Evaluation of season two of the television drama series, *Intersexions*

**Stakeholders**

United States Agency for International Development, Department of Trade and Industry, Johns Hopkins Health and Education in South Africa, SABC Education, AntS Multimedia, Quizzical Pictures

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Evaluation of season two of the television drama series, *Intersexions*

**Researched and developed by:**
Centre for AIDS Development, Research and Evaluation (CADRE)
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**Authors:**
Laura Myers, Helen Hajiyiannis, Alice Clarfelt and Ts’elishehang Motuba-Matekane

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The fieldwork was skilfully facilitated by Helen Hajiyiannis, Ts’elishehang Motuba-Matekane, Laura Myers, and Pumla Ntlabati. Grateful acknowledgement goes to the talented team of translators (Dudu Luthuli, Gcobani Qambela, and Nquobile Shabalala) and transcribers (Leigh Story, Rivonia Mokoana, Ovayo Ntlabati, Dudu Luthuli, Busisiwe Hoho and Mogoma Research and Development) who helped capture all the information that was shared.

¹ The opinions expressed herein are those of the authors and do not necessarily reflect the views of the United States Agency for International Development
DEDICATION TO JOHAN NEETHLING

We dedicate this report to Johan Neethling, commissioning editor for SABC Education for Intersexions I and II. It was with great sadness that we learned of Jo’s passing on the 14th of September 2013. Jo Neethling was a respected colleague and friend to CADRE. The staff and board of CADRE enjoyed a long relationship with Jo, dating back to 2001 following a request from SABC Education to commission an educational drama series addressing HIV and AIDS. Together, we worked closely on many television series and radio talk shows to bring together the best of education and entertainment, becoming leaders in this industry for the past twelve years. These include four award winning seasons of Tsha Tsha and two equally highly acclaimed award winning series of Intersexions that have set a new benchmark for drama in South Africa and a series profiling HIV trailblazers. National radio talk shows were developed under various campaigns, including Brothers for Life, Scrutinize, Tsha Tsha and Intersexions.

The ‘formula’ for excellence in the work we developed together required passion, risk taking, openness to doing things differently, integrity and a dedication to authentic storytelling. Jo embodied these values and together with CADRE, Quizzical Pictures and JHHESA, we developed programme material for television that has stood solid in the face of scientific enquiry and which we know, remains alive in the hearts and lives of viewers who have been exposed to and touched by these programmes.

Jo’s valuing and respect of formative and developmental research is perhaps one of the biggest contributions to the development of effective and meaningful drama series. When caught between the educational and entertainment divide, his respect of research is what he turned towards and this is one of the endearing memories we have of Jo; when different factions reached a stalemate over an aspect of the storyline, Jo, in his typical quiet way, would listen to all sides and typically say, ‘let’s ask what CADRE thinks; what does the research say? What did viewers say during pre-testing?’ Guided by the voices of those for whom the series were intended, and by his deep experience and knowledge of television, Jo would then suggest a way forward.

Jo passed away before he could learn of these research findings, something he always looked forward to hearing. We dedicate this report to him and undertake to continue developing the best of the best entertainment education programmes for South African audiences.
## ACRONYMS

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<thead>
<tr>
<th>Acronym</th>
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<tr>
<td>AIDS</td>
<td>Acquired immunodeficiency syndrome</td>
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<td>ARV</td>
<td>Antiretroviral</td>
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<td>ART</td>
<td>Antiretroviral treatment</td>
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<td>CADRE</td>
<td>Centre for AIDS Development, Research and Evaluation</td>
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<td>FGD</td>
<td>Focus group discussion</td>
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<td>HIV</td>
<td>Human immunodeficiency virus</td>
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<td>HCT</td>
<td>HIV counselling and testing</td>
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<td>JHHESA</td>
<td>Johns Hopkins Health and Education in South Africa</td>
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<tr>
<td>LGBTI</td>
<td>Lesbian, gay, bisexual, transgender and intersex</td>
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<td>MCP</td>
<td>Multiple and concurrent partnerships</td>
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<td>MMC</td>
<td>Medical male circumcision</td>
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<td>MSM</td>
<td>Men who have sex with men</td>
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<td>PEP</td>
<td>Post-exposure prophylaxis</td>
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<td>PMTCT</td>
<td>Prevention of mother-to-child transmission</td>
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<td>SAFTA</td>
<td>South African Film and Television Awards</td>
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<tr>
<td>STI</td>
<td>Sexually transmitted infection</td>
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EXECUTIVE SUMMARY

*Intersexions I* was a multi-award winning series, receiving eleven South African Film and Television Awards (SAFTA), the Screen Excellence Award for best drama, the AfricommNet award for best mass media and the internationally acclaimed Peabody Award. Against this backdrop, a second series of *Intersexions* was produced, maintaining the same format of 25 interlinked episodes and a one-hour long final docudrama episode. The second series was broadcast between February and August 2013 on SABC 1 and has already received similar acclaim as the first, winning SAFTA awards for best drama series, best actor, best actress and best director of photography.

The powerful tools of contemporary evidence-based research into HIV transmission and prevention and qualitative research that allowed for the deep examination of the lives and attitudes of ordinary South Africans guided the producers to get beneath the surface of what is known about the virus and the people most at risk. *Intersexions I* focused on love, sex, relationships and the sexual network—how our lives intersect in mysterious ways; that the moment people become sexually active, they become a part of a sexual network of people who are related even though they may be complete strangers. While *Intersexions I* focused on the sexual network, the focus of *Intersexions II* was on *secrets*—how that which is left unsaid or hidden in our personal and sexual relationships places us at risk of HIV infection.

The series’ overall objective is the prevention of HIV transmission and the promotion of attitudes and behaviours that enhance sexual and reproductive health. A variety of risk scenarios were highlighted in the 26 episodes including: infidelity, multiple and concurrent sexual partners, intergenerational and transactional sex, alcohol abuse, casual sex, open relationships, same-sex relationships, and student / teacher relationships. *Intersexions II* included topics not previously covered in *Intersexions I*, such as medical male circumcision, corrective rape of lesbian women, bisexuality, drug abuse, couples HIV testing, polygamy, STIs, post-exposure prophylaxis (PEP) and antiretroviral treatment for children. The series closed with a one-hour ‘docudrama’ that broke form to explicitly reveal the virus’s movements and to educate viewers about specific contexts of risk and what behaviours reduce the likelihood of HIV transmission.
Intersexions is produced by Quizzical Pictures and Ants Media, in partnership with Johns Hopkins Health and Education in South Africa (JHHESA) and SABC Education and jointly funded by USAID/JHU HIV Communication Programme through PEPFAR and through the South African Department of Trade and Industry. As the research partner for Intersexions, CADRE facilitated a multi-stage research process that involved participation in 1) the script development process, through research input and the review of beats and scripts to check the relevance and accuracy of HIV and related health content; 2) pre-testing scripts for storyline and message clarity, unintended messaging, to ensure gender sensitivity and avoid stereotyping, and to check for cultural, religious and social authenticity and acceptability for mixed viewing audiences and a range of age and cultural groups; and 3) undertaking a qualitative evaluation of the television series.

This report presents qualitative research findings on audience responses to the second series (episodes 27-52). Immediately following the broadcast of the final episode, fourteen focus group discussions and twelve individual interviews were conducted with regular viewers of the series in six South African provinces between August and September 2013. Participants were recruited from urban, peri-urban and rural localities and included people in three age ranges: 18 to 24 years, 25 to 29 years, and 30 years and older. The discussions focused on participants’ opinions of the series’ storylines and characters, what they ‘took away’ from the series, and to what extent participants critically engaged with the series’ educational objectives. The evaluative data provides rich insight into how regular viewers engaged with the drama series and the impact it had on individual, interpersonal and social levels.

Intersexions II was consistently described in ways that indicated that the series was an extraordinary success among participants, who said it was ‘an eye-opener’, ‘intriguing’, ‘suspenseful’, ‘prophetic’, ‘ambitious’ and ‘life changing’. It was found that the compelling drama, identifiable and realistic storylines and the focal content of the drama series—sexual secrets—continued to attract and intrigue viewers. Consistent with the initial series concept, participants often described Intersexions II as being about interconnectedness or in relation to the overall theme of sexual secrets: ‘life web’, ‘lies’, ‘hurt’, ‘secrets that bind’, ‘love has no rules’, ‘the truth comes to light’, ‘honesty’, ‘communication’ and ‘the secrets of love’. A message about the importance of being honest with one’s partner, friends and family was often articulated, with honesty being identified as a key strategy to avoid unnecessary conflict, protect one’s health and to achieving ‘real love’.

Continued from the first series, the unusual dramatic formula of featuring distinct, but interlinked storylines was seen to raise awareness about the effect of communication and the sexual network on HIV risk. Intersexions was thought to do something ‘no one has ever done’ in its approach to television drama and in the way it dealt with sensitive subjects, even while making people uncomfortable. The series was appreciated for raising taboo subjects, including male circumcision, corrective rape, and polygamy. The HIV content was said to be communicated in an innovative, relevant, and unpredictable
manner, covering ‘all the other issues that branch out of HIV’ and effectively communicating a sense that HIV is real and present. Intersexions II appears to have helped many viewers reach another level of understanding, moving beyond just basic awareness about HIV to asking critical questions about the subtle ways HIV risk plays out in relationships.

Findings are presented in terms of how participants engaged with the series. These include:

1. **Realism:** Intersexions was broadly perceived as being a contemporary, unconventional, dramatic, and realistic drama series. The series was lauded for its astounding realism and was often referred to as a ‘reality show’ in the way it ‘exactly’ depicted ‘the things that you see happen in life’. There was a deep appreciation from participants of the series’ depiction and mirroring of ordinary South African life, including various geographical settings, characters from diverse backgrounds and races, identifiable situations, and drama that resonated with the experiences and life-worlds of South Africans. Several said that viewing Intersexions was like ‘looking at a mirror’ or that Intersexions was so real it ‘made you search yourself’.

2. **Critical self-reflection:** Participants often reflected on their own relationships and the quality and type of communication they have with their sexual partners. Numerous participants expressed that the drama series brought about a new level of consciousness about their personal risk to HIV, in part due to an increased sense of awareness or even suspicion of their sexual partners, e.g., ‘Intersexions shows how you may be with your partner, but you don’t know what your partner gets up to’. Several participants reported that watching Intersexions led to a more communicative relationship or made it easier to discuss aspects of their relationships that would have been difficult to raise without the series having provided a platform to do so.

3. **Social media:** The series one evaluation found that Intersexions broke new ground in terms of how social media platforms can be strategically used within health communication programmes. This second round of research confirms that viewers’ use of social media continued to be integral to facilitating their greater engagement with the series. Viewers used a variety of forms of social media to communicate about the series, including Facebook, Twitter, MXit and WhatsApp. It is clear that social media provided a communicative space that facilitated greater engagement with the series. The public nature of social media conversations should be appreciated for going some distance in shifting dominant norms and values that perpetuate HIV risk as viewers questioned patriarchal gender norms, the acceptability of having multiple partners, and cultural taboos about sexuality.

4. **Interpersonal communication:** In addition, other forms of interpersonal communication highlight the relevance of the drama series as a useful tool to communicate sexual and reproductive health content and life lessons with sexual partners, family members, friends and others. Such
conversations strengthened norms that encourage open communication between families and sexual partners as well as a greater critical consciousness about the limits of trust and the potential consequences of having sexual secrets. Watching *Intersexions* created a space for a new level of openness in a number of participants’ family relationships. Many described how their engagement with the series led to more honest and meaningful discussions about sexual and reproductive health issues with children, parents, friends and partners as a result.

5. *Sexual minorities:* There was a mixed response to the series’ objective to promote greater acceptance of sexual minorities; numerous participants indicated that those storylines were effective at either reinforcing existing positive attitudes about or by helping to build greater acceptance of the LGBTI community. Many participants spoke about being more tolerant of, comfortable with or empathetic towards sexual minorities after viewing the series. A few viewers’ achieved deep insights into the fluidity of sexuality and of the subjective emotional journey that a person who is engaged in a same-sex relationship may go through. There were, however, a number of participants who expressed significant levels of intolerance towards sexual minorities, which may have even been strengthened by their exposure to *Intersexions*.

6. *The docudrama:* Episode 26 was effective at reinforcing the educational messages that were present in the preceding episodes. The docudrama was appreciated for providing an overview of the whole series, linking different plot elements and educational content, and reiterating the main theme of communication. While the dramatic device of the personification of HIV was less surprising than when viewers first encountered ‘Mr. V’ in *Intersexions I*, it was still effective at eliciting viewers’ attention, communicating information about the nature of HIV and provoking a renewed fear of HIV. For many, this fear was accompanied with efficacious knowledge of clear strategies that one can draw on to manage ‘Mr. V’s’ threat. Hearing ‘Mr. V’ narrate the final episode led some participants to internalise the reality of the virus and to assess its relative proximity in their lives through conscious reflection on the risky behaviours they have engaged in.

7. *Behaviour change:* The series sparked a considerable degree of meaningful self-reported behaviour change as a result of participants’ engagement with *Intersexions*. Actions included self-reported accounts of at least ten regular viewers deciding to test for HIV, and notably for at least five participants, taking action to test for HIV as a couple. The specific portrayal of a couple that tested together for HIV in one episode modelled this behaviour effectively and provided the motivation for at least one couple to follow suit. Quite a few participants reported an increase in their personal condom use as a result of their engagement with *Intersexions*; for some, this decision came from a greater realisation that ‘feeling safe’ is not a sufficient reason to have unprotected sex. *Intersexions* influenced viewers’ attitudes towards multiple partners; it is
notable that at least seven participants reported that *Intersexions* contributed to their making an actual change in the number of sexual partners they had, including four males who described making quite drastic changes from having many sexual partners to choosing only one. *Intersexions* led them to think more critically about their personal sexual network and HIV risk and act accordingly, e.g., deciding that ‘I don’t want to be a Zolile anymore’. There were also two accounts given of self-reported behaviour change around medical male circumcision. These self-reported actions took place during the series’ broadcast or soon thereafter and are remarkable in that participants attributed the series for leading them to take action. Though behaviour change is a product of multifaceted internal and external processes over a period of time, which takes place in a context where there may be other programmes communicating similar information, this finding is significant in that participants directly linked the actions they took to their engagement with *Intersexions* specifically.

A detailed analysis is presented of the different processes participants used to engage with key themes and messages of the series. Key messages are presented thematically and include new understandings of HIV as actionable forms of knowledge, including in relation to communication and strategies for managing risk situations (including partner reduction, HIV testing, condom use and MMC). Overall, the series’ aims and educational objectives were met, and often times, exceeded expectations: 1) the impact that keeping secrets can have on one’s own and others’ sexual and reproductive health was universally understood; 2) there was critical engagement with the concepts of the sexual network and knowing one’s sexual partner well before commencing a sexual relationship; 3) participants were also clear about the potential risks of having multiple and concurrent partnerships; and 4) there were different levels of meaningful engagement around other HIV risk reduction practices highlighted in the programme, including the treatment of sexually transmitted infections, medical male circumcision, condom use, and partner reduction. Messages that were less understood or discussed related to post-exposure prophylaxis, paediatric ART, and PMTCT.

It is recommended that a third series of *Intersexions* is developed, building on the success and lessons from the first two seasons and given its widespread popularity as having succeeded in both its dramatic and educational objectives.

The power of mass media to create much needed spaces for interpersonal dialogue and conversation about sexuality, relationships, and HIV prevention is significant. *Intersexions* series one and two appear to have broken through the silence about HIV and AIDS and the cultured ‘HIV fatigue’ that often accompanies efforts to raise awareness about HIV prevention, care and support. One could speculate that by moving viewers beyond the simple ‘ABC’s’ of HIV prevention (abstain, be faithful, use condoms) to asking critical questions about the quality of their relationships and the ways that
communication and secrets in particular contribute to HIV risk, *Intersexions* may have contributed to a more complex and multifaceted shift in the national consciousness around HIV prevention.

**BACKGROUND**

In early 2009, SABC Education issued a brief for a unique television drama series that would rise above the clutter of many voices and campaigns in the HIV/AIDS area. The producers of the series set the bar high, aiming to develop a drama series that was original, hard hitting and which was unlike anything ever produced from an HIV and AIDS entertainment education perspective in the arena of television. In order to achieve this, the series had to be bold, sassy, compelling and intriguing. The series aimed to combine the best of education and entertainment. The powerful tools of contemporary evidence-based research into HIV transmission and prevention and qualitative research that allowed for the deep examination of the lives and attitudes of ordinary South Africans guided the producers to get beneath the surface of what is known about the virus and the people most at risk. Series one focused on love, sex, relationships and the sexual network—how our lives intersect in mysterious ways; that the moment people become sexually active, they become a part of a sexual network of people who are related even though they may be complete strangers. Through the use of compelling storylines and characters, it was believed the series would resonate with audiences and that it would evoke identification with these. Viewers were exposed to the lives and situations of the different characters and a range of individual and social factors that place them at risk of contracting HIV.

The first series premiered on SABC 1 on 12 October 2010, on SABC 1 at 20h30 and broadcast was complete on 5 April 2011, followed by a rebroadcast of the series in 2012. The drama series was made up of 25 independent but interrelated episodes that followed the HIV infection chain and a docudrama episode, episode 26, which tied it up at the end.

A post-broadcast reception analysis of *Intersexions I* found that the compelling drama, identifiable and realistic storylines and the focal content of the drama series—the sexual network—attracted and intrigued viewers. The HIV content was perceived to be communicated to audiences in an innovative,
original, and gripping manner; the unusual dramatic formula was seen to bring home to viewers knowledge about the sexual network and related risks of multiple and concurrent partnerships.

Further, compared to other health communication programmes, it was shown that the series broke new ground regarding, 1) the way in which social media facilitated meaningful interpersonal interaction between viewers of a mass media programme, and 2) the extent to which some participants told of actual behaviour change that resulted from their engagement with Intersexions.

The first series of Intersexions was a multi-award winning series both nationally and internationally, winning the internationally-acclaimed Peabody Award in 2011 for ‘excellence’. The Peabody Awards are the oldest electronic media awards in the world, recognising excellence, distinguished achievement and meritorious public service. The series also garnered 11 South African Film and Television Awards in 2012 and in 2013, Intersexions won the Screen Excellence Award\(^2\) for best drama and the AfricommNet award for best mass media.

**THE SECOND SERIES OF INTERSEXIONS**

Against the award-winning backdrop of the first series, a second series of Intersexions was produced, maintaining the same format of 25-interlinked episodes and a one-hour long docudrama episode (episode 26). The series premiered on Tuesday, 12 February 2013 on SABC 1 at 20h30 and the final episode was broadcast on Tuesday, 6 August 2013.

The focal content of Intersexions II differed from the first series’ focus on the sexual network, with the current series focusing on secrets; on how that which is left unsaid or hidden in our personal and sexual relationships places us at risk of HIV infection.

The series’ overall objective is the prevention of HIV and the promotion of attitudes and behaviours that enhance sexual and reproductive health. The current series included topics not previously covered in Intersexions, such as medical male circumcision, corrective rape of lesbian women, same-sex relationships, post-exposure prophylaxis (PEP) and antiretroviral treatment for children.

The brief for the drama series specified that the series had to include a full spectrum of characters and African languages to reflect South African society. The guiding principle was that there must be a healthy spread of languages and cultures so that the drama series is inclusive of all groups in society. The series aimed to have impact on the broader society. The primary audience are young people aged between 18 and 35 years. The secondary audience was people aged over 35 years old.

*Intersexions* is a collaborative partnership between Johns Hopkins Health and Education in South Africa (JHHESA), SABC Education and SABC 1 and is produced by Quizzical Pictures and AntS Multimedia.

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\(^2\) The Screen Excellence Awards recognise and celebrate the best work produced in South Africa or by South Africans around the world.
Research for the series is provided by the Centre for AIDS Development, Research and Evaluation (CADRE). The current series is jointly funded by USAID/JHU HIV Communication Programme through PEPFAR and through the South African Department of Trade and Industry.

At the recent 8th South African Film and Television Awards (SAFTAs) held in April 2014, *Intersexions* won four awards, including best drama series, best actor and best actress.

**SERIES DEVELOPMENT**

As the research partner for *Intersexions*, CADRE facilitated a multi-stage research process that involved participation in 1) the script development process, through research input and the review of beats and scripts to check the relevance and accuracy of HIV and related health content; 2) pre-testing scripts for storyline and message clarity, unintended messaging, to ensure gender sensitivity and avoid stereotyping, and to check for cultural, religious and social authenticity and acceptability for mixed viewing audiences and a range of age and cultural groups; and 3) undertaking a qualitative evaluation of the television series.

The series is not only a leader in HIV communication programming; it also it a leader in the television industry for the approach taken to its development of new talent at every level. Open auditions took place in August and September 2012 in Cape Town, Durban and Johannesburg where over 5 000 hopeful South Africans auditioned for the series. The cast of the second series featured over a hundred new actors and actresses, including five new cast members from the auditions playing lead roles, bringing new talent to the television screen. Other fresh talent included first time directors and scriptwriters, allowing for new energy and fresh perspectives to be brought to the production.

In a parallel process, the compelling evidence-based storylines and characters were informed by research every step of the way. Initially, after the executive production team determined that ‘secrets’ would be an interesting building block for the series, two focus groups were conducted with males and females of various ages, asking what were the most common secrets that are kept from sexual partners. Common elements emerged, such as paternity, infidelity, inter-racial relationships, termination of pregnancy and same-sex relationships. As part of a multi-level process toward story and character development, JHHESA worked through detail from over 50 community dialogues they conducted across South Africa around HIV, gender-based violence, circumcision and sexual and reproductive health in order to identify some of the common narratives. Together with evidence-based data, these narratives were creatively woven into beats, which were fine-tuned by the development team.

An intense script-testing phase formed part of the development of this series. Extensive resources were made available for the pre-testing of scripts, with each script being pre-tested twice (in Johannesburg and Cape Town) with focus groups that consisted of the same participants throughout the pre-testing
process. This was to ensure the series’ continuity from a story and format perspective. In some instances, an episode may have been rewritten from scratch post-testing and would therefore be pre-tested again. In addition, each episode that formed part of the framing story was pre-tested among a focus group in a rural part of the Eastern Cape, to ensure that the rural and traditional nature of the episodes was accurate and authentic. Episodes that reflected specific localities, cultures and behaviours were additionally pre-tested among those very communities in order to ensure that they were accurate and precise in their representations of gender, culture and traditional behaviours. This included two episodes that portrayed culture in rural KwaZulu-Natal. In addition, episodes whose subject matter was specific to vulnerable groups, such as men who have sex with men and individuals who are in same-sex relationships, or specific content matter such as MMC, were pre-tested with groups representing these populations. Finally, two HIV-positive individuals read a copy of the docudrama script in order to give their input regarding how other people living with HIV might perceive the messages contained in the final episode. In total, 61 focus groups were conducted as part of the series development and pre-testing process.

**AIMS OF THE SERIES**

- Embrace the channel’s values: South African; responsible; authentic; inclusive; honest and straightforward; bold and energetic;
- Provide viewing that is challenging, insightful and which resonates with target audiences;
- Present rounded believable characters in credible situations that are challenged to make consequential choices regarding their sexual behaviour;
- A creative assimilation of deep understanding of the HIV epidemic, human emotions and socio-historical processes;
- Highlight behaviours associated with increased risk for HIV infection without being didactic or ‘preachy’.

**OVERALL EDUCATIONAL OBJECTIVES**

The series’ overall educational objectives were:

- To show the risks of keeping secrets that can impact on one’s own and others’ sexual and reproductive health including risk of HIV infection;
- To highlight the importance of knowing one’s partner well before commencing a sexual relationship;
- To highlight the concept of sexual networks and concomitant risk of HIV infection;
- To emphasise how multiple and concurrent sexual partnership increase HIV risk;
To emphasise HIV risk reduction practices, such as treating sexually transmitted infections, promoting the uptake of medical male circumcision, using condoms, reducing one’s sexual partners and use of post-exposure prophylaxis.

To promote tolerance and acceptance of the lesbian, gay, bisexual, transgender and intersex (LGBTI) community.

**SERIES OUTCOMES: KNOWLEDGE, ATTITUDE, AND BEHAVIOUR**

The series sought to increase knowledge, change attitudes, challenge norms and values in various areas related to HIV and sexual and reproductive health. The series also sought to increase individuals’ perceived risk to HIV infection (resulting in individual or collective efficacy) and the promotion and adoption of behaviours that would prevent HIV infection.

In terms of knowledge, we inquired to what extent the series contributed to new HIV knowledge and to what extent it reinforced existing knowledge of HIV. This covered several specific areas e.g., HIV prevention (knowledge around risks of multiple partners; consistent and correct condoms; HIV testing, etc.) and HIV treatment (knowledge around paediatric antiretroviral treatment; post-exposure prophylaxis; adult antiretroviral treatment).

In terms of attitudes, we sought to understand to what extent the series challenged or reinforced attitudes and stereotypes in relation to: a) sexual minorities; b) stigma and discrimination towards men who have sex with men and women who have sex with women; c) cultural practices such as polygamy; d) male norms relating to disclosure of sexually transmitted infections (STIs) and MMC; and e) people living with HIV or AIDS.

In terms of norms and values, we explored the extent to which the series either challenged or reinforced existing cultural norms and values e.g., the fear of HIV testing; the fear of knowing one’s HIV status; fear of stigma and discrimination if disclosure of status; cultural norms relating to polygamy, etc.

In terms of perceived risk, to what extent the series increased individual’s perceived risk to HIV infection or at the same time their ability (self-efficacy) to avert risk was also investigated.

In terms of social and ideational factors, the extent to which viewers socially interacted with the series was inquired about by asking about whether they spoke to their peers, families and sex partners about issues raised in *Intersexions* and the extent to which they expressed some form of efficacy in the face of HIV risk (e.g., testing; condom usage).

Individual and social behaviour change takes place over a period of time and it was not expected that audiences who watched the television series would have made significant behavioural changes immediately. However, it was expected that regular viewing of the television series would have resulted
in individuals personalising risk and asking themselves the questions that the series put out to its audiences—questions that demand honesty and integrity in thinking about our lives and the decisions we take every day that, whether intentionally or not, affect others. Within the qualitative evaluation, we expected to find evidence of regular audience members honestly reflecting on their lives and secrets that they have kept from significant others; and the actual or potential impact these have had in their personal and sexual relationships; and the meaning that they have taken from Intersexions (or meaning they created by identifying themselves with the characters and stories told in the current drama series).

There was evidence from the qualitative evaluation of behavioural outcomes being achieved, but these are long-term goals which are better measured using other methodologies and over a period of time, rather than immediately post-broadcast of the series. The overall behavioural outcomes for the series were:

- Increase the uptake of HIV counselling and testing;
- Encourage open and honest communication within relationships;
- Reduce number of sexual partners;
- Increase correct and consistent condom use;
- Reduce levels of alcohol consumption and other substance abuse;
- Reduce stigma and discrimination towards people in same-sex relationships;
- Increase knowledge and uptake of medical male circumcision;
- Encourage uptake of and adherence to antiretroviral treatment.

**METHODOLOGY**

The overall objective of the evaluation of the television series was to find out what regular audiences of Intersexions thought of the second series, the meaning(s) they took from the series and how or why the series was meaningful to them in the context of their own lives. The evaluation involved a post-broadcast reception analysis and evaluation of:

- The concept of the series;
- The characters (what the audience thought of them; how the audience reacted to them; what they thought of how the characters interacted with each other; essentially, to get a sense of whether the characters were liked or not (and why), whether they were realistic and consistent over time);
- Identification and resonance with characters and their life-worlds;
- The storylines;
- Likeability, interest and appeal of the series;
- Realism and originality;
New learning and understanding embedded in the series;
Key educational objectives;
Cultural, religious and social authenticity and acceptability of the drama for a range of age
groups and cultural groups, as well as for mixed viewing audiences (including urban and rural
audiences);
Gender sensitivity and avoidance of stereotyping;
Relevant HIV content;
Message or lesson take-out;
Contribution to understanding the role of secrets (lack of open communication) in the spread of
HIV infection.

OBJECTIVES OF THE SERIES TWO EVALUATION

The overall objective of the audience reception analysis or evaluation was to obtain perspectives on the
television drama series, *Intersexions series two*, from South African youth and adults representing the
diversity of cultures and languages spoken in South Africa. Specific objectives were:

- To explore the reception environment of the television series, *Intersexions series two*;
- To explore personal responses to *Intersexions’ series two* content including individual relation to
  the series;
- To explore various contexts of interpersonal communication about the series and what was
  communicated;
- To explore the relationship between *Intersexions’ series two* objectives (including educational
  objectives) and actual reception and engagement with the series;
- To explore the extent to which regular viewers of *Intersexions* series two were also regular
  viewers of *Intersexions* series one, and how these viewers assess series one in relation to series
  two (what worked and what did not work in the two series);
- To identify key strengths and weaknesses in the current series and to use these to develop a set of
  recommendations for the future development of television series, as well as for further research.

THE STUDY DESIGN

The study design consisted of focus groups and individual interviews. A focus group is a research
technique that allows for the exploration of perspectives of representatives of communities with a view
to informing the knowledge and assumptions of the researcher and/or other agencies (Morgan, 1996). In
this instance, the information sought, and assumptions to be tested, will relate to the objectives of the
television series, including the format used in the series.
Focus groups typically produce new, relatively generalisable knowledge, insights and understandings of contexts that are not readily acquired through other research techniques. The role of the facilitator was considered, as was the language of participants, given that developing trust and the ability of the facilitator to draw out responses to the questions needed to be achieved within a short space of time.

Individual interviews allow for in-depth discussion of a particular topic or phenomenon. They allow for opinions that may otherwise not be expressed in the context of a focus group and for closer exploration of how individuals engaged with the drama series.

RESEARCH PARTICIPANTS

Fourteen focus groups were conducted in six South African provinces among target and secondary audiences, to identify overall audience opinions of the second series of *Intersexions*, to determine the extent to which educational objectives of the series were achieved, and to identify strengths and weaknesses of the series in order to inform the development of a future series on HIV and AIDS (including sexual and reproductive health). In addition, two individual interviews were conducted per province.

Focus group participants were recruited from urban, peri-urban and rural areas. Minimum criteria for inclusion were:

- Participants needed to have been regular viewers (watched not less than ten episodes out of 26);\(^3\)
- Participants needed to have watched episode 25 of the series as well as episode 26 of the series;
- Participants must have expressed a willingness to talk openly and to share their opinions.

Focus groups and individual interviews were planned to accommodate three age ranges: 18-24 years, 25-29 years, and 30 years and older. Groups generally comprised of 6 to 8 individuals in mixed gender groups. Focus groups and interviews were planned to include representation of participants in each province that included the three locality types, three age ranges and equal representation of males and females. However, in some discussions, participants that had been recruited did not meet the criteria for participation but this only emerged during the focus group discussions. In this case, new groups or interviews were set up and conducted in that area. For example, the Evaton group in Gauteng was repeated with a group conducted in Drieziek; or there were a few instances where the researchers were unable to locate the precise demographic of participants who met the participation criteria. In the provinces of the Eastern Cape, Gauteng, and KwaZulu-Natal, individual interviewees were selected based on the perceived value of their contribution and allowance was made for a difference in specific age group (as the participants still fell within the overall age range). Given that the series is primarily

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\(^3\) It is noted that there was some difficulty in distinguishing separate episodes from each other and that participants tended to make their decision based on storylines they remembered watching, which oftentimes extended over more than one episode.
focused on HIV prevention, an effort was made to include people living openly with HIV/AIDS. An additional focus group was conducted in Grahamstown with HIV-positive members of support group. Both individual interviews conducted in Gauteng were with HIV-positive participants. In other instances, during focus groups or interviews, participants would spontaneously talk about living with HIV, being gay or in a same-sex relationship.

The evaluation research was conducted after the series during August and September 2013 as the last episode was broadcast on the 6th of August 2013. Facilitators used the focus group discussion guide and the interview guide during discussions. Focus group discussions and individual interviews took place in the preferred language of participants. Languages that were used included: English, Sesotho, isiZulu, isiXhosa, Setswana, Sepedi, SiSwati and isiNdebele.

Focus groups and individual interviews were audio recorded. Audio files were transcribed verbatim. When language used in the focus groups and interviews was not English, transcribers translated the audio from vernacular to English, verbatim, during the transcription. Focus group participants and those who participated in in-depth interviews are referred to as ‘participants’, ‘respondents’, or ‘interviewees’ throughout the report.

Table 1: Interviewees’ demographics according to age group, gender and locality

<table>
<thead>
<tr>
<th>Province</th>
<th>Area</th>
<th>Locality type</th>
<th>Gender</th>
<th>Age group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mpumalanga</td>
<td>Ermelo</td>
<td>Urban</td>
<td>Male</td>
<td>30+ (46)</td>
</tr>
<tr>
<td></td>
<td>Ermelo</td>
<td>Urban</td>
<td>Female</td>
<td>30+ (31)</td>
</tr>
<tr>
<td>Free State</td>
<td>Thabong</td>
<td>Peri-urban</td>
<td>Female</td>
<td>18-24 (18)</td>
</tr>
<tr>
<td></td>
<td>Welkom</td>
<td>Peri-urban</td>
<td>Male</td>
<td>18-24 (19)</td>
</tr>
<tr>
<td>Western Cape</td>
<td>Fish Hoek</td>
<td>Urban</td>
<td>Male</td>
<td>18-24 (24)</td>
</tr>
<tr>
<td></td>
<td>Khayelitsha</td>
<td>Peri-urban</td>
<td>Female</td>
<td>25-29 (25)</td>
</tr>
<tr>
<td>Eastern Cape</td>
<td>King William’s Town</td>
<td>Urban</td>
<td>Male</td>
<td>25-29 (25)</td>
</tr>
<tr>
<td></td>
<td>King William’s Town</td>
<td>Urban</td>
<td>Female</td>
<td>25-29 (31)</td>
</tr>
<tr>
<td>KwaZulu-Natal</td>
<td>Ntuzuma</td>
<td>Peri-urban</td>
<td>Male</td>
<td>18-24 (22)</td>
</tr>
<tr>
<td></td>
<td>Ntuzuma</td>
<td>Peri-urban</td>
<td>Female</td>
<td>25-29 (25)</td>
</tr>
<tr>
<td>Gauteng</td>
<td>Orange Farm</td>
<td>Peri-urban</td>
<td>Male</td>
<td>30+ (53)</td>
</tr>
<tr>
<td></td>
<td>Pretoria</td>
<td>Urban</td>
<td>Female</td>
<td>25-29 (28)</td>
</tr>
</tbody>
</table>

Participants’ actual ages are indicated in brackets in the demographics table.

Table 2: Focus group participants’ demographics according to age group, gender and locality

<table>
<thead>
<tr>
<th>Province</th>
<th>Area</th>
<th>Locality Type</th>
<th>Gender</th>
<th>Age group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mpumalanga</td>
<td>Sheepmoor</td>
<td>Rural</td>
<td>Mixed</td>
<td>18-24</td>
</tr>
<tr>
<td></td>
<td>Wesselton</td>
<td>Peri-urban</td>
<td>Mixed</td>
<td>25-29</td>
</tr>
<tr>
<td>Free State</td>
<td>Thaba Nchu</td>
<td>Rural</td>
<td>Mixed</td>
<td>30+ (21-38)</td>
</tr>
<tr>
<td></td>
<td>Welkom</td>
<td>Urban</td>
<td>Mixed</td>
<td>25-29 (24-29)</td>
</tr>
<tr>
<td>Western Cape</td>
<td>Cape Town</td>
<td>Urban</td>
<td>Mixed</td>
<td>18-24</td>
</tr>
<tr>
<td></td>
<td>Khayelitsha</td>
<td>Peri-urban</td>
<td>Mixed</td>
<td>30+ (27-69)</td>
</tr>
<tr>
<td>Eastern Cape</td>
<td>Zinyoka</td>
<td>Peri-urban</td>
<td>Mixed</td>
<td>18-24</td>
</tr>
</tbody>
</table>

[^4]: Participants’ actual ages are indicated in brackets in the demographics table.
Overall, 122 participants participated in the evaluation of the series. Of these, 110 individuals participated in focus group discussions and 12 participated in individual interviews. They were all black South Africans residing in Mpumalanga, Free State, Western Cape, Eastern Cape, KwaZulu-Natal and Gauteng. In terms of gender, 51 males and 71 females participated in the research. Participants had varying levels of highest level of education completed: 41 did not have matric, 53 had matric qualifications and 27 had tertiary-level education.

One criterion that defined participants’ involvement in the study was that they should have watched at least 10 out of the 26 episodes that were broadcast. Twenty-six participants reported that they had watched less than 10 episodes, 37 participants reported that they had watched between 11 and 15 episodes, 24 participants reported having watched about 16-20 episodes, while 33 participants reported having watched almost all 26 episodes or the full series. Ninety-seven (97) participants indicated that they were regular viewers of SABC 1 and that this was their favourite television channel.

**ETHICAL CONSIDERATIONS**

Participants in the focus groups were legal adults. Participants had the aims and objectives of the research explained to them and were provided the opportunity to withdraw from the research. An informed consent form was signed by all participants indicating that they had understood the aims and objectives of the research, that they had given their consent for audio-recording and for the use of the data provided it was presented as anonymous with identifying data removed from the transcripts. Participants were reimbursed for time and travel costs.

There was no risk of harm to participants as a product of the general nature of the questions that were explored. The research was conducted by trained researchers with formal training and extensive experience in qualitative research techniques.

**DATA CAPTURE AND ANALYSIS**

All focus groups and individual interviews were audio recorded. Data was transcribed verbatim by experienced transcribers. Where recordings were in languages other than English, the data was translated and transcribed. Transcripts were reviewed by the research team for quality and accuracy. The data was read by the research team and a coding scheme was developed based on emerging findings and
the major areas covered in the discussion guides. Data was coded using HypeResearch, which is a software programme used for qualitative data management.

**LIMITATIONS OF THE SERIES EVALUATION**

This evaluation was conducted immediately following the series broadcast, with all data collection completed within two months of the last screened episode. The findings from the evaluation should be viewed while recognising the limitation of it being a post-broadcast reception analysis, when recall was likely to have been strongest. Findings reported on influence on behaviour, reported message takeout and attitude shifts will require further research to determine *Intersexions*’ long-term effect and message sustainability. Further evaluative research that uses creative methodologies that combine qualitative methodologies, for example a longitudinal study to track series’ impact on research participants over time, would make a meaningful contribution towards entertainment education theory and practice.

**OVERALL VIEWS OF THE SERIES**

Participants were passionate in their description of *Intersexions*, calling it ‘spot on’, ‘prophetic’, ‘unpredictable’, ‘unexpected’, ‘very whoo-wa’, ‘an eye-opener’, ‘intriguing, suspenseful’, ‘realistic’, and that ‘it makes the youth wake up’. It was also described as ‘ambitious’ and ‘life changing for some people’; ‘it changed the people’s attitudes, and people’s mind-sets, and people’s lives’. Others simply described it as: ‘sex, it’s all about sex’, ‘all things sexual, STDs, STIs’, ‘sexual immorality at its best!’, and ‘promiscuity’.

Most often, participants described the second series of *Intersexions* in terms of interconnectedness: ‘life web’, ‘cheaters, because many times AIDS spreads because of cheating’, ‘relationships’, ‘it’s between two partners and then other people get involved’ or in relation to the overall theme of sexual secrets: ‘lies’, ‘hurt’, ‘secrets that bind’, ‘love has no rules’, ‘it taught us that in life, there shouldn’t be secrets’, ‘the truth comes to light’, ‘truth’, ‘honesty’, ‘communication’ and ‘it is revealing the secrets of love’. Numerous participants expressed that that the drama series brought about a new level of consciousness about their personal risk to HIV, in part due to an increased sense of awareness or even suspicion of their sexual partners, e.g., ‘*Intersexions shows how you may be with your partner, but you don’t know what your partner gets up to*’.

Some participants described the drama series in relation to its educational content. The series was broadly perceived to provide new knowledge as well as to have helped participants shift their attitudes about sex, relationships, and HIV. They used words such as ‘interesting’, ‘educational’, ‘very informative’, an ‘ah-ha moment’, ‘it gives wisdom, it enlightens a person’s mind’, ‘it changes your
thoughts’ to describe the programme. Numerous participants reported having learnt something from watching the show, including life lessons such as: ‘there’s more to a person than what you see on the surface’, ‘be loyal and faithful because we have seen how relationships break so hence we must be loyal to our partners and trust each other’ or about trust and respect in general:

It teaches us and encourages us that we should respect ourselves. That we should also have truth and to be trusted, trust is important when a man has left his wife in the house, she shouldn’t be going out and looking around for others. So there should be trust in the house and it’s also teaching us that you should trust your partner at all times and teach your child that like this and like that you will get the disease (rural female, 18-24, Mpumalanga).

Respondents often described Intersexions in terms of its comprehensive HIV content, expressing a sense that HIV is real and present, that ‘you are at risk and can get HIV anytime’ and that ‘HIV is here to stay’. It was described as being about ‘the spread of HIV and lies’. One person said how the series was not just about HIV, but ‘all the other issues that branch out of the HIV issue’; another said how the second season portrayed the ‘vicious cycle’ of HIV, including all the different kind of factors that contribute to HIV transmission:

Season one would be about HIV and the STIs and how we get it, etc., but season two was about the vicious cycle. It’s about effects, it’s about the factors that lead to that, it’s about the situations that lead to that. It’s about the lack of education that leads to people getting into situations and that makes them end up getting HIV. So it’s not just about two people meeting, sleeping together and then getting HIV. No, it’s first a story. There’s a story behind each and every person that’s infected with HIV…. It shows you different angles of how people actually end up getting the HIV virus (peri-urban female, 25-29, Gauteng).

Intersexions was appreciated for providing education about sexuality and HIV, which was perceived to be especially important given prevailing taboos that result in many young people having unanswered questions about sexual and reproductive health:

In the past, talking about sex was taboo…. in our culture. You wouldn’t go to somebody who can tell you more about sex… that now you are a man. If some things start happening to you, you will find your way on your own, or you will learn from your peers. But from the episodes, I could learn things that I never had the opportunity, or I never went to school for, but I could get that on the episodes (urban male, 30+, Mpumalanga).

The series was also appreciated for raising taboo subjects, including male circumcision, corrective rape, and polygamy. Intersexions was said to successfully prompt viewers to discuss these subjects when compared to other programmes on SABC1:

If you take a look at Yo TV, Zone 14, Generations, they claim that they teach the youth, but when you tend to watch them, you don’t find anything educational. What you find, it’s about…. weird storylines that you know wouldn’t happen in everyday life…. Give us something that we can relate to. Give us something taboo, something we can talk about…. Who talks about circumcision on a public platform? (peri-urban male, 25-29, Gauteng).
It’s something that one wouldn’t expect to be aired on TV. It’s not spoken about, it’s taboo, but it happens. That’s the reality about it…. All people do have affairs. I liked that about it (urban male, 18-24, Western Cape).

Intersexions was thought to do something ‘no one has ever done’ in its approach to television drama and in the way it dealt with sensitive subjects, even while making people ‘uncomfortable’:

Ambitious, like they stepped on toes. They did something that no one has ever done. It makes people uncomfortable, but at the same time it’s there. Like for example we all speak about gay people, but then no one actually goes to that extent. So I think they stepped on a lot of toes, which is good in a way (urban male, 18-24, Western Cape).

