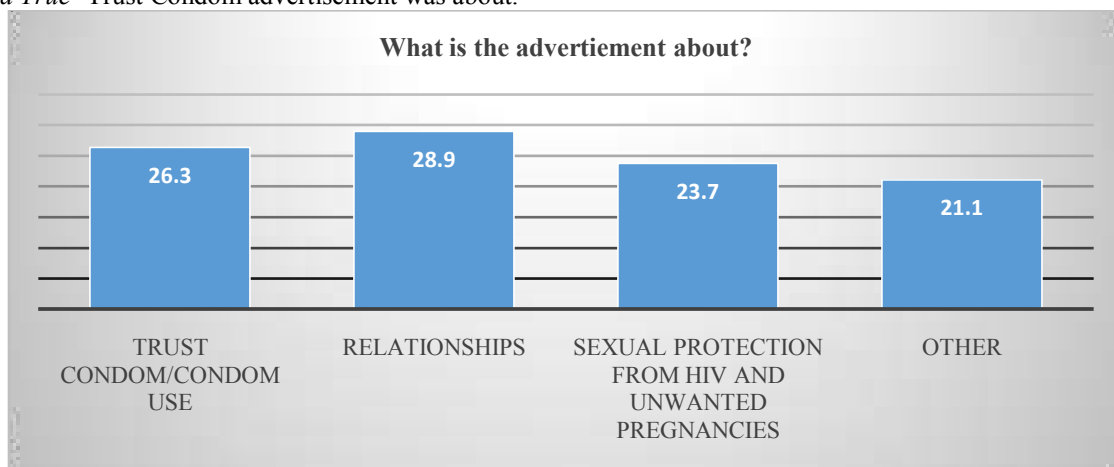


Figure 2:- What the 'Kuwa True' Advertisement was about.

Only 26% of respondents clearly understood that the ‘Kuwa True’ Trust Condom Advert was about the Trust Condom. The revelation that 74% of participants had a different interpretation of this advert justifies Hall’s (1993) ideology that meaning is multilayered and multi-referential. It also proves ‘that the audience are capable of

producing their own meaning from media text outside of the structures of those text' (Sullivan, 2013, p. 146). Some of the respondents with contrary opinion held that the 'Kuwa True' advert was about:

Respondent 2: The relationship between two parties and future of life;

Respondent 3: How to make your life safe and future life healthy

Respondent 4: Lessons on future life planning

Respondent 5: How you can trust your friends or control your relationship;

Respondent 8: True concern of lovers with their relationship;

Respondent 14: It's about believing in oneself;

Respondent 16: Entertaining; dances, dress code and acrobats

Respondent 17: Dress code and a beautiful girl;

Respondent 23: Prevention from HIV and pregnancies

Respondent 24: The girl in the advert is attracting the men;

Respondent 25: Encouraging sex amongst the youth

Respondent 28: Sincerity in a relationship

This finding can be explained using Stuart Halls 'Three Subject Position' theory and Frank Parkin's argument on class position. According to Parkin (1971), Class position, which includes income, type of employment and educational level, plays a big role in shaping an individuals' meaning system and view about public affairs. Given that this study included adolescents from both rural and urban settings with varying education background, Morley and Brunson (1980) argue that the differences in interpretation originate from social settings rather than the individuals. From this position, Woolfson (1976) argues that decoding of a message is based on 'cultural codes' and hence different groups and classes will interpret a given message differently, not just at the personal idiosyncratic level, but in a way 'systematically related' to their socio-economic position.

Cohen's Kappa Statistic Test for the Agreement between Advertisers Message and Respondents Interpretation

Table 2 represents findings from the Cohen's kappa statistic (κ) test for the agreement between advertisers message and respondents interpretation of the advertiser's message. The Cohen's kappa statistic (κ) test was used to measure the level of agreement between the advertiser's message and respondent's interpretation of the message. In relation to the Kappa statistic with a confidence interval of 95%, the strength of agreement for the Kappa coefficient was rated as; poor, $\kappa < 0.21$; fair, κ between 0.21 and 0.40; moderate, κ between 0.41 and 0.60; good, κ between 0.61 and 0.80, and very good, $\kappa > 0.80$ (Lynn, 1986).

