

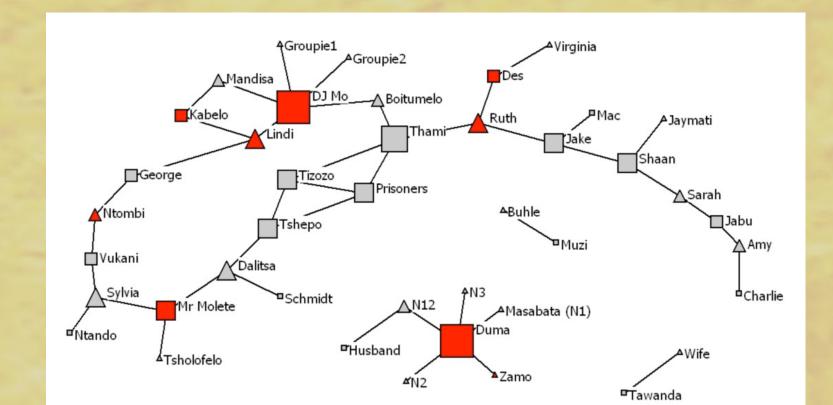
'Maybe she has slept with someone I have slept with before': Viewers' understanding of the sexual network as informed by the television drama series, Intersexions

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Background:

Series one of the successful South African television drama series, *Intersexions*, was first broadcast in 2010-2011 and utilised original storytelling firmly embedded in research to set it apart from other entertainment-education programmes.

Intersexions portrayed the risks of multiple and concurrent partnerships by mapping a fictional sexual network across 25 episodes and a culminating docudrama which strived to take viewers closer to understanding the interconnected nature of their own sexual networks.



'Our lives intersect in a vast network that affects us all.

In sex, there are no strangers...'

Methods:

A qualitative post-broadcast evaluation consisting of 12 focus groups and 11 interviews was conducted across six provinces with 87 regular viewers of the series from a mix of urban, peri-urban and rural localities. All discussions were transcribed and analysed using NVivo.

Identification and realism:

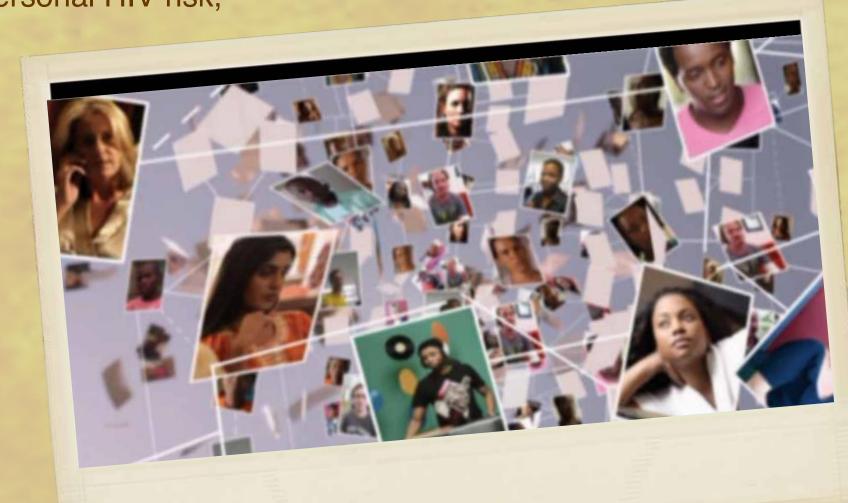
Intersexions was broadly perceived as a contemporary and unconventional drama series that depicted genuine South African issues. Its focal content, the central role the sexual network plays in the transmission of HIV, was well understood by participants. Many participants told how acceptable it is to have more than one partner, frequently change sexual partners, have someone 'on the side', not discuss sexual histories, and/or have unprotected sex without knowing whether one's partner is HIV positive.