Intersexions is straightforward. It shows us exactly what we want to see, it doesn’t tiptoe around issues, it shows it as they are (rural female, 30+, Eastern Cape).

Many participants described how their engagement with the series influenced their personal attitudes, relationships and behaviour, which will be elaborated on elsewhere in this report. One participant described the overall effect of the series as having a profound, moving effect on him:

Personally, the influence on me has changed the way I think. I’ve learned a lot and it was really eye-opening. It was more than just about awareness, it didn’t just teach me mentally, it taught me spiritually, it touched all over, spiritually, culturally, everywhere (urban male, 30+, Eastern Cape).

Yet despite it’s being educational, there was a very strong sense that the drama series was highly entertaining nonetheless. According to participants, the storylines, characters, production quality and unusual format succeeded in creating a series that achieved dramatic merit while also being informative; e.g., ‘you’ll be glued to your screen. Once being entertained, you are also learning, you see’. Another described Intersexions as ‘the best produced drama…. a revelation’ in the way it ‘reveals things to people’:

I’d say it’s the best produced drama. I have never seen a drama like that before…. Intersexions is like a revelation. It reveals things to people, things that we’re actually not aware of…. Intersexions is like a revelation, because it shows people that small things can actually make a very big destruction in people’s lives. I remember…. the HIV guy, he said I get people because of lying. You know, as people we always lie every day, but we don’t realise the consequences of lying. So what kept me watching is it’s a well-produced show and it touches different walks of life. It’s not based on one thing like a soapie or a drama (peri-urban male, 25-29, Gauteng).

Quite a few participants appreciated the series’ unexpected quality, the way ‘it keeps you on your feet’ by being unpredictable. The element of surprise was said to keep many viewers’ tuned in:

I won’t lie, most of the time I didn’t know what was going to happen next. For instance, I was really shocked by the soccer guy…. he’s such a typical soccer player, and then you find that he’s playing for the other team. I didn’t see that coming. I liked that about it (urban male, 18-24, Western Cape).
Participants appreciated the unusual dramatic device of depicting a constantly changing group of characters and settings, which was continued from series one. The mix of urban and rural settings, cultures, provinces, languages, types of characters and places was strongly appreciated for reflecting South Africa’s cultural diversity, contributing to its realism and entertainment value (without which, it ‘would be boring’). This diversity provided a variety of scenarios making it possible for just about anyone to relate. One viewer described how Intersexions ‘did not leave any stone unturned’: 

*Season two really covered all aspects of life, like anybody could relate. There were scenes from the rural areas, there were scenes from the clubs, there were scenes from church, there were gay scenes…. It shows you like everyday life, everyday living. I just felt they were exposing everything; it did not leave any stone unturned, for me (peri-urban male, 25-29, Gauteng).*

This approach also drove home a sense that HIV does not discriminate based on race, class, or age. The particular focus on families and the relationships that older people have was seen to broaden Intersexions’ reach. While much of this report will address the ways in which viewers’ engagement with the series had positive results on their personal attitudes and behaviour, it is worth mentioning here that there were several who described a desire to share some of the key messages from Intersexions with others in their community. For example, a rural participant shared how watching the programme motivated him to educate others about HIV: ‘it has taught me a lot of things especially about HIV. It has made me want to teach people about HIV and the risk involved. After watching that episode I wanted to call the youth and tell them about HIV’ (rural male, 25-29, KwaZulu-Natal). Some viewers’ took quite a moral message about how they should do the ‘right thing in life’ by being honest; this message was seen to be important enough to share with others:

*We have to do the right things in life. So, it’s a revelation. I learnt something, if you are a human being, you have to be honest in life. Immediately you are starting to be honest, it’s a message. You take that message and give it to the other people, especially in the community (peri-urban male, 25-29, Gauteng).*

*Intersexions is a bible. When you watch Intersexions, you are reading the Bible. When you finish watching that episode, you have a message, and you can take that message and tell other people outside (peri-urban male, 25-29, Gauteng).*

**IDENTIFICATION AND REALISM**
Intersexions was broadly described as a very realistic drama series. Many participants indicated that the realistic nature of Intersexions provided the motivation to keep watching. Across the focus groups and interviews, participants consistently expressed how the they easily related to the scenarios portrayed, which were seen to reflect situations they had experienced themselves or which they observed to be happening around them (‘it was a reality show’). Intersexions was said to show ‘the things that are happening in our generation’ and to ‘depict our lives and how we live them, its modern and it depicts our lives as they are’; ‘exactly what they’re doing, we’re doing’.

Every time I watched an episode I would say ‘mhhh, true neh, yho’. Because of one thing, it is realistic. It brings everybody to earth, like I am here and this is happening, it might even be happening to me (rural female, 25-29, KwaZulu-Natal).

What made it real was the characters were everyday people that I have met, people that I meet, people that I know. There were so many similar stories of friends or just acquaintances, people from back home that I could relate in certain people. The fact that it was youth and young adults also, it was a bit close to home (urban female, 18-24, Gauteng).

Several felt that the series is well researched, given how well the episodes depicted ‘exactly the things you see happen in life’. One even thought that it seemed so real that the director himself must have experienced ‘such things’:

I believe what Intersexions achieves is like proper research, that’s why the stories are so current and they develop all the time…. There are seven billion people with seven billion stories, so stories can never run dry (urban female, 18-24, Gauteng).

Intersexions tells us about reality of how people behave out there. It shows that before it was written, it was well researched…. The things that you see on the show are exactly the things that you see happen in life (rural male, 30+, KwaZulu-Natal).

The series for me was just opening up a box of life. Like ‘this is life and where do you fit’? Like showing you how life is, ‘this is what’s happening in life, whether you like it or not’, and ‘does any of this relate to you’ (urban female, 18-24, Gauteng).

It’s like maybe the director…. once experienced such things, because the things that are happening there, it’s like the person who created it is the one who had experienced such things (peri-urban male, 18-24, KwaZulu-Natal).

Several expressed that Intersexions was so realistic that it made viewers uncomfortable: ‘it’s straight-up-to-the-face reality about the lives that we live, it shows everyone and every type of situation, whether you like it or not’. Another shared how she felt the episodes were so real, that it made it easy to identify with, ‘because I’ve been there’. She said she felt ‘emotional’ watching them, even ‘embarrassed’ and ‘exposed’, given that the episodes were so ‘personal…. a reminder of my own story’:

I honestly feel like most of the episodes, I feel like they were quite emotional for me because they were just subjective, they were personal, most of them. I had the thing that it felt like an
embarrassment. They were just actually showing people that some people do this…. I felt exposed…. I feel like whatever’s been happening there, it’s been exposing most parts of my life and all that…. I understand, and I know how it feels. I can really get the emotion behind it because I’ve been there. So for me, it was more like, should I say, a reminder of my own story (urban female, 18-24, Gauteng).

The drama series’ realism was said to set it apart from other television programmes. Some viewers described how viewing *Intersexions* sometimes felt like they were ‘looking at the mirror’. This interviewee described how *Intersexions* was so real it ‘made you search yourself’:

> With other dramas it’s not as real…. even if there’s this ‘wow moment’, you know that it’s a story. But with *Intersexions* it’s like, how can I say it? It made you search yourself if what’s happening has not yet happened to me…. or it’s what happened to a next door neighbour. It’s like, like I’m saying looking at the mirror. You see things that make you wonder. Especially Zolile’s story that the mother and the father cheating, the mother cheating on the father the father cheating on the mother, now the mother is pregnant, lying saying the kid is his, it made me wonder like…. A lot of soul searching, a lot of introspection a lot of what is actually happening (urban female, 30+, Mpumalanga).

Many participants expressed a similar sense, that watching *Intersexions* sometimes felt like watching a televised version of one’s own life, the scenarios were that realistic:

> The reality in it, the fact that you can see your life in there, like some aspects of it. You’re like ‘wow, okay’, so if you did something similar to that, you see what would have happened (urban female, 18-24, Gauteng).

> It’s things that are actually really, really happening. It got me second-guessing some of the decisions that I’ve made (urban female, 30+, KwaZulu-Natal).

> F6: Most of the [episodes] would actually make me judge myself…. Like, I would just sit back and somehow feel ashamed that ‘okay, I’ve done that…. that’s my story’…. I would feel so ashamed seeing the reality of it. In my case, [it’s in the past] I never thought of it the way I see it now…. I feel like someone is watching my life and I am also watching my life, what I’m actually doing. So, like most of the episodes were quite subjective to me…. It was so real, and I would feel ashamed that okay, like seriously, but its truth.

> M1: I liked the fact that *Intersexions* was able to mirror, like what she said, your life and at the same time sort of give you a guidebook as to how do you move from that situation to the next. What I don’t like…. Is the fact that most of our parents are still ignorant about certain things that are happening in reality (urban female and male, 18-24, Gauteng).

The idea that the series provided a ‘guidebook’ of sorts frequently came up, with the series being appreciated for depicting the consequences of different sexual behaviours, thereby providing viewers with a ‘warning’ of sorts.

> What I like with *Intersexions* is it’s not exaggerating. It says what is happening in the community, and by saying so, it means stop what you are doing. You will see how you will end up (peri-urban male, 30+, Gauteng).
The series’ realism was also seen to enhance viewers’ sense of personal HIV risk in the way it reflected what people ‘are doing in real life’ back to them:

*It warned a lot of people. Maybe people realise some of the things, because most of the things which were happening there, some people are doing it in real life. So maybe they got a picture how to, because my friends who saw the first season of Intersexions, I think the last episode, it showed how this HIV is transmitted (peri-urban female, 25-29, KwaZulu-Natal).*

There was criticism expressed about some episodes which were described as boring ‘fluffy’, or ‘too scripted’ in contrast to others, such as episode eight, which were said to be so gripping or ‘deep’ that one could ‘forget you're watching Intersexions…. it hit home so much’:

*One thing about the episode was it was extremely deep. Even females were like ‘whoa’, it was a very, very deep episode. It was one of the few, because some of them I was somewhat disappointed in the sense that some of them were really, really, really good, like in terms of they would get you. You’d forget that you’re watching Intersexions, you’d actually relate so much, or it hit home so much (urban male, 18-24, Western Cape).*

Participants gave a number of specific examples of particular characteristics of the series that they found realistic. The most common aspect that was mentioned related to the overarching theme of secrets, particularly the secrets that can exist within families; ‘keeping secrets, not being open with your parents, like your parents thinking highly of you without knowing about the things you do outside’ (peri-urban female, 18-24, Free State). Secrets that are kept from one’s sexual partner, such as the scenario in which Musa pretended to go to work but in fact went to see his girlfriend (‘I know some people who do that in my community’). The portrayal of overlapping sexual partners and histories was also thought to be realistic. Thapelo’s infidelity and his wife’s ultimate choice (to stay with him and pack condoms in his luggage) were also frequently mentioned. One participant recalled how his friends were in a situation in which there were some shared partners due to cheating; they understood how their scenario was like *Intersexions: ‘We said this is clearly Intersexions, like in a way we’re playing Intersexions’* (urban male, 18-24, Western Cape).

Other storylines that were often cited for being realistic included episodes four and five; many told how there are both mothers and nurses who are like Agnes (‘*I know a girl, her mother is a nurse and it’s exactly the same thing that happened in the episode, happened in real life*’). A female participant described how watching Agnes’s poor treatment of the teenage girl who sought contraception felt like she was ‘looking at the mirror’, having experienced something similar:
It was like looking at the mirror, because for real, for real, there are nurses like her. You will go to the clinic looking for help and end up going home because of the treatment you receive from the nurses.... I once had an STI and went to a clinic; I was harshly treated and then sent away without treatment.... I told them that ‘I’m in a long distance relationship’.... and they said ‘no, you are lying, he’s around’. I ended straight up going to the doctor.... So I could actually see myself in that young girl (urban female, 30+, Mpumalanga).

Many others related to Rosie’s character, including her hidden pregnancy (‘she was hiding that she was pregnant while I was also hiding it’), miscarriage, partying, and even her eventual transformation.

Relationships between students and professors, ‘so it’s actually so close to home that it’s actually real, it’s really happening. Like students do have affairs with lecturers, and they get benefits.... there is reality in that’ (urban female, 18-24, Gauteng).

I’ve got a friend that had an affair with a lecturer.... as we were watching I’d turn and look at him to see how he’d react as we were watching and after the last episode it opened his mind that you can’t have an affair with a married person sometimes because they’ll leave you and you’ll end up getting hurt (urban male, 30+, Eastern Cape).

Many people reported knowing women who had experienced something similar to Lorraine’s rape in episode eight and felt that this scenario was very true to life. Two-Step’s secret bisexuality (‘it’s not easy, like coming out.... and having that self-acceptance’) and Pastor Rex’s indiscretion were also often said to be realistic (‘I’ve got a friend of mine who was pregnant with a Pastor, then the Pastor ran away’).

There were a handful of specific examples given of plot aspects that some participants felt were unrealistic or unconvincing. The vast majority of participants reported that they really liked the framing story and the main characters, Nomzamo and Zolile. Yet there were some who found this storyline about the connections between their parents ‘a bit unreal for me’ and ‘over exaggerated’. Similarly, episode 13 was much talked about, with most participants admiring Lerato’s strong behaviour in addressing her husband’s infidelity; yet, there were some who found the episode to be ‘too much fairy-tale’ given her response to finding out Thapelo was unfaithful: ‘I don’t get it; I still say it’s not real’. And there was some critical feedback given about the way some scenes were portrayed, for example episode three was criticised as being unrealistic for the rushed manner in which Khanya’s story unfolded as she transitioned from being with Zolile to Prof. Zakes.

**EPISODES THAT STOOD OUT**

Episodes identified as favourites by participants were often episodes that were considered controversial and which became topical. Favourite episodes were those most frequently reported as discussed with
others or within focus groups, either because they liked the storyline and characters or perceived them as contentious. Oftentimes, the episodes that participants identified as standing out were those that showed a particular hard truth, traditionally taboo subjects not often spoken about, or an action that was unanticipated or considered shocking, courageous, or unconventional. Below is a list of episodes that were frequently discussed.

<table>
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<th>Favourite episodes</th>
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| **Episode 10: Plan C**  
After coming face to face with an and embarrassing and painful STI, Sdumo a young man from rural KZN, takes responsibility for his actions by seeking treatment and coming clean to all his sexual partners before leaving town. | This was thought of as a comical episode and Sdumo liked for his sense of humour. The episode was appreciated for introducing a crucial element of medical male circumcision; two male participants reported being motivated to go for MMC after seeing this episode. Sdumo’s honesty in disclosing that he had an STI to his recent sexual partners was widely admired and seen to transcend typical male behaviour. |
| **Episode 9: Thou shall not covet**  
Godwin, a prominent businessman and a seemingly respected family man, is living a double life. His arrogance leads him to have a sordid affair right under his suspecting but oblivious wife, Thandeka’s nose. | This episode generated a lot of discussion, with many participants being quick to judge Gadima for bringing this misfortune upon herself after getting involved with a married man, Godwin. Others sympathised with Gadima and blamed poverty for her vulnerability. Some women identified with Thandeka, sharing her fear that no matter how good one may be, there’s always a chance that one’s partner may not be as faithful. |
| **Episode 13: King of the road**  
Lerato witnesses her husband, Thapelo in a very compromising position. Not wanting to destroy their business partnership and marriage, she makes a strategic decision on how to deal with him as she has bigger news of her own. His reaction to her news and plans surprises her. | The moment when Lerato decided to pack condoms into her husband’s luggage proved to be the primary conversation trigger from this episode. Participants wondered whether this was a tacit way of giving him permission to continue having affairs or an instance of powerfully shaming him and making her choice was clear: she was protecting herself. This was seen as an innovative strategy to maintain her marriage and protect herself from HIV. A couple male participants found this action somewhat far-fetched, but most others, particularly females, said they liked her unusual choice and even said they would now do the same if they were in her situation. Participants admired Lerato’s strength in not leaving Thapelo, as was expected that many women would have done. A possible unintended message arose, however, that women should stay in a marriage ‘no matter what’. |
| **Episode 16: On the Brink**  
Afraid and ashamed to come clean to her fiancé, Gadima runs off to start a new life for herself. Tangled in a web of lies and deceit she spirals out of control and is finally forced to | Contrary to episode 9, viewers appeared to empathise with Gadima more in this episode and the challenges she faced after testing HIV positive and while addicted to tik. Many participants admired her strength and resilience that led her to ultimately seek help with her addiction and hopefully move on with a more productive life. She was also appreciated for disclosing her HIV status to both Cedric and Clyde and for |
come out with the truth.

encouraging them to get tested. It was pointed out in a focus group of HIV-positive participants, however, that her story served to unnecessarily dramatise what it means to be HIV positive, given the way she ‘went crazy’ in this episode.

Episode 4: Matron
A self-righteous clinic Matron is faced with a dilemma when her daughter Rosie returns from university not the innocent and obedient child that left. She stops at nothing in an attempt to save her reputation.

Sister Agnes was regarded as a very realistic character, with many participants indicating that they knew nurses like her in their communities. The scene in which she treats an adolescent girl poorly was commonly recalled and thought to realistically depict the attitudes of many health care workers towards adolescent seeking sexual and reproductive health services (and was said to mirror at least one participant’s person experience seeking STI treatment). She was also seen to represent a certain type of mother who is vocal about other people’s behaviour but doesn’t communicate well with her own daughter. This episode conveyed a strong message about the importance of communicating about sexual health within families and was frequently referenced for motivating participants to improve such communication with their children (or parents).

Episode 5: Rose-tinted glasses
In an effort to recover from her ordeal, Rosie goes on a night out with the girls after being invited to a party by charming soccer star Two-Step. After one too many drinks Rosie is haunted by her past mistakes and must make a quick decision.

In this episode, Rosie was seen to be rising above her previous misfortune in a resilient manner, which a couple female participants took some encouragement from. The scene in which Rosie’s cousin and friends gave her a condom at a party was often discussed. Her friends were appreciated for challenging viewers’ expectations of ‘party girls’ by this display of responsibility and looking out for one another’s safety. The general depiction of the dual risks of alcohol and sex was further appreciated as realistic and helped motivate a couple participants to either drink more responsibly or stop drinking alcohol altogether.

Episodes 6: Play the mate
Is there more to Sizwe and Two-Step’s friendship than meets the eye? The truth may be revealed as a tabloid journalist probes following a rumour. It is later revealed who the surprising source of the rumour is.

And Episode 20: Truth
Two-Step is keeping a deep dark secret from his fiancé, Rea. He does right by her and tells her the truth. Does the truth bring them closer together or tear them apart?

Two-Step’s storyline may have been the most talked about. Many participants expressed surprise over the possibility Two-Step and Sizwe having heterosexual relationships and engaging in a same-sex relationship with each other. The existence of bisexuality was new information to some, while the sex scenes that were depicted between the two male characters titillated others.

Episode 20, which portrayed Two-Step’s ‘coming out’ as being gay, was also quite popular.

Episode 8: Rough justice
Lorraine, Bontle’s lesbian cousin falls victim to a brutal act of cruelty at the hands of the

This dark episode featured a ‘corrective rape’ of a lesbian character, Lorraine. This was seen as one of the most moving and emotional episodes that portrayed an all-too-real problem. Lorraine’s character was
**Episode 24: A journey of a 1000 miles**

Zolile is faced with the tough decision of revealing his status and his other secret to Veliswa. Can love inspire courage?

The episode was often discussed for the way it portrayed Zolile and Veliswa testing for HIV together as a couple and for introducing the idea of serodiscordancy. Some participants were perplexed by the notion that one partner can be HIV negative and the other HIV positive. It was not clear whether Veliswa and Zolile used condoms during sexual intercourse and if that was why she was not infected with HIV. By testing for HIV and disclosing to Veliswa (and later, Nomzamo), Zolile was perceived as being a role model and admired for his bravery to disclose to his partner. It is apparent that this episode succeeded in communicating the importance of testing for HIV as a couple, with one interviewee specifically citing it as the reason she and her partner decided to finally test together.

**Episode 25: Starts with a single step**

Nomzamo and Zolile reunite in their hometown. Zolile’s mother reveals an even bigger secret that will leave all involved reeling.

The ‘big reveal’ that Lwazi was not Zolile’s father (and therefore, Nomzamo and Zolile could not be siblings) proved to be a big surprise, which most participants seemed to enjoy. It appears as if some participants did not understand this final realisation, still believing them to be siblings. The focus on the secrets that parents keep was one of the main themes of the series and appreciated for the way in diversified the plot. Nokuthula was described by some as a strong woman who did whatever was necessary to protect her family, though some criticised her choice to stay with Lwazi. The episode provoked some frustration, in the questions that remained unanswered—particularly whether Zolile and Nomzamo would ultimately get back together.
KEY THEMES AND BEHAVIOUR CHANGE

One of the overall objectives of this qualitative evaluation was to find out whether there was evidence of regular audience members reflecting on the meanings and messages that they have taken away from the series by applying it to their lives, sexual histories and relationships. With the series’ behavioural and educational objectives in mind, this section unpacks key moments of reflection on central messages derived from the series, and, where applicable, how these have been conceptualised and enacted as actual behaviour change.

Participants derived a number of messages and lessons from watching the drama series. In this section, the kinds of messages that were spoken about in focus group discussions and interviews, as well as a focus on how participants spoke about these messages as fitting in within the context of their everyday lives are presented. Key to understanding the nature and effectiveness of a particular message is to obtain insight into how it functioned to change viewers’ behaviours and attitudes. Such insights are obtainable through a careful analysis of how participants framed these messages as being directly applicable to their own social realities (families, communities, and peer groups), sexual relationships and individual lifestyles. There were different levels of engagement or interaction with series’ messaging which can be described as follows:

- **Basic engagement** with a message, which comprised of basically stating what the ‘lesson learnt’ was from the series.
- **Reflection** on the message which often included how the message functioned within one’s family or community, or in one’s own life and relationships.
- Related to reflection were **key moments of realisation**, thinking about how this message might apply in one’s own situated context.
- Realisation would be associated with and sometimes **accompany action**, which can be broken down to include conceptualising specific forms of action one might take, action that one will take, and action that has been taken – either by oneself, or by a family member or friend who has viewed the series.
- **Social attitude change** was considered as its own process as this referred to how participants engaged with, challenged and sometimes ‘let go of’ previously held discriminatory attitudes, such as towards people living with HIV or sexual minorities.

The process of reflection and action that resulted from engagement with the second season of *Intersexions* is presented below. The primary thematic areas include engagement with the overall theme of sexual secrets and communication and with key HIV prevention messages, including the sexual network and concurrent partnerships, HIV testing, and condom promotion. Other prevention themes
were also discussed, including medical male circumcision, substance abuse, transactional and age-disparate sex, HIV treatment as prevention, and sexually transmitted infections. Within each of these themes, the participants’ reflections on a particular message, reports of corresponding knowledge gained, shifts in attitude, and any instances of self-reported behaviour change (conceptualised or enacted) will be discussed. When specific characters or storylines succeeded in carrying a particular message, this is also discussed.

COMMUNICATION

Overall

The overall message that regular viewers of Intersexions garnered from the series related to the importance of communication and in particular, the dangers of keeping secrets. This is consistent with two stated objectives of the series, which intended to show the risks that keeping secrets can have on one’s own and others’ sexual and reproductive health (including HIV infection) and to highlight the importance of knowing one’s partner well before commencing a sexual relationship. When asked what the main idea of the series was, or what they had learned from watching Intersexions, the most common responses related to this theme, such as: ‘Intersexions shows the consequences of keeping secrets’. An interviewee expressed how the focus of the second series was on secrets and the ‘need to take responsibility for your own mistakes’:

This series, the focus was on, it’s about secrets, keeping secrets and when you let it out, or when you are exposed, you must be in a position to take responsibility. I think throughout I’ve learnt that, that you need to take responsibility for your own mistakes, for your own decisions (urban male, 30+, Mpumalanga).

Another perceived a connection between the themes of series one and two, echoing the title sequence by saying that ‘we are bound together’ by secrets and seeing the potential of open communication to rectify the negative consequences brought about by maintaining secrets:

‘Our lives intersect in mysterious ways’, so we are sitting here, you and I may be connected in a different way. We are bound together by some secret maybe your daughter may be keeping from you. So the ideas of secrets, someone is gay or someone is lesbian, has to live within a certain box, now they have to live a shadowed life, then once in a while of course they will be ostracised or whatever. But like he said about communication, if we are all open in this space, we are all different and open, we’d save a lot of lives (urban male, 18-24, Gauteng).

This participant described how the way the series portrayed how keeping secrets ‘can open you to other harm’ was realistic and prompted viewers to reflect on the things they do ‘without even thinking’:

An ah-ha moment…. Basically most of us do a lot of things without even thinking about them, so season two was one of those shows which made you think about what you do and what people do. That’s why I call it an ‘ah-haven’t moment’. For example, the link between you keeping a secret, how it can open you to other harm, because you have to sustain your lie by keeping up with the lie and so
forth and later on you have to pay for the consequences of your actions, or what we do on a daily basis, how we go into relationships, how we deal with stress or discomfort in our lives. It’s either alcohol or we engage in sexual relationships or drugs. So, we are looking at this and going ‘oh, that’s true, and we do it’ (urban male, 18-24, Gauteng).

This section will discuss in-depth how Intersexions succeeded in opening up communication about sexuality in relationships, peer groups and households—spaces that were traditionally described as being difficult to have such conversations:

I applaud the second series for opening the channel of communication. We are able to sit and speak about very different opinions and you listen to what people have to say and you respect them. Communication broadens your mind, even at home as hard as it may be sometimes; we open up and talk about the things that happen on Intersexions. The world is changing and we need to be aware of the change (peri-urban male, 18-24, Eastern Cape).

Lessons

There were a number of reported lessons about communication that participants took away from the second series of Intersexions. The importance of being truthful in one’s relationships was widely perceived. Being ‘honest about everything’ was seen as the new moral standard to aim for—in one’s identity, sexual relationships, families and life.

In life you need to be honest.... You need to be honest about everything. Speak to your partner openly, if there’s something that they’re doing and they’re not doing it right, talk to them about it (urban female, 30+, Mpumalanga).

That we should be honest, when you say you are doing something you should really do it. That is what it taught us that you shouldn’t hide what you are because you are afraid of what people will say (rural male, 18-24, Mpumalanga).

In the second season, I learnt about lies. If you lie in your relationship.. you need to be honest, no lies, so that you can keep a healthy relationship, because all of these things happened because of lies (peri-urban female, 25-29, Western Cape).

Zolile and Nomzamo’s relationship was said to particularly convey this theme, given how their problems sprung from their parents’ dishonesty about their long-lasting affair and how Nomzamo then withheld the truth from Zolile. One participant told how their poor communication stressed out Zolile and contributed to his having sex with someone else; she saw how that situation could have been avoided if they had just been ‘honest with each other’:

That guy was in love with his girlfriend, Zolile, but now he gets stressed because Nomzamo didn’t pick up the phone, and she said they must break up their relationship, but he didn’t know anything about that.... He ends up being with another girl, having sex, because of the stress. So that episode
was ‘wow, how can they do that’, but it happens sometimes. If they were honest with each other, none of that would have happened…. Intersexions teaches a lot, not just with your partner, even with your friends you need to be honest about everything, and share everything in your life so that other things won’t happen again. So they weren’t even honest with each other, although they are friends, but they end up sleeping with one guy (peri-urban female, 25-29, Western Cape).

Being honest with one’s partner and friends was thus seen as a way to avoid unnecessary problems. She went on to share how this storyline elicited a lot of discussion on social media, as many of her peers identified with the message of how ‘silly mistakes’ could be avoided by simply talking about ‘real things’ with one’s sexual partners:

We don’t talk about real things, what happened, why and when, but people do their silly mistakes…. Because if they spoke, to be honest in the first place, nothing would happen (peri-urban female, 25-29, Western Cape).

In life we do things not knowing that we hurt other people. So I learnt from this series that if you are honest, honest to yourself and honest to the people that you live with, then you won’t have problems…. Some of the things I have experienced myself, that if you are not honest, if I cheat, it’s going to come back (urban male, 30+, Mpumalanga).

A male participant told how he discussed episode eleven with his family. Through the portrayal of Mandy and Sdumo’s developing relationship, he took a lesson that ‘real love’ requires honesty:

Like I said, we watched it with my whole family…. That day when the episode ended…. as we were speaking about honesty and dishonesty in that episode, there’s the one who was hiding the other one from the one who has money and also from the one who doesn’t have money, we spoke about who will last and who has real love between the two (peri-urban male, 30+, Western Cape).

The importance of communicating honestly with one’s partner, discussing one’s sexual history and testing together, were seen as the building blocks to a strong marriage:

I think they were giving a message mostly to the people who are married and those who still want to get married, that a good relationship cannot be based on lies, on secrets. If you want to get married, firstly talk about your past so that your relationship will be good. Know your status before you even say ‘I do’, so that your relationship will be stable and it will be nice (rural male, 25-29, KwaZulu-Natal).

Another participant learned that it helps to open up and talk about one’s problems with others. This message about social support was conveyed through the depiction of Rosie in episode five, who eventually opened up to her friends about what she was going through:

Communication helps…. If Rosie didn’t tell the cousin and the friend what was eating her, she wouldn’t have gotten the support that she wanted. She would have felt sorry for herself and lose weight to [the point of] death. But because she opened up and told her story, they all embraced her, they gave her love. Ja, that’s what I’ve learned: when you have friends or when you’re around people and you’re going through something, talk. It might help…. because she met girls like those girls, they made her feel like she belonged, she was loved, she ended up coughing out what was bothering her and…. gained her strength back…. So I think that maybe a lot of girls would learn
from that, that no matter what happened, no matter how hard you fall, you can still get up, dust yourself and bounce back and be whatever you want to be (urban female, 30+, Mpumalanga).

Another female said that she learned how it is better to talk things out than ‘take out your anger’ on someone else: ‘it has taught me that you should not take out your anger to someone else, but you should sit down with a person you trust and talk to them’ (urban female, 18-24, Gauteng).

The idea that the ‘past will catch up with you’ was often expressed as another key lesson participants gleaned from the series: ‘No matter how you hide things, but the truth always has a way of coming out’ (urban female, 18-24, Western Cape). And, ‘whatever you do today will catch up with you tomorrow, it taught us that’ (urban female, 30+, Mpumalanga). It was often seen as a warning, with the motivation to be truthful related more to the fear of getting ‘caught’ than because it is ‘right’ or more likely to enrich the quality of one’s relationships or health. Intersexions thus was seen to remind viewers that secrets can ‘come back to haunt you’:

M6: I remember the episode about this guy who had two wives. I think men have this mentality that they are players and they will never get caught. So I think that revealed it, that a secret can come out and you can get caught any time....

LM: Anybody else? What do you think is the main idea it’s trying to put across to people?

M1: Secrets are bad.

F7: They always come back to haunt you (urban males and female, 18-24, Western Cape).

Musa and Gadima were two characters seen to convey this lesson, in the way they got caught in their lies. One person said how Gadima’s story taught her how the past ‘will catch up with you’:

Gadima took the money and she flew the scene, then when she started building her life, then the past caught up with her. So, that was also educational there, whatever you are doing today, people might not see it now when you are not doing it, you might cover it and stuff and move on but somewhere down the line, it will catch up with you, so be careful what you do today, because tomorrow you’ll find it waiting for you at the door (urban female, 30+, Mpumalanga).

Many others took quite a literal message from the theme in feeling actual concern about paternity or potential incest as a result of secrets being kept. In reflecting on the potential danger of secrets, a number of
participants considered the possibility of whether their parents might have a secret similar to Kholeka and Lwazi’s, e.g., unknown brothers or sisters that one could date without realising they were related: ‘Intersexions shows the consequences of keeping secrets. The whole Nomzamo/Zolile storyline shows that it’s something that happens where you have half-brothers or sisters that you don’t know about because your parents have kept it from you’ (rural male, 30+, Eastern Cape). Another focus group participant also took an overly literal message of how keeping secrets can ‘lead you to do things that are not good for you’, resulting in scenarios just like the one Zolile and Nomzamo experienced:

'It told us that a secret can be very dangerous when kept to yourself because it can lead you to doing things that are not good for you. For example keeping secrets from your children such as having children outside of the home and not disclosing this to your family or to your husband can lead to one day perhaps the children falling in love with one another not knowing as a result of this secret (peri-urban male, 18-24, Free State).

This risk scenario seemed to make a big impression on many viewers. A male participant from the Western Cape remembered once overhearing people debate ‘what if your current girlfriend is related to you’? Watching Intersexions led another interviewee to ‘ask a lot of questions’ in considering whether the people in her life are who she thinks they are. She internalised what she saw in Zolile and Nomzamo’s families and Two-Step, in questioning ‘are my parents my real parents’ and even, ‘is my boyfriend straight’?

'My boyfriend, my father, my brother, everyone, you look at them like, hey, it’s something that really got you wondering. Watching Intersexions gets you wondering ‘if you live in a really true life, or are you just living a wishful life’, or ‘are my parents my real parents, is my dad really my dad?’ ....I know that he is my dad but I mean... hey, it could happen. Ja, is my boyfriend straight or almost straight, you know, you ask yourself a lot of questions. A lot of questions (urban female, 30+, Mpumalanga).

Some viewers struggled with the theme, believing that it is easier to just keep some secrets: ‘But are they really bad though, because, don’t judge, but some things don’t need to be said. I really feel like some things don’t, it’s an evil necessity again. Some things need to be kept secret, because shit happens’ (urban male, 18-24, Western Cape). The theme was perceived to be quite counter-cultural; in this criticism of Zolile for the way he ‘back chats’ to his father, the speaker suggests it is better to cover up ‘the family’s dirty linen’:

'The way I see this, referring to Zolile and his father, Zolile’s father is a Xhosa man. The family’s dirty linen [amanyala] must be kept secret and covered up and children are not supposed to back chat their parents (peri-urban male, 30+, Western Cape).

Family shame was seen to be a big reason why families keep secrets, such as where there is sexual abuse:

'There are so many cases where men have disrespected and abused women; for instance there’s a family I know where the father slept with his daughter and she fell pregnant and the wife kept it quiet
because she didn’t want the shame of telling people the truth…. Most times they don’t want to embarrass their family or husband so they keep it a secret…. (rural female, 30+, Eastern Cape).

One participant reflected on whether the series’ focus on promoting open communication was ultimately a bit too magical to hope for: ‘but the reality is, can we all communicate? ….What I didn’t like is that what they were expressing was true, but it’s a fairy tale’ (urban male, 18-24, Gauteng).

Secrets and HIV

The potential effect that keeping secrets have on HIV risk was apparent to many participants. A young woman told how each episode portrayed that ‘everybody had a secret’ which impacted their sexual relationships:

> From the beginning, from the first episode, the first secret was unveiled. The first secret was exposed in the first episode we watched. So from that episode, you want to see what will go on, what’s the next one, and at episode 26, when…. you see everybody had a secret. No matter how small that secret was, it still had an impact on how the other one slept with the other one (urban female, 18-24, Western Cape).

Intersexions was successful in depicting how having sexual secrets facilitates HIV transmission. Participants shared that they learned that ‘lies and secrets, they are the fuel to HIV’, and, ‘a person has to be honest…. [Or else] they will get HIV’. Another reflected how ‘lies will never help you’, recalling how ‘Mr. V’ explained that it is lies that help spread HIV:

> Intersexions wasn’t only about sex. Lies were there…. you know when Intersexions first started, it started on lies, based on lies, two parents actually lying to each other. They lied to the children, and these children ended up getting hurt, Zolile and Nomzamo. They dated because they didn’t know because of the parents’ lies. Lies will never help you. This narrator guy, Mr. V, he actually said he uses people’s lies to actually get them (peri-urban male, 25-29, Gauteng).

The manner in which Intersexions portrayed how dishonesty in relationships can result in HIV infection was thought to be realistic: ‘because it teaches us a lot about what is happening to our community and stuff. A secret can ruin our relationships and you can end up getting the virus. Prevention is better than cure’ (peri-urban male, 30+, Western Cape). The show was also successful in depicting the various ways in which HIV transmission can occur and how ‘keeping things to ourselves’ can lead people to make ‘uninformed decisions’:

> What I think it was trying to achieve was to teach us that lies, keeping things to ourselves leads us to make uninformed decisions about choices in our lives that could actually have an effect on us. It’s
like everyone thinks HIV is contracted just one way, but it showed us different ways (urban male, 30+, KwaZulu-Natal).

Another thought the series communicated that secrets are ‘dangerous’ and that people should be ‘cautious’ not to trust a sexual partner with unprotected intercourse too quickly:

I think it wanted everyone to see life as it is, that you’re not the only one in control of your life. Yes, it’s your life, but you’re not always in control because sometimes the person you’re with is in control. Secondly, it was showing us that secrets are dangerous. You need to learn about a person before you completely trust them. Even then, always be cautious (peri-urban male, 18-24, Eastern Cape).

Referencing the first series of Intersexions, which depicted the interconnectedness of sexual networks, many participants perceived a corresponding message around the interconnectedness of secrets, e.g., that lying ‘doesn’t affect only you’:

F8: I watched a lot of episodes of Intersexions. Some of them, it teaches us how to live life and how to be faithful. You mustn’t lie, you must always tell the truth. So it’s to protect someone else, because you can lie, but that lie doesn’t affect only you. It can also affect other people....

FI: Not telling the truth to your partner, it’s not only you that’s going to be affected. You have a secret, and then the partner that you have, maybe he or she may have an affair with your family member, and then you see now you’re saying that you’re translating to other people while it comes back to you (peri-urban females, 30+, Western Cape).

This critical reflection about the effect of secrets on another’s sexual and reproductive health is notable. The respondents above express a sense of responsibility to protect others from HIV and saw ‘telling the truth’ to one’s partner as a way to do that.

The importance of disclosing an HIV-positive status, rather than keep it secret, was perceived to be another one of the series’ messages.

Like a person who is infected with HIV, when he keeps secrets from his partner, or her partner, they end up fighting for nothing, whereas someone should come out with his or her status and say ‘I’m sick, so this is how we should live from now on’ (peri-urban female, 25-29, KwaZulu-Natal).

The excerpt below expresses that HIV transmission can be prevented by being ‘honest and responsible’ as opposed to having secrets, such as being unfaithful or HIV positive:

Without secrecy and the irresponsible activities which we indulge in, we can control it. In this case if I was honest and I was responsible, we can control it. If you are not infected yet, if you live a healthy lifestyle, stay with your partner, test regularly, use a condom, you can prevent. If you are already of course infected, by coming out, you might be saving someone’s life, because by keeping quiet you
look all nice, you meet someone at a function, emotions get high, then someone acts, you wake up tomorrow, you go ‘that man probably didn’t use a condom and he’s infected’. He goes back to his wife, he’s thinking ‘that was a once-off, I can’t even tell her about it’…. If we were to be open and avoid the secrecy and our irresponsible activities, we can control AIDS (urban male, 18-24, Gauteng).

**Family communication lessons**

In addition to the secrets that exist between lovers, many participants resonated strongly with how *Intersexions* dealt with the secrets and lack of communication that can exist in families. The frequency with which this came up suggested that many participants related to the series’ portrayal of households with limited intergenerational communication about sexuality. Some reflected on the framing story, taking a lesson that lying or withholding information from one’s children will negatively affect them: ‘Intersexions made me realise that our lies as parents puts our children in danger. Lying and keeping secrets is very selfish and it could have an effect on your children’ (rural female, 30+, Eastern Cape).

The clinic matron, Agnes, and her daughter Rosie (featured in episode four) were often referenced for portraying what can happen when families do not communicate openly about sexuality. Many participants identified with the kind of breakdown that occurred as a result of this mother’s failure to talk to her daughter. For example, one woman shared how she has a mother like Agnes, who’s ‘not free to talk about anything’:

> I think our mothers tend to not be free around us, and I can relate to Rosie’s mother, Agnes. I think they had this huge communication breakdown since they weren’t living together and so forth. I can relate to that with my mother. We don’t live together and we only see each other on weekends, and when we do see each other…. we don’t really have that mother daughter bond. She’s not free to talk about anything, so I’m not going to be the first one to come up and talk about everything to her. So, that’s just something I can relate to (peri-urban female, 25-29, Gauteng).

The way in which episode four portrayed the tragic consequence of having an ‘unapproachable’ mother was seen by many to provide a lesson that parents should speak to their children about the risks that come with sex:

> It also changed the parents that it is better to talk to your children because Rosie was afraid of how she was going to tell her mother that she was pregnant. Her mother was unapproachable; do you remember that part where she embarrassed that girl who was sitting in the clinic? ….She showed there that she was unapproachable and Rosie knew
when she went home that it’s hard to just get there and tell her mother that she is pregnant. So that is what I saw that parents also have mistakes, they are telling us a lot of things…. without thinking ‘what is it that you want?’ ….when you raise a child…. when he or she becomes a teenager, you should sit down and talk to them. When it’s a boy tell them about condoms and say that ‘I can see that you are now a teenager, that is something that will prevent…’ (rural male, 18-24, Mpumalanga).

Another participant described how Intersexions made it easier to discuss sensitive issues within families, gleaning a lesson through Agnes’ character, that parents should not be ignorant in thinking that such problems will not affect their children:

Some people do things without thinking about the consequences, but then Intersexions bridges a gap whereby some of the parents can’t talk about their issues, and then that’s where we see the issues happening in Intersexions. [It shows] some of the things I have never experienced, but now I have been able to talk about it because I have seen it through Intersexions…. The one where she was talking about the nurse, that sometimes you think that ‘it can’t happen to you’, while it can happen to your child. So it brings an open mind, that as a mother you don’t only need to educate your neighbour only, but then you also have to come back to your own children, that you need to teach them about certain issues. You need to be open-minded, talk about issues that affect your children, because now, at the end you may think that your child is innocent, because that child was in school…. Maybe she thought because her child is in tertiary ‘it won’t happen to her’, but then it did because she was also involved with an older man, which was the lecturer. So it brought to our minds, our thinking actually, that we shouldn’t think that ‘it’s never going to happen to me’ (peri-urban female, 25-29, Gauteng).

**Attitude change**

A number of attitudinal shifts were described in the research. A heightened awareness of the need for honesty in sexual relationships was often described, for one. For many participants, engagement with the series led to critical reflection about one’s own relationship history and what it means to trust another. A young male described how it was typical for him and his university peers to discontinue condom use early in a relationship, but after watching Intersexions, they have begun to think more critically about what it means to ‘trust’ someone. He also describes how he is less afraid to test for HIV as a result:

I’m a student on campus, and it [Intersexions] had a huge impact. We started talking about the history of our relationships, because for example most people, if they date, after two weeks they stop using condoms. Unfortunately it’s a reality, especially around my peers. We started talking about that idea of trust, and we say ‘I trust you’ after a month, but you don’t know this person’s sexual history. You haven’t even opened up to this person. Most people don’t test together, they rely on trust. I tell you, ‘I’ve tested, I’m negative’, so now after watching Intersexions, you started talking about these things. This idea of saying ‘I trust her, we no longer use a condom’, it’s opening us to harm now, and that’s how this virus will keep on spreading, because most people don’t like testing. I had a phobia about testing at some point, until I got used to it, but it greatly affected how we related, especially as far as relationships are concerned as young people. When we go out, now we’ve started thinking about this, ‘who have they been sleeping with?’ (urban male, 18-24, Gauteng).
Some participants expressed resolve to communicate openly with their future sexual partners, as a result of the way *Intersexions* portrayed the consequences of not doing so. A male focus group participant described having developed a new attitude to take into his future relationships as a result of his engagement with *Intersexions*, that rather than strive to have ‘unconditional love’, he and his brother have come to see the value in having some ‘rules’ to govern how each should behave in a relationship:

*We normally talk about what you used to say, unconditional love, love that has no rules. So, we mostly educate ourselves that ‘if I’ve got a girlfriend, I want these rules’. You must have these rules, ‘I don’t like this and that’, I don’t like, likes and dislikes, so we normally talk about that* (peri-urban male, 25-29, Western Cape).