Table 2:- Respondents Interpretation of Advertisers Message.

Advertiser message	Respondent's interpretation of advertiser's message			Total
	A	B	C	
A	16 (53%)	9 (30%)	5 (17%)	30
B	2 (67%)	1 (33%)	0 (0%)	3
C	1 (20%)	1 (20%)	3 (60%)	5
Total	19	11	8	38
Agreement			53%	
Kappa (κ) (95% CI)			0.146 (-0.024;0.349)	
P-value			0.072	

Abbreviations:

A= Use of condoms for protection against STIs & unwanted pregnancies

B= Being faithful, trustworthy and loyal in a relationship

C=Others

CI= Confidence intervals

Results from Table 2 show that there was poor agreement between advertisers message and the interpretation of the message by the respondents (Kappa=0.146, 95% CI -0.024; 0.349) with an average percentage agreement (53%). According to Hall (1993), these differences have something to do with the asymmetry between the codes of 'source' and 'receiver' at the moment of transformation into and out of the discursive form (Sullivan, 2013, p. 141).

In order to understand how the audience interpretes messages, Hall explains that during the process of decoding, the audience reacts to both surface meaning of the image/text or its related 'subtext' (Sullivan, 2013, p. 141). Similarly, Sullivan (2013) emphasised that text is polysemic in nature and can be interpreted in different ways by different viewers since audiences filter media content through the lens of their own individualised experiences and world view (p. 142).

Discussion and Conclusion:-

HIV and AIDS Risk Perceptions and Condom Uptake Among Adolescents

The study found that 70% of participants felt that they were at risk of contracting HIV while 30% felt that they were not at risk even though 86% of the respondents agreed that HIV was a serious problem in Kisumu County. This implies that these adolescents were likely to indulge in risky sexual practices such as not using a condom during sex which may expose them to contracting HIV. Nonetheless, this results indicate great improvement from 2013 when slightly above half of the participants at 57% perceived themselves to be at risk compared to 70% in 2016. In spite of this great improvement in perception of HIV risk among adolescents in Kisumu County, Kenya's Fast track plan to end AIDS and Stigma, informed us that "adolescents and young people still bore the brunt of the HIV epidemic (NACC, 2015, p. 1.). In 2015 adolescents were reported to have contributed 51% of the adult HIV new infections, a rapid increase from 29% in 2013. Incorrect perception of HIV risk and limited knowledge on risky sexual behaviour were identified as the factors advancing the alarming rate of new infections.

Condom use remained one of the most effective strategies of reducing the risk of spreading sexually transmitted infections (KNBS & ICF Macro, 2014). The '*Kuwa True*' Trust Condom campaign was a communication initiative that aimed to promote condom use among young people in Kenya. Ministry of Health partnered with PSI Kenya in the late 1990s to develop the Trust Condom Campaign with an objective of promoting the Trust Condom as a choice for safe sexual practices (Evans & Haider, 2008). However, this has not been effective as research shows that there were low levels of condom use regardless of the risk of being infected with HIV and STIs (KNBS, 2014; Lammers, Wijnbergen, & Wellebrands, 2013). According to the Kenya Demographic Health Survey (2014), only 26 percent of women and 64 percent of men between the ages of 15-19 used a condom in their last sexual encounter.

These findings concurred with other studies investigating the relationship between risk perception of acquiring HIV and condom uptake which revealed that perceived risk for HIV infection had no significant impact on condom uptake (Muchiri, Odimengwu, & Wet, 2017; Stehr, 2006; Ashagrie, Tadesse, & Alebachew, 2016). They also resonated with the Harvard Mental Health Letter (2011) which informed us that risk perception was rarely entirely rational as people assessed risk through use of a mixture of cognitive skills by weighing the evidence and using reason and logic to reach a decision about risk.

How effective was the '*Kuwa True*' Trust Condom Campaign?

Effectiveness of the '*Kuwa True*' Trust Condom Campaign was measured using two proxy indicators; the degree of understanding or misunderstanding between advertisers message and respondents interpretation and the proportion of respondents willing to take up condom use as a preventive measure for HIV and AIDS.