Engagement with the concept of the 'sexual network':

New understandings of HIV were formed through intense reflection on how sexual networks function and its implications on one's personal HIV risk,

ultimately building a more complex knowledge of HIV and AIDS. Regular viewers who were interviewed described gaining new insight into the complexity of sexual networks and how they can traverse social and geographical boundaries. This was accompanied by an understanding of the non-discriminatory nature of HIV and how the network can potentially incorporate anyone. Some participants would subsequently consider the chain of infection in everyday situations, such as when looking at someone with whom

they were sharing a taxi:



The show is real but what I like most about it is that it doesn't have borders. Whether you are gay, rural, urban, rich, poor, educated or gay, straight; if you have unprotected sex you are vulnerable to be infected.... I think the message was delivered and it shows that HIV doesn't have any borders. The scary part is how you meet a stranger on the road and think you don't know them only to find that they are former partners with your partner.... Even though I know about HIV and AIDS, it scared me. I would be thinking days after that, sitting in a taxi, I would look at people and go 'maybe she has slept with someone I have slept with before' (Female, 30+ years, urban and peri-urban, Kwazulu-Natal).

Interpersonal communication:

As the interconnected nature of the sexual network gradually sunk in, participants described discussing the series' messages with friends, family members, sexual partners, and on social networking platforms. Several recalled having discussed whether their partners were faithful or cautioned about the need to test for HIV; one shared how her friends discussed the connections between the main characters:

We were talking about how possible it was that we could all be seeing the same guy without knowing; that scene really left us a bit stressed (Female, 18-24 years, urban and peri-urban, Gauteng).

Internalisation of key messages:

Participants demonstrated having internalised the series' messages through key moments of critical dialogue, personal reflection and intense engagement with the concept of *sexual connectivity* (e.g. by questioning their partners' fidelity and sexual history). The realisation of their personal potential sexual interconnectedness was accompanied with insight into the related implications on their own HIV risk. One participant described hearing the 'voice' of HIV in his head after viewing the last episode and was prompted to draw his own sexual network:

I think she is only mine... but like now, I'm here in town, I don't know what she is doing there, if she is spreading the disease. So, things like that, it shows the network in me, the network, how the virus goes (Male, 30+ years, peri-urban, Gauteng).

Rather than to take a fatalistic view that HIV infection is inevitable, viewers described how the series ultimately left them perceiving a need for a fundamental transformation of relationship values. This included challenging the lack of trust and communication that was said to be common of contemporary sexual relationships, so that through open communication, one can in fact be able to trust that one's partner is faithful.



Influence on behaviour:

There were numerous self-accounts of both conceptualised and enacted forms of behaviour change that participants directly linked to watching *Intersexions*. Regular viewers who participated in this research reported:

- taking responsibility for consistent condom use by ensuring that they always have condoms with them and not leaving this to their sexual partner;
- making conscious attempts to set personal limits, such as having set rules around alcohol
 intake and undertaking not to have sexual intercourse when under the influence of alcohol;
- testing for HIV;
- communicating more openly with their sexual partners;
- and acutely realising the potential consequences of having multiple concurrent sexual partners and in some instances, reporting an actual reduction in the number of sexual partners, a decision to end a relationship with an untrustworthy partner or a heightened awareness of the need to always use condoms.

For example, a female respondent described how the voice of 'Mr. V' motivated her new commitment to consistently use condoms:

Although I would say I trust my partner, I am not totally sure that he is trustworthy... so I try to make sure that if we are to engage in a sexual act, we always use protection. The last episode freaked me out and the voice that they used for HIV, when it says 'I can get you' it made me traumatised actually. The voice always comes back to my mind.... [now] I always make sure that I use protection (Female, 18-24 years, peri-urban, Kwa-Zulu Natal).

Another described her decision to test for HIV for the first time as a result of her engagement with Intersexions:

Firstly, let me be honest, I never go for a test of HIV and AIDS. Now, it motivated me that I should, so that I can know my status and whatever, you know. I had a guilty conscience because I didn't and I couldn't even care about HIV and stuff.... So, it motivated me and I even went for a test afterwards (Female, 25-29 years, rural, Eastern Cape).

Conclusion:

Viewers' engagement with *Intersexions'* resulted in identification with characters, personal reflection and enhanced knowledge about the nature of HIV and the sexual network. The critical reflections were indicative of a dialogical process whereby study participants transferred meaning derived from the storylines to their own lives and social contexts, thereby developing actionable forms of knowledge that sometimes led them to change their behaviour as a result. The power of mass media thus created much needed spaces for interpersonal communication and action around critical sexual and reproductive health outcomes.