Zolile and Veliswa were seen to provide a message that honesty can ‘save a lot of lives’, both in terms of HIV disclosure and being authentic in one’s relationship. This participant told how he learned even though it may be harder, he saw the value in trying ‘to make a commitment to be honest’:

*The honesty part, honesty can save a lot of problems. If people would rather be honest, at some point you may have to pay for the consequences of your actions, it’s better than just lying, because even at a later stage you will still pay…. As far as Intersexions was concerned…. with your sexual partner, just be honest…. Honesty was what I really tried to learn, that if I can try to make a commitment to be honest, that would save a lot of lives. It may mean someone will leave you, but you will have saved that person’s life, or if that person tells, it makes a difference being infected or not. If someone had told you, maybe it would have saved your life if you had walked away or you made a choice to stay, it’s your choice…. [Veliswa] may have a chance to fall in love with the right man who loves her, who might have a mutual situation and Zolile may have time to heal and have a better life too, than to live in this pseudo love, so-called relationship, whereas he knows his heart lies somewhere else. So, the honesty factor, I really learnt a lot from it. It’s usually harder, but it does save a lot of lives, generally (urban male, 18-24, Gauteng).*

Another told how through watching *Intersexions*, she resolved to be truthful in marriage. She says she now believes it is important to discuss one’s sexual history with one’s spouse so that there are no surprises when a couple tests for HIV together:

*I keep on asking myself that abstinence may only be the only possible way to run away from HIV, but what about married people, then that is where ‘be faithful’ comes from. So that is what I got most from Intersexions that it does not matter what I have been doing till this far. The moment I get married it is important to sit down with that person and open up with each other that ‘my past, this is where I come from’. He will also remember and recognise the mistakes so that by the time we go to the doctor’s rooms we all know what to expect, because it would be…. a shock to go to the doctor’s office and find out that: ‘hawu, you are HIV positive, but dude I thought we were both church people’. It is better that we talk about everything* (rural female, 25-29, KwaZulu-Natal).
It’s interesting that the speaker thinks that such a conversation is reserved for marriage prospects rather than any committed sexual relationship. A male participant from the same group shared how *Intersexions* gave him ‘wisdom and confidence’ to bring honesty into his future marriage:

*Intersexions had a big influence in my life because, one it taught me a lot, it made me be enlightened, it gave me wisdom and confidence…. As I am going to be a father, as I am going to be married and so forth, now I know that you must not keep secrets when you are married. It taught me a lot* (rural male 18-24, KwaZulu-Natal).

Episode nine helped this participant understand the importance of talking to his partner about sex. He described how even though they used condoms, he and his partner usually have sex without communicating about it. He was now able to envision having such a conversation first, given his new understanding that it is ‘totally wrong’ not to:

*That’s the one that made me understand that ‘okay, I was using condoms all the time because I love myself, I love my life’. Using condoms is very understandable and to save your life at the same time, and then at the same time, when you talk to your partner about sex, it’s a problem sometimes because I have my partner, we don’t talk, we are starting to kiss each other and then starting from there, we start having sex. That is totally wrong. We must have a conversation first, and then from there you use the condom, because if you don’t do that, you are going to have sex without protection and you’re going to die* (peri-urban male, 25-29, Gauteng).

Besides looking at the role that secrets can play in sexual relationships, many viewers told how the series sensitised them to how important it was for families to communicate. *Intersexions* was perceived to facilitate communication between parents and children by providing a reference point with which to raise sensitive issues such as sexuality and alcohol use. This was seen to contribute towards shifting social norms that inhibit household communication about sex. A couple participants told how *Intersexions* succeeded in making it easier for parents to talk to children, something older generations usually found too awkward:

*F: It opens up the path of communication between you and your children because you can watch an episode on an issue you’ve been trying to raise with your child but you didn’t know how or when, but if you watch Intersexions together, you can then use it as a reference and talk to your child about certain issues….  
F3: Intersexions has opened a way of communication between parents and children. It was always hard and awkward for our parents to bring up the issue of drinking, sex and such things but after watching it on Intersexions, we can then talk about it easier* (rural females, 30+, Eastern Cape).  

Another female expressed a similar sentiment, of how *Intersexions* provided a starting point to talk about sex within families. Being able to discuss episode storylines was seen to make it easier for young people to raise such issues in their households; *Intersexions* gave ‘us a starting point to talk to our parents about such things’. She perceived such open conversations to be a marked shift from the past:

*F8: I think Intersexions was giving us a platform to bring that bond between the kids and the parents, because now, lucky for those who have watched Intersexions with their own parents, because now*
it’s going to be able to give them that starting point to talk about such issues. We’re more confident than our parents. We can speak about sex, we can speak about anything, but our parents, back then they were not allowed.

Facilitator: But can you speak to your parents?

F8: Now I can. Like I’m saying, we’re more confident than our parents. We can talk about issues, we can talk about things, we can be able to stand our ground, unlike our parents back then. So I think Intersexions has given that platform to be able to give us a starting point to talk to our parents about such things (peri-urban female, 25-29, Gauteng).

In our culture we are not used to speaking openly about sex as parents, because we use to hide things like sex from them. But now... (peri-urban female, 30+, Western Cape).

The series appears to have strengthened the idea that parents should be open with their children. A female participant said that children should learn about sexuality at home, not just through programmes like Intersexions:

I think it showed us that parents really need to be open with their children and guide them when it comes to sex issues from an early age. We’re living in times where HIV is everywhere and the more open you are with your children, the more they can be aware and protect themselves. Parents should give the child the freedom to decide whether they want to date and have sex, but should warn them and tell them everything there is to know to help the child make the right decision. Young people shouldn’t be exposed to relationship issues only through things like Intersexions; it should start at home (urban female, 30+, Eastern Cape).

Some perceived the series as trying to ‘create a culture’ in which talking about sexuality does not need to be taboo. This young woman critically reflected about her upbringing and how her mother never spoke to her about how to manage the consequences of sex:

What I appreciate about Intersexions is it’s trying to create that culture of saying it is fun to talk about these things, whereby in the past [talking about] sex was taboo. Some of us... we’re dealing with parents who still don’t want to talk about that. So Intersexions is creating an educational medium whereby it’s saying it’s fun to talk about these things... We’re not saying the world is going to accept you, the world still has its own issues, but as a person, you need to understand the values that you set for your life, that you build your life upon, and that you want to build your life onwards with other people.... Personally what I’ve experienced is my mom never sat me down and literally gave me a lecture, or a talk maybe, about sex. What I would hear is threats: ‘oh, if anyone gets pregnant in my house, you’re going to be a woman, go start a family somewhere’.... It would be a threat in a way. That’s how I grew up. I only got sex education at school, through TV, through friend’s experiences (urban female, 18-24, Gauteng).

Quite a few participants expressed an intention to communicate with their children more openly than their parents did with them. For example, a young male understood that Rosie’s miscarriage could have
been prevented if her mother had spoken to her and thus he resolved to discuss sexuality with his child when he becomes a parent one day:

Yes, I learnt something, especially about communicating, like a parent to communicate with a child. I learnt that it’s important, because there was this lady who even got, I mean she miscarried…. But if her mother did communicate with her, I think she wouldn’t have miscarried. I learnt a lesson even when I think about my future, when I have a child, I need to communicate with the child about such things (peri-urban male, 18-24, KwaZulu-Natal).

The barriers to open communication about sex within families can seem insurmountable. A male participant who grew up in a rural area tells how parents there are ‘very, very old fashioned’ and that it would have been very difficult to talk to his father about sexuality. He closes by highlighting the need for clear strategies about how to overcome this deeply entrenched norm:

You know, in the rural areas where we grew up, we were so scared of our parents, especially our fathers. You can spend a day only greeting your father once, you won’t say a word to your father, in the rural areas…. If I could go to my father and come up with a topic about sex, he would do two things. I’m telling you. If he’s not drunk, he was going to call the ambulance, thinking that I’m sick in the head [laughter]. I’m telling you the truth. But if he was drunk, he would hit me. He would kick me, asking me ‘who the hell do you think you are, where did you get all this’, because they are very strict and they are very old fashioned, so it won’t happen. So for me, if Interosexions could come back, I think they have to come back with the strategy of actually informing those people (peri-urban male, 25-29, Gauteng).

Another participant agreed with this idea that Intersexions should go even further by providing an example of how parents can communicate to children about sexuality:

M6: Rosie’s mother, I think maybe for the next season if they could show parents how to really deal with, because we understand, that’s happening.
Facilitator: In other words how to fix that relationship.
M6: Yes, we don’t talk freely with our parents when it comes to sex, when it comes to lots of stuff…. [It would be nice to have a character] who would really show…. parents how to communicate (peri-urban male, 25-29, Gauteng).

Others discussed how Intersexions helped them to see the importance of disclosing an HIV positive status, which is otherwise ‘a dangerous secret to keep’:

It teaches the youth about secrecy and lies and their consequences, it teaches the youth that honesty and trust in relationships are very important, you can’t live with a huge secret like HIV and keep it from your partner and you can’t be in denial about having HIV forever. It’s putting yourself and your partner at risk because you’ll be too afraid to even seek medical help and the virus will end up killing you. You might also infect your partner, so it’s a dangerous secret to keep. Rather be open and honest in your relationship…. I think it’s cruel to not be open to your partner because you’re putting your partner’s life at risk (rural female, 30+, Eastern Cape).

This speaker took a message from the docudrama that ‘I must communicate with other people about my condition so that it may make our lives easier’:
What I have learned is communication. That was from the last episode. Especially with HIV, you have to communicate; to prevent infecting others, we have to communicate, or else…. [The talking virus] was telling us about each of the characters and the scenarios, that ‘if this person would have communicated at this point, they would have stopped me’. And that is what I have learnt now that…. everybody needs to communicate…. although I haven’t had the time to practice but I have been thinking about it, how I must communicate with other people about my condition so that it may make our lives easier (urban female, 25-29, Gauteng).

**Behaviour change**

It was intended that engagement with Intersexions would encourage open and honest communication within relationships. By providing realistic characters and storylines to discuss, the series appears to have succeeded in creating spaces within both sexual relationships and families to discuss sexual behaviour, relationship values, previously held secrets and other meaningful forms of communication. When a participant gives voice to a particular behaviour or attitude it is important to understand: 1) how they position themselves in relation to this behaviour (is it conceptualised or enacted), 2) whether it is contextualised within their everyday lives and relationships, 3) is the conceptualised or enacted form of behaviour accompanied by a sense of self-efficacy, and 4) to what extent does the contemplation of the behaviour generate critical awareness of the social context around this behaviour.

**Partner communication**

A female participant shared how each week she would watch Intersexions with her family, but always discussed the episodes with her boyfriend afterwards: “*We talk about it every time. Even if I’m here, I would say ‘did you watch, did you see, what do you think?’*” She said that she and her boyfriend would discuss how the episodes related to their own relationship; Intersexions made her ‘really want to talk about’ issues that would have otherwise been difficult to raise without the series:

*If you like Intersexions, it will help you with your relationship. It will reduce chances of cheating and getting these diseases…. It made a good impact on my relationship, because once you see those things are happening, it’s good to tell your partner ‘that is not good, that is not right’. You see there are many lives destroyed because of this, so now ‘if we are doing the same things like them, so we are going to destroy our lives and end up killing our relationship’…. Sometimes it’s difficult to talk about some things, some issues with your partner, but once you start watching this show, Intersexions, it’s easier to get to the point that you really want to talk about, because you start to watch… ‘what do you think… so we need to do that… we need to do all of that’* (peri-urban female, 25-29, Western Cape).

A peri-urban male relayed how his engagement with Intersexions led to a more communicative relationship with his sexual partner: ‘*we would share things, we would share a secret and now we would talk about sex, because before we would not talk about sex. Well, she would come into my house and visit me, maybe we would do the sex but without communicating, but now we can like communicate*’ (peri-urban male, 18-24, KwaZulu-Natal). Another male told how he internalised the message that
'communication is paramount in every relationship' and 'now speaks about absolutely everything' with his partner:

*I think the show, what it’s trying to show to us is that communication is paramount in every relationship because you find with secrets, what happened was because they didn’t communicate. Even though some relationships were good, but because they didn’t communicate, they started having problems. So to me, I think what I got from it.... I now speak about absolutely everything with a partner, absolutely everything, even if it’s a minor detail, ‘are you happy or are you not happy’, because I think yes, communication (urban male, 18-24, Western Cape).

One participant shared how awkward it was to view episode 17 (about Nathan and Chloe’s open relationship) with someone she was involved with in an undefined relationship. She tells how they identified with the scenario so much that they even referred to each other using the characters’ names:

*F2: Once I was going to study with this friend of mine, and luckily, or not luckily, ironically enough it [depicted] exactly the situation we were both in. So it was like ‘okay, now what do we do now’? It was just something that also pushed us in this weird direction, so it was just a bit touching [laughs] .... It was the open relationship one. We’re not really in an open relationship, but it was just something that happened [laughs].

*Facilitator: So after the episode, did you guys talk about it?

*F2: He was making jokes, like calling me by the name, like the character names, and I was also calling him by the character names. It was so funny, because it was like ‘wow, okay, are we really doing this’? (urban female, 18-24, Western Cape).

Ultimately, their engagement with the episode led to a bigger conversation about what they each wanted from the relationship, which had previously not been discussed, as they ‘weren’t really big on communication’:

*Facilitator: So do you think it might not have happened if you hadn’t watched it?

*F2: Well, the thing is we weren’t really big on communication and whatever was happening, so it also provoked communication on like ‘what the hell is going on, and which direction are we to go in now’ (urban female, 18-24, Western Cape).

One woman told how her partner recently admitted to being unfaithful after they watched an episode of *Intersexions* together. While it is helpful that the series seems to have facilitated this confession, she tells how her partner then projected his infidelity onto her:

*I’m in a relationship with my boyfriend, and we watched Intersexions, and after that, I think about two weeks ago, after Intersexions, he told me that he slept with another girl. So he was open to me, so he is forcing me to tell, he said I ‘must be open too’.... He is open, but he doesn’t trust me.... I don’t cheat on him, but he thinks that because he told me that he slept with someone, now he thinks I am doing the same thing that he is doing.... I went to the clinic for an HIV test and then we talked about it and Intersexions and unfaithfulness and he told me that he had slept with another girl, I even saw the condom in his wallet (peri-urban female, 30+, Western Cape).

Episode nine depicts a married man who has an affair with the family’s nanny; through this episode, a male interviewee critically reflected on how difficult it is to establish trust in a relationship, to know for
sure if ‘I am the only one’. These insights prompted him to reflect on a previous relationship, in which trust was similarly broken. Interestingly, the episode opened up a space in which he and this ex-girlfriend were able to share what they had learned from their relationship (and Intersexions):

One of my ex-girlfriends, I once shared with her about Intersexions. That ex, she lives around here, but we broke up after I realised something, that she had an affair with a person I know..... So, I shared with her that these things, because we used to have sex, and maybe sometimes without protection, and then it’s all about trust, because I trusted her and she trusted me. The thing is, this thing, the question that comes into the mind is that ‘am I the only one? Am I the only one’?

So, what happened about that, I shared a story about this guy, a married man, he had his wife in the same house, and then another girl, another lady, she was working there.... this man would have sex with that lady and with his wife in the same house. Then his wife found out.... she found lipstick on his shirt, realising that she’s not the only one. When that wife tells.... the nanny and then the nanny realised that they are not the only ones, there is someone else too. So these things happen secretly.... So I shared this with her, I told her that ‘it’s not easy now to trust a person because we can be in love but I don’t actually know what’s going on when I’m not with you’. So, basically this is what I shared (peri-urban male, 18-24, KwaZulu-Natal).

Improved family communication

Intersexions also succeeded in facilitating greater communication within households around topics that may otherwise have been difficult. In this example, a young woman shared how watching Intersexions with her mother made it easier for them to talk about HIV and pregnancy prevention together. She describes how they often watched episodes together and would talk about the themes afterwards: ‘she told me how to carry myself as a girl in order to avoid pregnancy and HIV.... With my mom, it’s like watching with a friend’. Episode four in particular resonated for this pair in the way it portrayed the impact of poor family communication; viewing the episode prompted the participant to meaningfully share about her own miscarriage with her mother for the first time, which ‘brought them closer’:

F: The part with the girl who got a miscarriage; because that girl’s mom is a nurse so she should’ve taught her daughter all the proper things about sex and sexual health, but her mom chose to run away and avoid those things. The reason the child ended up miscarrying was because her mom didn’t have the talk with her.

Facilitator: Do you feel Intersexions allowed you to talk to her about things that you couldn’t talk about before?

F: Yes.... I never really told my mom the proper truth about what happened when I had my miscarriage, so watching that girl’s story made it easier to open up to my mom and tell her that I went through the same pain that girl went through and I ended up telling her everything.... She knew I went through a miscarriage but she didn’t know just how bad the situation around it was, so I told her and it was a huge relief, in fact it brought us closer (urban female, 30+, Eastern Cape).

Through portraying relevant and realistic themes, the drama series offered viewers a context with which they could discuss how those issues related to them. One mother described how watching Intersexions helped her to find ‘guts ’ to talk to her sons about their relationships and to invite them to ask her questions, something she had not done much of before:
After watching Intersexions I…. even started speaking with my children…. about sexually-related matters. I only have boys and for a mother to speak with her boys takes guts, you see…. I spoke with them after watching a lot of episodes…. Communication channels were open for us to speak and for them to ask questions…. I asked the two older ones if they ‘have girlfriends and if you are involved are you people sexually active’. Those are things I wanted to know…. I told them that they ‘have to be open because whatever that’s gonna happen will come back to me, they just have to tell me everything so that I can know’ and then they were open to such an extent that…. they can pick up a phone and say ‘ma this is what is happening’ (rural female, 30+, Free State).

Although this mother takes a somewhat threatening approach in telling her sons that (like secrets) what they do ‘will come back’ to her, Intersexions succeeded in prompting her to overcome gendered barriers by discussing sexuality with them. Similarly, another mother shared how watching episode two prompted her to ‘warn’ her daughter about ‘the dangers of the world’ and how some men are unreliable:

I watch Intersexions with my 15 year old and we also discuss and talk about each episode. For example the episode with the professor who was sleeping with Rosie, then moved onto Khanya, so I used that as an example to warn my child about what happens in real life. I told her that ‘this happens, and it might not even be your teacher, it might just be a boy who sleeps with you, then completely denies it, like the professor did with Rosie and Khanya, he was just using them’. So I’d use the things we saw in Intersexions to warn her about the dangers of the world (rural female, 30+, Eastern Cape).

From another perspective, this young woman shared how she and her grandmother have communicated better since watching Intersexions together. Again, episode four was the catalyst for her to feel able to now ‘tell her everything’:

Yes now I am close with my grandmother and I talk to her about everything, that my boyfriend is cheating and all that…. I wasn’t used to talking to my grandmother [before I watched Intersexions]…. So now I can talk to her. My grandmother is that kind of person who is always shouting, and I couldn’t even start.. But now we are like friends and I tell her everything…. It changed my behaviour…. I don’t know how to explain it. If I wanted to leave I would just leave and not sleep at home without them knowing where I was, and what was I doing and I would switch off my phone. But now whenever I leave I say that ‘granny, see you tomorrow, I have to go somewhere’ (rural female, 18-24, Mpumalanga).

The episode also provided the next speaker with the necessary motivation to have a meaningful discussion with her mother, who she said was very similar to Agnes’s character in the way she put her daughter ‘on a pedestal’. She told her mother that she was in a relationship and might disappoint her some day; the conversation ultimately created a greater level of understanding between them:

[Sister Agnes] is…. very much like my mother…. there are other things that I get up to and if she were to know she would be disappointed and she would see that her child is also like ‘so and so’s
child’. I realised that at some point I have to be honest with my mother and tell that ‘I’m at a stage where I’m in a relationship so don’t look down on other children but know that I am also like them’. If you continue that way then those people will be waiting for my downfall and when I do fall they will be happy because you have put me on a pedestal saying, ‘my child can sing, my child does this and that’ ‘…. It only clicked after [watching episode four] because I was also walking with that pride but deep down I knew that…. I should sit my mother down and tell her that mama ‘this is how it is in life and always have room for disappointment’ ‘…. She accepted that ‘really my child, these are the things that are happening but do not give in and…. try and stick to the right path and I will no longer walk around with that pride’ (rural female, 18-24, Mpumalanga).

Watching Intersexions created a space for a new level of openness in a number of participants’ sexual and family relationships. Many described how their engagement with the series led to more honest and meaningful discussions about sexual and reproductive health issues with family members, friends and partners as a result.

**MULTIPLE AND CONCURRENT PARTNERSHIPS**

**Lessons**

Other series objectives included highlighting: 1) the concept of sexual networks and concomitant risk of HIV infection; 2) how multiple and concurrent sexual partnerships increase HIV risk; and 3) the importance of knowing one’s partner well before commencing a sexual relationship. The qualitative feedback indicates that these objectives were achieved. Consistent with the findings from the evaluation of series one, it appears that one of the key successes of Intersexions is the extent to which viewers deepened their understanding of how having multiple, overlapping sexual partners facilitates HIV transmission. When asked what they learned from the series or what it was trying to put across, participants frequently mentioned something along the lines of having fewer (or one) sexual partners, being faithful and how the virus spreads more easily when one has multiple partners. Participants variously said the main message was to ‘have one partner’, ‘to minimise the number of partners that I have’, ‘that one must have not many partners but one partner’, ‘that you shouldn’t cheat’, to show ‘us how easily this virus gets spread’, and that ‘we are more connected than we are disconnected’.

It was clear that viewers brought what they remembered as the primary lesson from series one (about the sexual network and how ‘our lives intersect in mysterious ways’) to their engagement with series two. Series two was seen to continue that theme, building on how sexual secrets affect the spread of HIV within sexual networks.

*It [HIV and lies] does connect, because if I sleep with M3 and I lie about it, whereas I have a husband at home, then it will link, because if M3 infects me with HIV and AIDS, I also give it back to my husband at home. It does link, living a lie (peri-urban female, 25-29, Mpumalanga).*

*From Zolile’s father to Nomzamo’s mother. Nomzamo’s mother, Nomzamo’s father... We all related. AIDS makes us related, because I may be sitting here, maybe let’s say I’m HIV positive and I got*
infected by a man who got infected by this girl who was sleeping with my father.... And keeping
secrets. It’s not good, because see this one secret now prevented these two from being together
(urban female, 30+, Mpumalanga).

The second [series] takes South Africa from the beginning to the end, it connects everyone, no matter
where you are it might happen that you will meet someone that you don’t know but you will be
connected through this (rural female, 30+, Free State).

Zolile, Nomzamo, Godwin, Sdumo, Musa, Sambulo and Rosie were the characters most often said to
communicate the idea of sexual interconnectedness, the ‘circle of infection’, and how HIV easily spreads
from one person to another:

While [Rosie] was at university, she was sleeping with a lecturer and at the same time there was also
another girl, Khanya, who was sleeping with the lecturer. So it actually highlights the circle of
infection, how people get sick. So that is the part that stood out for me (peri-urban female, 25-29,
Gauteng).

In this second series, they showed how the world is so small in a way that you’re not aware that I’m
sleeping with you indirectly, and this can transfer…. that not only do we do it, kids, even the parents
do it to.... As he [‘HIV’] said, that there are consequences in life if you tend to ignore it.... Like
those two wives.... They suffered the consequences of their husband.... cheating (peri-urban male,
25-29, Gauteng).

It was common for participants to express their understanding of what a sexual network is in relation to
their own lives. The ease with which one may be connected to others through sexual networks that cross
geographical divides was explained:

It’s trying to show us how easily HIV is contracted and the ways that we take for granted and think
that would never give us HIV are the ways that could actually give you HIV.... If, say, your friend is
dating a rich guy and they break up.... Then because he is rich and you saw how much he spoilt your
friend, you decide to start dating him.... without knowing that your friend broke up with him because
he gave her HIV. Then you fall into the exact same trap your friend fell into and end up with HIV. It
shows the thread of HIV (urban female, 30+, Eastern Cape).

The fact that we’re connected, just because someone is in the Eastern Cape and you’re in Joburg
doesn’t mean you guys don’t have any connections. I come from the Eastern Cape, maybe I sleep
with a guy from Joburg and then he goes to Limpopo and infects someone else there. It just shows the
fact that just because we are geographically divided does not really mean that we are divided, just
because we have these hills and distances separating us (urban female, 18-24, Gauteng).

This participant expanded by saying how the docudrama helped her realise that lies have a ‘ripple effect’
and that it is better to communicate if one is dissatisfied with something in a relationship, than cheat.

This idea was echoed by others:

Communication is key and one lie can cause this whole ripple effect, basically.... The last episode
says ‘if this guy only told the truth, this and this and this would not have happened’. So, it goes back
to saying as much as it might seem uncomfortable to tell your partner such things, just be open to
save someone else’s life down the line somewhere, or even save your own, just by being honest. If
he’s boring, change this, ‘I don’t like this about you, our sex life is boring’, rather than go out and find something spontaneous. Obviously the man will go like ‘okay, ouch’, but we need such openness, I think (urban female, 18-24, Gauteng).

Talk openly about what you are doing outside the relationship with your girlfriend (peri-urban male, 30+, Western Cape).

Why at the first place when you are married, you are not satisfied and you do not say anything. What you do outside with a different person, you can also do to your wife. It just requires communication; talk to your partner about sex and ask him or her about how they prefer sex, maybe even changing sex styles instead of going out there to cheat (urban female, 25-29, Free State).

One participant said that ‘the cause of cheating is [poor] communication…. Communication is the problem’ (peri-urban male, 30+, Gauteng). While lying and having sexual secrets were understood to expand sexual networks, communication was seen as a strategy to reduce relationship dissatisfaction and the urge to seek sex with others, thus reducing the risks of having multiple and concurrent partnerships. Respondents frequently articulated their understanding that having multiple and concurrent partners (MCPs) increase HIV risk: ‘you’ve got multiple partners, you are likely to be infected with AIDS’ (urban male, 30+, Mpumalanga). ‘Cheating’ and ‘sleeping around’ were widely understood to drive HIV transmission:

I’ve learnt that if you are not faithful and you have sex unprotected…. you will get AIDS, and AIDS kills. That you could see, even if you see somebody cheating, then the next thing is this person is going to get AIDS…. I knew that, but the episode just emphasised the fact (urban male, 30+, Mpumalanga).

If you have many girlfriends that you are sleeping with, you can get sick…. HIV is dangerous and it can infect you easily…. by sleeping around and having many partners and not being satisfied with what you have. For example not being satisfied with your wife and having lust for other women and other people’s wives (peri-urban male, 18-24, Free State).

An interviewee thought that the second season ‘broke the silence of people who are cheating’ and appreciated it for correcting the idea that ‘married people don’t get HIV…. and don’t cheat’ (peri-urban male, 30+, Gauteng). Many understood a lesson that ‘being faithful’ will ‘stop the spread of HIV’:

I have learned that we have to be responsible because we never know when we can contract AIDS, we don’t know where and how so we have to be faithful to our partners because cheating is indeed what is spreading AIDS so we must learn to be faithful and responsible. Don’t do something only to regret it the next day (rural female, 30+, Free State).

The lesson that I got from watching Intersexions, it’s that if we are faithful enough, we can stop the spread of HIV faster (peri-urban male, 25-29, Mpumalanga).

Often reflections on one’s personal sexual infidelity or of one’s partner’s, led to efficacious thinking about how to protect oneself, usually by using condoms:

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It delivered the message that secrets can destroy someone’s future, something like that. We are connected, like the community, we are connected somewhere. So if you sleep with someone, make sure that you use a condom, because you don’t know if the person fooled around before you (urban male, 18-24, Western Cape).

A young woman shared how she learned from *Intersexions* that it is better to ‘be safe than sorry’, meaning that even with communication, one can never be certain that one’s partner does not have a ‘secret partner’, so it is best to ‘prevent’:

I would say prevention is better than cure…. Rather be safe than sorry. Like all those that say ‘just protect and prevent’ instead of you having to manage, because at the end of the day…. we can communicate, but if I have a secret partner or whatever, or if I know I’m in Cape Town and they’re in Joburg, you won’t know and you don’t have to know. I mean that can put me at risk, so rather prevent (urban female, 18-24, Western Cape).

This participant internalised a lesson about the inherent risk of having secrets. The idea that it is better to prevent in the first place was embodied by Lerato’s character, in the way she made sure that her husband had condoms, in case he was tempted to cheat:

That’s why I feel the lady gave the boyfriend or the husband the condoms, because it’s just like… ‘I’m not saying you will, I’m not saying you won’t, but I’m just saying just in case, just be safe’. I don’t know, I’m not really encouraging that, I think, but I’m just saying it’s a matter of her saying ‘just prevent, rather than you get tempted and you don’t have condoms’. ‘We’re already here, so we might as well use the condoms’ (urban female, 18-24, Western Cape).

**Attitude change**

Participants sometimes reflected on what they perceived to be the underlying motivational factors behind having multiple concurrent partners, which were said to relate to social circumstance (such as culture and peer pressure), poor communication, and as a way of escaping from one’s problems. ‘I also do believe that some of our culture actually does lead us into having a lot of girlfriends. They call you a Casanova. You become the biggest thing ever’ (peri-urban female, 25-29, Gauteng). The portrayal of MCPs was generally regarded as depicting ‘reality’. For example, one participant shared how much he identified with Godwin’s character and his love of ‘stolen cake’:

I understand that guy more than anyone else. I will talk about my experience, because I always say ‘there is nothing that is nicer than a stolen piece of cake’. It’s very nice. I don’t want to lie to you. It’s very nice. You know when you steal something, you enjoy it. This is reality…. What was happening to Godwin’s life was reality. At first when he started this thing with Gadima, it was something that was
stolen, so because of the enjoyment, it’s like a stolen piece of cake…. Maybe I’m still there (laughter) (peri-urban male, 25-29, Gauteng).

While this speaker did not seem to think too critically about enjoying ‘stolen cake’, the next speaker tells how much he identified with Sdumo’s character, wanting to be like him but ‘in a safe way’, demonstrating approval of being ‘a ladies man’, coupled with an awareness of the need to use condoms at the same time:

M3: I liked the Sdumo character…. He has an old, old Beetle, but yet he’s a ladies man…. He gets it his own way. He is funny, he’s Sdumo. He’s everything that I am [laughter]....

Facilitator: Do you want to be like him?

M3: Only in a safe way, yes.... meaning if I have to be intimate with a lady, if we haven’t tested, we can use a condom and everything and stuff. It’s not a problem with two, three women, but as long as we prevent (peri-urban male, 25-29, Mpumalanga).

Many male participants in particular indicated that they identified with Zolile. In the following excerpt, M2 and F3 critically reflect on how some people have sex as a way of channelling their stress and anger; M2 admitted having done the same as Zolile, but has taken ‘a new approach’:

M2: I’m young, at times I think I’ve been in the same space too, where you feel you can’t deal with whatever is happening head on, you rather go and find a replacement of that bad feeling.... I think most young people deal with their issues sexually. That’s when they don’t even think about condoms or who they’re sleeping with, or even think about testing. Then they will tell you ‘hey, I was drunk, and I just slept with this person because my girlfriend didn’t call me’, or ‘because my father told me he won’t fund my next meal’.

Facilitator: Would you say it’s something you can relate to?

M2: Yes, very much.... I have done [the same] at some point, yes.

F3: Doesn’t that kind of make it acceptable.... Like ‘maybe I’m angry with my girlfriend and I’ll go and sleep with someone else’.... I think that’s how a lot of people justify it, because ‘we’re all human, we’ve all done it’, but it doesn’t make it less wrong....

M2: I mean in [episode] 26 they show us the consequences. At some point he got infected because he did sleep with many girls.... they were trying to show us that if we are emotionally unstable, or whatever, we can’t just go and do random things thinking ‘tomorrow will be a better day’. It might be darker than yesterday. That’s what I learnt from it and hopefully I have a new approach (urban male and female, 18-24, Gauteng).

Later, M2 articulated how Intersexions (and the Scrutinize campaign), ‘broadened the idea of AIDS’ by emphasising the sexual network. He shared how the series led him to contemplate his own network, thinking beyond his partner and how ‘you may expose them and how they expose you’:

For me, you remember previous years we had the ads on AIDS, Scrutinize, I think that spider web kind of broadened the idea of AIDS. Intersexions was one of those and personally I could sit down and think ‘I’m at this age, I’ve probably had ten exes, maybe’, and now I started thinking about ‘if each of them probably had so many, and so many’.... I think that’s one of the things which hurts most young people, thinking now beyond your partner, now going behind the scene and how you may
expose them and how they expose you. It even accommodates our parents and the like (urban male, 18-24, Gauteng).

The series appeared to make it easier to discuss transmission within sexual networks in social circles:

With my mates, we speak about how the HIV virus moves and how.... this person sleeps with this person and so on and that’s how it spreads.... After some episodes others would confess what they had done and that they have stopped it (peri-urban female, 18-24, Free State).

Some participants shared how they developed a new sense that they should be more faithful in their relationships after viewing the series:

Watching Intersexions emphasised that really one needs to be responsible and faithful to one partner. Because I myself will have a partner but if I can desire someone else, I already have a good mind to cheat so I realised that it is wrong because if I go there, I don’t know what this person has for me (rural female, 30+, Free State).

I learnt a lesson from that one, that I have to be faithful. Even if it’s a girlfriend, I have to be faithful, because the consequences... (urban male, 30+, Mpumalanga).

Sometimes when our parents are away working, they end up having kids out there. You might end up having a relationship with your half-sister or half-brother, not knowing the truth that you are related to them. It has taught me to be trustworthy in my relationships so that my children do not end up in similar situations and having questions that I cannot answer (urban male, 18-24, Free State).

The series successfully prompted many viewers to reflect on the sexual history of their current or potential sexual partners; ‘it’s an eye opener. It gets you thinking about all the stuff that actually goes on around you. Like most of the time they say you don’t know who your partner [slept with]’ (urban female, 18-24, Western Cape). This young male shared how his peer group discussed the sexual network and how he personally has begun to wonder whether a potential partner is a virgin, and if not, ‘how many guys has she slept with’ as a result of watching Intersexions:

Back at school, when we discussed about knowing our status, we get to a point whereby we share about Intersexions. We’d be like ‘do you know, guys, how our lives intersect?’ We used to say that thing of that guy ‘our lives intersect in a mysterious way’. Yes, that’s a lesson to us. We discuss it and some of them went to check their status, but some of them didn’t.... Before [Intersexions], I didn’t ask myself if a girl is saying she’s not a virgin. If she’s not a virgin, now I’m just thinking ‘how many guys has she slept with’. Now I’m starting to think about this, you see. It’s from the influence of Intersexions (peri-urban male, 18-24, KwaZulu-Natal).

A dominant theme that arose in the focus group discussions (which was discussed in more depth in the section on communication) was a critical sense that one cannot know for sure whether one’s partner has
other partners. Such reflection about the fidelity of their sexual partners can be said to be a form of realisation.

I’m trying to be responsible and honest but what if my partner.. I don’t see what he does behind closed doors but he’s the only one in my life. I don’t know what he gets up to around the corner (rural female, 30+, Free State).

Forgoing any notion of trust in sexual relationships, some concluded that the only answer is to use condoms in all situations because one can never be sure of the behaviour of one’s partner: ‘it opened my mind. Like oh, okay, you think you know someone but you don’t. You don’t really know that person, so you’d better protect yourself against those things’ (urban male, 18-24, Western Cape). By personalising the sexual network, the next speaker explains how he imagined how easily he could potentially spread HIV to ‘lots of people’, which led to the conclusion that he has ‘to have some protection in my pocket’, without worrying if others criticise him as a result:

I’m from Limpopo, I am in Gauteng, I’m dating a girl from KZN or Eastern Cape. I’m HIV positive. When we break up…. I go back to Limpopo, I meet a girl and I didn’t say anything about that and maybe I didn’t go to the clinic to test, so I don’t know anything about my status. What happens is she gets pregnant, she goes to a clinic, she finds out she’s HIV positive…. It is spread to lots of people, so that’s the time for people to know, especially men…. I have to have some protection in my pocket. It doesn’t matter what people are going to say about you, but the important thing is your life, which is more important than those people who talk about you (peri-urban male, 25-29, Gauteng).

The next speaker describes how watching Intersexions made her realise the importance of finding out a partner’s sexual history, including names, in order to deduce her potential HIV risk. While encouraging such communication was an aim of the series, it appears as if she may have taken an unintended message that trying to pin an HIV culprit of sorts is a substitute for HIV testing:

I have concluded that, like after watching the whole of Intersexions, even though it wasn’t put out there as is, but it’s important to ask your partner about how many sexual partners he or she has had. Names, if possible, especially us being from this community, we know each other. If you tell me ‘I was with whoever, Thandi’, if you are with Thandi and I know Thandi’s ex-boyfriend was HIV positive, then I wouldn’t want to be with you because you are with Thandi and Thandi was with whoever. So it would be nice for you to ask your partner how many girls have you slept with, their names and it’s important for us to be honest.

My boyfriend cheated on me, and there was this girl that he cheated with. So I wanted to know what was that girl doing, and the guy friends or whoever that girl was dating, because if that girl is HIV positive and my boyfriend was cheating on me with that girl, then it means it’s possible that the HIV virus has spread from that girl’s boyfriend to whoever to whoever, to him and then to me (peri-urban female, 25-29, Gauteng).

Overall, it appears that Intersexions II challenged existing norms that support the practice of having multiple partners and to a greater awareness of the potential consequences of having multiple and concurrent partners. Greater awareness of the role of the sexual network in HIV transmission prompted
some participants to critically reflect on their own behaviour in this area and to speculate about their partner’s—with some believing that the only option is to always use condoms.

**Behaviour change**

It was hoped that one of the behavioural outcomes that would result from watching *Intersexions* was a reduction in sexual partners. There were many instances shared of self-reflection and disclosure about having multiple partners or being unfaithful to a sexual partner during the evaluation research; it is notable that seven participants reported how *Intersexions* contributed to not just a heightened awareness of the associated risks, but to their making an actual change in the number of sexual partners they had. For example, this female tells how before watching *Intersexions*, it was not difficult for her to say ‘yes’ to a man; she has since decided to ‘stick to one partner’ and the series helped her to understand why that is important:

> It changed me a lot to watch episodes of Intersexions. I was this person who didn’t care about how many partners I have and it wasn’t a difficult thing for me to say ‘yes’ when a man proposed love to me. So since I watched Intersexions, it changes me now. I understand how many partners I should have. It tells me a lot…. I stick to one partner and I understand why I have to stick to one partner. It helps me to understand now and move forward (peri-urban female, 25-29, Mpumalanga).

The emphasis on sexual secrets, including the particular portrayal of how ‘the truth will come out’ was sufficient motivation for this next speaker to decide to have just one sexual partner. His fear of being found out (and ‘losing both’) led him to ‘ignore’ his side partner, rather than clearly tell her it was over:

> M1: Yes, it did influence me because I have two girlfriends. Then I think you know, this one doesn’t know, I rather ignore one, because when the secret comes, I will lose both. So, I rather ignore one and concentrate on one....

Facilitator: Did you end it with the other one, or what did you do?

> M1: No, I just ignore her. So, she’s surprised, I no longer phone her, because I look, the Intersexions shows that if you have secrets in the relationship, when it is discovered, you may lose both, and you may destroy your image and character in the community (peri-urban male, 30+, Gauteng).

The speaker derived a message that secrets will come out, but instead of engaging critically with the importance of honesty in relationships, he seems more concerned with preserving his primary relationship than being truthful with both partners. Another participant reflected on how his previous infidelity negatively affected many others, causing a great deal of hurt:
In life we do things not knowing that we hurt other people. So I learnt from this series that if you are honest, honest to yourself and honest to the people that you live with, then you won’t have problems.

Some of the things I have experienced myself…. if you watch a series like Intersexions where people are cheating, then you will know how to deal with it. But I don’t think I can be a victim of cheating again…. I’ve cheated in this case, but I wasn’t aware that in the process, there were lots of people that were involved. There are kids involved, there’s parents, families, and when this thing came out (urban male, 30+, Mpumalanga).

He elaborated how watching Intersexions helped him to reconsider the way his ‘freestyle’ lifestyle was negatively impacting his wife and children and could potentially damage their health:

M: It has influenced my behaviour because the way I act, the way my lifestyle changed…. there are things that I can’t do like before when I was still younger. I respect myself, I take care of myself, my health. I’ve got kids that I’ve got to look after. So if I live a loose life, they are going to suffer. So watching Intersexions made me make the right decisions about myself, the lifestyle, the kind of life I want to live in order to be better for the kids.

Facilitator: How was your lifestyle different before that?

M: Yoh! [Laughs] ….It was. I was living freestyle…. I would go wherever I want to go, do whatever I want to do, like do whatever I want to do …. That’s why I said it had an influence, because I had to think of my kids, think of her, because anything can happen when I am going around partying, doing whatever (urban male, 30+, Mpumalanga).

Four other males described making quite drastic changes from having many sexual partners to having only one. They each shared how watching Intersexions led them to think more critically about their personal sexual network and HIV risk and act accordingly.

I have cut down on this idea of multiple partners, or casual sexual relations. At some point as young people we tend to allow flexibility, especially at functions, res functions, or a jazz event. I won’t see this person again, so whatever happens…. So we started thinking but that person leaves, goes back to wherever, they do the same thing with someone, the web is much bigger. Then maybe the source was me in that case, as an example. I would have affected so many people in different parts of the world. So [Intersexions] really, really got us thinking about AIDS (urban male, 18-24, Gauteng).

The next speaker also reflected on the potential breadth of his sexual network. He described a key moment of realisation that if he continues being a ‘high time player’, it will ‘catch up with’ him, just as it did for some of the characters in Intersexions. He described that although he finds it difficult and sometimes boring to have one partner, he does not ‘want to tell a lie ever again’ and is trying to be with one person (‘I’m on rehab’):

Yoh! Chicks from all over, a girl from Cape Town, a girl from Nelspruit, Free State, Newcastle…. I need four hands to count them. No, seriously, and still I will go to church…. and still cheat…. So from that, seeing all these things intersecting and stuff, yoh, two girls every week.. But I saw that and
I said ‘you know what? Once I’m busy here with this one, all the other 15 or 18 are still busy out there, because I don’t stay with them. I might think I’m a high time player right now, but it’s going to catch up with me’.

Until one day when I met my match, yoh, that woman, I don’t want to tell a lie ever again…. She was the most beautiful woman I have ever dated. Everybody knew her, but ever since I decided seeing on Intersexions and knowing that there might be a possibility…. Now I’m different because I decided ‘you know what? I’m going to have one and I’m going to be good and behave, and behave and behave’, even though it’s hard to behave when you are used to. Sometimes I get bored having one woman because I am used to so many characters in my life. I know when this one bores me…. I will just call this other one and everything will go well, and I will go to the other one…. I’m trying [to be with one person] (peri-urban male, 25-29, Mpumalanga).