The study revealed that there was poor agreement between advertisers message and the interpretation of the message by the respondents. A number of factors may have contributed to this result such as the framing effect, the subject's position and the multilayered or multi-referential nature of meaning. According to Lakoff (2014) a retired professor of science and linguistics, framing was inevitable in human communication. He argued that marketing professions used the framing of experiences, personal and social identity to lead the audience into action. Just like other studies have shown, It was likely that framing shaped and altered the participants' interpretation of the '*Kuwa True*' Trust Condom advert (Entman, 2007; Scheufele & Tweksbury, 2007; Gross & D'Ambrosio, 2004; Iyengar & Simon, 1993).

Unlike the Trust Condom Campaign developed in the late 1990s, whose emphasis was on healthy lifestyle choices and not the commercial end in itself, the '*Kuwa True*' Trust Condom campaign had a distinctive strategy that sought to increase sales rather than promote a healthy lifestyle. The advert introduced frames that raised the importance of certain ideas such as having fun and using the condom to encourage the target audience to think, feel and decide in a particular way. The campaign leveraged on youth culture, music and entertainment among others, and failed to recognise that 'Engaging in risky behavior may not seem that way if it involves pleasure.' The framing theory informed us that the lens through which we viewed a particular situation, in this case the risk of being infected with

HIV, largely depended on the type of frame used to communicate HIV risk. It is therefore possible that the skewed interpretation of the 'Kuwa True' Trust Condom advert resulted from the type of frame used to structure the message. The Trust Condom advert did not put into consideration 'the fun factor,' one of the most influential factors that manipulated risk perceptions for young people (Reniers, Murphy, Lin, Bartolomé, & Wood, 2016; Ropeik, 2002).

Interpretation and the Subject's Position

It is within the bounds of possibility that the difference in interpretation of the advertisers message and that of the respondents resulted from 'audience positioning' in the interpretation of the text within the advertisement. Stuart Hall espoused three ways in which an audience may decode the meaning of a message. If a message was decoded according to its dominant reading, then the audience will interpret it the way the author intended them to. However, if the message is decoded according to the negotiated or oppositional reading, then either part of the message will be interpreted as intended by the author and the other part rejected or the message will be rejected all together given that the readers social position places them in an oppositional relation to the dominant code within the message. According to Hall, 'The particular reading chosen by different audiences would depend on their life circumstances, often corresponding to social class position and on the specific socioculturally anchored *interpretive repertoires* at their disposal for decoding the media' (Littlejohn & Foss, 2009, p. 66).

Given that education played a key part in reading messages and the study was conducted among in and out of school youth in rural and urban areas, the probability that the discrepancy identified between intended and perceived meaning was as a result of differences in the audiences socialization, experience, outlook and frames of knowledge was very high. According to Halls, encoding and decoding model, the process of encoding any media text was based on the *meaning structure* of the producer but the decoding is based on "...the different meaning structures and frameworks of knowledge of differently situated audiences" (McQuil, 2010, p. 76). Therefore, the encoders of the messages must always strive to situate their messages within the interpretive schema of the target audience's dominant reading.

The Nature of Meaning

This study also revealed that when participants were asked the meaning of 'Kuwa True,' not one interpretation was received. This can be explained by the fact that text was polysemic in nature and could be interpreted in different ways by different viewers given that audiences filter media content through the lens of their own individualised experiences and world view (Sullivan, 2013, p. 142). According to symbolic interactionists (Blumer, 1969; Manis & Meltzer, 1978; Rose, 1962), people were able to modify or alter the meaning and symbols that they used on the basis of their interpretation of the situation. This was because context provided meaning and every individuals knowledge was evaluated through their context (Renzl, 2007).

Theoretical insights from George Herbert Mead (1974) cited by Fenton (1983) implied that meaning was constructed socially. According to Mead, meaning was mobile and through an elaborate process of social interaction, it was constructed. In order for an individual to make a rational choice, then they must understand the meaning of the choices they confront (Grifford Jr., 2005). Culture had been identified as a key aspect of the environment in which social interaction took place, which facilitates rationality. Through an individual's culture, complex social constructs were created that reduced uncertainty and increased rationality. Results from this study showed that the phrase 'Kuwa True' obtained numerous readings from the audience. This was evident when participants provided diverse interpretations of the meaning of 'Kuwa True' such as : Do not pretend; Tell people about your status; Be faithful and be true to everyone; Use protection and Carry condom always, among others.