Another male similarly described deciding not to be ‘a player anymore’; he reflected on how tight the sexual networks at his university are and after feeling some anxiety while waiting for his HIV test results, decided ‘I don’t want to be a Zolile anymore’ and how he doesn’t want ‘HIV to change me’ like it did Zolile:

I changed. I was a player. I’m not a player anymore. I am honestly not [laughter]…. I could easily sleep with four, five girls in a week, but after this year, the whole HIV and AIDS unit, and Intersexions, that’s how I sort of started working with it. Because you think to yourself ‘yah, and then?’ Also, with the first episode, you know what you’re sleeping with, but then the person, like especially our school, it’s so small. It’s so big but it’s so small at the same time, because you find that who you are dating has dated someone else and that person is sleeping with someone else. Yah, it happens…. I sort of saw myself as - what’s that guy’s name? Zolile, especially when he gets HIV and you’re thinking to yourself ‘eish’, because I did an HIV test a week ago and I was so nervous because I was thinking to myself ‘yoh! What if now?’ But then ‘no, I’m cool now’. I don’t want to be a Zolile anymore…. Towards the end he’s much more, I’d say mature. Unfortunately it takes HIV to do that, but you see that he is transforming, which as a person now, I think I don’t want to get there. I don’t want to have to have HIV to change me (urban male, 18-24, Western Cape).

In an extraordinary example, M2 describes how his identification with Godwin’s character in episode nine led him to reflect on his own behaviour. He tells how the heightened sense of personal risk that emerged after watching the story unfold prompted him to end relations with all 32 of his sexual partners:

M2: I dropped everything, I say ‘okay, if you have many women, the bad things will come in your life’. So I learnt from there and I took the good things.

Facilitator: So are you saying you had different girlfriends?

M2: Yes, many women…. Thandeka’s husband, he is the one to make me check everything. To tell you the truth, I have 32 girlfriends. Serious, I’m not lying. No guys, I’m telling you the truth. So, I told myself okay, this is not good for me, because at the end of the day I will hurt myself. So, as I love myself, let me drop everything because this is not the life, this is not good for me. At the end of the day, I have a son, so if I get infected tomorrow, how am I going to tell my son?

Facilitator: Have you ended your relationships?

M2: I ended everything, actually.

F5: All 32 of them?

M2: I ended everything.
M1: Give that man a Bells.

M2: I’m alone now. I’m lonely, lonely (peri-urban males and female, 25-29, Gauteng).

This participant elaborated on the attitude shift that led to this significant change in his behaviour. He reflected on the potential consequences if he continued having so many partners and how that makes it difficult to ‘know who you are’. He now believes this is available by having a relationship with one person:

I sat down, I started to think about what will happen in my life if I continue doing the wrong things with so many people. So, let me delete everything, and then understand myself, because having many partners, you don’t understand yourself; that’s the first thing, but if you have one partner, you understand yourself. You know who you are, lonely (peri-urban male, 25-29, Gauteng).

HIV COUNSELLING AND TESTING

Lessons

In addition to messages about communication and the sexual network, viewers perceived a strong message around the importance of knowing one’s HIV status, testing regularly and testing early. ‘It teaches that people should always know their HIV status, they should regularly get tested’ (urban female, 30+, Eastern Cape). Noting how many people do not know their status, it was assumed that Intersexions would give many viewers ‘the courage to go and get tested’ (peri-urban female, 18-24, Free State). This came across from the way in which Intersexions depicted how HIV is transmitted through sexual networks, the consequences of not testing, and how episode 24 served to normalise HIV testing and disclosure.

The importance of testing for HIV in order to find out if one is HIV positive early in the course of infection was also understood. This was accompanied by a sense that it is better to know that one is HIV positive than not, so that action can be taken to protect one’s health and prevent onward transmission: ‘I have learnt that I should know my status early, and by doing so, we can also reduce a number of new infections and also can reduce the number of young teenagers that can get infected’ (peri-urban male, 25-29, Mpumalanga).

Intersexions was sometimes used as a platform to encourage others to attend HCT. This speaker shared how she encouraged her friends to test on Facebook, referencing the series:

Sometimes it happens, like on Facebook, I’ll say ‘so guys, let’s go and test for our HIV status’, and some say ‘oh no, I will never do that’. I even told them ‘if you’ve got a problem, let me go with you and do the testing’. Then like some say ‘oh no, I will never do that. What if I find out that I’m HIV’? I go like ‘oh, what if you are not HIV positive now, and then the next day you get HIV’ (peri-urban female, 25-29, KwaZulu-Natal).
Many participants expressed a heightened awareness about needing to know one’s partner’s status in addition to their own. The importance of both testing for HIV with one’s partner and using condoms when one’s partner’s HIV status is unknown was often expressed:

*I’ve learned from Intersexions that once you meet a person, before you do a lot of things, before sex is involved, we need to test because sometimes you can get carried away with fun whereas that person is sick (rural female, 30+, Free State).*

*It teaches that…. if you’re going to be with anyone, just use protection because you don’t know where or what that person has done before they were with you (urban female, 30+, Eastern Cape).*

*What it taught me about sex was that if you don’t want to use a condom, then you need to know one another’s statuses, and if you don’t want to know, then to always use a condom (peri-urban male, 18-24, Free State).*

One of the series’ objectives concerned the importance of knowing one’s partner well before commencing a sexual relationship. Respondents reported a heightened interest in communicating openly, discussing sexual histories, and testing for HIV with their partners as part of knowing one’s partner well. This participant explains how he understood the window period to provide a useful opportunity to get to know a partner before engaging in unprotected sex:

*I discussed it with my other friend…. we’d watch Intersexions because it would help open up our minds…. like the whole theme of secrecy, you need to be open and open your mind before you sleep with someone and know that you should test together with your partner…. but there’s that six month window period, where you need to go back. I liked that because I wish some people would get into a relationship and they would get tested and in that three months period of waiting, they would spend getting to know each other without having sex and test again after three months, then if they want to they will have protected sex and open your eyes that someone can be faithful to your face, but then turn around and cheat on you behind your back (urban male, 30+, Eastern Cape).*

Some participants seemed unclear about how often they should test for HIV. The interviewee above spoke about both a six-month and a three-month window period and a couple participants conveyed an idea that they should test for HIV every three months; they may have collapsed information about the window period and the need for follow-up testing with a sense that quarterly HCT may serve as an HIV preventions strategy itself. It is recommended to address this potential misunderstanding in an accompanying discussion guide or in the next series, if there is one.

Along with the docudrama, episode 24, in which Zolile and Veliswa test for HIV together stood out to many participants as one of the main episodes that conveyed a strong message about HCT. Both characters were admired for testing for HIV and particularly for testing together.

*Yes, that you should always check your status and get tested regularly…. The one with Zolile when he found out that he is HIV positive. The whole time he did not know his status and he was sleeping with a lot of women (peri-urban female, 18-24, Free State).*
This episode was also lauded for the way it modelled HIV disclosure. Zolile was often appreciated for asking Veliswa to test for HIV together, for the ease with which he disclosed his HIV positive status to her, and for telling Nomzamo that she should also get tested.

That stood out for me because obviously I had to do that…. I had to disclose to my partner and my mom…. I thought it was very easy for him [Zolile] whereby you’d usually struggle and think what would the person…. You’d even sit with a certain person and you’d be thinking when must I do it and you’d be postponing and postponing. And he just… got home and told his partner and he even decided to tell his ex-girlfriend and yes. I don’t know if he was brave or.. (urban female, 25-29, Gauteng).

Don’t be shy to go to the clinic and when you see that your status is HIV [positive], I think you can tell your partner that you are, then he can go to test and whatever…. Zolile just went to that girl, then he said ‘I am HIV [positive], so you must go to the clinic and test yourself, then you will see what your status is’ (peri-urban female, 30+, Western Cape).

A message about the importance of disclosing to one’s previous sexual partners as well as to current ones was thus taken from this storyline. Zolile was perceived as responsible for informing Nomzamo that she should test, thinking: ‘I have left some trouble at the back. So let me go back and tell people whom I have slept with about the way I am…. that they should also go and get tested to find out how they are…. and if they also have it, they should tell those that they have slept with to go and get tested’ (rural male, 18-24, Mpumalanga).

**Serodiscordant relationships**

Episode 24 was also appreciated for the way in which it modelled serodiscordant relationships. Veliswa’s reaction to learning that Zolile tested HIV positive was perceived as being unusual, in how well she seemed to accept him without even blinking and her openness to the possibility that they could still marry. She was well liked for the acceptance she demonstrated towards Zolile: ‘Zolile’s fiancée, that lady is strong. She was like I love you with your AIDS, HIV’ (urban female, 18-24, Western Cape). A female described how this storyline taught her a lesson that it is okay to be HIV positive: ‘Zolile’s girlfriend, he told her ‘I am positive’, and then the girlfriend thought ‘no, it’s fine, we can stay together while you are positive. There was a secret, but at the end, the truth comes out’ (peri-urban female, 30+, Western Cape).

The existence of serodiscordant relationships was said to be new knowledge for at least three participants in this research, who reported that before watching episode 24 they did not know it was possible for an HIV-positive and HIV-negative person to be in a sexual relationship (in which they have unprotected sex):

I didn’t think it was possible that if I was in a relationship with F5 and we do everything together one stays negative whilst the other is positive…. I didn’t know that such a thing was possible (rural female, 30+, Free State).
One of them referred to President Zuma as the only example he was aware of (of someone who had sex with someone who was HIV positive and apparently was not infected) while a fourth participant was confused by this concept and assumed Veliswa must have been in the window period. The confusion appears to be linked to a misguided sense that HIV is highly infectious per sex act. Episode 15 also addressed serodiscordancy, through the characters of Ata and Grace; no participants recalled this aspect of their story, however.

Serodiscordancy proved a challenging concept for some participants, particularly the above speaker from the Free State, who imagined how she and her boyfriend would cope if they were in Veliswa and Zolile’s position. She decided that unlike Veliswa, she would not be able to stay with an HIV-positive boyfriend (‘honestly speaking.... I would leave him’), nor would she want to ‘waste his time’ if it was the other way around. This led to some debate, with some agreeing ‘you will always be fearful that he will infect you’ and others expressing that ‘love conquers all’, one should not walk away from a marriage for this reason, and one should love ‘the person’, not their blood:

*I think that these people are negative towards HIV, I know it is not easy to accept someone with HIV but it’s not about what’s running in his blood but about you loving the person. If a person contracts HIV whilst being married and you have vowed to be with them in joy and in sorrow, will you divorce that person because they have AIDS? No they do not have AIDS but their blood has AIDS, remember that AIDS is in the blood, not in that person (rural females, 30+, Free State).*

It was evident that this episode stood out to quite a few viewers who were quick to identify with Veliswa and Zolile, imagining what they would do if they were in their shoes. While some participants held onto the belief that being HIV negative and having an HIV-positive partner was an unthinkable ‘burden’ (‘I must hide my status so he will stay with me’), it was clear that the episode stimulated meaningful reflection about this issue for others:

*M4: It will be hard for my girlfriend to tell me that she has AIDS if I only slept with her twice without a protection, I will ask her ‘why’ and the problem with ladies is that they keep quiet....

F2: Yes, let’s say I am now with my child’s father. He dumps me.... let’s say I have it and I meet another guy whom I love. I go and get tested alone and find out that it’s bad; he is going to leave me if I told him.... Telling him my status is not good, I must hide my status so that he will stay with me (rural male and female, 18-24, Mpumalanga).*

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*In most cases it becomes difficult if you find that the girl is the one who has AIDS, if the guy doesn’t have it. It’s going to be difficult to carry on like that, and in most cases what’s happening is that as guys, we would leave that girl but it’s rare that a girl might leave a guy (rural male, 18-24, Mpumalanga).*
No one deserves to have AIDS, because AIDS, in some way, limits your life, because if I’m HIV positive, if you’re coming and proposing a relationship, I need to tell you my status and if you are not comfortable with it, you go away, and another guy comes... and I tell him my status... and you see, that’s a burden on its own (urban female, 30+, Mpumalanga).

I think Intersexions left us with a question as we are talking about relationships: Is it right to marry a person with a positive status whereas you are negative? ....Is a marriage about status or love? It left me with those questions (rural male, 25-29, KwaZulu-Natal).

The episode may have contributed something towards the reduction of the social stigma around partner disclosure. One HIV-positive participant thought that Zolile and Veliswa’s example communicated that ‘they can still be a normal couple’, despite Zolile’s status. This was something she had not considered was possible before viewing this episode:

What I liked about the series was the disclosing part. I feel like now people don’t see HIV as such a bad disease especially in relationships.... I didn’t know that but now there are couples where the one is HIV positive and the other one is... I didn’t know there were couples like that and apparently there is and people are now just... ‘no it’s fine if you do test positive’.... they can still be a normal couple.... I got confirmation. I thought it was a myth.... I didn’t think people do that. I didn’t think somebody would accept you.... After I was diagnosed, I thought ‘I must get somebody who is also HIV positive’ (urban female, 25-29, Gauteng).

**Attitude change**

By testing for HIV and disclosing to both Veliswa and Nomzamo, Zolile was perceived as being a role model for young men in particular. Many participants felt that Intersexions portrayed a relevant issue in modelling a male character test and confirmed in their communities, since women are usually more likely to test—and be blamed—for HIV:

The problem is that guys don’t believe in HIV.... they would just say that ‘because you have tested it means you have it’ .... If you get tested and tell him that you have tested and you are positive, he will tell you that ‘it means that you are cheating and you are the one who got it’ (rural male, 18-24, Mpumalanga).

I know my friends, if I would ever talk to them about HIV they would laugh at me.... If we are all guys sitting and then we talk about HIV, no one will say anything. They will just tell you that, ‘that’s nonsense’ (rural male, 18-24, Mpumalanga).

Zolile was broadly appreciated for disclosing his HIV positive status to his previous and current partners; this was perceived to ‘show responsibility’:

I liked how he showed responsibility by finding out he has HIV and that he thought of the people he slept with, that he needs to make them aware of what’s happening, just in case they don’t know, so that they too can go and test. He’s a responsible guy, I really like that (urban male, 30+, Eastern Cape).
Another rural male thought it was a ‘good thing’ that Zolile disclosed, but admitted that he had doubts as to whether he would do the same:

> I think there is this style that we guys refuse to get tested for HIV. It is a good thing that a guy should go get tested and then come back to tell the girl because with me, it would be hard to tell my girlfriend that I have AIDS. It would still be difficult to tell other girls that I have AIDS because I might I not get another girlfriend (rural male, 18-24, Mpumalanga).

He suggested that attitudes may be changing, however, because clinics are full as ‘people do go and get tested…. Zolile taught us, he went to test and…. didn’t keep it as a secret. He went and told the girlfriend to go and get tested’. Ultimately, he took a personal message from Zolile’s example: ‘that is what I have learned, that HIV is not something that can scare you…. It also made me think that if I find out that I have a certain disease, I shouldn’t be afraid to come and tell my girlfriend’ (rural male, 18-24, Mpumalanga).

There was considerable debate in one focus group, when one woman shared her concern about HIV and ‘what if’ her partner isn’t faithful (‘Intersexions came at a time where my mind was really afraid of this disease, I honestly am afraid of it…. I myself am honest and test regularly but if this other person….’). A younger participant advised that she should have openness in her relationship and test with her partner (‘if you want your partner to be faithful you must have an open relationship and speak about everything’). This view was critiqued as being naïve (‘you are still young, my girl’), with the older woman finding the idea that one can simply communicate with and subsequently trust one’s partner laughable (‘when they are cheating they will never speak of it even if you can have an open relationship’). The difficulty of discussing testing for HIV as a couple was also raised:

> F3: I was talking on the point that you have to encourage your partner to get tested and not only go by yourself.

> F1: There is no way you can go and get tested alone when you are staying with a man in the house and speak of it over and over and over again, you’d much rather go by yourself…. I can hear that F3 has an ideal situation in mind but she is still very young, she is not there yet. F3, we are in open relationships but you cannot trust a person (rural females, 18-24 and 30+, Free State).

A number of participants critically reflected that while knowing one’s HIV status is useful, it will not prevent HIV. This came through both as a sense of the need to know one’s partner’s status and with the realisation that condoms should still be used after testing. One person critically expressed that even though one may feel safe after testing together does not mean that one is safe; after all, ‘people can still go out and do things’ (urban male, 18-24, Gauteng). Another agreed, saying how one should not ‘just take’ what one’s partner says about their HIV status or their sexual history to be true and rather seek ‘hard-core evidence’ (by testing together):

> You don’t know your partner’s sexual history, protection is key. Just because he’s saying he slept with two girls, don’t believe it…. If you don’t test, like if there’s no transparency or proof that this
person is [HIV] negative or whatever, don’t just take what they say. It motivates you guys to go test together, or just test yourself, type of thing. Just have evidence, like hard-core evidence that this person is not infected, because it’s not written on your face this thing (urban female, 18-24, Gauteng).

**Behaviour change**

The series aimed to achieve an increase in the uptake of HIV counselling and testing. This evaluation found that HCT was a commonly self-reported behaviour that was directly linked with exposure to *Intersexions*. Participants often shared their personal stories, providing some detail about the context and or circumstances that they were in, when they made the decision to go for HIV testing. This behaviour change was reported both as something they ‘may’ do (following an attitude change in support of HCT), something they say they ‘will’ do (expressing greater intention) and in fact ‘have’ done.

Some participants explained that they are thinking more seriously about testing for HIV after watching *Intersexions*. For example, ‘I’ve learnt to get tested each and every three months. [Did you go?] I’m thinking about it’ (peri-urban female, 25-29, Gauteng). This young man tells how *Intersexions* influenced him to realise ‘I could be at risk’ and consider testing, while before he ‘never saw the need’:

*Intersexions has a lot of influence…. A couple of years back my father asked me to take an HIV test and I said ‘no’ because I never saw the need to get tested for HIV, I saw myself as healthy and fit. But watching shows like *Intersexions* really makes you think that ‘I could also be at risk’. Yes, I’m safe, I’ve never touched anyone’s blood but even then *Intersexions* makes you think maybe you should get tested, maybe I should make sure (peri-urban male, 18-24, Eastern Cape).*

Others expressed greater intention to test for HIV. This speaker shared how her engagement with the series led her to think critically about a previous relationship in which she never questioned what her partner told her about his HIV status or his faithfulness, only to later learn that ‘I was actually the side chick’. She said that *Intersexions* taught her to question when a man says ‘trust me, I’m clean’ and to rather test together than take him at his word. She also revealed her plans to test for HIV again:

*I was in a relationship with a guy from KZN and I think I was just smitten…. I took everything he said as the truth, like, I’d never question anything that he’d say, even in terms of our sexual whatnot, our relationship type of thing…. I remember there was a time when we spoke about it and he was like ‘I’m clean’ and I believed him, I actually believed him, until I found out that…. he actually has a girlfriend back home and I was actually the side chick, and I thought I was the only girlfriend. That’s the only time I actually went to test…. 
So, such things like Intersexions and whatnot, when you see that a person may say ‘I’m faithful, I love you, I come back from work, I buy you flowers, whatnot’, don’t really believe that. Like question that. Your trust is shaken, type of thing.... The first time I tested.... I think the first series was done and this one wasn’t on yet, and now I also had this thing of saying ‘just because this man is saying trust me, I’m clean or whatever’, go test. It’s like a repetition of those words in your head until you really want to go and test. It motivates your actions to just go and test. [You haven’t been to test yet?] I almost did [chuckles]. But yes, I am going to go though. It made me really want to do it. It’s just that I haven’t had time’ (urban female, 18-24, Gauteng).

There were some accounts of friends or family members who were influenced by Intersexions and decided to test for HIV. A peri-urban male shared how his peers took away a lesson from the theme, ‘our lives intersect in mysterious ways’, and some of them found out their HIV status as a result. He also recalled a friend who posted on Facebook about testing for HIV after watching the docudrama:

> On Facebook I have a friend who after watching the last episode wrote on his status: -thanks God I watched the last episode, now I know my status. Because after watching the last episode he went and checked his (HIV) status (rural male, 25-29, KwaZulu-Natal).

Another shared how Intersexions provided ‘a big wake up call for my brother’, who apparently tests frequently now:

> F5: I think Intersexions was a big wake up call for my brother. My brother was like Zolile. Like literally. Every single thing that Zolile did, I used to call my brother, I’m like are you watching? Are you going to admit this and this and that? He’s like yah. So after this whole incident, my brother gets an AIDS test every six weeks.

Facilitator: You think he did that as a result of the show?

> F5: Yes, I think so, or because of this ex-girlfriend or something. But I like to believe the show helped (urban female, 18-24, Western Cape).

Intersexions was also seen to reinforce existing positive attitudes about testing, such as for this participant who tests regularly with a friend:

> I talk with my friend.... whenever we go for testing, we go together.... To me it’s so nice, because you go there after every three months. Whenever I see a place that’s a testing place, I just go. It feels nice to me. I enjoy it actually. So, my friend as well, I see she is also starting to enjoy it (peri-urban female, 25-29, KwaZulu-Natal).

Many participants reported how their engagement with series two provided them with key realisations about their personal HIV risk and to reflect critically on their uncertainty about their own and their partner’s HIV status; this led at least ten participants to take action to find out their HIV status by testing. This participant shared how she ‘didn’t care’ about testing for HIV until her identification with Two-Step helped her realise how ‘stupid’ it was that they had unprotected sex without knowing whether they had other partners; this uncertainty led her to test for HIV for the first time in ‘two or three years’:

> I went and get tested after.... a very long time because I was a blood donor then I stopped, then stopped testing. Then I just didn’t care..... I stopped and then after watching it [Intersexions], then I wanted to know my status.... Two-Step stuck on my mind.... He would sleep with anyone, anywhere,
anyhow. Whether he knows them or not, he didn’t care…. I know where I have been, but I do not know where my partner’s been…. He might have been with other women…. Early in January when we started dating, we were using protection frequently. But once we get used to each other, like May towards June we, like, stopped using it. And it’s stupid because I don’t know where he’s been, if I’m his only girlfriend. He doesn’t know if… he’s, like, the only one sleeping with me.

So watching Intersexions got me thinking wondering and stuff. I imagined my boyfriend as Two-Step. He’s not the party animal… But then I know him when he’s with me but what about when he’s not with me? So I got to think of him as Two-Step (urban female, 30+, Mpumalanga).

It is interesting how imagining ‘my boyfriend as Two-Step’ prompted her to think critically about her personal risk (‘I do not know where my partner’s been’), to test, and to appreciate her own agency in deciding whether to use ‘protection’ in the future. Since ending relations with his ‘32 girlfriends’, the participant who was described in the previous section on MCP, also tested for HIV: ‘I’ve started to test until I know my status; I want to be an honest person with the partner that I date’ (peri-urban male, 25-29, Gauteng).

The docudrama was particularly instrumental in motivating some to test for HIV. This male recalled how watching episode 26 together motivated him and many of his friends to test for HIV:

My friends and I, after watching the last episode in particular, we all watched it together. We all used to be reckless, we used to live reckless lifestyles, it’s actually a miracle that most of us tested and came out HIV negative. There are things that haven’t changed in our behaviour, like we still date lots of girls at the same time, I won’t lie most of us still do…. But we all get tested regularly now (peri-urban male, 18-24, Eastern Cape).

One wonders from this excerpt about their condom use (seeing as they ‘they still date lots of girls at the same time’) and if they have a misguided sense that merely testing for HIV will prevent them from acquiring the virus.

Episode 24 influenced viewers to discuss, and in some case act on, the importance of testing for HIV as a couple. A male interviewee said that he had never really thought about testing with someone else before and would now ‘like to try it sometime’. After viewing the episode, he spoke to his partner and they agreed they will: ‘we haven’t had the chance to go there, because we are always busy, either I’m away, but we will schedule some time and then go’ (urban male, 18-24, Western Cape). The realisation that one can never fully trust another to be sexually faithful provided motivation for this woman to regularly test for HIV with her partner. She described how she learned from Intersexions how easily HIV can ‘run’ and that even if she becomes HIV positive, there are advantages to finding out early in order to seek treatment:

F4: I’ve learned that no matter how hard you try when the two of you are in love there will always be one that cannot be trusted. I’ve learned…. that I can be faithful but my partner isn’t, so we must try to always get tested and if we find that we are already sick, it is at an early stage…. Normally we do it once or twice in a year…. It was not one specific episode but Intersexions all in all that made me see that one needs to get tested regularly.
Facilitator: So after watching it you went to go get tested?

F4: Yes we went to get tested and checked out.... I prefer to go with my partner and not by myself.... because I saw that this AIDS can really run, one cannot just be trusting and if it is there, to detect it on time during the early stages, take pills and keep it at bay (rural female, 30+, Free State).

Zolile was brave to express his feelings and to tell his heart out, that he is in love with this one, not the other one.... I was brave one day, I went for an HIV test with my partner, I wanted to know my status, either I’m [HIV] positive or I’m negative. So I was brave to take him to a health facility, that we need to understand and know our status.... We tested together (peri-urban female, 25-29, Mpumalanga).

In the next excerpt, a peri-urban female describes how much she identified with what was portrayed in Intersexions. Previously she shared how she and her partner usually discussed the episodes together (‘once you start watching Intersexions, it’s easier to get to the point that you really want to talk’) which led her to discuss the importance of honesty with her partner. After episode 24 aired, they followed Veliswa and Zolile’s example and tested together:

F1: When I watched Intersexions, I said that I learnt things. I asked my partner ‘if we can go and test together, so we can try to be honest every time. I need to know everything about you, and you need to know everything about me. Once there is a loss of interest in a relationship, it’s better to tell me earlier before you do lots of things’.

Facilitator: You said that to him?

F1: Yes, because of the show. I even asked him to go and test with me. We went and tested together. It’s because of the show.... Zolile and that girl, that episode made me realise ‘no, it’s good to go and test’ (peri-urban female, 25-29, Western Cape).

Intersexions can be credited with helping this couple communicate more meaningfully about their relationship in general while episode 24 was clearly instrumental in their deciding to take this action. Another participant similarly described how his engagement with the series prompted him and his primary partner to test together. The next excerpt demonstrates a number of complex intersections as a result of Intersexions: he describes how Intersexions (and the Scrutinize campaign before it) led him to reflect on his past behaviour and consider the risks within his own sexual network (‘thinking now beyond your partner, now going behind the scene and how you may expose them, and how they expose you’) and helped him create a ‘comfortable space’ to discuss their relationship, including their sexual histories. Through this open communication they agreed to test for HIV together for the first time and re-introduced condoms into their relationship. He also reported reducing the number of other partners he has sex with.

Mine was going for testing with my partner, which was the first time. I usually do not approve of it [laughter], because if one is [HIV] negative, it’s a different story. But in this case, we provided enough comfortable space for each other, because on campus we usually have free testing. I think about a month ago we got free testing. So, we went. I was scared [chuckles], then lucky me.
After looking at the whole web, I started thinking about the exes, we can’t claim that we were forever using protection and now you are in this relationship and you talk about trust, and you don’t always use protection again. So after that, we went and tested and then there was an increase of using protection. That was the change which most affected me.... We started talking about our histories. We were worried (urban male, 18-24, Gauteng).

It is a powerful example of how identification with a television drama series can lead viewers to reflect on how the dramatic content relates to their context and even to their personal lives. In this example, we see how the storylines prompted this focus group participant to reflect on his past sexual behaviour and his personal sexual network, leading to the key realisations that he may be exposing his partner to HIV or vice versa and that trust comes with open communication, and ultimately to the action of testing with his main partner, using condoms more frequently and reducing his side partners.

**CONDOM PROMOTION**

*Lessons*

One of the educational objectives of *Intersexions* was to emphasise a number of HIV risk reduction practices, including correct and consistent condom use. The regular viewers of *Intersexions* that were interviewed took away a strong message that condoms prevent HIV transmission. While hardly a new concept, participants consistently described a heightened awareness that they ‘should’ use condoms more often. This was often expressed in conjunction with two main lessons they perceived from the series, 1) that HIV spreads ‘easily’ through sexual networks and 2) that one can never really be sure whether or not one’s partner may have had sex with another, so it is better to use condoms to rather be ‘safe than sorry’. There was often talk of ‘being responsible’, which was strongly associated with using condoms during intercourse. When asked what message the series was trying to put across to viewers, one woman said simply that ‘you can protect yourself by using condoms whenever you have sex’ (urban female, 30+, Eastern Cape).

Others understood that one should use condoms all the time, given what they had come to understand about how sexual networks facilitate the spread of HIV. Using condoms and being truthful were identified as a useful strategy to manage the risk from having concurrent sexual partnerships:

*People should always be protected all the time.... And they should be honest.... because when you sleep with someone you don’t know who else they are sleeping and who that other person sleeps with (peri-urban female, 18-24, Free State).*

The next excerpt adds that condoms should be used when one does not know their partner’s HIV status:
I’ve learned that, whoever you have sex with, whether it’s for the first time or the third time, if you’re not married to that person and you don’t know that person’s status, use a condom. I also learned that talking helps (urban female, 30+, Mpumalanga).

Using condoms to protect oneself from HIV was also understood as being a way to demonstrate both love for oneself and one’s partner (‘I’ve learned that sometimes we use protection because you love your partner. Not because you suspect them or what, but because you love them’). Two female participants gleaned a message that viewers should ‘respect ourselves enough to protect ourselves’ and ‘trust yourself enough to protect yourself and your partner’. ‘Sleeping around’, in contrast, was framed as an indication that one does not respect oneself:

* I think Intersexions is teaching us to love ourselves and respect ourselves enough to protect ourselves. So, if I don’t love myself or I don’t respect my body, I will sleep around, yes. I will sleep around without using a condom, I wouldn’t protect myself. So, I wouldn’t care what’s happening after, what are the consequences, I wouldn’t mind doing anything. So, it’s teaching ourselves to love ourselves enough and protect ourselves (peri-urban female, 25-29, Gauteng).

A number of characters were identified as delivering messages about condom promotion, either through their careful use of condoms or by portraying the consequences of having sex without them. Musa and his wives, Sdumo, Godwin and Thandeka, Lerato and Thapelo, and Rosie and her friends were most often connected to condom promotion. For example, episode twelve closed when one of Musa’s (the polygamist) wives gave the other wife condoms ‘to protect herself’ as she left the homestead:

* When [Musa’s] second wife left and she gave the other one condom, she was teaching the first wife that she ‘should protect herself and use condoms’. Same goes with the gospel singer; it also went like that and also with Thandeka’s husband who slept with the maid… without a condom and that is why the HIV was transmitted…. They are saying ‘whoever does not use it and if you sleep with someone with the infection, then you will get it’ (rural female, 18-24, Mpumalanga).

Rosie’s character was also associated with condom promotion, particularly because of the often discussed scene from episode five, in which her friends gave her a condom while they were partying. While a little debate emerged (largely from participants who thought it improper for young women to carry condoms), most seemed to appreciate the scenario. Rosie’s friends were admired for being prepared, for ‘protecting themselves’ against HIV, and, notably, for ‘looking out for each other’:

* I identified with the episode where Rosie went to visit her cousin and she ended up going out with her cousin and her friends…. I loved the fact that her one friend stopped her and gave her condoms, as drunk as they all were, they still looked out for each other (rural female, 30+, Eastern Cape).

I liked that group. Although they are drinking, but they always keep it safe, that’s what I liked about them, like all the time how they go around with condoms in their purses…. they are safe (urban male, 18-24, Western Cape).
Several appreciated how they would normally expect such characters that party and ‘like boys too much’ to be the ones most at risk for HIV, but enjoyed the paradox that in fact, they were among the series’ more responsible characters by taking action to prevent HIV, even while drinking alcohol. They were seen to convey a powerful message to ‘expect the unexpected’:

We usually think that it is only the girls we refer to as whores that like boys too much have HIV, but they usually protect themselves as they always carry condoms. HIV usually gets those people that say they are well behaved and get caught off-guard without a condom and get infected (rural male, 25-29, KwaZulu-Natal).

I know there is stigma that would say, ‘you are going after sex, you are always expecting it’. But at the end of the day ‘always expect the unexpected, you may not know what may happen, someone might just rape you’. So it is safer when you carry it (rural female, 25-29, KwaZulu-Natal).

One participant liked when Rosie’s friend gave her a condom, taking a message ‘if you have no protection, no action’:

I liked those girls because they said something that stuck in my mind, they said ‘If you have no protection, no action’ and I liked the fact that even though they had a minor part in Intersexions, they were just party girls, but even they knew the importance of using a condom because they even gave their drunk cousin who wanted to sleep with Two-Step condoms and I liked that (peri-urban male, 18-24, Eastern Cape).

One person also perceived a message that Rosie could have avoided becoming pregnant and having a miscarriage if she and Prof. Zakes had used condoms when they had sex: ‘if she used a condom, maybe she wouldn’t get pregnant and get a miscarriage afterwards. That’s what it taught me from Intersexions’ (peri-urban male, 25-29, Mpumalanga).

Episode thirteen appeared to have a big impact on viewers who were surprised when Lerato gave her gospel singer husband, Thapelo, condoms after discovering his infidelity. Both men and women identified with her character and appreciated her for being ‘a strong woman’ who demonstrated that there are choices available if one suspects that their partner is unfaithful. Several focus groups debated whether she was condoning her husband’s cheating or protecting herself. Her behaviour was certainly regarded as atypical, with most understanding that it was a good strategy to protect both of their health, because after all, ‘we all know that men are like dogs’:

I think she’s a very strong woman. She is very strong, because no woman in this day and age would.... condone what her husband has done to her, because she knows he’s cheated. The thing that grabbed my heart, is when she was in the bathroom and he was doing his backup singer in the next
bathroom. That hurt me. I was like ‘what would I do?’ I’d go home and burn all his clothes (urban female, 18-24, Western Cape).

M4: They should have sat down to discuss this issue to get to the root cause of the problem and the solution to their problems. She was actually encouraging him to have more sex out there, but safe sex. If he was cheating before he is still going to cheat and get his family into problems.

M2: I disagree with M4. That woman did her job well. I applaud her for that because you find that in most cases, women would not do that. Any man would disapprove if his wife gives him condoms. What they do not realise that she might be doing that to protect him and herself. We all know that men are like dogs. She was just ensuring that he came back safe. She did her job very well. I encourage her behaviour. I wish we had more women like her (urban males, 25-29, Free State).

A male participant recalled a friend who said that if his girlfriend gave him condoms, he would take it as a sign that ‘she doesn’t trust me’:

*I remember I was watching it with my friend and he was like ‘oh, this girl, she’s promoting that the guy just goes and sleeps around. If my girl does this, I’m definitely going to dump her’. I’m quoting his words.... What he was thinking was ‘I know I have to use a condom, but immediately my girlfriend says I should use a condom, it’s like she doesn’t trust me’ (urban male, 18-24, Western Cape).

One participant criticised Intersexions for not portraying characters that used condoms enough, however. This was linked to a desire to want to trace the path of HIV in series two:

*I feel like they didn’t depict condoms enough. We’d see condoms maybe on a counter, then next thing we see the characters engaging in sex, [but] we never see who insisted on using a condom or not. I wish we could see who wanted to use the condom, so that later on if the character were to find out they had HIV, they would know who to look back at. Condoms were not prominent enough (peri-urban male, 18-24, Eastern Cape).

**Attitude change**

Quite a few respondents described how their engagement with the series led to some kind of shift in their attitude regarding condom use. This was often phrased with new urgency that having watched Intersexions, ‘I should’ always use condoms. The speaker in this excerpt identified with the manner in which Zolile expressed his hurt over Nomzamo’s rejection by sleeping around; as a result, he learned that ‘he must always, always remember the condom’, especially because he has multiple partners:

*M6: Another part that influenced me is Zolile, when he was HIV positive, because sometimes when you are hurt, you end up doing stuff and sleeping around. So that really taught me like I must not really lose the plot. Even if I do sleep around, I must always, always remember the condom.

F8: If you sleep around, you are taking a part.

*M6: Yes, I do get that, but right now I am sleeping around, so the best way is to protect myself (peri-urban male and female, 25-29, Gauteng).

The storyline in which Rosie’s cousin and friends encouraged her to use a condom was appreciated for strengthening an attitude that women should see themselves as personally responsible for protecting
themselves from HIV, rather than relying on their partners to be prepared. Members of an HIV support group debated the acceptability of whether it is okay for women to carry condoms. While a male took it as a sign ‘that she is a prostitute or always ready for action’, several women disagreed, saying that ‘carrying condoms is about me taking responsibility for my own health’ and that is particularly important as part of positive health, dignity and prevention:

F10: I always carry condoms in my bag! (group laughter)

M7: It is still unusual... I take that she is a prostitute, or always ready for action. It is a guy thing to carry condoms. Guyx initiate sex, not the other way round. Girls who do this I see as sluts... and am weak.

F10: That is a stereotype!

M: I guess that with all this equality and it being the 21st century, girls have the freedom to do what we do.... 'If I cheat on her; she has a right to cheat on me too’. It’s a 50/50 thing. This is what happens. Ladies always want to be equal to us.

F10: For me, carrying condoms is about me taking responsibility for my own health.

F5: I also support the fact that women carry condoms in their bags. If we are HIV positive and I go to my boyfriend and he does not have condoms, I can then take them out and we use them. If you are an HIV positive couple, and your boyfriend runs out of condoms, what happens, then? I have to have condoms from the clinic (peri-urban females and males, Eastern Cape).

The female characters were thus seen as role models, appreciated for helping to shift cultural norms in a direction in which it is more socially acceptable for women to carry condoms. A female student identified with them and described how ‘things are changing’; while ‘we like to have fun.... You need to protect yourself before others protect you’:

F1: I can’t judge them. They are young and fresh, they are studying, they are doing things like all young girls are doing outside. They are drinking, which means they are having fun. But one thing I like about them, every time when they go outside, they carry their condoms in their bags, which means they want to be safe. Even now in the last episode, when Mr. V was describing those episodes, he said ‘I liked the girls, because everywhere they go, they carry those condoms, which is not good for me’. I like those girls.

Facilitator: Among your friends, is it common for girls to carry condoms, to be prepared?

F1: I don’t see any difficulties. You need to protect yourself more than anything. Everywhere you go. You know yourself.... Things are changing. We are young girls, we like to have fun 24/7, but you need to protect yourself before others protect you (peri-urban female, 25-29, Western Cape).

Several participants described how watching Intersexions increased their sense of personal risk. This speaker shared how she learned how ‘easily’ HIV can be transmitted by watching the programme; this new knowledge was accompanied with a sense of what can be done to manage that threat: ‘use a condom, go test as soon as possible’:

When I watched Intersexions, I was not like seriously watching it. By the time I continued to watch it, I became scared because I wasn’t aware. I know that HIV, how it’s transmitted, but I didn’t know it
can be transmitted very easily. It opened my eyes, now I have to be more careful now. It’s very scary
(peri-urban female, 30+, Western Cape).

The series’ realistic depiction of ‘what happens’ in life prompted many viewers to critically reflect on
their own sexual behaviour. This speaker tells how watching Intersexions made her look at her own life
and realise that she has a say in whether she will start using protection or carry on as is: ‘after watching
the story, my attention was drawn towards my life and the things that are happening. And I got to think
and then I got to make a choice whether I use protection or just go on and live as is’ (urban female, 30+, Mpumalanga). Many participants described how Intersexions served to remind them about the
importance of using condoms as protection against HIV, reinforcing what they had learned elsewhere:

I take care of myself, firstly. I know I must use condoms. Every time I go, I need to be protected.
Every time I watch Intersexions, I learn more about how things are going around us as youth…. and
not being honest, that’s not cool. So all of those things I keep bearing in my mind that it’s not good,
‘I must do this and do this’. I learn more every time when I watch Intersexions (urban female, 18-24,
Western Cape).

The next speaker expressed a renewed sense that she one should be stricter about using condoms, in not
allowing even a momentary unprotected ‘taste’, knowing it makes condom use less likely:

There’s this thing that guys do that I’ve put a stop to with my boyfriend. Like the thing that okay, I’m
going to use a condom for now, when we start, let me just taste first, let me just feel the warmth, and
then I’ll be like no, he’s like no, but nothing is coming out at this moment. So that’s also very
dangerous, and people don’t understand that. It’s a trick that guys use. You know what, I just want to
feel it, and obviously once you also feel you’re going to be like oh, oh, oh. You’re not going to know
if I must pull closer or if I must push. So, don’t even start saying let me taste or whatever (peri-urban
female, 25-29, Gauteng).

Another participant shared how the show deepened her commitment to ‘use a condom whenever I have
sex and to be faithful’. She said that although she was already using protection, the series reinforced this
attitude, clarifying that she ‘will die’ if she does not:

Yes, it did have an influence, which was good. At the end of the day, it taught me that whatever I do,
I’m going to have to think it through first and if I’m going to have sex, I’m going to have to use
protection. I’m going to have to be honest in everything I do, but not always, I’m not going to be
perfect. I believe that it taught me to use a condom whenever I have sex and to be faithful to my
partner all the time…. I was using protection before…. It made it clearer, if I’m not using condoms, I
will die (peri-urban female, 25-29, Gauteng).

Given how difficult it can be to know whether one’s partner is ‘telling lies’, participants understood that it
is important to use condoms to protect oneself. A female shared how because her partner ‘doesn’t like to
talk’ and ‘doesn’t want to hear about HIV and AIDS’,
she ‘protects herself’ by using condoms when they have sex:

M7: My question is you are honest but your partner isn’t. How are you going to know that your partner is telling lies?

M1: That’s why you have to be more careful and be responsible.

M7: Yes, you’ve got to be more careful and responsible, but what if your partner, how are you going to know that your partner is telling lies?

F3: My relationship is like that, I’m honest. My partner is like a person who doesn’t like to talk, so he is like that so I just keep on using condoms because by the way he is, he doesn’t like to talk about HIV. I am taking him like an old person who doesn’t want to hear about HIV and AIDS, so I think I must protect myself, so I just leave him like that (peri-urban males and female, 30+, Western Cape).

Lerato’s character was strongly regarded as a role model, for the strong manner in which she protected herself by packing condoms in Thapelo’s luggage rather than being silent. In this excerpt, participants described how ‘that’s a woman’, with one saying that she wishes she could be like her and would gladly follow her example if she thought her partner was cheating, a sentiment which was echoed in another focus group as well:

F5: The gospel singer, Thapelo, the wife of Thapelo, Lerato. I wish I could be someone like her one day.…. 

M8: The woman, when that guy goes to that other place to sing, she put some condoms in his bag, to be safe. That’s a woman. [She was saying] be safe, because she knows that ‘hayi khona, he is a troublemaker’.

F5: I would also buy condoms, I don’t have a problem.

Facilitator: But would you pack them for your husband?

F5: Yes, I don’t have a problem, go, use condoms. I know when men are cheating…. I will also do it, with pleasure, as long as he will use them.

M8: Hey, if he’s got a conscience he won’t use those condoms. He won’t sleep with another girl (peri-urban female and male, 25-29, Mpumalanga).

I would also do that for myself, to protect myself, because this is myself, my body, so I will protect myself. I would do the same if I was in that situation (peri-urban female, 30+, Western Cape).

The perceived challenge in diligently translating the intention to always use condoms into practice was noted. Recalling the docudrama, when ‘HIV’ spoke about when ‘emotions and hormones’ take over, a participant expressed that it is all the more important that someone in the relationship insist that condoms are used:

It’s all good and well, like we know these things, we know what to do and whatnot, but implicating it, I’m sitting here and I’m listening to how much we’re saying about condomising, about how ‘good it all should be’, but when it comes to like implementing, because the HIV virus said…. Like there’s a moment where our emotions or our hormones take over…. I feel like there should be at least, in a relationship one should be stronger to say ‘condom, condom, condom’, because you know there will
always be that one person that does not give much attention to such things (urban female, 18-24, Gauteng).

**Behaviour change**

An increase in correct and consistent condom use was one of the long-term behavioural outcomes that were envisioned to arise as a result of viewing *Intersexions*. While other methodologies may be able to better establish the extent to which that outcome has been achieved, this research found quite a few participants self-reporting an increase in personal condom use as a result of their engagement with *Intersexions*. For some, this behaviour change existed at the level of conceptualisation (action they might or will take), but most described enacting this change by either introducing the practice of using condoms in existing relationships or using them more consistently overall. In the first example, the speaker shares how episode thirteen reinforced her resolve to use condoms. Having a partner ‘I don’t trust’, she identified with Lerato’s character and conceptualised the possibility of following her example by giving her boyfriend condoms because ‘he must also have protection with him so that he doesn’t die’:

*I’m currently in the situation where I don’t trust my boyfriend and I’m using condoms. I insist, no matter what, because once you suspect that your partner is cheating, that is your way that you actually start protecting yourself until you test three times, which takes like a year, because you test after every three months, and then you see that he is faithful, then only can you stop using condoms with him, and that’s after you’ve tested a lot of times, and now you trust the person.*

*I used to use condoms all the time, but after I saw the gospel singer and the woman putting condoms into his bag, I think I’m going to start giving my boyfriend condoms as well. While I use protection with him, he must also have protection with him so that he doesn’t die. That episode showed me that you can have condoms out there. Like M6 said, I will carry condoms. If he thinks that I’m carrying condoms because I’m sleeping around, it’s his problem. But I carry condoms so that we can both use them, I carry condoms so that if there are leftovers, he can take them to wherever he is going to go, if he is going to go. So that just taught us that ‘even if he’s your husband, you can still protect yourself against HIV’.... I condomise with my man, and I carry condoms, and I learnt that from the episode where the gospel singer actually had condoms in his bag (peri-urban female, 25-29, Gauteng).*  

She identifies the importance of testing for HIV, the window period, and the idea that only after ‘you’ve tested a lot of times’ can ‘you trust the person’. She also expresses determination to carry condoms herself, showing disregard for the social norm that discourages women from doing so: ‘if he thinks... I’m sleeping around, it’s his problem’. A male interviewee reported that episode nine prompted a greater sense of the risk that comes from having multiple partners and the need to use condoms. He admitted that ‘to be honest, I wasn’t using it before’ but after deeply identifying (‘It hurt me very badly’) with
how Gadima, Cedric and Thandeka were negatively affected by Godwin’s not using condoms with his additional partners, he has come to understand that ‘when I am having sex, I must always use protection’:

*Godwin did not use a condom and that’s not good because when you have sex you must always use a condom.... It hurt me very badly, I felt a lot of pain.... She was afraid to tell Cedric.... the truth, the way that I see it. When you have many partners you will hurt many people because you are not trustworthy and on top of everything you still refuse to use condoms. You will hurt many people that you love (peri-urban male, 18-24, Free State).*

Series two was described by one participant as reinforcing a message from series one, that using condoms (especially outside a primary relationship) is the best way to prevent HIV transmission. He shares how even though he had heard about ‘AIDS everywhere’, it was watching *Intersexions* which motivated him to test for HIV and that he has been using condoms ever since ‘to save my life and to save others’:

*M1: You see, the other thing that I’ve learnt is to practice safe sex, especially when you are outside, you are not at home, because there are also temptations out there, but safe sex is the only solution to curb the spread of HIV.*

*Facilitator: And for you safe sex is using a condom?*

*M1: Yes, using protection like a condom.*

*Facilitator: Did you use that before, if I can ask, or is that something new for you?*

*M1: Can I be honest with you? Even before we learnt about AIDS, I personally never used a condom until I realised that ‘it’s serious, people are dying of AIDS’. Then I said to myself ‘it’s about time I went for a test’, then from there I started to use a condom.... You know, people have been talking about AIDS everywhere, but I think now it has come to the point that we need not to listen, we need to act.... We heard people talking about it, but the moment its right next to you, then you realise that this thing is there. So, I would say using protection during sex, it started during the first series, I started, that’s where I started opening my eyes, that in order to save my life and to save others, it’s better to use safe sex. I will say especially the previous series had an influence on me (urban male, 30+, Mpumalanga).*

Episode five’s portrayal of how consuming alcohol is often linked with unprotected sex changed the attitude of a male participant who described himself as ‘one of those club addicts’. In this excerpt he shared how the episode depicted something that was familiar to him and how when he and his friends go clubbing, they sometimes have unprotected sex as a result of being ‘under the influence’. Identifying with this scene helped him to finally ‘get the message’ to ‘be responsible’ by using condoms:

*For me, it really influenced me a lot, especially when Rosie went out partying, because I party a lot and I see what happens.... Let me just say I’m just one of those club addicts, I just go out a lot. So you see stuff that happens, you see with your friends, especially when you are intoxicated and under the influence. Sometimes there is no protection and you will have sex without protection.... But right now I think it has influenced me. I get the message now. Like now I know. The message is just out there.... About being responsible at the end of the day.... being responsible means protecting yourself.*
and knowing…. the consequences of not actually using protection (peri-urban male, 25-29, Gauteng).

He described sufficient efficacy to extend this new realisation into action, sharing how he ‘always carries condoms’ now, after learning from ‘those stories’ that ‘anything can happen’:

Like whenever I go out, I just have condoms, I always carry condoms, so I don’t care whether somebody would say I’m going to get laid or not. But it’s all about protecting myself at the end of the day, because you just see from those stories that you watch, anything can happen. It’s very easy to be tempted and influenced (peri-urban male, 25-29, Gauteng).

There were other self-reported examples of enacted behaviour change given. A young man said Intersexions changed his perspective and as a result, he reduced his number of sexual partners. He also shared that he thinks he should always use condoms, given his new realisation that ‘feeling safe’ is not a sufficient reason to have unprotected sex:

M2: My perspective was the condom factor, number one…. I mean, it’s of importance that condoms are always used, regardless of whether you’ve tested together or you’ve been in a relationship for years, or not.
Facilitator: Whereas before you weren’t that careful?
M2: No, there was this idea of ‘trust’. We test, then after that we say ‘we feel safe’, but people can still go out and do things (urban male, 18-24, Gauteng).

Intersexions helped another participant realise that feeling ‘love’ also was not enough of a reason to shun condoms, which he since explained to his partner: “‘Even if I love you and you love me, but from now on’… Intersexions, you see, Intersexions influenced me. I said ‘no, we must use condoms, because even if I trust you, even if you trust me, but still, we must use condoms’” (peri-urban male, 18-24, KwaZulu-Natal).

Two women from the Western Cape shared how their engagement with Intersexions heightened their HIV risk perception and motivated them to introduce a new practice of condom use into their serious sexual relationships: in one instance, with the father of her child, in the other, with her husband. In both cases, they attributed the drama series for being the reason they concluded this was necessary and explained as much to their partners.

The first speaker deeply identified with Thandeka’s character, whose husband Godwin had an affair with their nanny, Gadima. She tells how the episode helped her to understand that merely being faithful is not sufficient if she cannot be sure her partner is as well. The realisation that ‘he is staying far, I’m staying here, I don’t know what he’s doing there’ could have on her own health was enough to give up her previously held view that ‘he is the father of my baby; I mustn’t use a condom with him’:

F8: The one that the husband was cheating with the maid…. that one changed my life because I’ve got the father of my baby, I wasn’t using a condom with him because I knew that ‘this one, he is the father of my baby; I mustn’t use a condom with him’, but after that episode, I saw that ‘no, this thing
is wrong, because I’m not staying with this man. He is staying here, I’m staying here. I don’t know what he’s doing there. I know that I am faithful to him, but I don’t know about him’. That changed my mind also, I thought ‘no’…. I think that ‘maybe he is doing this also. Then one day, I will be sick and I don’t know how I got this, because I’m sitting here in the house’. So that episode also changed my life.

Facilitator: Since then, have you started to bring condoms into that relationship?

F8: Oh yes, and I told him why I’m doing that…. I told him that ‘from today, I think you must use a condom because you are staying far, I am staying in Khayelitsha, I don’t know what you are doing there, so we must be protected, both of us’ (peri-urban female, 30+, Western Cape).

She credits episode nine for ‘changing her life’. The portrayal of Godwin and Thandeka’s marriage led her to realise that like Thandeka, she too could become HIV positive, without understanding why ‘because I’m sitting here in the house’. The other woman then shared how she often watched *Intersexions* with her husband of twenty years and would speak to him about what was portrayed. An episode that featured Lwazi and Kholeka’s affair led her to realise that even though her husband ‘is my everything… you don’t know a person, even if he is your life, so I must use condoms’. After the episode aired, she informed him that from now on, ‘we must use them’ because (like Lwazi) ‘I don’t know what you are doing there at work’. Initially he suspected her and criticised *Intersexions* for making people ‘fight’, but eventually he consented:

FI: What I discuss after an episode, it’s worse that they don’t use condoms most of the time in the episodes so we discuss that, because when you don’t use a condom you will get HIV.

Facilitator: Who were you talking to about that?

FI: My husband…. I met him many years ago. It’s almost 20 years ago. First we didn’t use condoms. I said ‘he is my life, he is my everything’. So when I watched this about being unfaithful, I said ‘no, you don’t know a person even if he is your life, so I must use condoms’.

Facilitator: Did you do that?

F4: Yes, after the show. I said ‘we never used condoms before, and now we must use them’. He said to me ‘are you in a relationship with someone else?’ I said ‘no, I’m thinking about these things’. He said ‘no, I’m separating from you, maybe you are guilty’…. I thought ‘okay, I am not afraid of him’. I said to him ‘maybe it’s you who is in a relationship. Why now? You are getting old’. He said ‘you see, there is something wrong with this show. It makes people fight’, No, it’s true, ‘I don’t know what you are doing there at work’. He said ‘this show makes people fight’. But at the end it was fine. We ended up using a condom, but he always complained, ‘but we are old now, we are getting old, but we start now. Why?’

Facilitator: Were there certain episodes that made you start to think more seriously about this?

F4: Because of this episode, you see the secret, those people don’t know exactly when they met those people, because I can stay here with my husband, he said he is going to work, I don’t know exactly what he is doing. Maybe I said ‘me, I’m honest, I know myself’ (peri-urban female, 30+, Western Cape).

*Intersexions* was successful in supporting both women in negotiating a new practice of condom use within two serious, established relationships. The women were able to see themselves in the compelling
portrayal of Nokuthula and Thandeka, realising that something in those scenarios resembled their own. This identification led to a heightened understanding of their own potential risk and the introduction of condoms in their relationships in order to reduce their risk of HIV transmission.

OTHER HIV PREVENTION THEMES

When asked what they perceived the main message of *Intersexions* to be and whether watching the series had any impact on their own attitudes and behaviour, participants usually spoke about communication, the sexual network, HIV testing and condom use. There were some other topics discussed, including medical male circumcision, substance abuse, treatment as prevention and STIs. Those findings are briefly presented here.

*Medical male circumcision*

Another stated outcome that the drama series aimed to accomplish was increased knowledge and uptake of medical male circumcision (MMC). Episode eleven depicted a character, Sdumo, who sought MMC. Several male participants referred to the episode as one of their favourites and perceived it to encourage viewers to consider getting medically circumcised. One thought the series should have covered MMC even more than it did.

Notably, two participants reported gaining new knowledge about MMC. One said that he learned that he should not have sex until the circumcision wound has healed: ‘when you’re circumcised, I know that you have to wait until it heals; Sdumo needed to wait until it completely heals and tell the girlfriend about it, I’ve circumcised and I have to wait until I’m sure that I’ve healed, and the woman understood’ (peri-urban male, 25-29, Mpumalanga). Another reported learning that MMC only provides partial protection against HIV, when previously he had thought it offered complete protection:

_The circumcision part, not necessarily that you won’t be infected because you are circumcised. It may reduce your chances of course, but it’s not a guarantee that you won’t be infected, because that’s what some of us may have thought, ‘if I’m circumcised, I won’t be infected’ (urban male, 18-24, Gauteng)._
Others appreciated this emphasis as well, ‘it was encouraging other people who don’t believe in male circumcision that they must go forward. What I like, it did not say it cures, it says it reduces’ (peri-urban male, 30+, Gauteng). This message was perceived as being particularly important, given reports that there are men who misunderstand the effectiveness of MMC as providing full protection against HIV. This episode appeared to clearly communicate MMC’s partial protection against HIV:

M4: You know when you have been circumcised it’s better. It’s hard to use a condom....

F2: If guys have circumcised, they believe that they will never get HIV and that is why they don’t use condoms anymore’....

F6: I think it’s what they are told when they go to circumcise, that it’s not easy for them to get STIs. So they take that information and assume that they will never be infected at all. They are saying chances are minimal, but they think that they won’t be infected at all (rural male and females, 18-24, Mpumalanga).

Some people are getting the wrong idea that when you are circumcised you can’t get infected, which is very wrong.... it’s reducing the risk of getting HIV (peri-urban female, 25-29, KwaZulu-Natal).

A participant who identified with the way Sdumo carried himself, appreciated how the character did not keep his circumcision a secret from Mandy:

I was exactly the Sdumo character.... Sdumo will tell you the truth in anything that he does. He will tell you. He never keeps a secret. That Sdumo character, even though he tried to keep a secret when the woman wanted to have some, until Sdumo came clean and said I got circumcised, but I like the Sdumo character (peri-urban male, 25-29, Mpumalanga).

Sdumo’s openness with Mandy was perceived as courageous, given cultural taboos that discourage men to discuss circumcision with women:

I thought it was brave of him because culturally men are not supposed to talk about circumcision. They are not supposed to tell anybody, not even tell their mothers. So it was very brave of him to tell a white girl that I have been circumcised, because it would be a cultural shame if anybody had to know about it (rural female, 25-29, KwaZulu-Natal).

Inevitably, there were a couple male participants who disliked the portrayal of MMC as opposed to traditional circumcision; this speaker thought the episode ‘kicked Xhosa tradition in the face’ and criticised MMC for not giving men a ‘sense of dignity’:

I didn’t like the storyline with the male circumcision. I feel it was kicking Xhosa tradition in the face.... Because as a Xhosa man, you need to go to initiation school to get circumcised, the whole process gives you dignity. Medical male circumcision gives a man no sense of dignity. Also, in Xhosa culture there are certain things that you need to learn as a man, I can’t talk about them but those things are only taught at initiation school (peri-urban male, 18-24, Eastern Cape).
The episode was positively perceived to encourage men from other ethnic groups to be circumcised, however: ‘I liked the circumcision part. The Zulus are the only people that don’t go for circumcision, initiation school. So, when I saw Sdumo actually going to the clinic, I saw an opportunity for them to also go to initiation’ (urban male, 25-29, Gauteng).

The focus on MMC in this episode of Intersexions was seen to complement other campaigns which promote awareness about the benefits of MMC, such as Brothers for Life. This speaker suggests that new pro-circumcision attitudes are emerging among boys and young men and took his teenage neighbour for MMC:

*When Sdumo decided to circumcise, to people who believe in cultural circumcision, which is far from here, Joburg to the village, it’s very expensive and it’s free circumcision in the hospital, then it changes their mind. Do you know children who are nine years, ten years, they ask their parents, ‘I want to go and circumcise’…. Early last month, I took my neighbour’s child who is 14, to the circumcision…. Because others are circumcised, so now it’s a competition to children since the Brothers For Life introduced these adverts of circumcision…. It has had quite an influence (peri-urban male, 30+, Gauteng).*

There were two accounts given of self-reported behaviour change around medical male circumcision. In the first, M4 describes how his fascination with Sdumo resulted in his feeling less afraid to get medically circumcised. He shared how the episode lessened his fears about testing for HIV and being physically examined and helped him realise how important the protective benefits were. As a result, he set a clear intention to have the procedure (*now I want to, earlier I didn’t*). He thought that having peer support would make a difference, as it did for Sdumo, whose friends ‘told him to go to the clinic and get some help’:

*M4: Sdumo yes that is the one that fascinated me…. Because I also wanted to go and do it but I am afraid…. There was this girl…. she wanted to sleep with him and have sex…. at the end Sdumo told her that ‘I am saying no because I am still healing’. That is what I liked about that, it’s important to get circumcised…. This guy Sdumo changed me…*

Facilitator: What are you scared of M4 if I may ask?  
*M4: When they have to check me for HIV…. and the fact that they will touch me when they cut the foreskin…. It [the episode] did change me because now I want to, earlier I didn’t want to…. When they said after you have circumcised you will be protected from many infections…. From today I am ready to go…. but I have to get friends because it’s better to do something with friends but when you are alone it’s hard (rural male, 18-24, Mpumalanga).*

Episode eleven provided the necessary motivation to move the next participant from merely intending to get circumcised, to taking action to do it. He tells how Sdumo made him realise that *now is the time*:

*With me, it did make me do something physical, which is what I mentioned earlier, to circumcise…. I was going to do it; I should have done it sooner…. I was going to do it, but after seeing that guy, I was like ‘no man, I need to, like now is the time. I’m not going to waste any more time’, and that’s*
when I went and did it…. Remember, before he got circumcised…. he got an infection, and they said to him ‘if you were circumcised, the probability of you getting that infection would have been less’. So, as a guy, it makes you go ‘oh’, you know (urban male, 18-24, Gauteng).

After the procedure, he had a similar experience to Sdumo, of needing to explain to a new partner why he could not have sex: ‘It’s actually quite embarrassing, because you don’t know what to say, and then you have to’. When he later told someone on Facebook that he went for MMC, he was criticised for speaking about it openly, which made him feel uncomfortable. The exchange led him to think critically about how he should not have to feel embarrassed, just as women who give birth or men who ‘go to the mountain’ do not feel the need to hide:

The other day I became comfortable with it. I told someone on Facebook, but it wasn’t in an inbox. I didn’t know…. Not many people commented, but one person did, and she said ‘why did you write that for everyone to see’? I was like ‘has everyone seen this’? So that embarrassment came back again. It shouldn’t be an embarrassment…. but then if someone comes on Facebook and says ‘why are you saying it’? I said to her, this might be a bit sensitive, but I said to her ‘when guys go to the mountain…. when they go circumcise, and then they come back as a man. We know what they did there. So now, if I go to the hospital and go book and do my thing, why should I hide it? Why can’t I share it’? … She was like ‘okay, I see your point’ (urban male, 18-24, Gauteng).

**Substance abuse**

A lesson about the link between drinking alcohol and HIV risk was perceived from *Intersexions*: ‘it shows that most people who are getting infected, they are in pubs and taverns, which is a real thing that is happening’ (peri-urban male, 30+, Gauteng). Alcohol was understood to cloud one’s judgment and negatively influence decision-making; drinking with ‘responsibility’ was thus identified as a way to guard against having unplanned, unprotected sex (and HIV):

To drink responsibly when you’re with your friends at the tavern and not overdose…. It takes over and leads you to do things that don’t make any sense and which you are going to end up regretting the following day. You may end up having sex without a condom or even get mugged…. [It showed] how easily contractible HIV is…. through things like alcohol and drug abuse (peri-urban male, 18-24, Free State).

Things like drugs, they made the characters lose the ability to think straight and alcohol as well, you have very little control over your actions when you’re under the influence of these two substances, so you might not be able to make sure you use a condom when you have sex, you might think you have but because you were under the influence, you can’t be sure. So that taught us that alcohol and drug abuse could lead to reckless behaviour which could lead to HIV (urban female, 25-29, Gauteng).

Drinking alcohol was particularly described as sexually risky for young women:

When you’re drunk you easily lose control and you let loose and you can’t think…. When you’re drunk it’s easy for a male person to have his way with you and this gives AIDS even more power (rural female, 30+, Free State).
When you go with the man, you just go with him and at the same time you’re drunk, so you won’t really want to use a condom when you’re drunk (peri-urban male, 18-24, Free State).

One person perceived a message from episode 26 about taking responsibility—not that it is ‘bad to party…. what is bad is what you do when you get to those parties or after being drunk’ (peri-urban female, 25-29, Gauteng). Another proposed a strategy to simply ‘enjoy alcohol’ without having sex, or at least avoid ‘over drinking’:

*People should not drink and have sex because the outcome is always bad. You end up getting pregnant and you’re in a predicament because you don’t want to abort the baby but you have HIV, so do not drink and have sex, do not over drink and have sex. You have to just enjoy yourself without having sex, just enjoy alcohol if you wanna enjoy alcohol (urban male, 30+, Eastern Cape).*

Episode five, which depicted Rosie and her friends partying with Two-Step was often cited for depicting the consequences of substance abuse. Rosie was perceived to drink as a way to escape her problems; her drunkenness was seen as the reason why she dropped the condom she was given:

*Rosie when she was drunk with her friends and Two-Step and everyone. Her friend gave her, I think condoms, three condoms or something, and because she was drunk she dropped the condoms (peri-urban male, 25-29, Mpumalanga).*

The extent to which Rosie’s friends were appreciated for giving her condoms at the party is discussed under the condom promotion theme. The way in which they look after each other’s safety more generally was also taken as an important lesson; for example, this participant decided to ‘be more careful’ when she goes out and to ‘look out’ for her friends: ‘I learned from the episode with Rosie and her cousin’s friends when they all went out. I’m a person who loves going out and having a good time, so after watching that episode I decided to be more careful when I’m out and also to look out for my friends’ (rural female, 30+, Eastern Cape).

Episode 16, which featured Gadima’s drug addiction was said to ‘educate teenagers about the dangers of drugs in their lives’ (peri-urban female, 25-29, Mpumalanga) by depicting the dangerous consequences of drug use. Gadima was seen as prepared to ‘do anything for these drugs’:

*She was living this double life where she was a good girlfriend and portrait as this innocent lady and then after hours she was…. a drug addict…. she would do anything for these drugs and subjected herself to that other guy who was giving her… (urban female, 25-29, Gauteng).*

*Especially people who are using drugs will be sleeping with other men. You wouldn’t see where you will be sleeping and end up finding yourself with problems, so it is important to be well-behaved (rural female, 18-24, Mpumalanga).*

One participant said he related to the way Gadima tried to ‘run away from her problems’ by using drugs:
I think I could relate with Gadima. She had problems and she tried running away from her problems by creating a new image of herself, which was not the case. So, like with me, I was just involved and I was just doing drugs, being with the wrong friends. I just went away from home and started doing stuff (peri-urban male, 25-29, Gauteng).

It was hoped that engagement with the series would lead some viewers to reduce their level of alcohol and drug consumption. While there were not any reports of reduced drug use, four participants decreased their alcohol use as a result of *Intersexions*, a fifth reported changing his behaviour by always carrying condoms when he drinks, and a sixth shared a second-hand account of her niece’s changed behaviour:

*She used to go out boozing in rough places with her friends and she was smoking a little bit. After watching Intersexions, when her friends come on Friday to pick her up, she will say ‘no, I can’t go out, I’m not going out’…. We asked her why and she said ‘no, I have learnt a lot from Intersexions. I have learnt a lot about avoiding some of the things, so I decided to watch it rather than going out with my friends’ (peri-urban female, 25-29, Mpumalanga).*

Two participants describe a heightened awareness of the risks that come with drinking too much alcohol. They both report how this critical reflection about the next-day regrets that often accompany partying led them to change their drinking habits:

*When I go to the tavern, to not drink too much and…. Not to let alcohol completely take control of me and let me lose my self-control and do things that I will regret the following day… like sleeping with a girl that I hadn’t thought that I would sleep with without using a condom…. When one is drunk, the alcohol just takes over your mind and takes control. You can no longer think for yourself (peri-urban male, 18-24, Free State).*

*It changed a lot of things about me…. I used to like partying a lot with my friends and I realised that alcohol can lead to certain things, you can even wake up the next day with someone that you don’t know and didn’t even use protection (peri-urban female, 18-24, Free State).*

A third told how he decided to stop drinking alcohol altogether; he identified with Two-Step’s character:

*Watching Intersexions, it taught me a lot of things. Like I was a heavy drinker, and when I’m drunk, I do some stupid things, beating people and all that stuff. So like now, I’m not drinking anymore…. Like Two-Step, every time when he finished playing soccer, he goes to a bar and he drinks. That is the main reason [I stopped] (peri-urban male, 25-29, Mpumalanga).*
In the next excerpt, another interviewee shared how he related to episode five (‘it was personal’) because he also ‘partied hard’, and admitted to drinking alcohol every day. His identification with Rosie’s character (‘I was in that girl’s shoes’) and his perception that her drinking was an attempt ‘to fill the emptiness that she’s feeling’ contributed to his decision to drink less (or give up alcohol altogether, it is not clear which):

The episode [where Rosie] went out partying, it was personal because I went through some challenges in life and I didn’t want to face them so I went partying hard in a way. I’m a person who was leading a church and people around me didn’t understand me and no one asked me, but some people kept judging me, they would say ‘he’s a waste now, he was fake in church’ and those things made me more bitter and want to drink more and go partying more. But it came to a point where my mind came back and I decided that ‘no, every weekend you’re drinking, every day you’re drinking, even though you’re not drunk’. I decided, ‘no, now you’re going to become an alcoholic if you don’t watch yourself’. So in those episodes, I was in that girl’s shoes, I know that she’s trying to fill the emptiness that she’s feeling. That’s why she went to the party, that’s why she was drunk, that’s why she felt like it was okay to sleep with that guy, but she came back to her senses and she left him (urban male, 30+, Eastern Cape).

The interviewee then shared how his mentor cautioned him about his drinking habits; his identification with Rosie’s character in episode five was seen to reinforce the critical reflection he was already engaged in and prompted his eventual decision to stop drinking:

Even though I shrugged it off and thought ‘I’m just living life’, when I was alone at home, it came back to me and even when this episode aired on Intersexions, I was still drinking but that episode showed me that ‘no, you need to do something’ and I did something (urban male, 30+, Eastern Cape).

**Transactional and age-disparate sex**

Although the stated series objectives did not specifically address the impact of transactional and age-disparate sex on HIV transmission risks, many participants perceived a strong message about this subject from the series nonetheless. The characters that were perceived to portray transactional sexual relationships were Khanya, Rosie, and Prof. Zakes, Bontle and Godwin, Gadima and Godwin, and Grace and Pastor Rex. The portrayal of young female characters that engaged in relationships in which there was an element of exchange (financial or otherwise) was said to be realistic, with many reporting that such a pattern was not uncommon in their communities.

Girls who love money, they want to impress people. It’s known that ‘if you give me money, then I’ll give it to you in any way you like’ (urban female, 30+, Mpumalanga).

The university setting, which was portrayed in episodes two, three and seven, was particularly appreciated for its realistic depiction of students who either seek ‘sugar
‘daddies’ to assist them in securing a ‘city lifestyle’ or who have sex with a lecturer in order to gain favour:

This is true because our children in tertiary institutions get themselves sugar daddies; they forget about education and focus on beauty while they deceive their families that it is money from their bursary whilst risking their lives for these things (rural female, 30+, Free State).

[Bontle] had a boyfriend, which she actually loved, and sometimes you would see she would be making excuses to see this older guy and when she went she will get rewarded with money.... It is typical these days, it’s sad, but it is; that somebody would subject themselves to such a relationship to get money. It usually starts.... at high school and then with varsity girls it is just a norm.... We see it happening, for some it is for rent, some for alcohol, some for money (urban female, 25-29, Gauteng).

Khanya and Bontle’s characters were often criticised for having transactional relationships with older men. While participants said such behaviour was commonplace, they were quick to express disapproval of their behaviour. For example, Bontle was described as ‘greedy’ and ‘dissatisfied’, ‘a gold digger’, and willing to ‘go to any length as long as they benefit financially’. Khanya was criticised for trying to ‘sleep her way to the top’, which was understood both to be something that women ‘have’ to do sometimes and which can carry the serious consequence of potentially ‘destroying’ their lives and others’:

Khanya tried sleeping her way to the top. You cannot sleep your way to the top, not in this country.... Khanya’s character was very, very interesting.... I would have loved to have seen more of Khanya.... She actually went and slept with the lecturer just because she was heartbroken.... She actually destroyed her life first, and then she destroyed Rosie’s life.... In real life, that’s what women deal with on a daily basis. They have to sleep with someone in order to get that. In that, they are not only destroying their lives (peri-urban male, 18-24, Gauteng).

Discussions of this theme tended to blame the young women in such relationships more than their benefactors. That said, some criticism was expressed of Godwin, the sugar daddy (‘I didn’t really like him because he used women’; ‘he took advantage of her’) and Prof. Zakes, the enterprising lecturer (‘I didn’t like the lecturer, simply because he slept with his students’; ‘in universities, there are guys exactly like Zakes. They are killing the future of young girls, just the way he did’).
Gadima (the nanny who was seduced by her employer in episode nine) was discussed at length. Her character was primarily understood to want Godwin for his money, rather than for other reasons, such as basic attraction or the dissatisfaction she felt in her relationship with Cedric. Her reasons for having sex with Godwin were debated, with several criticising her for lacking morality (‘what kind of person actually does that’) and betraying Thandeka; one person suggested that she got what she deserved (‘when you work, you get paid’). Others, however, sympathised with her character, believing that poverty can lead one to make poor decisions.

She betrayed her by having sex with her husband but then it’s cool cause she got paid I’m not saying that anybody deserves to have AIDS, but when you work you get paid…. Her life was a mess from beginning to end…. I was disgusted…. by both of them, Gadima and the husband. Cause they would smile at Thandeka’s face, pretending as if everything was okay. There was an instance when Thandeka was in the house and they had sex in the bathroom. You see that was like degrading, disrespecting (urban female, 30+, Mpumalanga).

F5: It came back to me, to morality, what kind of person actually does that? Why would you actually do that when you know it’s hurting other people?

M2: …Gadima, she doesn’t know what she wants in life…. her boyfriend is so honest and he was waiting till the good times came, but she messed up and she’s destroying everything because she wants the money, that is not good....

F7: When Gadima did what she did, she did it for money. At the end of the day, she needed the money. I believe that the husband took advantage of her needing the money, so at the end of the day it’s not Gadima’s fault. Yes, she’s old enough to make her decisions and rightful decisions, but at the end of the day, I don’t think it’s her fault.... I don’t blame her (peri-urban females and male, 21-33, Gauteng).

In terms of Gadima, I think when I relate the story to our daily life, when you are in poverty or you have lack of finances, you end up letting yourself be in situations that you wouldn’t normally allow yourself to be in, and lack of knowledge as well.... It’s also ignorance.... because Gadima knew, I mean, almost everyone knows about condoms, so if she had used condoms consistently, I don’t think she would have been HIV positive (peri-urban female, 25-29, Gauteng).

The temptation of money was said to be very difficult to resist:

Let me tell you something. There’s money, there’s poverty and we must also know that we are people; we get tempted very, very easily. I’m rich, you work for me, and then I offer you money. On top of that, I’m actually tempting you. Because you are poor, it would be easy for you to actually get tempted and come to me.... Gadima was [Christian]. The Bible doesn’t save you from getting tempted. It won’t. ‘I have money, I will tempt you. When I’m tempting you, I’m actually pressing you’. So, I understood Gadima very well (peri-urban male, 18-24, Gauteng).
Yet, despite the pull of such temptation, several people critically reflected on the issue of transactional sex, articulating that there are alternatives and one should have the personal agency to ‘know yourself and what you want’ enough to choose not to have sex for material gain:

The knowledge we have that poverty is not something that, it’s something that we can actually avoid in certain ways, like getting alternatives. If you need money, there are alternatives instead of sleeping with people (peri-urban female, 25-29, Gauteng).

Some other things we have to understand. If you come from a poor background, it doesn’t mean that you have to put yourself in that wrong place. You have to know yourself, what you want, and then if anything can come, the good things for that short period, it doesn’t mean that you have to grab it (peri-urban male, 30+, Gauteng).

Two female participants shared how they identified with Thandeka, imagining ‘what if one day’ the same thing happens to them:

I didn’t like that because I thought ‘it might happen to me’. I might be married one day and have a helper and she might do this. It’s not ayoba [cool] (urban female, 30+, Mpumalanga).

What if one day I’m a wife and then this husband who is doing this, I mean he [Godwin] sleeps with basically three different,... age groups. He slept with the student, he slept with the maid, Gadima, and he was sleeping with his wife obviously, and then who knows, maybe someone at work. So, it was a very reflective moment, that ‘what if’.... like I delved into myself, ‘no matter how good you are or want to be’, because even the wife was torn by the fact that there could be someone (urban female, 18-24, Gauteng).

Several male participants related to Sizwe’s character and found it realistic that someone like him could discover that a ‘sugar daddy’ is buying ‘your girlfriend fancy things’:

I felt like Sizwe was trying to make things right with his girlfriend. But now what his girlfriend did to him, I didn’t like it.... It usually happens in a relationship, even now, your girlfriend would come with fancy things and give you things, buy you things, and you wouldn’t know of it, but come the day when you need to really find out where she’s getting the money from, because you’re the one working, only to find out that there’s a sugar daddy behind it (peri-urban male, 25-29, Gauteng).

A couple male university students described how their engagement with episode seven prompted reflection about the potential of their own girlfriends to engage in transactional relationships. They identified with Sizwe’s character in not being able to provide their girlfriends with ‘a certain lifestyle’. One recalled how Intersexions got his peers thinking about their relationships and to start wondering whether
their girlfriends have someone providing for them (‘when she comes with a new weave, now he thinks, where does that come from?’). He described how they are starting to view such situations more critically, that rather than ‘just have to live with it’, they want a partner who is content with them, rather than looking elsewhere:

I think Bontle loves Sizwe, but she’s with some guy for money, and to fit into a city lifestyle…. Most of our students, our classmates, our girlfriends, during the day, on Fridays they meet up and they go to places like Sandton and these fancy places, so that they fit into a certain lifestyle. It’s a lifestyle, which they generally cannot afford…. They find guys who have money so that they can fit in….

So that’s one of the things which got us thinking about relationships. Like this guy was talking about his girlfriend, when she comes with a new weave, now he thinks ‘where does that come from’…. Now we know that even your best, well-behaved girlfriend can go out there and be some guy’s, what do you call it, as in everything she needs. She comes to you and gives you a kiss and says ‘tonight, you’re studying’, she’s somewhere else. So that really, really hit on our relationship, especially at the age of varsity lifestyle. Now trust was a big issue…. It is very common, especially at res. We have even got used to it that during the day she’s my classmate, once in a while we’ll have relations, but she loves a certain lifestyle which I can’t afford, she goes elsewhere to get it and I just have to live with that.

So yes, now guys are questioning, ‘are there still girls who can still be content with what they have’. Like in the case of Grace and her boyfriend, we saw Grace being content with this lifestyle, she knows there’s something out there, but her man can only afford her to live this type of lifestyle (urban male, 18-24, Gauteng).

Another participant from the same focus group expressed a similar idea. He reports that before watching episode seven, he never considered whether ‘my girlfriend is living a double life’, but ‘now because of the show, these things creep up in my mind’:

When the boyfriend is not around, she has another man on the side, a sugar daddy. Now it makes us as young guys here at school think what if my girlfriend is living a double life. For me, before that show, I did not consider that…. now because of that show, these things creep up in my mind…. Like ‘is she really the person that she is and if I’m not around, how does she act?’ (urban male, 18-24, Gauteng).

He went on to describe how difficult it is to know whether his girlfriend has a secret ‘sugar daddy’ and recalled an instance when he doubted whether she was being truthful. He concludes by saying he does not want to be jealous or insecure, yet the potential that he could be like Sizwe seems all too possible:

It’s hard because these girls are good, they’re really good. So, like you can never find out. It’s hard to find out actually…. On Monday, my girlfriend doesn’t attend classes, but I do. So I called her…. at the end of our conversations we always say, ‘I love you’. So, this time I did say ‘I love you’ and then she said ‘okay’ [laughter]. She couldn’t say ‘I love you’ back. Now, it drove me crazy, because I’m thinking ‘why can she not say I love you back’? Do you understand? So she called me back thirty minutes later and said ‘no, I couldn’t say I love you
A peri-urban female shared how she related to Bontle’s character, having experienced a similar situation in which a man ‘offered to do everything for me’; thanks to the support of her friends, she ultimately found the wisdom to ‘run away’ and says she would not advise anyone to have a ‘sugar daddy’, no matter how tempting it is:

A character that I can relate to, it’s the girl who had the sugar daddy. I never had a sugar daddy, but I’ve had a man who actually offered to do everything for me.... which was very scary.... I actually ran away, wondering what he’s going to want in return. ‘Is he going to actually want to kill me in the end’. [At first] it was quite nice because.... He used to send money electronically and he used to send his pictures, weird pictures.... I was supposed to meet him, and then that’s when I ran.... The fact that you’re in a certain place, you want to go to a party, you’re broke, and your boyfriend is just as broke as you, and then somebody calls you and says ‘okay, I’ll give you money for the weekend’. You go, you get the money, you do shopping, you buy yourself nice shoes, nice clothes, and for that time it sounds good, but then when he said ‘meet me’, then I had good friends to advise me ‘if you go there he’s going to slaughter you, or he’s going to do whatever to you’. So, it’s tempting, but I wouldn’t advise anybody to have a sugar daddy or an anonymous lover or some Internet site call. It’s wrong. It’s tempting, yet it’s wrong (peri-urban female, 25-29, Gauteng).

A female participant shared how these episodes influenced her to develop a more critical attitude about having ‘expensive boyfriends’. She conveyed that she now finds it more problematic, given that she has learned to be more ‘judgmental’ in deciding whether she can trust a new partner and would question whether he had other partners:

When I think about it in terms of, okay, let me say I’m this single lady now who needs a boyfriend.... it would not be easy for me to find an ‘expensive boyfriend’ there, trust him and start doing things with him. I would have a lot of questions in mind, like ‘okay, what is he up to’? It would have an influence in such a way that starting a new relationship would actually be problematic for me. So, I don’t know, it gives me that judgement of people, like people out there, that ‘okay, how good are they, how faithful are they’ (urban female, 18-24, Gauteng).

Treatment as prevention
Another one of the educational objectives of series two was to emphasise HIV risk reduction practices, including the use of post-exposure prophylaxis (PEP). Episode eight featured the ‘corrective rape’ of a lesbian character, Lorraine. She sought medical care after the incident and was given PEP. Only a few participants spontaneously recalled this part of the storyline, e.g., ‘The nurse told her that if she has been infected after being raped there are pills that will be given to her that will help her’ (rural female, 30+, Free State). Another participant recalled a clear message from the docudrama that the narrator (the personification of HIV) prefers it when people who have been raped ‘stay and be afraid, it’s easier for him to grow, but people who go there and talk, ‘that I was raped’, then they get help, he doesn’t have a chance’ (urban female, 30+, Mpumalanga).

Only one participant clearly expressed that she gained new knowledge about PEP from the episode. Now that she understands that HIV transmission can be prevented by PEP, she states that she would ‘run to the nearest hospital’ to seek immediate treatment if she was ever raped:

F1: Lorraine was given medication that she must take, they told her for how many days she must take them and then come back and get tested. And if the guy was HIV positive, the pills were going to help just taking [the] virus out before it even clings in her system. Yes, I remember that.... It was an eye-opener to me because if I got raped today, I wouldn’t stay home and feel sorry for myself. I’d run to the nearest hospital and tell the lady that ‘this is what happened’ and they would help me ‘cause staying there would make matters even worse.

Facilitator: Is this information you had before?

F1: No, I didn’t know what happened to a person who got raped. So after I saw that I knew that ‘okay then, you can prevent it’. If you have it then they can help you prevent it, chop chop (urban female, 18-24, Mpumalanga).

Two other participants thought that this would be good information to share and that it should be emphasised more:

I knew about it, but it didn’t come through very strongly. I knew that it was taken by men who sleep with men (urban male, 30+, KwaZulu-Natal).

I would say the pill, there is a pill that when you sleep with an HIV positive person, the pill that you drink after.... A lot of people don’t know about that (urban male, 18-24, Western Cape).

Prevention of mother-to-child transmission (PMTCT) was featured in episode 15, when Grace tested HIV positive when she sought antenatal care. This message did not appear to come through strongly, as no participants recalled a PMTCT message from Intersexisons.

Another intended behavioural outcome was to encourage the uptake and adherence to antiretroviral treatment (ART). The research sample included two interviews and one focus group with participants who were known to be HIV positive. One additional focus group participant disclosed as well. Both
interviewees indicated that the series had a positive influence on the way in which they approach their ART. The first perceived a message that he should be more careful about following ‘the doctor’s advice’ by taking his treatment consistently, even in the face of uncomfortable side effects, in order to ‘live long’. He also felt a responsibility to encourage others to do the same. The speaker recalled a message from episode 26 that ‘Mr. V will be happy’ if he does not take his ARVs, ‘if you are not taking ARVs, Mr. V will clap hands .... if I don’t play safe, if I don’t take my medication, then I’m giving him power’. He indicated that sometimes the voice of ‘Mr. V’ will remind him to take his treatment ‘no matter what’:

Intersexions was talking about being caring, supportive.... to my partner, my family, to care for myself in taking the doctor’s advice, take ARVs, encourage others to take their treatment .... It has had an influence on me. One, to be more careful.... about my status.... Like for instance taking my treatment, make sure that the condom does not burst (if I’m using a condom), and to make sure that I’m eating healthy, because I think Mr. V, if you don’t eat healthy and taking the treatment, it destroys you. So, such things like that, and then it makes me again confident that ‘if I’m doing this, I will live long, and I must not do this alone, let me advise other people’.

Especially you know, when you are taking ARVs, sometimes they become, you become fed up taking ARVs and you say ‘hey, today no, I’m not taking it, tomorrow I’m not going anywhere’.... Sometimes it makes you want to vomit, it makes you dizzy, sleepy. Sometimes you find that you are weak. You don’t even watch Generations, you see, after drinking [the pills] .... So, by changing me, it says ‘no matter what, take it, because I’m there’. Yes, I like that part.... The part of Mr. V, it was the most powerful part. Yes, I enjoyed Intersexions, but at the end, I knew what it was all about. It was all about me. It said ‘if you don’t take your treatment in time, Mr. V will hit you. If you have one day off, Mr. V will be happy’, and then at the end of the day you will say ‘no, the ARVs are not working’ (peri-urban male, 30+, Gauteng).

Another participant took a clear message from episode 26, that anti-retroviral treatment upsets ‘Mr. V’ because it slows the growth of HIV:

Once I am part of your life, we’re stuck together for life. And if you don’t go to the clinic and get your ARVs then [whistles] I’m taking you to the grave. But if you go and get your, your, your ARVs and you use protection then you compress me - I cannot grow. But if you don’t, I grow, I destroy them. That’s who I am’ (urban female, 30+, Mpumalanga).

Several people appreciated Koketso’s character and the manner in which she accepted being HIV positive and the confidence with which she spoke about her treatment with Grace. Her positive attitude and belief that she will live well with the support of antiretroviral treatment was noted:

There was an episode where she was making pap and she was saying ‘no, I’m going to be okay if I take my antiretrovirals, I’ll be fine, I’m going to live’, but the brother’s girlfriend is running away because she’s HIV positive, yet a little child is so positive that she’s going to live if she takes her medicine. So it just shows how older people are just so negative and thinking that HIV is a death sentence, but a child is thinking of the positive, ‘I’m going to live’. I liked that (urban female, 18-24, Western Cape).
An HIV-positive female participant related to Koketso, as she was pregnant and taking ART when the episode aired. She appreciated how Koketso ‘made peace with it and then the nurse from the clinic was also supporting them; I could relate to that’. She took a message that she should tell others about her treatment needs in order to educate them and be more supported by them:

Koketso, when she was she telling Grace about her condition…. At some point people will ask you why you are taking medications and you can’t hide it forever. So you have to…. inform them and educate them. If they are taking care of you, you need to tell them that ‘I need to eat before I take my medication’…. or remind the person that ‘I need to go to the clinic and collect my medication’ (urban female, 25-29, Gauteng).