It was also possible that language played a role in this finding. Language, as stated by Sapir (2014) was made up of thousands of signs that consisted of different symbols and meaning. Understanding the relationship between words and things in order to appreciate how these elements interacted within a specified context to create meaning for those within that environment was key to understanding the concept of language (Heath & Bryant, 2000). As reported by Mutiso-Mbuvi (2015), 'Kuwa True', a swahili phrase for 'Be true to yourself,' can be translated figuratively as 'show your true colors or be comfortable in your skin.' The campaign aimed at encouraging young people to put the Trust Condom back into their sexual plan. As expressed by Heath and Bryant, (2000), language influenced thought, judgement and how meaning was constructed. If this assumption was true, then the swahili and english phrase of 'Kuwa True' and 'Be true to yourself' would elicit different thoughts, meanings and judgement from the targeted audience as expressed by Sapir (2014), when he stated that language had a certain effect on the way people think.

The interpretation of the phrase 'Kuwa True' was determined largely by the relationship between the words within the phrase and the experiences of the target audience with these words or how the audience came to know the 'Kuwa True' phenomenon in their world. Given that the study was carried out in Kisumu County where the Luo culture is predominant and sexual contact was required in almost every ritual of their culture, it was possible that the participants interpreted the meaning of the 'Kuwa True' advert by first finding association before inferring meaning. According to the socio-cultural tradition, communication was influenced by concepts such as social structure, identity, norms, rituals and collective beliefs.

Heath and Bryant (2000) argued that 'People learn to interpret meaning based on rules that operate during each communication episode' (p. 96). According to these two scholars, meaning was derived from personal interpretations of communication actors and was dependent on the context, relationship, situation and intent of communicators. In this regard, 'Kuwa True' could have many meanings depending on the relationship, situation and context of the communicators.

The meaning changed if the words were spoken by a boyfriend to a girl friend or by a parent to an adolescent. The former meaning insinuates 'being faithful' while the latter implied 'behaving according to your beliefs and doing what is right.' This example showed that meaning was not in the words but in the intentions of the communicator. From the illustration, the boy friends' intention was to secure his relationship while the parents' intention was to guard the adolescent against peer pressure.

References:-

1. Agha, S. (2001). *The Impact of the Kenya Social Marketing Program on Personal Risk Perception, Perceived Self-efficacy and on other Behavioral Predictors*. PSI, Research Division. Washington D.C.: Population Services International.
2. Airhihenbuwa, C. (2000). A critical Assessment of theories/models used in health communication for HIV and AIDS. *Journal of health communication*, 5, 5-15.
3. Ashagrie, M., Tadesse, S., & Alebachew, F. (2016). Sexual Behavior and Risk Perception of HIV Infection Among Young Students of Wollo University, Dessie Campus: A Cross Sectional Study. *World Journal of Public Health*, 1(1), 19-27. doi:10.11648/j.ph.20160101.14
4. Bertrand, T., O'Reilly, K., Denison, J., Anhang, R., & Sweat, M. (2006). Systematic review of the effectiveness of mass communication programs to change HIV/AIDS-related behaviors in developing countries. *Health Education Research: Theory and Practice*, 21(4), 567-597. doi:10.1093/her/cyl036
5. Blumer, H. (1969). *Symbolic Interactionism: Perspective and Method*. New Jersey : Prentice Hall.
6. Chong, D., & Druckman, N. J. (2007). Framing Theory. *Annu. Rev. Polit. Sci.*, 10, 103-126.
7. Entman, M. R. (2007). Framing Bias: Media in the Distribution of Power. *Journal of Communication*, 57, 163-173.
8. Evans, W. D., & Haider, M. (2008). Public Health Branding: Applying Marketing for Social Change. In D. W. Evans, & G. Hastings (Eds.), *Public Health Branding: Applying Marketing for Social Change* (pp. 215-232). New York: Oxford University Press. doi:10.1093/acprof:oso/9780199237135.001.0001
9. Fabrigar, R., Petty, E. R., Smith, M. S., & Crites, L. (2006). Understanding Knowledge Effects on Attitude-Behavior Consistency: The Role of Relevance, Complexity, and Amount of Knowledge. *Journal of Personality and Social Psychology*, 90(4), 556-577.
10. Fischhoff, B. (2012). *Risk analysis and human behaviour*. New York: Routledge.
11. Fischhoff, B., Bostrom, A., & Quadrel, M. (1993). Risk Perceptions and Communication. *Annual Reviews*, 183-203.
12. Gifford, A. (2005). The Role of Culture and Meaning in Rational Choice. *Journal of Bioeconomics*, 7, 129-155. doi:10.1007/s10818-005-0495-9
13. Gill, P., Stewart, K., Treasure, E., & Chardwick, B. (2008, March 22). Methods of data collections in qualitative research: Interviews and focus group discussions. *British Dental Journal*, 204(6), 291-295. doi:DOI: 10.1038/bdj.2008.192
14. Gifford Jr., A. (2005). The Role of Culture and Meaning in Rational Choice. *Journal of Bioeconomics*, 129-155. doi: 10.1007/s10818-005-0495-9
15. Gross, K., & D'Ambrosio, L. (2004, January 14). Framing Emotional Responses. *Political Psychology*, 25(1), 1-29. doi:10.1111/j.1467-9221.2004.00354.x
16. Hall, S. (1993). Stuart Hall Encoding and Decoding. In S. During (Ed.), *The Cultural Studies Reader* (2nd ed., pp. 90-98). London and New York: Routledge.

17. Harvard Mental Health Letter. (2011, June n.d). *Harvard Health Publishing Logo*. Retrieved October 25, 2017, from Health Harvard Web site: https://www.health.harvard.edu/newsletter_article/the-psychology-of-risk-perception
18. Heath, L. R., & Bryant, J. (2000). *Human communication theory and reasearch : Concepts, Context and Challenges*. London: Lawrence Erlbaum Associates, Publishers.
19. Hermann, C. M. (2015, August 5). *PSI Impact*. (M. Stowell, Editor, & PSI Kenya) Retrieved from PSI Impact Website: <http://psiimpact.com/2015/08/new-trust-kuwa-true-campaign-live/>
20. Iyengar, S., & Simon, A. (1993, June). News Coverage of the Gulf Crisis and Public OpinionA Study of Agenda-Setting, Priming, and Framing. *Communication Research*, 365-383. doi:10.1177/009365093020003002
21. Kenya National Bureau of Statistics(KNBS). (2010). *Kenya 2009 Population and Housing Census*. Nairobi: KNBS.
22. Khasiani, C. M. (2013). *The influence of mass media in shaping HIV risk perceptions:The case of secondary school youth in Kisumu East district*. Nairobi: Lambert Academic Publishing.
23. KNBS & ICF Macro. (2010). *Kenya Demographic Health Survey 2008-09*. Calverton, Maryland: KNBS & ICF Macro.
24. KNBS & ICF Macro. (2014). *Kenya Demographic Health Survey*. Nairobi: ICF macro.
25. KNBS & ICF Macro. (2014). *Kenya Demographic Health Survey*. Calverton,Marlyland: KNBS & ICF Macro.
26. KNBS. (2009). *The 2009 Kenya population and housing census: Population and house hold distribution by soci economic characteristic (Vol. II)*. Nairobi: KNBS.
27. KNBS. (2010). *Kenya Population and Housing Census:Population Distribution by Age,Sex and Administrative Units (Vol. 1C)*. Nairobi: Author.
28. KNBS. (2014). *Kenya Demographic Health Survey: Key indicators* . Nairobi: KNBS.
29. Kwigizile, E., Shao, E., Mtango, G., Sonda, T., Moshi, J., & Chilongola, J. (2013). The Gap Between Knowledge and Practice of Risky Sexual Behaviors for HIV Among University Students and Staff in Moshi Town in Tanzania. *Journal of Public Health Africa*, 4(1), e.8. doi:10.4081/jphia.2013.e8
30. Lakoff, G. (2014, November 29). George Lakoff: In Politics, Progressives Need to Frame Their Values. (M. Karlin, Interviewer)
31. Lammers, J., Wijnbergen, S., & Wellebrands, D. (2013). Condom Use, Risk Perceptions and Knowledge: A comparision across sexes in Nigeria. 5, 283-293. doi:10.2147/HIV.S31687
32. Langford, M., & O'riodan, T. (1998). The Quantitative Test of the cultural theory of risk perceptions:Comparison with the psychometric paradigm. *Risk analysis*, 18(5), 635-647.
33. Littlejohn, S. W., & Foss, K. A. (Eds.). (2009). *Encyclopedia of Communication Theory*. California : Sage Publications.
34. Littlejohn, W. S. (2002). *Theories of human communication (7 ed.)*. New Mexico: Scratchgravel Publishing Services.
35. Lynn, M. R. (1986). Determination and quantification of content validity. *Nursing Research*, 35, 382-385.
36. Manis, G. J., & Meltzer, B. N. (1978). *Symbolic Interaction: Reader in Social Psychology (3rd ed.)*. New York: Allyn & Bacon.
37. Mberia, H., & Mukulu, E. (2011). Persuasive Communication Factors that Influence University Students in Therie Response to HIV and AIDS Prevention Campaign messages. *International Journal of Humanities and Social Sciences*, 1(11), 254-260.
38. McQuil, D. (1994). *Mass communication theory: An introduction (3rd ed.)*. London: Sage Publishers.
39. McQuil, D. (2010). *McQuils Mass Communication Theory*. London: Sage Publishers.
40. Miranda, M. S., & Saunders, S. (2002). The social construction of meaning:An alternative perspective on information sharing. *Information Systems Research*, 0(0), 000-000.
41. MoH & NACC. (2016). *Kenya AIDS Response Progress Report 2016*. Nairobi: NACC.
42. Morley, D., & Brunson, C. (1980). *The Nationwide Television Studies* . London and NewYork: Routledge Taylor and Francis Group.
43. Morrow, B. (2009). *Risk Behaviour and Risk Communication:Synthesis and Expert Interviews*. Maimi.
44. Muchiri, E., Odimengwu, C., & Wet, D. (2017). HIV risk perception and consistency in condom use among adolescents and young adults in urban Cape Town, South Africa: A cumulative risk analysis. *South African Journal* , 105-110. doi:10.1080/23120053.2017.1332800
45. Mugenda, O., & Mugenda, A. (2003). *Research Methods: Quantitative & Qualitative Approaches*. Nairobi: African Centre for Technology Studies.
46. Mutungu, S. (2015, August-October). Youth Umbrella Brand. (G. Mutiso-Mbuvi, Ed.) *Hatua Yetu*(9), p. 5.