At the time, she also reflected on the possibility that her son might be infected and hoped he would find the same ‘happy place’ as Koketso:

Then I was thinking ‘what if my son is HIV positive’, you know? He is going to be that Koketso who will have to take his medication every day and eventually he will also have to find that happy place that ‘I am HIV positive and I am taking my medication with everybody around me supporting me’ (urban female, 25-29, Gauteng).

**Sexually transmitted infections**

Episode ten featured Sdumo, who acquires an STI when he returns to his family home. The episode introduced the role that sexually transmitted infections have in HIV transmission, emphasising the importance of STI testing and treatment, and disclosure to one’s sexual partners, which was further elaborated on in the docudrama. One focus group participant reported learning about the importance of completing a full course of STI treatment, even after symptoms go away, from watching the episode:

I learned that when you have an STI, even if your symptoms go away after a few days of treatment, it’s important that you carry on with treatment until it’s finished. If the treatment was prescribed to you for two weeks and you feel better after the first week, don’t stop, carry on until the two weeks are finished (rural female, 30+, Eastern Cape).

Sdumo’s friends were appreciated for encouraging him to seek treatment at a clinic, rather than make the ‘wrong decision’. Most discussion around this episode centred on Sdumo’s character, who was admired for the way he sought treatment for his STI and told the women he had sex with to go to the clinic. Such disclosure was considered unusual, particularly for men. An interviewee told how a friend of his sought treatment for an STI, but never told his girlfriend; he thought it was ‘a good thing’ that Sdumo told them, even though ‘it’s difficult’:

He went back to them and asked them to test for this STI. It was a good thing, because guys, they don’t usually do that. We don’t usually do that, and actually if I’m sick, I will be like ‘God, I don’t want to go’ …. He did a good thing. It’s difficult to tell somebody else about your condition, especially if it’s an STI (urban male, 18-24, Western Cape).

Another participant told how he has ‘never seen a guy like that in my life’ and said if he ‘was a player’, he ‘would never be honest’ like Sdumo or disclose having an STI:
Sdumo was very honest…. I never saw a guy like that in my life. Even me, I would never be honest like that…. Like going and telling those ladies to go and get checked…. If I was a player, I would go alone to the clinic and don’t come back and tell them. He went back and told the ladies to go and get checked for STIs…. If it was me, I was going to make myself clean and not tell them so if they want to spread it they would spread it without knowing that they are they are sick (peri-urban male, 30+, Eastern Cape).

This participant did say, however, that since testing HIV positive, ‘I am never going to get those things again, I play safe. Because of my status I can’t risk’. Sdumo’s character was generally regarded as a role model, both for seeking healthcare and for telling his previous partners that they should seek treatment. Two other participants expressed an intention to ‘do the same’ in order to protect one’s partner:

I liked Sdumo’s episode because when he realised he had an STI he told his girlfriend. If he had a straight girlfriend and told her he had other girlfriends, it taught me a lot, because I would also do the same with my boyfriend (peri-urban female, 18-24, Eastern Cape).

You should build up the courage to go tell all your previous sex partners that you have an STI. Don’t be scared because in the end you’re protecting that person…. It’s something that should happen, but doesn’t. You can always go to each partner individually and yes, they’ll react and be angry but like F1 said earlier, when they’re alone, they’ll think about what you told them and go to the clinic for a check-up, so it could help them in the end (rural male, 30+, Eastern Cape).

Relationship values

One of the series’ objectives concerned the importance of knowing one’s sexual partner well before commencing a sexual relationship and it was hoped that viewers’ engagement with Intersexions would lead to more open and honest communication within their relationships. Inevitably, much of the engagement with Intersexions II extended beyond explicit HIV messages to participants’ key realisations about relationships in general—the quality of which, no doubt, fundamentally impact HIV risk. The episodes’ strong focus on communication and the consequences of keeping secrets resulted in numerous insights about relationships being generated, many of which have already been discussed, but will be summarised here.

Participants frequently shared their critical reflections about how difficult it can be to truly establish trust in a sexual relationship. From this sample, it is clear that the series succeeded in getting viewers to consider both the quality of and the potential risk within their personal relationships. As has been discussed elsewhere in this report, one of the primary forms in which participants internalised the series messages was articulated as a newfound awareness about the potential that one’s sexual partner may not be as trustworthy as previously thought. The possibility that one can never be completely sure if one’s partner is faithful occurred to many, for example:

By watching more Intersexions people actually have thoughts about their relationship and reflect on what they see. So basically, ‘if I’m honest, I would want my partner also to be honest’, but that can’t
happen. I don’t know when my partner is going to work, what she is doing there, and when I stay at home, what am I doing. So basically to me, it’s a challenge (peri-urban male, 25-29, Western Cape).

As I was sitting there watching it, I would think that my husband when he’s out there, he’s actually doing those things that are happening there…. like the relationship between Zolile’s father and Nomzamo’s mother (peri-urban female, 25-29, Gauteng).

Similarly, another participant identified with Thandeka’s character, as she realised that ‘no matter how good a person you are’, it is possible to discover that one’s partner may be unfaithful anyway: ‘no matter how good a person you are or how much you think you are investing into this thing with your everything…. you would expect [the same] from your partner, and they’re doing this to you’ (urban female, 18-24, Gauteng). Someone else took away a message from Lwazi’s story in Intersexions, to always have ‘room for disappointment’, as no matter how well you know them, ‘you cannot rely on another’:

It taught me one thing and that is to always have room for disappointment because most of those people didn’t know that those things would happen in their lives but ultimately they saw them happening. As a person, you need to know that you cannot rely on another person, it doesn’t really matter how long you have known them for. Look at Nomzamo’s mother and Zolile’s father and look at what Zolile’s mother did to his father. That man was certain that the child was his (rural female, 30+, Free State).

The speaker in the next excerpt identified with Rosie’s character, having also experienced a stress-induced miscarriage. Her experience led her to conclude that she can ‘never trust another man again’:

It’s happened to me before with a boyfriend I had. The whole thing of boyfriends being unfaithful and not being honest, like he was engaged but I didn’t know because he didn’t tell me. So I fell pregnant and when I told him he got angry and started lashing at me…. he held a gun at me and told me that he ‘had many children and couldn’t deal with having another one’. So I was traumatised and stressed to the point that I had a miscarriage. I never really recovered from that and to this day, I have trust issues. This all happened in 2012 and the one thing I’m very grateful for is the fact that I didn’t end up with HIV…. and after that I told myself that ‘I’m never trusting another man again’ and since then I’ve never been with another man because what I went through was so painful (urban female, 30+, Eastern Cape).

Forgoing any notion of trust in sexual relationships, some participants concluded that the only answer is to use condoms in all situations because one can never be sure of one’s partner, ‘regardless of whether you’ve tested together or you’ve been in a relationship for years’. Testing for HIV as a couple was also identified as a preventive action that can be taken in situations where one does not trust one’s sexual partner: ‘I’ve learned…. that I can be faithful but my partner isn’t, so we must try to always get tested’.

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There was some discussion about the various reasons that people have sex, with several critically reflecting about how some characters appeared to have sex to address the hurt and pain they felt or as a way to avoid feeling lonely. A sense that one should have sex—and be in a relationship—for the ‘right’ reasons was thus perceived:

I was also about to say it’s just being oblivious to the consequences of our actions…. Sometimes I think it’s pain and then we try to maybe go and console that pain somewhere and we end up doing stuff that we aren’t meant to do. If you remember, Khanya, I think she was hurt because the lecturer didn’t give her the scholarship, and then Zolile on the other hand, I can’t remember, was it because of Nomzamo? Yes, so they ended up having sex just like that without even knowing each other…. I think sometimes if you are hurt, you can do things that can maybe.. (peri-urban male, 25-29, Gauteng).

Another perceived message came up with some frequency, that younger women should not ‘pursue married men thinking that he will leave his wife’:

In most cases, girls think that they can get a married man to leave his wife once they get to sleep with him. Lerato and Thapelo’s situation should have opened the eyes of those kind of girls that a married man will not always leave his family even if he has an affair with you. Their commitment when they were making those vows, he stuck by it. They have mended issues and unfortunately the girl will be left alone. Thapelo did not go back to her asking them to continue with the affair. It was a lesson that women and girls should not pursue married men thinking that he will leave his wife (urban female, 25-29, Free State).

Zolile’s decision to end his engagement to Veliswa surprised some who thought he should be glad to have found someone who will stand by him, despite his HIV-positive status. But this difficult choice was more often appreciated for carrying a message that one should not remain in a relationship where one is not satisfied or truly in love. Knowing that he was still in love with Nomzamo, Zolile’s authenticity to walk away was admired: ‘it taught me that if you are in a relationship and then you’re not happy, then you should just leave, rather than cheating and spreading disease’ (peri-urban male, 25-29, Mpumalanga). Zolile was seen as ‘responsible’ and ‘noble’ for ending his inauthentic relationship with Veliswa:

Another lesson I learned was that you shouldn’t get married if you’re not ready…. apart from the fact that Zolile knew he had HIV, in his heart he knew who he was really in love with. He wanted to move on and find happiness but his true love broke his heart long ago, so I think if he had carried on and married this girl he would have never truly been happy, so he ended things before it was too late and that was a noble thing to do (urban female, 30+, Eastern Cape).
Relationships are complicated, they’re not as simple as they look.... There’s a responsibility for both members, or whoever is active in a relationship, to act.... So as far as relationships are concerned, how you choose to deal with your boring partner, whether you tell them or not, or whether you stay in a relationship.... it’s your choice.... So two people can be in the same situation, but based on how they act, the outcome can be different. So Intersexions.... it made us think about such (urban male, 18-24, Gauteng).

Likewise, Two-Step was also admired for ending what could be considered an inauthentic relationship with Rea. When asked whether the series had any personal impact on her, an urban female shared how it helped her realise the importance of making better relationship choices, rather than settle for less. As a result, she shared how she decided to ‘stop dating’ for the time being:

\[\text{Just making better choices, especially when it comes to relationships.... Like right now, I’ve decided to stop dating for a while, at least a year.... I mean, not date just because I can, because obviously I can [chuckles], but you know, just be in the right space of mind to actually be in a relationship.... Yes, the right kind of situation where you’re able to commit to a person and trust them and whatnot (urban female, 30+, KwaZulu-Natal).}\]

Another female echoed this sense that she should not rush into another relationship, but rather consider her long-term goals:

\[\text{My behaviour is actually good, I can say. It made me realise that you should abstain, because right now I’m not involved. It encourages me that I should stick to that way, because HIV/AIDS is a very scary thing. I can’t imagine myself taking ARVs for the rest of my life, at this age.... I’m not involved, so I’m not into any sexual engagement, so I wanted to stick to my plans. Guys are so stressful, let me just stick to my instincts and my books and maybe afterwards I will start dating again (peri-urban female, 25-29, KwaZulu-Natal).}\]

Reflections on relationship values and what constitutes a ‘healthy’ relationship led many participants to conceptualise the importance of increased and improved communication. This was most often discussed within sexual relationships, but also with family members and friends (see ‘Communication’ section above); ‘a good relationship cannot be based on lies, on secrets’. The notion that honesty and open communication improves all kinds of relationships was oft expressed:

\[\text{One word, communication, which is like a personal philosophy. I always emphasise this to people from every level of my relationships, whether we’re just acquaintances, friends, family, but I always emphasise communication, because it can never be overemphasised. Not speaking about things only makes things worse (urban female, 18-24, Gauteng).}\]

\[\text{It helped me pay attention to the friends that I have and to cut some them. Also to have the courage to tell them the truth if I see something that they’re doing that is not right and tell them that if they continue with that kind of behaviour it would force me to leave them because those actions would lead us into trouble.... [It helped me] to choose better friends (peri-urban male, 18-24, Free State).}\]

\[\text{I loved it because it teaches me I have to be a man, an honest man.... I have to teach my kids, have a good relationship with my kids and my family (peri-urban male, 30+, Gauteng).}\]
Communication was conceived as a problem-solving tool, that it is better to talk through issue than leave when things get difficult, or even ‘boring’.

In life you need to be honest.... You need to be honest about everything. Speak to your partner openly, if there’s something that they’re doing and they’re not doing it right, talk to them about it (urban female, 30+, Mpumalanga).

I learnt from this series that if you are honest, honest to yourself and honest to the people that you live with, then you won’t have problems (urban male, 30+, Mpumalanga).

Ultimately, one peri-urban male reflected how he came to the realisation that sex is not the ‘only tool to build a relationship’, identifying both the need to communicate well and to know oneself as the building blocks of a meaningful relationship:

Sometimes with my friends, we would party, go to parties, or go to the club, and then from there we would be like having girls, coming with them to our house and we would do things. You know what I mean? But I got the impact that sex, eish, sex must not be the only tool maybe to build a relationship, but there are other ways. When you are in a relationship, you need to try to find out ‘what else should I do maybe to build a relationship’, because every time and every day you need to realise something new with your partner, something new, and you need to even develop yourself. You need to find yourself first. You need to find yourself, ‘where am I actually, what are my abilities’. I realised that sex must not be the only tool to build a relationship (peri-urban male, 18-24, KwaZulu-Natal).

Episode 17 featured a couple in an ‘open relationship’, in which they had an agreement that they could have sex with other people once as long as the other person is not a friend or a colleague and they discuss it with each other afterwards. This seemed to be a new and intriguing concept to most participants that discussed the episode, e.g., ‘I’d love to experience an open relationship.... How it feels to be in it.... Yes, I want to cheat, but for him to know that I’m cheating’ (peri-urban female, 18-24, Gauteng). Others found the idea ‘absurd’: ‘it’s like giving everyone a free ticket to do whatever they please’.

Where you and I are dating, you can do whatever you want, I do whatever I want, but we just have rules—I have never.... I always thought an open relationship, okay, I thought maybe you could try something else, but not to that extent, because they were so explicit about it. ‘I slept with someone and I did this and this and this’. Like whoa, to me that was new.... Like how could you be in love with someone who is sleeping around? (urban male, 18-24, Western Cape).

Many appreciated the initial ‘openness’ between Nathan and Chloe in terms of their communication with each other, if not their agreement about having sex which was described by one participant as ‘not ayoba’.

An urban female shared how while Interseions ‘makes us question things’, ultimately it is up to each individual viewer whether they do anything with what they learned from the series:
What I saw about Intersexions is okay, it teaches us all these things, like it makes us question things, like it gives you all these wild moments and whatever. But the minute Muvhango comes on at nine o’clock, like a part of Intersexions is kind of forgotten at the moment. Like it’s really forgotten, and what you do with what you learnt there is up to the individual. For instance, I remember this one episode I watched where they found out they’re brother and sister, those two, like I was so wow. I said to my boyfriend, ‘like what if you’re my brother’? At that moment it’s hot, it’s happening, but two days after that, like it’s fading. So you also go back to saying it’s an individual thing, like what you do about what you learnt there. You can learn it and it can have this ‘wow’ effect, but after two days, you go back to your normal lifestyle, and you go back to the lie, you go back to whatnot. It’s easy to do that. Yes, it does give you that effect, but what you do afterwards with it is up to you (urban female, 18–24, Gauteng).

**PORTRAYAL OF VULNERABLE GROUPS**

**Sexual minorities**

This section captures viewers’ responses to same-sex relationships, as they feature in the series through the storylines of Lorraine and Two-Step. Divergent views about sexuality, including homosexuality, bisexuality, and same-sex relationships, arose in the focus groups and interviews, ranging from expressions of absolute intolerance and resistance to same-sex relations to others that promoted acceptance and support of sexual minorities. If approval of same-sex relationships can be measured according to a scale, the majority of participants were located somewhere in the middle: expressing the need for tolerance of sexual minorities and same-sex relationships, but at the same time expressing some discomfort, prejudice, resistance or lack of understanding of homosexuality.

Existing attitudes towards sexual minorities and how viewers’ attitudes were affected or changed through exposure to the series will be reported. It is important to note that attitudinal change is a process; therefore the section on ‘lessons learnt’ covers identification and resonance with a particular storyline or message as well as new knowledge that was derived from the series. Finally, different forms of behaviour change that were directly related to participants’ exposure to series content on sexual minorities and same-sex relationships will be discussed.

**Identification and resonance**

Many participants spoke about how these episodes reflected real-life issues and represented them well. Several participants described experiencing an attitudinal shift such as becoming more tolerant and accepting of sexual minorities. Often this was expressed as finding resonance or identifying with a particular storyline or message and gaining meaning from it, rather than necessarily gaining new information about same-sex relationships. At other times, the series content was reported to trigger a change in perception or to communicate a message that was entirely new. Some forms of attitudinal shifts and behaviour change were related to exposure to homosexual friends or acquaintances as well as
exposure to the series; it is possible that a combination of personal experience and engagement with the health communication programme had an optimal impact in changing perceptions.

**Lorraine**

In episode eight, *Rough Justice*, a community activist and *out* lesbian (Lorraine) is brutally attacked, beaten, burned and raped by three men from her neighbourhood. She receives PEP and care for her injuries at the hospital, but fearing they will similarly take revenge on her partner, Lerato, she initially decides not to press charges. A confrontation with one of her rapists results in his being arrested and an older woman who witnessed the initial crime, but disapproved of Lorraine’s sexuality, realises the right thing to do is to come to her defence.

Numerous participants spoke about how episode eight impacted them and reflected a troublesome reality. Participants were touched emotionally by the episode; one participant revealed how much he related to the episode, describing it as ‘extremely deep’ and ‘really, really good’, that it was one of those episodes that ‘would get you, you’d forget that you’re watching Intersexions, you’d actually relate so much’ (urban male, 18-24, Western Cape). Participants from a number of provinces confirmed that the episode portrayed a very real and serious problem in their communities:

*If a guy, they always have that in mind that she is pretending, and they tell each other that: ‘We will not be fooled by her, once I have had sex with her, she will remember that she is a girl’. So I have seen that happen (rural male, 25-29, KwaZulu-Natal).*

Apparently this episode was often discussed after it aired; in this example, one person recalled how people criticised how the community did not initially support Lorraine and understood this to be a contributing factor to the violence she experienced:

*People talked about that episode.... they talked about the community who didn’t even support, because firstly, if that girl was knowing about the whole community that she is a lesbian, nothing would happen maybe to her, because firstly, the parents didn’t even know.... Those guys took a chance, because no one would care about them, they took a chance because of that (peri-urban female, 25-29, Western Cape).*

Many personally knew lesbians in their own communities who had been raped under similar circumstances or threatened with assault. One participant recalled how in the same week this episode aired, ‘my lesbian friend called me saying that she was almost raped.... She said she was walking alone at night in the street.... Luckily someone came up and helped’ (urban female, 18-24, Western Cape). Another said Lorraine was his favourite character and that the episode ‘touched me a lot’ as he had a close friend who was a lesbian and had been
raped. He appreciated how Lorraine was a role model in the way she sought justice ‘at the end of the day… because she had support’:

She was my favourite character, Lorraine…. That really touched me a lot because I had a close friend that was raped and who is also a lesbian…. I just liked that it was really out there. It was just one of those episodes… Because she didn’t give up after. She did not want to come out and go to the police and report the matter, but at the end of the day, at least I can just commend her for going back to fight…. because she had the support from parents and friends and cousins. They pushed her to go to the police station and report the case, so I love that people have support all the time (peri-urban male, 18-24, Gauteng).

Two-Step

Episodes six (‘Play the man’) and 20 (‘Truth’) tell the story of Two-Step, a professional football player who tried to keep his sexual relationship with another man (Sizwe) a secret until a journalist (Rea) uncovers the truth. They subsequently begin a relationship of their own. When Sizwe blackmails Two-Step in the follow-up episode, Rea helps Two-Step find the courage to accept himself and be open about his homosexuality, rather than being bribed and exploited. The initial moment when it was revealed that Two-Step had sex with men as well as women surprised many viewers and was one of the more discussed aspects of the series. Many participants enjoyed the Two-Step storyline and applauded his bravery in coming out about his sexuality. Some participants found parts of this story realistic and spoke about friends who had not come out; others shared about being gay themselves and having experienced relationships that resembled Two-Step and Sizwe’s. However, two male participants who identified as being either gay or bisexual found it significant that Two-Step’s moment of truth came as a result of being blackmailed, rather than from an authentic desire to be self-expressed (‘he didn’t have a choice’):

I would say he was pretending, and it’s not a good thing…. that means you don’t live your life fully. You are just pretending that you like this and that, although you know that you are thinking about something else on the other side. So, I think maybe he was stressed about it or something like that…. His journey was difficult, honestly. He didn’t have a choice at the end, to come clean…. Yes, he was trapped: he was going to pay like each and every year, or actually every month, for his secret (peri-urban male, 18-24, Western Cape).

Several participants (at least five) commented on how they found resonance and meaning in Two-Step’s story. These participants represented a mix of provinces, ages, and locality types. One female participant spoke about how she was ‘wowed’ by the Two-Step storyline and found the portrayal of sexual intimacy between Two-Step and Sizwe real and exciting (urban female, 30+, Mpumalanga). Another participant spoke about how he admired Two-Step ‘for his courage, that he shows the world that he’s
Another liked the story of how he comes out and wished her gay friend would have seen it as she thought it could have been a catalyst for him to do the same (urban female, 30+, Eastern Cape).

In one explicit example of identification with the series, one participant who has same-sex relationships spoke about how he had a casual sexual partner who identified with Two-Step when they watched the series together: ‘I’m Two-Step, his character is exactly like me’. Like Two-Step, his partner would lead what he referred to as a ‘double-life’ and would not publically come out about having male sexual partners. This participant stated that he stopped having relations with this man, precisely because he continues his relationship with his girlfriend and ‘is not the kind of person I can build a future with’ (rural male, 30+, Eastern Cape).

At the time that the Two-Step episode played, I was seeing a young guy, we weren’t together, I’m single, but there are times when you get lonely and you call that person just to hang out, nothing serious. So we were watching the Two-Step episode together and he was like ‘I’m Two-Step, his character is exactly like me’ and I replied saying I’m glad he saw that and I didn’t have to point it out…. He’s got a girlfriend that he always gives excuses about being busy or having to do things for his family, when in fact he’s coming to see me…. He tells me that he loves me and he says he is gay and that he would like a future with me but is afraid of the stigma and judgment from society that comes with being an openly gay man…. So he lives the double life that Two-Step lives. He tells me that he doesn’t love the girl he is with, he loves me and I’m honest with him because I tell him that I don’t love him, I’m just with him for sexual pleasure once in a while because what he’s doing to that girl is unfair. He’s basically leading her on, so I no longer talk to him because he’s not the type of person I can build a future with and I’m looking for someone who can be on the same level as me…. I still have other dreams and ambitions. Sometimes it feels like some men use you because…. it’s a fashionable thing for them to hang out with gay men, because they see us as having lots of money, so they think by hanging out with us, we’ll spend money on them and they’ll get away with it because everyone would never think of them as being gay (rural male, 30+, Eastern Cape).

A couple other male participants who have sex with men shared being able to relate to Two-Step’s character and the challenges he experienced coming to terms with being gay. One of them described how difficult it is to ‘come out’ and have ‘that self-acceptance’:

I can also relate to that. You know, it’s not easy, like coming out. I was not like this before, I was in the closet. Especially during high school and the first years of varsity, it was not really easy coming out, like being you, because you just feel like ‘okay, everybody is like this’ and you just feel like ‘I’m the one who is different’. Maybe you just feel people won’t accept you or understand you or maybe they will judge you for the way you are or for whatever you do or for whatever sexual preference you choose to fall under. So, I think I could relate; it’s not easy…. coming out and having that self-acceptance. It’s not really easy (peri-urban male, 18-24, Gauteng).

Reinforced positive attitudes

A perceived message that sexual minorities should be accepted and supported came from all provinces, age groups and sexes, with marginally more participants from urban and peri-urban Gauteng expressing this perspective. Several participants appeared to have pre-existing progressive and egalitarian views
about sexual minorities and resonated with the message about the importance of accepting sexual minorities, an attitude which was reinforced by their engagement with the series. For example, one participant described how *Intersexions* resembled how she experiences her own personal journey, whereby she has moved ‘beyond just tolerance to accepting it [homosexuality], accepting a person for the fact that they are a human being, they’re a person of value’ (urban female, 18-24, Gauteng). Another participant stated that one should be able to be friends with sexual minorities: ‘I think we must be friends of [with] them. It doesn’t mean you are going to be a lesbian or you are going to be a gay if you just say ‘hello’. Do you understand what I’m saying?’ (peri-urban female, 30+, Western Cape).

Two rural females disagreed with other participants in their focus group who were intolerant towards gay men, expressing an understanding that homosexuals are born with same-sex desire rather than choosing it and therefore ‘we have to accept them’:

*F2:* Yes we have to accept them…. They will give birth to the baby as a boy, so we have to accept that ‘my son doesn’t have those feelings, he doesn’t love girls, he loves..., he feels comfortable when he is touched by another man’….  

*F1:* I think I would accept a gay person because some of them are really born like that (rural females, 18-24, Mpumalanga).

The series provoked engagement at the level of identification and resonance with the storylines and their particular associated messages, as it picked up on existing progressive views about sexuality and gave them weight, basically re-emphasising a perspective that some viewers held already. Moving beyond resonance, this next section will move on to document what were made explicit as new lessons learnt through engagement with the series.

**New lessons learnt**

There were several examples of new lessons learnt around same-sex relationships articulated by participants from different research sites across the country. The intensity of the experience of being affected by this new learning varied between participants, with some describing transformative experiences. Significant examples of new learning from the series included an empathetic engagement with the subjective experience of same-sex desire, the fluidity of sexuality—including bisexuality, acceptance and support of sexual minorities, and knowing how to be more comfortable around people of alternative sexual orientation.

At least four participants experienced empathetic engagement with the concept of same-sex desire. Often they would describe the process of how they appropriated new learning, for example one participant described how the intimate relations that were portrayed between Two-Step and Sizwe initially shocked her, but at the same time, ‘I learnt something from it’. She tells how as a result, she developed a deep identification with men who have sex with men, at a human level:
I’ve watched eKasi Stories. But with Two-Step and Sizwe, it was like ‘wow... two straight men, the man who falls in love with women?’ ....It was very funny in a way. I was shocked. I was shocked, but then learnt something from it.... That there’s more to a person than what you see on the surface. And people go through stuff that they can’t tell other people, they just keep it in and deal with it their own way. And people receive pleasure in various places and in various different ways.... It was so real (urban female, 30+, Mpumalanga).

Several participants spoke about gaining a new perspective about gays and lesbians as being no different to themselves, which formed the basis for increased acceptance of people of alternative sexual orientation. One participant described how he and others he knew used to think that gay or lesbian people were sick or insane; through exposure to Intersexions, he experienced a shift in attitude ‘if you are a gay, you are a human being at the end of the day’ (peri-urban male, 25-29, Gauteng).

An important lesson learnt from the series among participants was around the fluidity of sexuality, bisexuality, and how men can have sex with men and at other times have sex with women and appear to be ‘straight’. This can be attributed to episode six, which elicited empathetic engagement with the subjective experiences of men who have sex with men. Three participants mentioned this as being a lesson learnt from the series. One participant spoke about developing a new understanding that someone who seems ‘good and straight’ could in fact be having sex with men and keeping it hidden because of the intolerance that exists in society:

Something that I took from the episode is you can’t, just because a person seems this way, like good and straight and whatever, you can’t make your own perception.... [Two-Step] kept up his whole player role to hide the gayness, the other half of himself. I think it’s because of society that he actually hid himself, or his gayness.... Emotionally he was always stressed like when he was alone. I think the reason he threw himself at girls, or he was a player, personally was to like fill up the emptiness of not being allowed to be himself (urban female, 18-24, Western Cape).

Acceptance of sexual minorities

Several participants spoke about learning to feel more comfortable with people who identify as gay or lesbian through exposure to Intersexions. In one instance a participant spoke about how the series helped him to interact with gay people more normally; he described how previously he would ‘move away’ from gay men, feeling discomfort.

One of the key lessons learnt from the series as reported by participants was that sexual minorities must be accepted. There were at least five examples of participants from different localities reporting how the series had encouraged them to be more open and accepting of sexual minorities. One HIV-positive
participant spoke about learning from Two-Step’s story, that one’s sexuality is one’s choice and that ‘we’ as heterosexual people must accept and support sexual minorities:

M: I mean the part of the soccer guy being in love with a man, being in love with a lady. It shows that everyone has the right to sexual orientation, and people must accept that. You can’t change somebody’s choice.

Facilitator: Did it change the way you maybe think towards gays at all?

M: To me, I’m supporting, it makes me to be more supportive to gays.

Facilitator: So it reinforced that?

M: It reinforced that, because I believe that any community member, on his or her activity, it depends what kind of activity. If a gay, he’s a gay, it’s his choice. If he or she becomes infected, me I’m infected but I’m not gay, so what we need is unity and then educate each other, be supportive to each other (peri-urban male, 30+, Gauteng).

A participant from Cape Town spoke about the importance of acceptance; using different words to give voice to her feeling that sexual minorities should not have to hide who they are, she states ‘they need to express themselves’ and that ‘we’ as heterosexuals must ‘just know that it’s here’:

I feel like it was right and it should open people’s eyes that it’s happening. It can’t hide. They’re people themselves. They need to express themselves, like you know what? ‘I don’t like girls, I like guys, I want to be happy. Even if you don’t accept it, know that I’m there. I’m here to live’. You don’t have to like it, but just know that it’s here. Don’t hide. Why must you hide? (urban female, 18-24, Western Cape).

**Increased empathy**

Many participants described being deeply affected by episode eight and felt strongly for Lorraine’s character and the pain she experienced. In each instance this storyline was discussed, the actions of Montsho and his friends were criticised and contextualised as ‘not right’. Many expressed feeling extremely emotional while watching the episode, describing how it ‘was too painful’ or ‘broke my heart’:

That episode was too painful, because that lady, she is a lesbian. She doesn’t want a guy with her, but the guys take chances because they know that she is a girl. But that one was not right. It was too painful (peri-urban female, 30+, Western Cape).

I was going to say it was emotional to me. The thing is, I saw that in our communities, we are not more informed about gays and lesbians. Also, there are no schools that teach us to accept.... To me, it was educational (peri-urban male, 25-29, Western Cape).

Such reactions suggest that many viewers identified with Lorraine’s character and were able to feel empathy for her, transcending any heterosexual / homosexual barrier that would have viewers regard Lorraine as ‘other’. For example, this speaker shared how despite not ‘being homosexual’, she was nevertheless saddened by what was depicted in episode eight:
[The character] I don’t like is that gangster guy…. it was the most violent episode…. it was just a very sad..., you know. I don’t know, I can’t relate to being homosexual, but I just think it’s unfair what people are doing (urban female, 25-29, Gauteng).

I was angry with those boys about what they did to her, I was angry because it was so painful, it was so painful. I felt for that girl (rural male, 25-29, KwaZulu-Natal).

Lorraine’s rape was understood as a violation, fuelled by a lack of acceptance by her rapists and the larger community. The act was met with disapproval and described as ‘unfair’, discriminatory, and a violation of human rights:

It hurt me because they were discriminating against her and weren’t accepting her, but rather raping her; hitting her and doing all sorts of horrible things to her and that hurt me very much…. I think that they didn’t accept lesbians at their place or they didn’t like lesbianism (peri-urban male, 18-24, Free State).

It pains me when they kill them.... because they are human beings also (peri-urban male, 25-29, Mpumalanga).

Several participants connected the storyline to what happens in their own communities, both the extreme violence that some lesbians experience and others’ lack of acceptance, which was seen to drive the problem:

F2: It pained me when the lesbian girl got raped just because they refused to accept that she’s a lesbian....

F1: The episode that broke my heart was the one about the lesbian. We cannot accept that a lesbian is a lesbian, we see them getting murdered on the news. We see and we read about this and that is why I can liken it to what is happening in reality (rural females, 25-29, 30+, Free State).

Well there are a lot of attacks that I see in the community at large of lesbians and gays. Within the church they are being accused, a lot of preachers accuse them. Yes, but the true thing is you cannot accuse a person at a distance not knowing what is happening with him or her till you sit down with that person and communicate with him or her. So it has happened a lot of times, preachers accusing people yet they do not know or do not understand what is happening (rural male, 25-29, KwaZulu-Natal).

A critique of a certain oppressive form of masculinity forms many of these responses, as men like Montsho are situated as cruel and intolerant; their sexuality seemingly threatened by women who have sex with women. Such men were criticised for abusing their power and for acting on a violent impulse to demonstrate ‘true masculinity’:

So it shows that this thing of power, male power, is still working, that a male, ‘I’m a man, you are a woman, so why do you want to be like me’? So, in that, it shows the brutality of a man against a woman and then you relate this into power in other campaigns (peri-urban male, 30+, Gauteng).

So I’m saying people don’t understand the way lesbians have sex and what kind of satisfaction two women can give each other, it kind of annoys men that women aren’t interested in them. But also on
the other hand lesbians like provoking guys by acting too butch and again, guys don’t like that. They don’t like feeling small, especially not to a woman. That’s why guys end up wanting to rape lesbians because they are trying to take away the power that the lesbians have and show them true masculinity (rural male, 30+, Eastern Cape).

Having identified and empathised with Lorraine was followed by a clear call to be more supportive and accepting of lesbian women. For example, this female understood that ‘we must be friends’ with them and that being friendly to gays or lesbians will not in turn make you one:

About that episode, that episode was so sad because if you see in Khayelitsha and Gugulethu, these things are happening. So when the men see that lady is a lesbian, they say ‘no sisi, let me just give you some skuif’. He knows that the lady can’t skuif. She says ‘no’, then they just grab her, and then they say ‘I will show you who I am’. Then he says ‘I will do this to you’, then if you know that person does that thing to you, he wants to be sure that you want to be killed. So I think we must be friends of them. It doesn’t mean you are going to be a lesbian or you are going to be a gay if you just say hello. Do you understand what I’m saying? Sometimes I think it’s like jealousy (peri-urban female, 30+, Western Cape).

Another female participant powerfully described how her engagement with this episode changed her personal attitude about sexual minorities to one that is more ‘accepting and open’. The episode is positioned as the catalyst for her now being able to see gays and lesbians as human beings, first and foremost. She critiques her previous intolerance, recognising how not speaking out against such violence actually condones it:

Why should it matter in the first place? Why must a human be so violated, only because of such a small matter? I think that has made me more accepting and open in knowledge. It doesn’t mean I’m going to go out and be a lesbian, but it means that I acknowledge that there are such people, but they are people at the end of the day before being gay, before being lesbian. So, that’s what it did for me, because the rape scene was quite visual and strong and powerful. I felt ashamed of even my previous intolerance of gay people. It means I contribute to such rape if I’m going to be intolerant and don’t want to hear anything. It means ‘guys, you have the right to rape these women’ (urban female, 18-24, Gauteng).

Overall the reaction towards the rape of Lorraine was an outcry among participants against such a discriminatory act of violence towards lesbian women. One participant experienced this deeply and spoke about the importance of promoting the rights of lesbian and gay people by taking a stand against discrimination and violence:

I think I became much more comfortable around the idea and especially the whole lesbian issue, how she was victimised was even way, way sadder. It made me feel like we need much more authority, enforcement, around such allegations, even on campus (urban male, 18-24, Gauteng).

**Partial shifts in attitude**

Some lessons took the form of a shift in attitude, rather than a full transformation. More than fifteen participants conveyed an opening or a partial change in their opinion of same-sex relationships, but did not make a significant step towards absolute acceptance of such diversity. Often this came through as
participants articulating a message about the necessity of tolerating sexual minorities, while at the same time, giving voice to their existing and unchanged prejudice towards gay, lesbian or bisexual people. This was reported by a range of participants, both male and female, from different age groups and localities. One participant described how he had become more tolerant towards what he describes as ‘tomboy lesbians’ after watching episode eight, but maintains his prejudice towards gay men:

Prior to the episode, I always didn’t like, like tomboy lesbians. Again also, it’s with society; society accepts two girls, ‘they’re both sexy, they’re girl and girl’. Society accepts that. However, the second it’s a tomboy and a tomboy, it’s a whole different story, if you get what I’m trying to say? So for me, I didn’t like it, but then after the episode, after they beat that woman, I was like ‘okay, you know what? Maybe I should change’, and my opinion did shift slightly in terms of being more accepting to lesbians. But gays, I still stand very firm on that (urban male, 18-24, Western Cape).

Another participant echoed this view; he expressed intolerant views of gay men during the focus group and admitted being threatened by their sexuality, but curiously indicated that he would not mind if his own girlfriend were involved with another woman:

I don’t have problems with lesbians…. Because ladies, if my girlfriend can start saying that she is lesbian I won’t mind I would just say hey…. Girls are soft and guys are tough. If two men are touching, even if you can look at the skin it’s not the same (rural male, 18-24, Mpumalanga).

Another participant expressed an understanding that homosexuality is not a choice, but phrased with an inability to consider being a lesbian herself: ‘you can’t choose who you are. That thing is in you, inside you. Even if you can watch that thing, I can watch Intersexions, but I can’t say I also want to be a lesbian’ (peri-urban female, 30+, Western Cape). There were many examples of lessons learnt about tolerating sexual minorities taken from the series, which were not necessarily transformative. For example:

It is very important that in our society these people live with us and these things that have been happening in Intersexions are the real things that are happening in our society. There is no need of ignoring it, we have to be with it whether we like it or not, that is the reality (rural male, 25-29, KwaZulu-Natal).

It was often the case that participants would express some tolerance of sexual minorities, but this would be qualified with a prejudiced or ignorant statement about homosexuality:

F4: I’m not against gays; I don’t mind them, they can live the life that they want to live but the question that I asked myself is where they end up in being gay.

F1: I love them…. I’ve never heard of an elderly woman being lesbian or an elderly man being gay (rural females, 30+, 25-29, Free State).

Intersexions was credited for ‘making us talk’ about difficult issues like homosexuality. A female shared how exposure to these episodes prompted her (and presumably others) to adopt a more relativist, non-judgmental attitude towards gays and lesbians. She credits the series for sparking debate about this issue and for ‘broadening’ the mind of some viewers who previously may not have been as aware of ‘such
people’. Yet, it is interesting that being gay is still conceptualised as comparable to ‘having my own mistakes’, rather than seen as a legitimate way of being:

We tend to judge people, we tend to judge each other so much so that we even have our own mistakes. ‘I have my own mistakes, why should I judge you if I think that is right’? I think it’s more of we still need to communicate about issues, we still need to talk about things. We talk about gays and lesbians, ‘who am I to say you are wrong to be gay? You know, I’m not God. If it feels good for you, if you feel it’s right for you then go for it, as long as it doesn’t affect my own life’. That’s why I’m saying it [Intersextions] brings a debate between issues. It makes us talk about issues. It even gives other people to explain about what they believe in. It made us stand our ground and say if ‘I’m gay, I believe in gay’, then why not? It also talks on behalf of other people. Maybe you’ve been in a place where there was never a gay person, so now it broadened your mind that ‘oh, there are such people, and this is how they live’. So, if they should have the third series, why not? (peri-urban female, 25-29, Gauteng).

It is of interest to observe how an expression of tolerance was mixed with some deeply held prejudice, which was occasionally connected to religious views. One participant stated that she has gay and lesbian friends and it is not for her to judge, because ‘their god will be the judge, not me, because I’m also not perfect’ (urban female, 30+, Mpumalanga).
Behaviour change

There were few explicit examples of behaviour change related to this theme. However, one stands out as being a significant attitudinal shift, which then led to behaviour change. A male participant described how episode eight, which featured the ‘corrective rape’, changed his thoughts and made him accept that lesbians ‘are who they are’. This was a dramatic and significant shift for this participant, who after finding out his girlfriend had an affair with another woman, had been contemplating raping this other woman. He clearly situates his intention as an act of revenge, since he does not accept lesbians ‘as men’. He described how he empathised so much with Lorraine’s character in this episode that he changed his mind and decided not to seek ‘revenge’, realising the ‘problems lesbians face in our community’:

MI: In relation to that Lorraine story, it changed my thoughts because at the time, I was in a relationship and my girlfriend was in another relationship with a lesbian. So, what that guy did, it was on my thoughts that ‘I was going to do that with that lesbian’. So when I saw that scene, that episode, it kind of changed my thoughts, and then accept that they are who they are.

Facilitator: So before the episode – just so I understand you – you thought maybe if I did this to someone, it would change them?

MI: Yes.

Facilitator: You were thinking of doing that?

MI: Yes.

Facilitator: And then you didn’t because of that story?

MI: Yes…. My girlfriend, she had an affair with a lesbian. What I was thinking at that present time is to go to that lesbian and have sex with her, as revenge, since I do not accept them as men…. I was watching this scene and I was emotionally hurt at the same time.

Facilitator: So what you saw in the episode, you could relate and sympathise with Lorraine?

MI: Yes, and the problems that lesbians face in our community (peri-urban male, 25-29, Western Cape).

A male participant gave another personal example of behaviour change. Having secretly been concurrently involved with both a male and female in the past, he identified with Two-Step’s character (‘I was like that’). He explained how his engagement with these episodes led him to resolve not to date two genders at the same time in the future (or to hide such a relationship); he also reports learning that he ‘shouldn’t hide who I am’:
M1: The one about Sizwe and Two-Step. Those things, they do happen. Like I have seen it around, like someone that is dating a girl but interested in men as well, but hiding it. That taught me that I shouldn’t hide who I am. I should be honest about me, myself actually.... I would say the Two-Step story, I can relate to that one.

Facilitator: Do you feel like you’ve been in a similar position?

M1: I was actually.... it’s a long story [laughs]. I grew up in a rural area and while I was doing grade eight I think, I was 14 or 15, I can’t remember, I was in a similar situation as well, but I wasn’t emotionally involved. I was sexually engaged with this person.

Facilitator: It was kind of hidden from others, is that what you can relate to?

M1: Yes.... I kept it that way. Like I will just tell someone when the person is asking me about it and I will let them know what is happening.

Facilitator: So then when you watched Two-Step, you were kind of like...

M1: Yes, I was like that [laughs].

Facilitator: And if you were to be again, do you think you’d do anything differently?

M1: I wouldn’t get involved with two genders at the same time. Maybe if I’m bisexual I can date one gender at a time.... not dating a girl and then doing a guy at the same time, no.

Facilitator: Or hiding it from them too.

M1: Yes (peri-urban male, 18-24, Western Cape).

One participant spoke about becoming more comfortable about same-sex relationships, during his exposure to Intersexions. Demonstrating how an attitudinal shift led to behaviour change, he is now able to relate to gay people normally, whereas before he would be ’like a fish out of the ocean’:

Facilitator: What was your attitude before towards gays?

M4: Well, usually I wouldn’t show it, but I would tend to be, like secretly or just move away.

Facilitator: So not comfortable.

M4: Not comfortable. I’d feel like a fish out of the ocean, but now, like I’m comfortable.

Facilitator: And you’re saying you’ve actually got a friend who is gay?

M4: Yes, I do. I interact with them normally.

Facilitator: Is that since the series, or since before the series?