47. Muturi, N. (2005). Communication for HIV/AIDS in Kenya: Social cultural considerations. *Journal of Health Communication*, 77-98.
48. Muturi, N. (2005). Communication for HIV/AIDS Prevention in Kenya: Social; cultural considerations. *Journal of Health Communication*, 77-98. doi:10.1080/10810730590904607
49. NACC & NASCOP. (2012). *The Kenya AIDS Epidemic Update 2011*. Nairobi.
50. NACC & NASCOP. (2014). *Kenya HIV Estimates*. Nairobi: National AIDS Control Council.
51. NACC & NASCOP. (2014). *Kenya HIV Estimates: June 2014*. Nairobi.
52. NACC & NASCOP. (2014). *Kenya HIV prevention revolution road map: Countdown to 2030*. Nairobi: National AIDS Control Council.
53. NACC & NASCOP. (2016). *Kenya HIV Estimates*. Nairobi: NACC.
54. NACC & UNAIDS. (2014). *Kenya AIDS Spending Assessment Report*. Nairobi: NACC.
55. NACC. (2014). *Kenya AIDS Strategic Framework*. Nairobi: NACC.
56. NACC. (2015). *Kenya's fast track plan to end HIV and AIDS among adolescents and young people*. Nairobi: NACC.
57. NASCOP & NACC. (2014). *Kenya HIV Prevention Revolution Road Map*. Nairobi.
58. NASCOP. (2012). *Kenya HIV and AIDS Indicator Survey*. Nairobi.
59. National AIDS Control Council. (2015). *Kenya AIDS Progress Report*. Nairobi: NACC.
60. National AIDS Control Council. (2015). *Kenya's Fast-track plan to end HIV and AIDS among adolescents and young people*. Nairobi: NACC.
61. Nkwi, P. (2004). The impact of cultural practices on the spread of HIV/AIDS: An Anthropological study of selected countries in sub Saharan Africa. *Discov. Innov.*, 21-35.
62. Noroozinejad, G., Vassel, Y. M., Bazrafkan, F., Sehat, M., Rezazadeh, M., & Ahmadi, K. (2013, September 30). Perceived risk modifies the effect of HIV knowledge on Sexual Risk Behaviour. *Front. Public Health*. doi:<https://doi.org/10.3389/fpubh.2013.00033>
63. Nyabuga, G., & Booker, N. (2013). *Mapping Digital Media: Kenya*. Nairobi: Open Society Foundations. Retrieved from <https://www.opensocietyfoundations.org/sites/default/files/mapping-digital-media-kenya-20130321.pdf>
64. Odundo, P., & Owino, W. (2004). HIV/AIDS Scourge in Nyanza Province: Poverty Culture and Behaviour Change. *Institute of Policy Analysis and Research*, 10(11), 1-4.
65. Omoke, M. K. (2017). *The influence of Mass Media in shaping HIV and AIDS Risk Perceptions*. Nairobi: Lambert Academic Publishing.
66. Omolo, E. (2013). HIV and AIDS: Factors Sustaining riskysexual behaviouramong female fish dealers in fish landing beaches in Kisumu county,Kenya.
67. Parkin, F. (1971). *Class Inequality and Political Order: Social Stratification in Capitalist and Communist Societies*. New York :Praeger: MacGibbon & Kee.
68. Radden, G., Kopcke, M. K., Berg, T., & Siemund, P. (Eds.). (2007). *Aspects of meaning construction*. John benjamin's publishing company.
69. Reniers, R., Murphy, L., Lin, A., Bartolomé, P., & Wood, J. S. (2016, April 21). Risk Perception and Risk-Taking Behaviour during Adolescence: The Influence of Personality and Gender. *PLoS ONE* 11, 11(4), 1-14. doi:DOI:10.1371/journal.pone.0153842
70. Renzl, B. (2007). Knowledge as a vehicle of knowing: the role of language and meaning in constructing knowledge. *Knowledge, Management, Research and Practice*, 44-53.
71. Ropeik, D. (2002). Understanding factors of Risk Perception. *Nieman Report*(Winter), 1-8. Retrieved from <http://niemanreports.org/articles/understanding-factors-of-risk-perception/>
72. Rose, M. A. (1962). *Human Behaviour and social processes: An interactionist Approach*. Boston: Houghton Mifflin.
73. Rundmo, T. (2004). *Explaining risk perceptions:An evaluation of cultural theory*. Trondheim, Norway: Rotunde.
74. Sapir, E. (2014). *Language: An introduction to the study od speech*. USA: Lushena Books, Inc.
75. Scheufele, A. D. (1999). Framing as a Theory of Media Effects. *Journal of Communication*, 103-123.
76. Scheufele, D., & Twombsbury, D. (2007). Framing, Agenda Setting, and Priming: The Evolution of Three Media Effects Models. *Journal of Communication*, 57(1), 9-20. doi:DOI10.1111/j.1460-2466.2006.00326.x
77. Stehr, M. (2006). Relationship between HIV Risk Perception And Condom Use: Evidence from a Population-Based Survey in Mozambique. *International Family Planning Perspectives*, 34(4), 192-200.
78. Sullivan, L. J. (2013). *Media Audience: Effects,Users, Institutions and Power*. Los Angeles: Sage.
79. UNAIDS. (1999). *Sexual Behaviour Change for HIV:Where have theories taken us*. Geneva, Switzerland.

80. UNAIDS. (2001). *HIV/AIDS for Behaviour and Social Change: Program experiences, Examples and the Way Forward*. Geneva, Switzerland: UNAIDS.
81. Williamson, J. (1994). *Decoding Advertisements : Ideology and Meaning in Advertising* . London : New York: Maryon Boyars.
82. Woolfson, C. (1976). The semiotics of working -class speech. *Working Paper in Cultural Studies*, 9, 163-197.
83. Zabin, S., & Kiragu, K. (1998). The health Consequences of adolescent sexual and fertility behaviour in sub saharan africa. *Studies in Family Planning*, 29(2), 210-332.