M4: Well, I think during the series, because usually you would have your normal eKasi stories with gays involved, but they would show you the normal thing (peri-urban male, 25-29, Gauteng).

The series’ portrayal of same-sex relationships also led to behaviour change in the form of increased interpersonal communication about how gays and lesbians (other sexual minorities were not explicitly discussed) should be accepted within society. A participant reported how these episodes prompted
debate at their local councillor’s office, with the conclusion being that ‘there is no need of ignoring it [homosexuality], we have to be with it whether we like it or not, that is the reality’. This comment represents a shift in attitude towards tolerance (albeit not without some underlying prejudice towards sexual minorities). This was catalysed with the adoption of a particular behaviour—in this case, deliberate interpersonal communication about needing to accept ‘these gays’:

Like last week, we had about fifteen minutes’ debate about the last episode; we were in the councillor’s office arguing about these gays. The outcome of our argument was that it is very important that in our society these people live with us and these things that have been happening in Intersexions are the real things that are happening in our society. There is no need of ignoring it, we have to be with it whether we like it or not, that is the reality.... In our group there were two sides, there were those who were saying: ‘no gays, that thing is out of order’ and there were those who were saying: ‘guys we have to understand it is here’. But at the end of the day we reached a conclusion that ‘gays are here, so we have to live with them’ (rural male, 30+, KwaZulu-Natal).

Likewise, an interviewee recalled how episode eight led to greater discussion in his community; after some people misunderstood the episode to ‘encourage guys to rape lesbians’, he took the opportunity to use the episode as a platform to debate what can be done ‘as a community.... to protect our lesbians’:

They were saying ’hey man, these gays are raping this lesbian, these gays, they are encouraging guys to rape lesbians’. So I said ‘no, maybe it’s not saying that. It’s saying look at the reality that’s happening, what do we say, what do we do as a community’. It gives us to act against that and to protect our lesbians. You know, I like that part because it has made debate on it, because one will say ‘look, it’s encouraging us guys to rape’. ‘No, it’s not encouraging. It’s saying let’s protect them, because if it was your sister, what would you do? You would say they’re right because she is a lesbian”? ....I was part of these debates.... People got the message that ‘if my sister can be like this, purely because she is a lesbian, what must I do”? It makes people to be creative in terms of protecting the lesbians (peri-urban male, 30+, Gauteng).

In what was possibly an unintended effect of the series portrayal of same-sex relationships, one participant described how her behaviour had changed once she realised that sexuality is not static, and that someone can have desire for someone of the same sex and still have sexual relations with the opposite sex. She gave an example of having a gay friend, whom she used to share her bed with. Deriving a lesson from the series that a man can appear gay and still have sexual relations with women, she is afraid that this friend will want to have sex with her and resolved to therefore stop sharing her bed with him. In this case it appears that new learning from the series has contributed to a prejudiced attitude towards gay men, as this participant stated that ‘now.... I don’t trust them’:

I never used to have a problem with these gay things, but after I saw the gays and lesbian episode, it makes me to change because I used to share my bed with a gay man and I couldn’t think that they are going to do any harm to me. But since I watched that man having sex with a man and having sex with a woman, I have a problem now to sleep with them, because I don’t know what’s going to happen, because it shows that they can change.... I was sharing a bed sometimes with gay men in my house, so from that episode I have changed now because I don’t trust them. What is going to happen if they can have sex with men and they can have sex with women? (urban female, 25-29, Mpumalanga).
Unchanged attitudes

The series had significant impact in both shifting and transforming attitudes and opinions towards same-sex relationships and sexual minorities. However it should be acknowledged that there were many participants whose views remained unchanged and still held on to their deep-seated prejudice towards people who engage in same-sex relationships. These expressions of prejudice were vocalised as fear, dislike and condemnation, often from a religious perspective. Some statements of outright rejection and intolerance of homosexual people invoked religion, apparent in certain references to sin and to God (*because God does not want that*, rural female, 18-24, Mpumalanga).

Prejudice came from a range of participants, male and female, from different provinces, from urban, rural and peri-urban, age groups. It can be surmised that homophobic views are prevalent throughout the country, though there were fewer articulations of extreme prejudice from Gauteng and KwaZulu-Natal in this sample than from other provinces. On a more positive note, one can observe how the research conducted at each geographical location gave rise to as many, if not more, expressions of support, acceptance and solidarity with sexual minorities as it did to expressions of homophobic prejudice towards sexual minorities. Thus, for example, in peri-urban Mpumalanga, participants expressed resistance to homosexuality, as in one man who called it an *‘abomination’* (peri-urban male, 25-29, Mpumalanga), while a 46 year-old male interviewee from the same province applauded Two-Step’s courage in coming out about his sexuality.

Findings around unchanged attitudes and existing prejudice are documented here; with some examples given that demonstrate the range and depth of homophobic prejudice that exists among some participants. There were some attitudes expressed that were critical of homosexual identity and behaviour that were brought to the surface by viewing Intersexions. Some participants stated that they simply did not like and would not tolerate homosexuality, admitting that they *‘have a problem with gays and lesbians’* or simply, *‘I don’t like gays and lesbians’*. Some expressed being *‘forced’* to tolerate homosexuality, although this was not something that they would choose to do. As one participant stated:

*Now we are forced by the constitution to accept that these people are like this and you must respect that. What we see on TV.... they are showing.... gays and lesbians, I mean obviously we follow. So now we are respecting them, they are here and we can’t do anything about it* (peri-urban male, 30+, Western Cape).

Some would express strong negative emotions towards sexual minorities, which was especially associated with the possibility of being approached sexually by a lesbian woman or gay man. This points to a deep-seated fear or insecurity around sexuality that was brought to the surface through exposure to Intersexions. In this excerpt, lesbians are criticised for subverting dominant gender norms in wanting to *‘become men’*.
M9: I have a problem with gays and lesbians, especially with lesbians. You find a very, very beautiful woman, and then she starts to smoke, and even when they greet you, they greet you with the tsotsi taal, ‘eita, howzit’, and those things, and that woman ends up being an ugly woman....

F6: To add to M9.... my problem is especially about lesbians. You find those women want to be like men. They want to do men’s stuff. They start to smoke, they start to take drugs, they start to drink, and they want to change their life to become men. So I’ve got a problem about that, because now they end up doing all these things that men are doing.

Facilitator: Did you see the episode with the two ladies who were partners, on Intersexions?

F6: No, I didn’t see it.

M8: That one that got beaten because she was a lesbian? ....I know that one....

F5: I saw it. I also have a problem with lesbians. I don’t have a problem if maybe F2 is dating with F1, it’s fine, but then F1 mustn’t come to me, because I’m not the type, and propose to me. I hate it (peri-urban male and females, 25-29, Mpumalanga).

It was often the case that female participants experienced resistance in regards to lesbian women and the same was the case with male participants towards gay men. Often this was based on a fear that a person who has same-sex desire is going to ‘propose’ to them, which was associated with a feeling of insecurity and fear. Sometimes it was expressed as pure intolerance and lack of understanding, stating that those who have same-sex relations must be kept far away from ‘us’ heterosexuals:

I have this problem of gay men. I mean, how can you date a guy while you’re a guy? When it comes to kissing, a guy usually has this moustache, how can he kiss a guy? How can he date someone who is just like him? Like we are both having this, a beard, how do you date someone like that? When you’re in a club, when that gay man gets drunk, I’m dead sure he’s going to come to you, he’s going to leave his partner and go to that one. The one who is just straight, he’s just a guy, then he goes straight to the guy and he wants something.... I won’t entertain that. I don’t like it. I can’t talk about it, because they haven’t done something in front of me. I just see them walking there, then that’s it. They can walk there (peri-urban male, 25-29, Mpumalanga).

In one of the more disturbing responses, a participant professed that he would commit an act of violence if they demonstrated their sexuality in front of him. He also reported that he would end a friendship with someone who came out as gay; in both cases, his fear appears to underlie his extreme reactions to these hypothetical examples:

F6: You have heard that when he sees gays kissing he feels uncomfortable, just think that gay standing in the street and M4 approaches. What is he going to do?

M4: I would change the street.

F6: Let’s say there are gays kissing each other at the street and M4 is approaching in that street. Think what M4 will do in that immediate time.

Facilitator: What would you do M4?

M4: I will be scared; when they are kissing I will hit them.... If they are in the street, there are kids here....

F6: They are teaching our kids... [Laughter]
M4: Yes there are kids, so what would kids say when they see men…. If my friend comes and tells me that he is gay, we won’t be friends anymore….

F6: I think that he is afraid that he might touch the friend and the friend starts saying that he has feelings for him. He is afraid of that, that the friend might start proposing him (rural female and male, 18-24, Mpumalanga).

Several participants expressed discomfort with what could not be classified as purely ‘gay’ or ‘lesbian’ behaviour; this included bisexuals as well as women having sex with women and men having sex with men, but who do not necessarily identify as being homosexual. For instance, an issue several participants appeared to have is with men who change their sexual partners from women to men; here being unable to define or categorise their sexuality was experienced as problematic. One participant indicated that while he supports gays and lesbians, he struggled to make sense of how a man could have sex with both men and women: ‘that is the one I do not understand’.

Facilitator: How do you feel about men that sleep with other men?
M: I do accept it because there are gay people in our society, but I wouldn’t want to do both sleeping with a man then after also sleeping with a woman. In that way I feel that it’s not on.

Facilitator: How do you feel about women who sleep with other women?
M: I also accept it because we know that there are lesbians in our community. I’m okay with it…. I don’t have a problem with it (peri-urban male, 18-24, Free State).

Many participants spoke about what they described as ‘after nines’: men who present themselves to be heterosexual and have relationships with women, but also have sex with men in secret (peri-urban male, 25-29, Mpumalanga). Overall, participants found ‘after nines’ such as Two-Step and Sizwe a difficult group to understand or be comfortable with—it appeared that participants were happier once they could categorise and ‘know’ a character’s sexuality.

There were some reports of viewers being resistant to Intersexions content on same-sex relationships, and would either avoid watching these particular episodes, or criticise it openly for ‘promoting being gay’ (urban female, 18-24, Western Cape). She recognised that the series might be trying to encourage people to be open about their sexuality, but she ‘just personally think[s] that it’s wrong and we should just try and get people to be straight [laughter] ‘ (urban female, 18-24, Western Cape). It was reported (second-hand) that these episodes apparently deterred other viewers from watching Intersexions:

I remember when I talked to my neighbour…. I told him about Intersexions. He said ‘what? That shit about gays?’ ….and then he said ‘no, I don’t watch that shit’ (peri-urban male, 25-29, Mpumalanga).

There were also some unintended consequences or lessons derived from the series, that played into viewers’ deep-seated fears about sexuality and the possibility of being involved in a same-sex relationship. For example one participant spoke about how a friend and fellow football player had been
sending him half-naked pictures and after viewing the series he was now very worried, stating that this new awareness ‘got me scared’ and is therefore a negative feeling (urban male, 18-24, Western Cape).

**Recommendations**

Some criticisms and recommendations given by participants who identified as gay about the portrayal of Two-Step and Lorraine and the process around how they disclosed being gay and lesbian. It was suggested that there was insufficient context provided to how both characters decide to come out into the open about their sexuality. In the case of Two-Step, one participant suggested that his coming out in public appeared to be more due to pressure in the form of financial blackmail and the audience did not get insight into the emotional journey he went through in order to make the decision:

*He was in the closet, but let me just say, maybe if that guy didn’t come and threaten him, or try to blackmail him, would he have come out? I just feel that they didn’t deal with the emotions or the feelings of the character very well, for me.... I wouldn’t say they need to come out, I’m just saying they need to tell the story more in detail. For me, I don’t think there was enough clarity. For me it just showed okay, this is Two-Step, he’s a soccer player, and then he’s bisexual or whatnot, and then comes the blackmail part and then that’s when he decides to come out. So for me, like it couldn’t deal with the emotions (peri-urban male, 18-24, Gauteng).*

This participant also wanted more insight into, and representation of, Lorraine’s feelings around what it was like for her to come out publicly about her sexuality, for her character to have had more of a voice to articulate about being open about her identity as a lesbian. He also thought there should have been more exploration into what drove Lorraine’s rapists to attack her, in order to shed light on a ‘solution’:

*I would have just liked maybe Mr V to put more focus on the rapist, because now it doesn’t highlight, or doesn’t really give enough detail of why, what really drove him to rape Lorraine. So for me, I didn’t get clarity on that story. I just saw Lorraine got raped and then the mother was just there to tell her ‘no, you need to change’. I couldn’t understand the initial story, or was it to show that lesbians do get raped, and then it ends there? ....For me, like honestly, I could not get the solution, like ‘why did that guy rape her in the first place?’ Like what was the trigger for him to rape her, besides homophobia, because I think they were just showing just homophobia, but they didn’t go into the details. Was there maybe something wrong with him, because I think there has to be something (peri-urban male, 18-24, Gauteng).*

Another gay participant criticised *Intersexions* for not depicting male characters that were truly ‘gay’, as opposed to bisexual:

*They didn’t really show gay men. Both the characters who were portrayed as ‘gay’ were actually bisexual. They both had girlfriends and were perceived as straight by those around them. There wasn’t an openly gay character (rural male, 30+, Eastern Cape).*

A recommendation was made for more episodes about sexual minorities ‘so that everyone can learn about them and understand them’ including youth, and the older generation:

*Facilitator: Do you think these situations happen in Khayelitsha? Are there lesbians who are being raped for that same reason?*
FI: They are.... I think the old people, our parents need to be more understanding about those lesbian kids because we as young girls, we as the youth, there are some of us who didn’t even understand them, but there are still challenges about that. There need to be more episodes that show about lesbians and gays, so that everyone can learn about them and understand them (peri-urban female, 25-29, Western Cape)

Conclusion

Overall, Intersexions had a significant impact in affecting viewers’ perceptions of same-sex relationships and sexual minorities. Several participants gained new insight into or knowledge of, same-sex relationships, echoing key messages around acceptance and support of sexual minorities and solidarity with them in the face of discrimination and violence. Many participants spoke about being more tolerant of, comfortable with or empathetic towards sexual minorities after viewing the series. There were a few examples of viewers’ achieving deep insight into the fluidity of sexuality and the subjective emotional journey that a person who has same-sex relationships may go through. Many participants found resonance with the storylines of Lorraine and Two-Step and related this to their own personal experience, or that of friends, relatives, or other community members.

Some participants reported a partial shift in attitude, expressing some greater acceptance while still holding onto a prejudiced view about sexual minorities. In particular, the idea that one can have same-sex relationships and relations with the opposite sex (sometimes referred to as bisexuality) was experienced as problematic, demonstrating that people like to be able to categorise and classify sexual minorities as being ‘other’ to themselves. It was also the case that some viewers’ opinions on same-sex relationships were left unchanged, including existing homophobic attitudes, which were brought to the surface through exposure to the series and strongly articulated in focus group discussions and interviews.

Some recommendations were made in relation to these episodes. The strongest critical appraisal of the representation of same-sex relationships was made by a viewer who recommended having more content around the process of a) Two-Step and Lorraine coming to terms with their sexual orientation and b) coming out in public about it. Another expressed a desire to feature a more customary gay character that only has sex with men. There was also an appeal for content on same-sex relationships to continue to educate people and create understanding and openness around same-sex relationships.

People with disabilities

Episode 18 told the story of a young comedian, Mdu, who falls for his deaf neighbour, Amy. Although the episode did not appear to stand out as strongly as other episodes, there were some participants who appreciated the meaningful inclusion of a deaf character. This was seen to contribute to the overall diversity of the series’ characters by ‘representing the disabled community’: ‘we don’t leave them aside.'
So, even a person who is deaf who is watching those scenes, it becomes interesting’ (peri-urban male, 30+, Gauteng). Other participants commented on the series’ diversity of characters and couples, including the representation of interracial couples, same-sex couples, couples in ‘open’ relationships, and couples where one person has a disability. The diversity of characters and couples was seen as a particular strength of the series:

I think another thing that was nice about this season, or this whole show, is interracial relationships and also the fact that a person, like the blind [sic] girl, I really liked her, and I liked the fact that he was learning so that he could communicate with her. I loved that. I liked the fact that it wasn’t only gays and lesbians, or just like normal people. It was like a mixture, black and white and old and young (urban female, 18-24, Western Cape).

This episode was also noted by three participants as making strong points about love. An urban female participant talked about the importance of giving all people a chance, as otherwise you may never discover the potential feelings you may have for someone: ‘you can lose a person that can be the most dearest person that you’ve ever met. So it just feels like you should give each and every one a chance, like 100 percent chance. I know it’s not easy, but it’s just logic too, because you never know what you’re missing out on’. Mdu stood out to another participant as a character who had changed his ways after falling in love, recalling how he turned Chloe down when she approached him a second time: ‘When Chloe came and told Mdu that they could sleep together again, he refused because he said to her he has got a girlfriend, Amy’ (peri-urban, 25-30, Gauteng). In a third example about what were perceived to be representations of love between Mdu and Amy, a female participant described how the fact that Mdu had been honest with Amy about his previous relationships and that they always used condoms when they had sex demonstrated that they cared deeply about each other:

He tried to be honest with her, but firstly he was in love with other girls, but he ended all those relationships and focused on that girl. They always use protection when they are having sex, and I love that part. At least they show there is safety; people do still care about others. I like that part, really (peri-urban, female, 25-29, Western Cape).

Two participants thought this episode offered a message that ‘you can love anyone’:

I liked the fact that he loved her even though she was deaf and he could hear. Some people are narrow-minded and would refuse to date someone who’s deaf because they assume they won’t be able to communicate. But you can actually communicate if you really want to and I liked that the series highlighted that there are people who are deaf and can still communicate, it shows you can love anyone (urban male, 30+, Eastern Cape).

One person appreciated ‘the lengths the dude went through’ to communicate with Amy, while another participant similarly admired Mdu for trying to learn sign language in order to facilitate communication with her, viewing this as ‘very romantic’:

I liked the comedian guy, the time where he fell in love with the white chick who couldn’t talk, Mdu. That was very romantic for me. I found it very interesting, the fact that he didn’t know sign language
but he tried, and then they still knew how to communicate with each other. It was just nice (peri-urban female, 25-30, Gauteng).

Another participant recalled how this episode once prompted debate among his peers about whether they would date someone with a disability. Mdu was admired for dating Amy and ultimately they arrived at the conclusion that they should accept others, ‘regardless of their disabilities’:

There is a disabled girl in the community. One time when we saw her, we started a conversation about whether we could date a disabled person or not. We argued about dating disabled people. That discussion ended up being verbal about the disabled girl in the episode, the deaf one…. that boy managed to date her regardless of her disability. We asked each other ‘if we could date a disabled person like Mdu did’…. Sometimes we guys are stubborn…. What if you end up having disabled kids or you get injured and become disabled? So we would advise each other to accept disabled people. Your perfect girlfriend might end up in an accident one day and you might have to live with that because you won’t dump her. But on your own, when you think about it, you realise that those guys were actually right that we must accept people, regardless of their disabilities (urban male, 25-29, Free State).

One participant thought that Intersexions took the needs of deaf viewers into consideration, given that each episode is subtitled. In a discussion about the series’ target audience, a male participant criticised the series for not catering to people with disabilities; this was countered by another focus group participant who pointed out that there was a deaf character. The first participant responded with: ‘oh, but I’m specifically referring to people in wheelchairs’ (peri-urban male, 18-24, Eastern Cape) indicating that he did not perceive people who are visually or hearing impaired as having a disability.

People living with HIV

While the focus of Intersexions was generally thought to be more on prevention and communication than HIV care and support, some episodes were seen to carry messages about acceptance, support and living well with HIV; (‘I have seen episodes whereby there was a lot of support shown to people with HIV’, urban male, 30+, Mpumalanga). An HIV-positive female said that she watched the series in order to learn from how the characters coped with HIV: ‘it did influence me. Since I was still new to my condition, I wanted to learn more… from how the characters dealt with it…. if they were going through what I went through’ (urban female, 25-29, Gauteng).

Many participants expressed a sense that the series communicated that one can live positively with HIV. This was accompanied by the understanding that people living with HIV are not necessarily going to die, that there is treatment which can allow one to have a long and healthy life, and that people who are
HIV positive should be encouraged and supported to live a positive and healthy life. Research participants consistently expressed a sense that community norms about positive living are changing and many indicated that their personal beliefs had become more accepting and compassionate towards people living with HIV, in part due to the influence of the series.

F: There is no reason to hide anymore because we live with it anyway.
F: People are not the same, some are still ashamed and embarrassed (rural females, 30+, Free State).

These days AIDS is not like in the olden days that a person with AIDS is as good as dead (rural male, 18-24, Mpumalanga).

If you are HIV positive, it doesn’t mean like it’s the end of the world for you (peri-urban male, 25-29, Western Cape).

The portrayal of HIV-positive characters as healthy, as opposed to ‘sickly’, was particularly appreciated:

What I liked about it is they weren’t sick.... Most of the time on TV, when you’re HIV positive, they make it seem like you have AIDS, not HIV positive, because there’s a difference. So they make it seem as though you have AIDS and also sickly. So I like that they didn’t show the people who are sickly (urban male, 18-24, Western Cape).

It came up in two focus groups that some participants wanted Intersexions to show antiretroviral pills so that they would be more identifiable. This seemed to come from a desire to want to identify if another is HIV positive or even to figure out ‘if our partners are lying to us’. This view was criticised in both groups for infringing on others’ privacy:

M1: I wish they would show what the packaging of ARVs looks like, so we recognise them when we see people using them.
M6: You shouldn’t know, that’s none of your business, if someone wants you to know they are on ARVs, they’ll tell you.
M1: I think we should just know what the packaging looks like so we know whether our partners are lying to us or not.
M5: But it’s not just about you and your partner. What if your neighbour’s using ARVs and you see them but they haven’t told their family yet, how would that look? (peri-urban males, 18-24, Eastern Cape).

A desire to live in a society in which HIV was no longer stigmatised was often expressed, linked with a value that people should not feel a need to keep an HIV-positive status secret: ‘it’s this whole thing of secrecy. I don’t like it. I wish HIV was treated like every other disease and people were just honest about their status, because I would be honest about my status’ (peri-urban males, 18-24, Eastern Cape).
This participant believes that HIV should not be viewed as a killer and that it is ‘high time’ to stop gossiping about people who are HIV positive:

"It taught me that when it comes to HIV and AIDS it is high time that we stop mocking each other as people, ‘so and so has AIDS’ and ‘so and so has this’. The reality is that high blood and sugar diabetes are the real killers. HIV doesn’t kill because the person can live for years to come as long as they have accepted and are taking their treatment. When you laugh at others tomorrow it might be you in that situation, we need to be remorseful as Africans because one doesn’t know when things will be that way for them (rural female, 30+, Free State).

Denial of HIV was seen as the main cause of early death, including those that do not accept they are positive and those that do not ‘treat it properly’. This speaker reflects on how her openness about being HIV positive has helped others around her:

"Actually, these days hardly anyone dies of HIV, the people who die are those that find it hard to accept that they have this disease and therefore don’t treat it properly, as well as people who are in denial about the fact that they have HIV. Other people, especially in small communities like ours, are afraid of being seen getting treatment from the clinic and I always tell those people ‘be free. HIV is no longer a death sentence, it just means that you have to maintain a healthy lifestyle; use protection at all times and eat your treatment’.

HIV also doesn’t mean that you can’t date because I remember when I first discovered I had HIV, I thought that I could never have a healthy, normal relationship with anyone and it was my counsellor who helped me see that isolating yourself will only frustrate you and make you lonely. She told me that ‘you can date, but just always make sure you use protection so that the virus stays at a standstill and doesn’t move forward, but also so that you don’t infect your partner’. After a while of having HIV I’ve discovered that my being so open about my disease has encouraged many of my friends who I didn’t even know had the virus to come out and speak to me about it. They saw how free I was and it gave them hope and courage to accept their disease (rural female, 30+, Eastern Cape).

Quite a few participants expressed humanity towards people living with HIV and a sense that they should support friends and family who are HIV positive and not treat them any differently:

"The lesson that I got from watching Intersexions…. if we are faithful enough, we can be able to support our loved ones and our families if we find out that they are HIV positive (peri-urban male, 25-29, Mpumalanga)."

"There is influence [from Intersexions]. I can say talking about me, I understand those people. I care about them. I don’t judge them in their past, but I understand…. I have a friend who had a lot of fun without using a condom, at the end of the day she got HIV…. I love her, I treated her as the same. Even if she’s HIV positive now, I keep telling her ‘you must always use a condom’…. She knows her status, she is positive, but nothing has changed to me (peri-urban female, 25-29, Western Cape)."
At home, we have people who are HIV positive. And when they found out that they were HIV positive, they were not thrown out or being treated differently, instead we support them, we make sure that they take their tablets at the right time, like showing them that you’re not different from yesterday…. I’ll hold you because you’re my sister, you’re my brother. It doesn’t matter whether you’re HIV positive (urban female, 30+, Mpumalanga).

Intersexions and ‘Mr. V’ in particular, played a role in helping this male participant feel less stress regarding his HIV-positive status:

I understand, I’ve accepted my status. Sometimes when I’m alone, I do think hey God, I’m positive, I become stressed, but after I have seen Mr. V, he removed that stress and said I must not be stressed. The moment maybe that thing comes, I must talk about it (peri-urban male, 30+, Gauteng).

An HIV-positive female shared how she was considering looking for opportunities to disclose her status publically, in order to educate young women ‘like Rosie and her friends’ about the risks of HIV and how to support each other:

I have also been thinking about talking about my condition in public, to teach people…. I see that this thing touches everybody…. Just seeing different people in the series…. Like Rosie and her friends…. I think it would be easier for me to talk to them and tell them that ’you know what, you are going in the right direction and this is what could happen to you. If it does happen to you, don’t worry and this is how we carry on’…. Possibly because I think I could relate to them, I would like to talk to a group like that…. about how to carry on and support each other, even if they are harmed…. I’d love to do it (urban female, 25-29, Gauteng).

Zolile and Gadima’s reaction to testing HIV positive was criticised by some participants, as portraying ‘people living with HIV as having given up and not knowing what they can do and therefore giving up on their aspirations. For example in the story of Zolile, he left everything, he stopped his plans to marry and ended up returning home…. It showed that he was not content with himself, and was just not ok’ (peri-urban male, 18-24, Free State).

Gadima’s journey as an HIV-positive character gathered mixed reviews from participants. A focus group consisting of an HIV support group criticised Gadima’s portrayal and the way her character changed so drastically. Her secret life and drug addiction were criticised for unnecessarily negatively dramatising what it means to test HIV positive. This sentiment was echoed in another group, when someone pointed out that ‘Gadima went crazy’ in a discussion about how the other HIV-positive characters were so healthy. Others appreciated how her troubled journey ultimately ended with her transformation into accepting her HIV status, however. This participant took a message from Gadima’s story that one shouldn’t ‘hide’ but ‘accept it, come clean’ and get support:

Being HIV positive doesn’t mean that it’s the end of the story. It means that it’s a new beginning…. As long as you take care of yourself, you are as good as a person who is HIV negative…. Being HIV positive doesn’t mean that you need to run to the nearest bush and hide yourself, but you need to accept it, come clean with it and then when you got the right people who will support you, you’re just going to live your life and just move on (urban female, 30+, Mpumalanga).
INTERPERSONAL COMMUNICATION

Overall, research participants described three main contexts in which they discussed Intersexions: with whomever they viewed the televised show with, through social media (namely with peers), or in conversations that occurred after episodes were televised. Numerous examples were shared of discussions about the series with friends, family members, neighbours, strangers, work colleagues, young people, and sexual partners. There were a number of different types of communication that emerged, including specific opinions of the series and its characters, episodes which stood out, the extent to which it related to ‘real life’, reflections on one’s own relationships, heightened perceptions of HIV risk, and communication between sexual partners about sexual histories and HIV prevention.

Several participants reported hearing discussions about Intersexions in taxis, the day after an episode aired. One told how she often found people of different ages discussing Intersexions on the bus; apparently passengers were especially critical of characters that transmitted HIV:

Even in public transport, when we get a bus, even old people, same age people, when they are talking, the conversation involves everybody, so we talk about those things every time…. but what they don’t like about it is when there is someone who infects someone with HIV without using a condom, that is what people don’t like (peri-urban female, 25-29, Western Cape).

Participants said that it was so common to hear Intersexions episodes being discussed in public spaces that some even described feeling left out (or ‘hurt’) if they were not able to watch an episode, knowing that they would be subjected to having to hear others discuss it ‘whether you like it or not’:

Usually when you missed it, the hurting part is that you didn’t see it yourself, but the following day you are going to know about it whether you like it or not…. People talk about it every time…. (peri-urban male, 25-30, Gauteng).

For many, the proliferation of discussion about the series (both in person and on social media platforms) served as a motivation to tune in, to see what ‘they’re talking about’:

Obviously there would be a couple of people who would mention, like ‘yoh, this Facebook, hash tag Intersexions’, so obviously seeing that, I will go onto SABC1 and just try and see which one they’re talking about (urban female, 30+, KwaZulu-Natal).

It appeared that despite Intersexions being an HIV-educational programme, there was little or no perceived stigma associated with watching it. This male told how he and his colleagues often spoke about the content of the episodes together, extending their engagement as viewers well beyond the actual moment of viewing:

All the time when I watch these episodes or I log in, we talk, immediately we are watching an episode, we are talking about that, and especially with my colleagues. We are talking about that, which means a simple thing can take the message to other people outside, and even ourselves, we are learning about everything through Intersexions (peri-urban male, 25-30, Gauteng).
That said, two male participants were sometimes teased by their friends for being ‘boring’ in missing the opportunity to play football to watch Intersexions (peri-urban male, 18-24, KwaZulu-Natal) and:

_We are a group of people and we play football. We were discussing if it’s important to watch it or it’s not important. Some of them disagreed that it’s not important to watch it. Sometimes I don’t go to play, and then they say yes, ‘this Intersexions of yours is keeping you there, that’s why you don’t come to play’ (peri-urban male, 25-29, Mpumalanga)_

**CONTENT OF DISCUSSIONS**

The scenarios and characters depicted in Intersexions episodes were broadly discussed, as well as how they related to viewers’ lives. Participants reportedly discussed a number of specific episodes that stood out with others, including the ones featuring Two-Step and Sizwe, Lorraine, Zolile, Nomzamo and their families, Lerato and Thapelo, and Godwin and Gadima. Sometimes discussions were said to centre around how what was portrayed in the drama series happens in real life, for example, how what was portrayed in episode 21, of two friends who were involved with the same man without knowing it, happens in real life (‘these things happen’):

_Yes, the episode…. with those high class ladies. I had a discussion with my friends about it, and the truth is, for me it was quite an exciting episode because I liked the way…. the guy played his games and everything. What we actually discussed there is that these things actually happen, where like the two ladies, you will be going all over the place with one man not knowing that they’re sleeping with both parties, and eventually they would open up. Basically that’s what we actually talked about, it was quite fascinating for me (urban male, 30+, KwaZulu-Natal)._  

The storylines succeeded in provoking vigorous debate about social problems, secrets (particularly within families), trust, alcohol use, and relationships. Further, series two seemed to have particularly sparked disputes related to sexual minorities—including corrective rape, understandings of bisexuality and the acceptability of same-sex partnerships. In one example that was already discussed, a male participant told how after viewing the docudrama, nine or ten men got into a big debate in the local councillor’s office about what should be done about ‘these gays’ in their rural community: ‘last week, we had about fifteen minutes’ debate about the last episode, we were in the councillor’s office arguing about these gays…. At the end of the day we reached a conclusion that gays are here, so we have to live with them’ (rural male, 30+, KwaZulu-Natal).

Several participants recalled discussing with others whether the storylines featuring sexual minorities or what was perceived by some as overly explicit sexual content might negatively influence young people. This participant remembered discussing such issues with her fellow teachers:
F6: We discussed the topic ‘is it right for young people to watch Intersexions, or is it wrong’. Most of the teachers think it is wrong, but I was trying to convince them by all means that it is a good thing for them to watch Intersexions.

Facilitator: Did you talk about any of the episodes with those teachers?

F6: The episode about the bisexual, the guy who was in love with a guy and was in love again with a woman, we were discussing that episode. They were saying that episode is not a correct episode for young children to watch, because it’s going to influence them in the long run (peri-urban female, 25-29, Mpumalanga).

COMMUNICATION WITH PARTNERS AND FAMILY MEMBERS

Participants described communicating with their sexual partners about Intersexions, which is largely discussed in the above section on communication. Communication centred around the series’ characters or to reflection on how the series’ themes related to their relationships, such as concerns about infidelity and HIV.

M6: Me with my wife we would argue and she would say: ‘you men, that is how you behave’....

M1: There’s an episode about the lady who puts condoms, and we spoke about this afterwards and she said she wouldn’t put condoms for me (rural males, 18-24, KwaZulu-Natal).

Viewers often reported a sense that Intersexions created a space in which the previously-taboo subject of sexuality could be discussed more openly, particularly within families. A peri-urban female explained how the show sparked ‘a lot of debates’ in which issues that had ‘never been spoken about’ could be discussed within peer groups and families:

So I think it brought a lot of debates among us, and to talk about issues that we have never spoken about before. We never spoke about sex, we never spoke about even the issues of our own parents, but now, because of Intersexions, it made us talk about those issues, to debate about it, and even talk with our parents about those issues.... So now they can be able to speak about such things; before we never spoke about it (peri-urban 25-30 female, Gauteng).

Two other females similarly described how it used to be the case ‘that we were afraid of talking to our parents about sex’, but Intersexions was seen to make that easier, with some older people now finding it easier to broach taboo subjects which previously were not spoken about or by finding it easier to raise such issues oneself:

People were talking about it, because you know in the olden days, we were afraid of talking to our parents about sex and AIDS and everything, but after watching Intersexions, like we saw what we are going through, other people out there are going through it too.... Watching it with our parents and everyone, so it was easier for them to say ‘oh, so this is how it is’. We started talking about it openly because some other people are still afraid of talking about HIV/AIDS (urban female, 30+, Mpumalanga).

Intersexions has opened a way of communication between parents and children. It was always hard and awkward for our parents to bring up the issue of drinking, sex and such things but after watching it on Intersexions, we can then talk about it easier (rural female, 30+, Eastern Cape).
Discussion of the various scenarios that were portrayed in the series easily led to critical reflection of how those issues impact communities in general. For example, one family discussed how corrective rape was problematic after watching episode eight together:

*We were discussing that episode because we saw that it was wrong what that guy did to the other lesbian, so we discussed that…. As a family, because we’ve got a big family at home, so we discuss things like that, brothers, sisters, and parents also* (peri-urban male, 30+, Western Cape).

Another participant’s mother appreciated the Two-Step / Sizwe storyline and discussed how she wished a family member that they suspect is gay but afraid of ‘coming out’ would have taken courage from watching that episode:

*The storyline with the gays made me think of my cousin, he’s about 25 years old now and how his sexuality has always been confusing because he says he is straight but has homosexual tendencies. My mom and I have always suspected that he is gay but that he is just afraid of coming out of the closet because of the Xhosa men he grew up around and the fear of their judgment. So my mom was saying that she wished he had watched that storyline and that it would maybe give him courage to come out* (peri-urban female, 18-24, Free State).

This urban male told how his mother got ideas about what she should discuss with him (e.g. ‘are you sexually active?’) from what was depicted on Intersexions:

*Now this series, it had parents inside, so even though I couldn’t watch it with my parents, but when they watched it, it gave them that thing that ‘now I need to talk to my kids about such social issues’. Usually my mum, she’s the kind of person when she sees certain things that need to be spoken about with kids, she just raises that point right there. Like let’s say Zolile’s father would ask Zolile ‘are you sexually active’, my mother would ask me that same question, and then I’d need to answer and we’d talk about that. We usually talk about such issues, me and my parents* (peri-urban male, 25-29, Gauteng).

*Intersexions* was also said to facilitate health communication between siblings; for example, one female participant shared how Zolile’s character reminded her of her brother. As a way of cautioning him to reduce his HIV risk, she would phone him to make sure he was watching the episodes that featured Zolile. A participant from another focus group also saw a ‘little Zolile’ in her brother and referred to *Intersexions* when she brought him condoms to use, cautioning him not to do what was portrayed in the series:

*I liked to discuss with my brother, because my brother is cheating too much. So, I don’t see that he is normally using condoms, because when I go to the clinic, I take the box of Choice, then I put there, then I said ‘you must take these’. Last week when I came from there, I got some condoms, then I surprised my brother and I said ‘you watched the episodes of Intersexions, so you mustn’t do that’* (peri-urban female, 30+, Western Cape).

A third shared how she and an older cousin used to find it ‘kinda hard’ to talk about sex, particularly given their age difference, but that through watching *Intersexions*, they now ‘talk about anything and everything’:
I’d talk about it with my boyfriend and my cousin and stuff; watching Intersexions really got me and my other family members like free to talk about sex. Like he’s the first born at home and I’m like almost the last born, the second last. There’s this huge gap between us, he’s like almost 50 and I’m like 31, but we talk about anything and everything.... Before watching [Intersexions] it was kinda hard because he’s like my older brother (urban female, 30+, Mpumalanga).

While most respondents described how the series served to open up household communication about sexual risk, there were a couple who still found such topics too awkward and uncomfortable to discuss with their family members:

With my family, I would never discuss it.... It’s kind of awkward because they are old, you see. I can’t discuss with them. I just watch (peri-urban male, 18-24, KwaZulu-Natal).

COMMUNICATION WITH FRIENDS

The most common form of communication was reported to occur among peers. Participants shared how they engaged in debates about the series content (e.g., the characters, plot, and the direction they thought it was headed in), as well as conversations about relationships and HIV and AIDS with their friends.

This speaker tells how her friends at university often discussed how episodes related to what is ‘happening in our lives’. They particularly resonated with the idea that that poor communication contributes to HIV transmission:

For me, it triggered conversations with my friends.... We have conversations whereby when you’re discussing an episode, then it’s like ‘oh, did you see that?’ Actually, people are not talking. That’s why this thing happens. So it would literally trigger a conversation from what happened in the episode to placing it with what’s happening in our lives, or what we observe in society, everything like that (urban female, 18-24, Gauteng).

The extent to which viewers identified with the series’ characters was often discussed. In this example, someone tells how her friend identified with the way Nomzamo accepted Zolile’s HIV positive status while she doubted that she would be as accepting:

The friend I mentioned earlier who’s married with children, the day I went with her to go to the clinic to get her contraceptives and we were actually talking about Intersexions. We were making reference to the story of Nomzamo and Zolile and how he told Nomzamo his HIV status and she just accepted it. She was saying for a person at her age and the stage of life she’s in, she would react the same as Nomzamo if her husband revealed that he’s HIV positive to her and I was saying that for me ‘it was different because I’m still young, I still have my dreams and ambitions, so it’s not just going to be okay. I’m going to be in denial, I’m going to have acceptance issues for a while because it means your life plan has been affected’ (peri-urban male, 18-24, Eastern Cape).

In another example of the sort of discussions peers would have about Intersexions storylines, a young woman recalled discussing with her friends that there are people like Pastor Rex, who subvert what Christianity is about. The episode thus reinforced a sense that they are ‘on the right track’ by ‘practicing what they preach’:
The Grace and Pastor Rex episode was quite something that triggered conversation amongst my Christian friends. Not denying it, but it was like what that person did, that’s misrepresenting Christianity…. going against what they preach and stand for, whereby we are these young, passionate Christians who believe…. you have to practice what you preach. So, it was just encouraging ourselves that ‘you know what? We can’t be perpetuating these stereotypes which stem from the truth in society, but let’s just try and be different young Christians’…. Every episode, especially if my friends have watched it…. would literally turn into a conversation and not just an episode for the sake of being an episode. That’s how I engaged with this with my friends. Personally, from my experience, I’d be like ‘wow, I’m really on the right track, let’s keep it up’, you know (urban female, 18-24, Gauteng).

She described how the episodes became more than ‘just an episode’ in the way they prompted meaningful conversation and critical reflection about important issues among her peers.

Numerous examples were given of friends who used what was portrayed in Intersexions to caution their peers who they believed were engaging in risky behaviour. Similar to some of the familial examples given earlier, the ability to reference the characters and scenarios that were portrayed was seen to make it easier to raise difficult subjects. For example, a peri-urban male shared how a friend of his acquired an STI in very similar circumstances as Sdumo. He told his friend about that episode and encouraged him to watch the series, as it depicts the consequences of unprotected sex. It appears as if being able to reference episode ten made it easier for the speaker to support his friend in what would otherwise have been awkward to discuss:

My friend was once, he got sick. He had an infection in his private parts…. like an STI, and he was sharing with me a story that he doesn’t want to have sex without protection anymore. So I walked him to the clinic and I told him about Intersexions. I said ‘you see these things that are happening to our lives are the things that we watch on Intersexions and they are portrayed, the very picture that is happening, what you do’. I think there was this episode and that guy took a girl and went with her in the car and he tried to have sex… My friend did it like that…. and there was no condom there, they did sex without protection. So that’s what I shared with him, that it’s important to watch these things because these things are happening, although we are shy to talk about them (peri-urban male, 18-24, KwaZulu-Natal).

A peri-urban male described how Intersexions provided a reference point to discuss ‘things you wouldn’t normally talk about’ with friends. He noted how the shared experience of viewing the series and knowing its characters made it easier to discuss when a friend makes a ‘wrong decision’, which would have been more difficult without the series providing a means to raise the issue:

Intersexions had become a point of reference for a number of different issues because there are times when you see your friend making wrong decisions but it was difficult to talk to them. Intersexions
made it easier because you could refer to a scenario in the show and because they watch Intersexions too, they know who or what you’re talking about, so it has become a point of reference. We talk about these themes even on social networks like Facebook, things that you wouldn’t normally talk about (peri-urban male, 18-24, Eastern Cape).

The idea that people should learn from the examples that are given in Intersexions, was often expressed. In this example, a friend told another that she ‘should have watched Intersexions’ rather than give up her virginity; the speaker further believes that the series has made some people more careful and less quick to blindly trust their partners:

There’s a friend of mine, we’re very close, and she recently broke her virginity with this other guy. So this one weekend, he came back from Cape Town…. and he just randomly didn’t want to see her. She was with her other friend, and this girl is like ‘I told you, you see, this is what happens. You should have watched Intersexions, because if you watched Intersexions you were going to know that this is what happens after you sleep with them. He just runs away’. So it shows how people are really open-minded now and they are very careful now. I think they also have that trust issue, like walls built up, because they’re not sure if they really need to trust their partners or not (urban female, 18-24, Western Cape).

SOCIAL MEDIA

The series one evaluation found that Intersexions broke new ground in terms of how social media platforms can be strategically used within health communication programmes. This second round of research confirms that viewers’ use of social media continued to be integral to facilitating their greater engagement with the series. Viewers used a variety of forms of social media to communicate about the series, including Facebook, Twitter, MXit and WhatsApp. The majority of participants who mentioned using social media were from urban or peri-urban localities; rural discussants were less likely to report using social media, though there were some who reported doing so.

Social media was used both for informal communication driven by viewers (e.g., discussions between peers) and as an intentional space utilised by the series’ producers who promoted the series and provided additional information about sexual and reproductive health through Facebook and Twitter. At the time of writing, the Intersexions Twitter account had 9,117 followers. Since the Intersexions page on Facebook was launched to promote series one, it has grown to an impressive 107,884 ‘likes’ (four times what it was when the evaluation of series one was written). The page provided a dynamic platform in which viewers debated what happened in the episodes, asked questions of a professional sexologist, anonymously sought relationship advice, revealed what they were learning about HIV and AIDS, and in some cases, how watching the show led to specific attitude and behaviour changes.
I joined the Intersexions group on Facebook.... We discussed.... relationship stuff, we would discuss the HIV and just anything regarding that specific episode (Female, 30+ years, urban, Gauteng).

I just went and searched.... because most of the programmes usually have and I thought ‘oh, Intersexions probably I will get resources on HIV and those type of things ‘.... and I thought if I went to Intersexions then I will know how to follow such a thing (urban female, 30+, Gauteng).

During the week it’s usually a person writing in and saying ‘can I please remain anonymous’, and they have some weird story about maybe dating more than one guy at a time, or something along those lines. But like dilemmas, and then there will 600 to a thousand comments going on (urban female, 30+, KwaZulu-Natal).

Another found it helpful to get additional clarity from the page, to fill in any ‘blanks’ that remained after watching an episode:

What I often did was some of the episodes that I watched, at the end I’m always left with some blanks, like I didn’t really get what was going on, so when I get online again, and also following the Facebook Intersexions page, so when I see some of these comments again, I can get highlights (urban male, 30+, KwaZulu-Natal).

Several participants raised criticisms about the Intersexions Facebook page. By allowing all fans to comment, the comments section was described as ‘disastrous’ and lacking ‘decorum’ as a result, instead of serving as a way to educate and empower people:

I was also on the Intersexions group.... Yes there are usually questions and we just answer.... Most of them are very uneducated and they are... The thing is you can’t screen people who answer there. But it could be very disastrous if you listen to some of them there (urban female, 30+, Gauteng).

I think there’s no decorum on the Facebook page because when you see the comments people make consistently, I think it should be a platform where people should be educated, it should be a form of empowerment for people, but when you follow some of the comments, you get to discover, I think admin should do something in terms of trying to control how people... (urban male, 30+, KwaZulu-Natal).

However, when asked whether they discussed Intersexions on social media, participants mainly referenced posting on their own or their friends’ ‘walls’ rather than on the official page, which added another dimension to their enjoyment of the series. These viral discussions seemed to peek viewers’ interest and increase anticipation for future episodes. Many focus group participants described how social media platforms such as Facebook and Twitter contributed to their motivation to watch Intersexions.

On Facebook, because I’ve got a lot of people, so some of them who are watching it, they would update, they would discuss it. I would be like curious and I want to know, and I would join the conversation, and that’s how I got to know what happened (peri-urban male, 18-24, KwaZulu-Natal).

I actually heard about it on Facebook and Twitter. A lot of people were tweeting about it. Like my TL was just full of ‘Intersexions this, Intersexions that’. So that’s when I actually tuned it.... I missed the
first few episodes, that’s when I was interested. The tweets were like ‘it’s so intense and whatnot’, so I thought ‘okay, I have to watch’ (urban female, 18-24, Gauteng).

Several shared how following what others said about Intersexions on social media made missing an episode all the more frustrating. This female participant spoke about how she would feel like she missed out by not being able to join the conversations others were having on Twitter:

Sometimes at night when I’m bored, then I’ll go on my phone and go on Twitter, and all I’ll see changing is Intersexions, and I’m like ‘oh, I missed it, now I can’t comment’. I’m watching it through my phone and I think ‘tomorrow morning I’m going to go and watch it’ because everybody was going on about it. Like maybe when I watch it, then I won’t see the hype, but because I read about it the night before and everything, it would make me want to see it. ‘Oh my gosh, my friends will go on about, what am I going to tweet about? ‘It’s like ‘oh, this is boring, I’m going to go to sleep because I’ve got nothing to say’ (urban female, 18-24, Western Cape).

One participant follows one of the actors, who regularly encouraged people to tune in:

Through Facebook one of the characters [actors] from Intersexions, the one who was the girlfriend of the polygamous man, every Tuesday morning she would update her status and give a hint of what that night’s episode would be about, not wanting to give it all away, but to create anticipation (rural male, 30+, Eastern Cape).

MXit provided viewers with another space to discuss Intersexions. A young male told how he and his peers would convene group discussions ‘involving only boys…. someone would write as the group name ‘Intersexions’, and then we would know that we are going to discuss it’. They would discuss storylines, how the series related to their lives (e.g., debating whether one should be open about liking ‘other girls’ with one’s girlfriend) and how one could potentially be infected with HIV. He said they even used that communicative space to complain about how their girlfriends wanted to use condoms and prevent pregnancy as a result of engaging with the series!

Also when she sleeps with you she will make it a point to use condoms because of what she saw happening on Intersexions. Some people didn’t even want to see Intersexions air because it would make those that want to have babies no longer wish to have them. Those are the things that they liked to discuss (peri-urban male, 18-24, Free State).

Participants described updating their ‘statuses’ or ‘tweeting’ their views on the storylines, the interactions between the characters or on the broader messages they took from the series. The live commentary that emerged on social media while episodes were broadcast became a space where audience members could express their views on the characters and discuss with others, ultimately creating a social viewing experience that extended well beyond the episode:

While it’s playing, on Twitter and on Facebook, while the actual episode is on, people would comment about it (urban female, 30+, KwaZulu-Natal).
People tweet during the episode. You mustn’t miss those thirty minutes of Intersexions (urban female, 18-24, Western Cape).

Twitter was just the best platform because every Tuesday night you know Intersexions is playing, so it was just the best platform…. I was tweeting everything (peri-urban male, 25-29, Gauteng).

Fans who missed an episode described being able to find out what happened on the show by signing into Facebook or Twitter (‘especially on Twitter’) after an episode had aired:

F3: I’d go to Facebook and I’d go to my newsfeed or on Twitter. Everyone is talking about it. Immediately when something happens, someone is going to write about it....

M2: Yes, especially if I know today I won’t watch this episode, I always used to tell my friend, my friend, watch Intersexions and then tell me on Facebook what happened. But then sometimes I am going to get angry because like I didn’t see, but he tells me something that I was supposed to see (peri-urban female and male, 25-30, Gauteng).

Sometimes Facebook would update you on what happened. Like people always update about it. Like you’d hear ‘oh my gosh’, and then you’d ask what happened, and then they would update you, or on WhatsApp I’d ask my sister, ‘what happened today’, then she would just tell me the most interesting part about it, so that’s how I’d know what happened (urban female, 18-24, Gauteng).

One person said that people she follows on Twitter, but does not actually know, would discuss Intersexions:

On Twitter…. they would speak about people’s characters and about who is good looking... and who does what.... Just the people that I follow on Twitter, I don’t know them (peri-urban female, 18-24, Free State)

Participants commonly expressed their opinions about the storylines and characters that were featured on Intersexions on social media. Several recalled people posting or ‘tweeting’ their surprise over how graphic some of the sex scenes were, particularly those with Two-Step and Sizwe. Another shared how her male friends expressed their fury over Jama’s acceptance of his wife’s infidelity on Facebook:

Especially on the episode where that guy couldn’t have kids. That episode, guys were very furious with that on Facebook. They were very furious about that. Like, ‘I would never do that, whatever, he’s such a fool, like go and get another wife somewhere else’ (urban female, 18-24, Western Cape).

Episode 25 prompted discussion on social media, when all was revealed about the intersections between the Cekiso and Bangani families. An interviewee remembered how surprised her friends were as they argued about Nokuthula’s secret on Facebook:

F1: [My friends were] like, ‘did you watch Intersexions, did you watch guys doing that and that and that? Oh no, I’m not going with that’.... Especially on Facebook, we got into a lot of conversations
about Intersexions…. Especially the last episode…. when he went back home, when his father heard
the news that Zolile wasn’t his child.

Facilitator: Did you guys talk about that on Facebook?

F1: Yes, we talked about it a lot…. They said ‘women are snakes [chuckles]. How could they keep
something like this for such a long time?’ We were arguing and arguing and arguing (peri-urban

Social media also provided a space where viewers could pose provocative questions and engage their
peers in debates about the issues that emerged from the series. A university student told how ‘most of
our statuses would be about this discussion’ as he and his friends posted discussion questions in
response to episodes, such as ‘what do you think of being in an open relationship? What are the pros
and cons?’ Facebook provided a space where viewers could process the series’ messages and how they
applied to them, personally. The same participant recalled how his friends debated the limits of trust and
how ‘it’s safer to continue using condoms even after people have tested’:

Going to test together, that was one of our latest challenges. People said ‘it’s better when people go
test together, but then again, people can still cheat after you’ve tested, if you stop using condoms’. So
we can all conclude it’s safer to continue using condoms even after people have tested. So, it has
changed our perspective on relationships and how we relate with sex (urban male, 18-24, Gauteng).

One participant described discussing Intersexions on the Internet in ‘a secret group where all of us are
HIV positive and then we talk in-depth about the episodes… and about anything regarding HIV’. She
tells how everyone in this online support group appreciated Koketso’s character, wishing that they
‘could be Koketso’, meaning, being happy, accepted and openly taking ART:

We talked about… if we felt that the episode was real, we talk about relationships…. I just remember
that…. at some point we were just wishing that we could be Koketso. All of us, we just thought that at
some point we would love to be her. Just be happy and everybody be accepting and taking your
medication openly. I remember that part, we once talked about it and a lot of people just related to
that…. the acceptance and not having to hide, not having to… everybody was just saying ‘we wish we
were also like that’ (urban female, 25-29, Gauteng).

Social media presented a means with which viewers could express how they identified with the
characters and even consider what they would do if they were in that position:

Usually this is what would happen, you would get on Facebook or on Twitter a hash tag, ‘oh my
God, what do I do’, and then it starts like that. People like Busi will go like ‘oh my God, Two-Step
did this, like oh, Two-Step is bad’. It will start like that, what would you do if you were in Two-Step’s
position? (peri-urban males, 25-30, Gauteng).

Another shared how he would ask his friends’ opinions on what transpired in different episodes, for
example, ‘what they would’ve done if they were in her situation’. In this way, they would debate the
characters’ behaviour, and eventually reach a conclusion:

I also talk about it on Facebook with my friends, I post up a status asking people’s opinions on
whatever happened in that particular episode and they’ll comment and usually we come to a
conclusion…. We discussed characters and storylines like Gadima, the maid who slept with her boss only to find out he gave her HIV, so I asked my friends what they would’ve done if they were in her situation, and my friends replied that they would confront him, others said they would tell his wife and then someone else would reply that getting the wife involved would be wrong because you slept with your boss. So we all give our opinion on the issues surrounding each episode (rural male, 30+, Eastern Cape).

It seemed as though a lot of social media debates centred on cheating in particular:

M1: With my Facebook friends. Like hence I said, a girl that’s never cheated before will never ever understand why guys cheat. Some topics like that come up. It was a debate between guys and girls, girls defending themselves, exposing how bad guys are, and then the guys on the other hand, defending themselves. As I said, there is nothing nicer than ‘a stolen piece of cake’.

F7: The thing is, we talked about it, and we talked about the cheating stuff, the dignity stuff and everything, and we tend to debate about it, boys and girls, women and men. We tend to say ‘girls shouldn’t do this, boys said girls should do this, they shouldn’t do that’. Do you get my point? We always debate about everything. So, that’s what we talked about all the time (peri-urban male and female, 25-30, Gauteng).

People were also said to post ‘exclamations’ in response to the dramatic content. Such shock or surprised revelations were said to prompt bigger conversations, thereby the series sparked ‘a conversation that replicates beyond yourself’:

F5: There was this one story of a guy who had multiple sexual partners just because he can do it. He’s got the money and the women love him and all of that…. As we said earlier, it might not change people or make them accept you, but it sparks a conversation that replicates beyond yourself; basically. On social media, most statuses were not about what happened in the episodes, but just exclamations about ‘whew, that was…. really something to think about’, ‘that was really oh wow, I can’t believe people cheat’, because those are the things that start conversations. Some people would share their Intersexions page stories, and I would see it on my friend’s posts and all that.

Facilitator: Were there specific things that got spoken about?

F3: Cheating for instance, this one where Zolile’s mother, like when the whole affair thing came out, that was the basis of the comments. Like ‘can’t believe people do this type of thing’, like ‘oh my God, men are such dogs’, comments like that. People were just wowed by the fact of adults doing this (urban females, 18-24, Gauteng).

A young woman also remembered how her friends would express a sense of surprise over what transpired in an episode. She suggests that merely referring to ‘Intersexions’ became a code to imply that someone resonated with what was depicted, without publically wanting to admit exactly how:

Some people, they updated their status showing that they are so surprised. Some would say ‘hmm, Intersexions’, then it was like in inverted commas on their status. It’s like you think like okay, maybe there is something he is thinking, or maybe there is something she is thinking about the episode, but they won’t say (peri-urban female, 25-29, KwaZulu-Natal).

Social media was another way in which participants described using the lessons from Intersexions to caution their peers to be more ‘responsible’. The overall theme of how ‘the truth will come out’ was particularly popular and generated a lot of comments on social media. A female interviewee shared how
‘every Tuesday’ her friends would talk about what they learned about HIV from Intersexions on their Facebook profiles:

[My friends were] talking about Intersexions on Facebook…. most people talk about HIV things on their Facebook pages, having sexual partners, bisexual partners, all of that stuff…. When I watch Intersexions, there’s a part that I liked, about parents, they were cheating, having an affair. Then there was a guy and a girl, their son and their daughter, they do the same thing, having an affair. But all of that, the truth comes out at the end of the day. So I posted about that, to be honest, because everything will come out at the end of the day. I heard lots of comments (peri-urban female, 25-29, Western Cape).

Others similarly described using social media as a way of expressing the lessons they perceived from the series as a way of cautioning their peers not to make the same mistakes:

I usually just hear people’s feedback [on Facebook]…. maybe she posts ‘I hope you learnt today on Intersexions, being a girl and doing that is very cheap of you’ (urban female, 18-24, Western Cape).

One interviewee told how she encouraged her friends to test for HIV on Facebook and even offered to go with them to the clinic when they commented in response about their reasons not to. Another shared how a friend of his posted about how he tested for HIV after watching the docudrama, encouraging others to do the same.

It is clear that social media provided a communicative space that facilitated much greater engagement with the series than would happen from a mere solitary viewing. Public discussions about episode storylines, character behaviour, lessons learnt, warnings to friends, and declarations of both intended and enacted behaviour change all occurred on platforms like Facebook, Twitter, MXit, and WhatsApp. This demonstrates both the overall popularity of Intersexions and its success in provoking critical reflection and interpersonal dialogue about sexual and reproductive health, relationship values and personal responsibility to prevent HIV transmission. It is notable that Intersexions garnered so much discussion on social media because it is, after all, an HIV educational drama series that is broadcast in a context marked by considerable HIV-related stigma. That so many viewers felt comfortable discussing what they got from the series with others suggests that they felt little social risk in associating themselves with the programme and the messages associated with it. Intersexions series one and two appear to have broken through the silence about HIV and AIDS and the cultured ‘HIV fatigue’ that often accompanies efforts to raise awareness about HIV prevention, care and support.

The public nature of social media conversations should be appreciated for going some distance in shifting dominant norms and values that perpetuate HIV risk as viewers questioned patriarchal gender
norms, the acceptability of having multiple partners, and cultural taboos about sexuality. Such conversations strengthened new communal norms that encourage open communication between families and sexual partners as well as a greater critical consciousness about the limits of trust and the potential consequences of having sexual secrets. The power of mass media to create much needed spaces for interpersonal dialogue and conversation about sexuality, relationships, and HIV prevention is significant.

SERIES’ ELEMENTS

FRAMING STORY

The storyline that opened and closed Intersexions II featured two feuding families, the Cekisos and Banganis. Zolile and Nomzamo fell in love at the onset of the stories, when it was also revealed that Nomzamo’s mother (Kholeka) and Zolile’s father (Lwazi) had been having an affair since before either had married their respective spouses (Dalindyebo and Nokuthula)—leaving Nomzamo (and the audience) under the impression that they could be brother and sister. However, in episode 25, ‘the truth came out’ that Nokuthula had had an affair with Lazarus, which resulted in Zolile’s conception.

Episode 25 was thus a favourite among many viewers, who described it as ‘very surprising and shocking’, ‘perfect’, ‘nice’, an ‘important and interesting episode’, and ‘everything fell into place’. In response to this episode, some participants said ‘I loved it’, ‘I was so shocked’, ‘I was surprised’, ‘I wasn’t expecting that’, and ‘I liked everything about it’. The big reveal, that Zolile was Lazarus’s son, seemed to universally take viewers by surprise; the surprise discovery that Nokuthula had a secret of her own was widely enjoyed. Only a couple people indicated that this plot turn was ‘over-exaggerated’ and ‘too much’.

The process of discovering the truth over the course of the series was appreciated, e.g., ‘I really loved it with my whole heart that the truth ended up coming out’ and ‘I am happy about the fact that the truth came out’. While one person described episode one as ‘my best episode’, another said he was disappointed by it, thinking it would unfold as a typical Romeo and Juliet storyline, but appreciated how the ‘storyline expanded’ and the truth ultimately was ‘exposed’:

They surprised us…. they didn’t stick to each other, the boy left and went to school, the girl decided to leave her home after some time and that surprised me because they didn’t get back together.
quickly. The storyline expanded... they opened up and they showed us that even in varsity this happens, the lecturer, this happened over there and when it came to the final episode, the families didn’t end up getting along, instead the truth got exposed.... the married wife, who everyone thought was quiet and didn’t know anything, knew the truth (urban male, 30+, Eastern Cape).

Zolile was said to be ‘caring’, ‘honest’, ‘confident’, ‘selfless’ and to ‘stick to his guns’. He was also criticised as being ‘way out of it’ for the way he soothed his broken heart by having ‘unprotected sex with a lot of ladies’, which an urban male participant said he could relate to. Nomzamo was described as ‘a good character’ and ‘responsible’. Though some disliked that she did not initially tell Zolile the truth about their parents’ affair, many appreciated that she ultimately told the truth. ‘I like that [Zolile] swallowed his pride and went back to speak for himself and at the end even the girl realised that she had to confront her mother about what she saw and she knows about her and Zolile being siblings’ (rural female, 30+, Free State).

As previously discussed in the section about secrets, many participants thought that this storyline about secret paternity (or at least explosive family conflict) was realistic, while a few found it to be a bit of a stretch (‘the way the secrets came out, even now I’m still asking myself can it really happen that way?’). Several personally experienced, or knew of, similar situations in which one’s biological father was unknown. A young woman shared that her dad fathered ten children (‘that we know of’) and so the possibility of being in the same situation as Nomzamo struck her as a real possibility: ‘A year after my dad passed away, I found out I have a brother in Cape Town.... if my dad was not so open with us, any one of my siblings would have been probably in the same situation that Zolile and Nomzamo found themselves in, thinking that maybe I’m dating my brother or something like that’ (urban female, 18-24, Western Cape). Another participant questioned her father about this possibility after watching what happened to Zolile’s family:

After what happened in Intersexions, it got me thinking and I started questioning my father, ‘you, tell me now’. So he told me that he has two more daughters that we don’t know of and he doesn’t even know them.... So I asked him ‘if my brother dates one of your girls.... what if something happens’? (urban female, 18-24, Western Cape).

A focus group participant admitted that it was ‘painful and embarrassing’ to watch those episodes, because the same situation happened to her: not knowing who her father was, ‘I had a relationship with my [half] brother’ (peri-urban female, 25-29, Gauteng). Two other participants reported knowing someone ‘who was in love with her cousin, but they didn’t know’ and a man who only discovered that he was not the biological father of his child some twenty years later. This storyline also brought back ‘painful memories about how we grew up. My mother did not tell us who our real fathers were, and I only got to know who my father really is when I was an adult’ (peri-urban female, 30+, Eastern Cape).
In regards to the ending, many participants expressed great disappointment that it was not clear whether Nomzamo and Zolile would get back together (‘I want Zolile and Nomzamo to be partners for real’; ‘I thought they are going to be together again, and then Nomzamo is going to cancel the marriage… and go back to Zolile’), while a handful somehow mistook them as having resumed their relationship. Likewise, several participants appeared to misunderstand that Nomzamo and Zolile ultimately turned out not to be siblings (‘how did life continue after these two…. found out they are related?’). And quite a few expressed disappointment that they were left with unanswered questions or did not find out more about what became of the main characters, e.g.: ‘I didn’t like it; I wish it would have been extended so that we can see... how the two families carried on with life’; ‘I wanted to see what happened when Nomzamo and her mother got home’; ‘the one thing I wonder about is whether Zolile and Nomzamo’s love would persevere’; ‘Where did [Zolile] get it [HIV] from? ….I wanted to know if the girl was also HIV positive’; ‘does Dalindyebo leave his wife’, ‘what are Lwazi and Nokuthula going to do’; and ‘does Nokuthula leave Lwazi for Lazarus’?

**Perceived messages**

This framing story was often discussed and widely appreciated. Many liked the specific focus on family and the secrets that parents may hold and how Zolile and Nomzamo’s story began long before them, with the love affair between their parents:

*F3: It kind of made me ask myself: ‘these are the things parents get up to?’ We would think only young people are doing these things....*

*M1: What I learnt from it was that some of the things we go through are not our shame but that of our parents (rural female and male, 25-29, KwaZulu-Natal).*

This focus on parents’ secret and past relationships was widely enjoyed, with one participant wishing she could ask her own parents about such topics:

*We have this perfect image of how parents should be.... You don’t see your parents doing that.... Seeing adults having this undying love for each other but they can’t be together because of circumstances.... Like if parents can do this, what does it mean? Like I always took it home in that sense, like okay, ‘so you guys act all normal and happy in front of us, but we don’t know what happens behind closed doors. Like are you really happy with each other, did you have a first love’, and you can’t really ask your mom ‘who was your first love? Were you really, really in love with my dad’, type of thing? But you wish you could ask those questions. Like I really wished I could have that conversation (urban female, 18-24, Gauteng).*

Episode 25 was also thought to convey a strong message about the risk of having secrets, that the truth will always come out and even come back to bite you:
That’s a message that shows people that ‘if you are doing things outside, don’t tell yourself I’m the boss, I can hide everything’. You forget about everything where you come from, then you find out he is not your son. ‘The time you were cheating outside, I want to pay revenge and then I got pregnant’ (peri-urban male, 30+, Gauteng).

Some participants thought that Zolile’s parents’ dishonesty ultimately led to his becoming infected with HIV: ‘I reckon if the parents had told them the truth then Zolile would not have been HIV positive. The dishonesty of the parents is what landed him in such a crisis’ (rural female, 30+, Free State). Another echoed this lesson, adding that lies ‘always come out’ and ‘hurt a lot of people’:

Lies will always have a way of coming out, and when the lies do come out…. the damage has been done, in this case, somebody is HIV positive. The greatest thing when it came to the end that really made me sad was the fact that the two parents that were keeping the lies from the children and the children ending up finding out the truth, and it hurts because they were now in love and…. they find out they’re brother and sister, then all of a sudden they find out they’re not brother and sister. So, it was like quite confusing, although it shows that ‘when you lie, you hurt a lot of people’ (peri-urban female, 25-29, Gauteng).

The other main message perceived from this episode was about the importance of disclosing an HIV positive status to one’s previous partners. Zolile was greatly admired for ‘the fact that he didn’t keep his HIV status a secret’. This was seen as a very responsible thing to do and to seldom happen in real life:

I liked him so much, he’s a charmer, he’s smooth…. I liked him, and the fact that at the end, he ‘man up’ and wanted to speak the truth, even though he knew that the girl might not like him, but he wanted to tell her that she needs to go and get tested (urban female, 30+, Mpumalanga).

I was surprised by Zolile coming to confess his HIV status to Nomzamo because it hardly ever happens in real life. I wasn’t expecting that from him and I liked that he took the responsible route and decided to end his engagement and tell Nomzamo his status (urban female, 30+, Eastern Cape).

I liked that Zolile went back to…. Nomzamo and told her that he is HIV positive…. before she would marry…. to warn her to test. Maybe to prevent her from infecting her new partner if she hadn’t already done so. But I think that in a world of this thing [HIV], I think it would be ideal that before you get a new partner you know your status (urban female, 25-29, Gauteng).

THE DOCUDRAMA

Overview of series two

The final episode, episode 26, was positively regarded by respondents, namely for the strong messages it provided and
for the manner in which it ‘tied all the loose ends together’. The episode broke form and explicitly revealed in documentary style how the various secrets, risk scenarios and behaviours portrayed in the previous 25 episodes either thwarted or helped the HI virus to thrive. The episode was said to ‘show it [HIV] the way it is’ and ‘how everything came together in terms of… the subtext behind the stories’.

The narrator of the docudrama was the personification of HIV, who many participants commonly referred to as ‘Mr. V’. This episode took a similar format to the series one finale, in having the HI virus review key moments throughout the previous 25 episodes, explaining how the different themes intersected and providing key educational messages along the way. The series one evaluation found that this dramatic device was extremely effective at explaining how the chain of infection spread from one character to another through the intersections of different sexual encounters. This enhanced viewers’ understanding of the nature of HIV risk and concomitant perceptions of their personal vulnerability to infection by arousing a kind of fear that led to a desire to control the danger of the threat of HIV rather than a sense of powerlessness.

This time around, the episode did not appear to have as tremendous an effect, in part because the episode was less surprising as viewers knew what to expect (having previously met ‘Mr. V’). There a sense that the episode was not quite on the same level as the Intersexions I finale, which the previous evaluation found to be immensely provocative.

The first, it was more powerful than the second. If you look at the first one, the first one was most direct into HIV, and it was threatening people, you see, that you know, you sleep together, you are already gone… It was scaring…. The end of the first series was more scary than the end of the second one…. This one, the second one, it was a person. That one, it was not a person, it was a voice, and it shows how [HIV] moves in the body (peri-urban male, 30+, Gauteng).

The episode was discussed on social media and in other settings, but apparently not to the same extent as the previous docudrama.

After the last episode of the first series, the following day, you could hear people, they say ‘hey, you must watch out, you see how the body is being destroyed by the virus’. But in this one, yes, they talked, but not like that one. They will say ‘hey, you heard how it gets in the body’, but others, they didn’t understand (peri-urban male, 30+, Gauteng).

But while it might have been less shocking and less discussed about with others, the Intersexions II docudrama was still very popular among participants, who found it both educational and entertaining and described it as ‘thought-provoking’, ‘beautiful’, ‘insightful’, ‘everything linked’, ‘epic’, and as ‘the cherry on the cake’. The episode was seen to strongly articulate the overall theme of ‘sexual secrets’ and how they contribute to HIV transmission. Reviewing the intersections between characters was said to be quite satisfying. The format was found to be effective in the way it reviewed key moments from previous episodes to deliver a message, which was seen to be a unique to Intersexions:
What I liked there, it was able to link different scenes from the first episode and create a message. I think that’s the uniqueness of Intersexions as an entertainment education medium. It’s been able to put together different scenes that eventually would bring the message across (urban male, 30+, KwaZulu-Natal).

The docudrama was appreciated for the general overview that it provided (‘I like how the dots connect’). This was helpful both for filling in the gaps for any episodes that viewers may have missed, clarifying unanswered questions and for bringing new insight into content that had been previously televised. For example, these speakers said the docudrama shed new light on previous episodes that they either did not pay close attention to or which had been understood differently when originally viewed:

I think it was quite detailed. At the beginning, the poet [narrator], should I say, he kind of like analysed the scenes, explained them. Like some of them I would see that ‘okay, I understood this differently’, and it starts giving me another impression of the scene (urban female, 18-24, Gauteng).

I could get clarity on certain issues that I could not understand within the storyline. So, Mr. V, as he was unravelling the secret web of lies and deceit that was happening within the story, so at least he was, by his narration, I could understand what was happening. I could relate to some of the characters that I didn’t really pay attention to during the previous episodes (peri-urban male, 18-24, Gauteng).

The episode was critiqued by some for being ‘overdone’, however, for visually showing the narrator, and for featuring too much narration: ‘I think it would have been better if it was a story, he could have narrated here and there.... and actually gotten to the point faster’. A couple participants reported said the episode did not sufficiently sustain their interest to watch it in its entirety.

The docudrama was said to emphasise what each character did to increase their risk of HIV transmission while explaining clearly how different outcomes could have arisen if they had made other choices:

I liked it because the guy who was narrating told us everything that happened in each scene and also spoke about what would have happened if the characters had made different choices (peri-urban male, 30+, Western Cape).

When asked if the episode left them with any remaining questions, only a few questions surfaced in relation to the plot, rather than the HIV content. Those included: was Nomzamo HIV positive, did she marry Cedric, did Thandeka ever test for HIV, did Thapelo cheat again after he was given condoms, what happened to Zolile’s parents after the truth came out, why did Grace have to leave, and what became of Khanya, Lorraine, Two-Step, Sdumo and Nathan? ‘I wish that they had shown us the aftermath of truth coming out. Whether the parents would carry on being married, how Dalindyebo reacted, I would have loved to see them after they all knew the truth’ (urban female, 30+, Eastern Cape).

The docudrama left this participant ‘wanting more’, wishing the series would continue:

I was happy with the ending, but it left me wanting more. Like I mentioned before, I wish Intersexions was a continuous series, so it serves as a constant reminder to stay safe.... I was hungry for more, for me [the ending] felt too summarised (rural male, 30+, Eastern Cape).
Personification of HIV

‘Mr. V’s’ character was described as ‘extremely powerful’ and as having a human quality: ‘he is the virus, as if he is a human being’. His humanity was all the more apparent since he was visually featured, instead of just providing a voiceover. There were several participants who said that they preferred only hearing his voice, rather than seeing him on screen, but many liked this new element, noting in particular that because his face was obscured from the camera, it helped to disassociate HIV with a particular race.

I liked the whole cinema thing they had with Mr. V watching all the different scenarios. I loved that they personified HIV because it lets you see now how it thinks and acts as if it was a person…. it makes you understand the disease better (peri-urban male, 18-24, Eastern Cape).

F5: The mystery of darkness, not seeing him, because we couldn’t locate him, his accent was also quite blurred a bit. You couldn’t say ‘oh, that’s a white man for sure, or that’s a black man for sure or an Indian man’. So giving HIV that facelessness…. maybe if it was a black man, white people would have said ‘ah, we knew it, it’s in the black community’, but defacing it and just giving it a voice…. I think it worked....

F6: I think it might be because the voice was representing the whole series, which obviously had different cultural views, different sexual orientations, different races and all that. So, I think it was just that concept of accommodating everything into that…. at the end of the day, HIV is for everyone (urban females, 18-24, Gauteng).

There were no indications that the personification of HIV was unclear; all respondents understood the narrator to be the voice of HIV. The voice of ‘Mr. V’ was found to be particularly effective and brought a dark, sinister element to his personality, portraying that ‘he will get you’. ‘He makes it sound like the HIV virus is so scary and like dark and everything…. I think he was very cool’. Participants thought he was ‘rude’, ‘scary’; even ‘his pride is intimidating’; ‘I squirmed at the way HIV was so full of himself’. Others added, ‘the way he talks, he is HIV. He is HIV, and he doesn’t care’; ‘I wanted to see the face behind the voice because it was so deep and mysterious and arrogant’. One person said that ‘the way he spoke, you really felt it’:

The moment he started talking, he really sounded like HIV, the cruel thing. Even when he clapped hands for the fact that people are infected, yho.. and his voice, the way he spoke you really felt it. If he wanted you to be angry, you would be angry (rural female, 25-29, KwaZulu-Natal).

That voice is scary…. it’s a deep voice and it is talking about something that people have been taking lightly (rural female, 30+, Free State).

‘Mr. V’ was described as ‘the destroyer’, maliciously out to deceive people:

He sounded like he’s the destroyer. He’s here to destroy people’s lives. Most people like him, but when he’s there, things turn around. He comes to your life and he turns the tables. He’s nice to you, like you go out into clubs, meet people, they buy you drinks, and then you have to pay by the end of the day (peri-urban female, 25-29, KwaZulu-Natal).
The things that I like about Mr. V, the thing about himself, it’s not about the other people. That’s why Mr. V was destroying everyone, he was doing all these things, this mess. He was thinking to himself ‘if I want this chick, I know I will get her’, and he has a strategy to get that lady (peri-urban male, 30+, Gauteng).

His personal qualities made him feel close; his cunning desire to get inside one’s body made him a character that viewers loved to hate. He was seen to have human emotion, such as feeling happiness or sadness, depending on whether characters behaved in a way that put them at greater risk of infection:

‘I only want this from you, if you give this to me, then I’m happy, but if you don’t give it me then I’m sad. But if you do this and do this, I’ll be much more happy to be part of your life. But if you that and do that, then you’re preventing me from being part of your life. Once I am part of your life, we’re stuck together for life (urban female, 30+, Mpumalanga).

‘Mr. V’ was also described as a ‘smooth operator’, an ‘opportunist’; like a ‘lion’ in the way he patiently waits to ‘pounce at the right time’:

Mr. V is a smooth operator, he has a slick way of doing things. Like you said, if ever he doesn’t get you on the left side, surely he will get you on the right side. Like, whatever he wants, he gets.... not in a human perspective, like, predictable, he does it in a lion’s perspective. He is patient. He will pounce at the right time.... He’s an opportunist. Whenever you slip, he will be there to keep you down forever. Whenever you try to get up, it won’t be easy for you.... Whatever Mr. V wants, Mr. V gets (peri-urban male, 25-29, Gauteng).

One person disliked ‘Mr. V’ for not warning the series’ characters in advance, criticising him for providing the ‘solutions’ too late:

He comes up with the solution after everything is messed up. He saw everything, the whole thing from the start, ‘this is not good’, but he didn’t come up with that idea to show people that this is not good. He came up after everybody gets affected, everybody is messed up, their relationships are destroyed (peri-urban male, 25-29, Gauteng).

The ‘educator’

Besides being a ‘destroyer’, ‘Mr. V’ was also seen as an educator for providing clarity and revealing ‘some secrets on how people get infected with STIs and HIV and AIDS’. When asked what kinds of behaviours helped the virus to thrive or which were protective, participants generally reflected back many of the intended messages as described by ‘Mr. V’ in episode 26. When asked what he liked, respondents predominantly recalled that he loves lies and secrecy (‘lies, secrecy and anger, all these dark things’; ‘when there are secrets, he enters’; ‘where there is a lie, there is a secret, there is HIV’; ‘people who keep secrets, that is where he thrives’). Lies, deception, dishonesty, and being untrustworthy were perceived to facilitate HIV transmission:

I remember Mr. V talking about lies; lies and being untrustworthy. For me, that’s where he actually dwells. He dwells more in lies (peri-urban male, 18-24, Gauteng).
Because of lies and deceptions, it went on spreading and spreading and finding its way until it got almost everyone (peri-urban male, 25-29, Mpumalanga).

Lies will always have a way of coming out…. it shows that when you lie, you hurt a lot of people. It’s not just even about HIV and AIDS only, but it’s also about emotional scars that get left on people. However, now the greatest thing is that lies will always lead to people ending up with HIV and AIDS (peri-urban female, 25-29, Gauteng).

Related to that, ‘Mr. V’ was also said to thrive where there is cheating (‘when they start to cheat on each other it gives him a way in’), anger, ‘carelessness’ or ‘recklessness’, poor communication, and ‘telling women what they want to hear’. Poverty, ‘girls who love money’, ‘ben tens’, multiple partners, drinking large amounts of alcohol, STIs, peer pressure, sexual coercion, and low self-esteem (‘not believing in yourself’; ‘not having the courage to say no’) were also specified as behaviours or scenarios which help the virus flourish. Others recalled that he likes it when people avoid taking ART and PEP and nurses like Agnes who ‘intimidate people and make them feel like they don’t belong at clinics’.

The behaviours that were perceived to thwart ‘Mr. V’s’ ability to spread HIV were said to be: having ‘self-control’, ‘sticking to one partner’, being trustworthy, honest and having integrity, ‘drinking responsibly’ and ‘not using drugs’, using condoms, ‘going to clinics’, ‘having awareness’, supportive friendships, testing for HIV, seeking help and PEP after being raped, and consent (remembering how ‘Mr. V’ was disappointed when Two-Step stopped trying to have sex with Rosie). Condoms and mutual faithfulness were seen as the most effective ways of protecting oneself against ‘Mr. V’, ‘where he will stand no chance’:

If you use a condom, it can be blocked; if you don’t, it can be spread (rural female, 18-24, Mpumalanga).

He cannot enter people that are using protection, they prevent him from entering (peri-urban female, 18-24, Free State).

It boils down to the fact that you have to be faithful, faithfulness in everything that you do (urban male, 30+, Mpumalanga).

F5: Where there is trust, consistently using condoms and where there is faithfulness, he finds it difficult to enter and becomes very angry.

F: Especially where he finds that the love is strong and there is trust, he finds it difficult because there is love, openness and no fooling around. That is where he stands no chance but he will enter those that are not trustworthy, are hopeless and say yes to anything. That makes it easy for him (rural females, 30+, Free State).
Specific characters that ‘Mr. V’ was seen to ‘love’ because of their risky behaviour, included Musa, Godwin and Agnes. Characters that he ‘hated’ included Rosie’s friends, Cedric, Lerato, and Sdumo who ‘makes life hard’ for him.

M1: I think he said, ‘I hate guys like Cedric because Cedric was a faithful guy, he was a good guy’. So Mr. V actually hates people who are good. He wants these bad people like Musa….

F5: Honesty, focus, commitment, loyalty and integrity. Mr. V is very scared of those and those I’ve seen in Cedric (peri-urban male and female, 25-29, Gauteng).

He didn’t like girls like Rosie’s cousin because they support each other; they carry condoms with them; they want to learn as much as possible about HIV/AIDS. So it’s not easy to attack them because they use protection all the time, so he didn’t like girls like those (urban female, 30+, Mpumalanga).

New understandings about HIV

In describing ‘Mr. V’, participants expressed how they acquired new, accurate understandings of the nature of HIV and AIDS. One of the qualities that emerged was a sense that HIV does not discriminate, that everyone is potentially vulnerable regardless of whether one is rich or educated, because ‘HIV cares only about HIV’:

HIV does not care about anybody whether you are hungry, whether you are rich, whether you are educated or whether you are not educated…. Everybody is vulnerable the same way to HIV. So HIV cares only about HIV (rural female, 25-29, KwaZulu-Natal).

It was understood that ‘Mr. V’ does not ‘care’ about class or other attributes, that the critical deciding factor is whether one ‘plays safe’ by using condoms. It was also understood that he emphasised that HIV is primarily transmitted through unprotected sex, rather than through other means:

Mr. V was emphasising unsafe sex and infection, that if you don’t play safe, I will infect you, like it or not. No matter if you are rich or poor, I’m there for you (peri-urban male, 30+, Gauteng).

He was seen to provide a lesson in how easily HIV is transmitted, that it only takes a ‘split second’ to get infected:

[People think] even if they can go once without protection it will not catch them but he showed us that it takes a split second to change your life forever (rural female, 30+, Free State).

It is very unusual for someone to speak up and say that ‘I am AIDS’. He wanted to show us how easily AIDS is contracted (rural female, 18-24, Free State).
‘Mr. V’ communicated that ‘he will get you’ when one acts on emotions instead of thinking through potential consequences: ‘he knows that people don’t have time to think. They are very, very good at acting with their emotions’. Participants also understood that he ‘likes’ people who are ‘reckless’, harbour secrets, or ‘do bad things’ because they make it easy for him to grow:

He likes people who are reckless, people who are naïve and believe they are above getting HIV but lead reckless lives, people who live secret lives where they pretend to be straight but are actually gay, people like that (peri-urban male, 18-24, Eastern Cape).

I never knew how it got inside my body, but if I listen to Mr. V, that’s when I realise ‘oh, the virus is happy when I’m doing bad things, but when I’m doing good, it’s not happy’ (peri-urban male, 30+, Gauteng).

**The chain of infection**

The basic premise of the sexual network that was presented in series one was seen to continue in series two, but on a smaller scale:

I feel like in this season there was a chain, but it was not as vast as in the first season. The chain in the first season was country-wide; this time round it was more limited. But the last episode was still good, it still left me with the fact that I cannot trust anyone (peri-urban male, 18-24, Eastern Cape).

Episode 26 addressed complaints about the season one finale from viewers who wanted to know exactly how the chain of infection flowed between the characters. This came from a desire to want to be able to pinpoint and blame someone specific for introducing HIV into the network, rather than understanding that the movements of the virus are more complex and it is not always traceable back to some origin. In the final moment of the episode, the narrator teased viewers that it was ‘time for the big reveal! Who infected who over the course of the series?’ Only to explain:

That’s the wrong question. Here’s the question you should be asking. Why, after all that you know about me, do you still let me in? ... This was not a story about infection. It was a story about decisions. Choices. Secrets and lies. And the fact of the matter is this: As long as you choose to hide from yourselves, from your loved ones, from your communities... Then there’s a very good chance that we’ll meet (episode 26 script).

The desire to trace the path of HIV among the characters continued in series two: ‘obviously you know it’s Intersexions you want to find out where is this virus is starting and going’—but many respondents took ‘Mr. V’s’ message to heart and appreciated the fact that the ‘chain wasn’t clean and obvious’:

I would have really liked to see who infected who in the end. More than anything, I was looking forward to that in the last episode but they didn’t show that. Instead, they give us a good message (urban male, 18-24, Gauteng).

M4: It was very clear for me, I followed the chain and every time V said he would come back... he would come back and we could still see the chain....

M5: The Intersexions chain wasn’t clean and obvious.
M4: The question marks and unrevealed things keep us interested. For instance ‘who did Nomzamo sleep with’ and ‘did he get the virus from Khanya’, we wouldn’t be asking ourselves who he was infected by (peri-urban males, 18-24, Eastern Cape).

This complexity was thus seen to keep viewers interested. An urban male critically reflected that finding ‘a scapegoat’ for HIV is not what is important, rather to look towards the future and whether one is going to pass the virus onto others:

People are looking for ‘where did the HI virus come from, who had it’, but now that’s more looking for a scapegoat, because if you already have the HI virus, it’s not important that ‘I got it from her or her’, it’s important that ‘I have it and who I’m going to pass it on to’. So I think in a way I sort of like that he didn’t say that ‘the whole story started from so and so’, because if you look at it, I would also say not all my problems started with this particular person. So the mere fact that it’s out there sort of worked (urban male, 18-24, Western Cape).

The next excerpt expresses frustration that ‘Mr. V’ did not explain the chain of infection; the speaker’s description of how there are people who take the fact that they slept with someone who was HIV positive and did not get infected as proof that they are ‘immune’ from HIV, highlighting the need for greater education about serodiscordancy and the actual infectiousness of HIV at different stages of infection in order to counteract prevailing myths about immunity:

At the end, he said ‘the question that everyone is itching to know is where did this virus start’ and he said ‘it’s only you, you’ll find out for yourself’ and then it was done, Intersexions ended. I wish that they told more, that they told us exactly who started it and how it happened, so that in life you can use it, these things teach us that ‘oh, this is how it happened’ so you know, as the guy said on Intersexions, ‘when you drink the chances of getting infected are higher’. But he should’ve said exactly who and how because…. people like saying that there are people who are immune to HIV/AIDS. That you can sleep with someone with HIV/AIDS and not get infected…. Some people it makes them not fear getting HIV…. Like you can sleep with someone who is HIV positive without a condom and you wake up and you don’t have HIV (urban male, 30+, Eastern Cape).

Participants in a different focus group understood that it can take time to acquire HIV, that as long as one ‘sleeps around’, eventually HIV infection will be inevitable:

The things that I like about Mr. V, he was showing us that getting the virus, a simple thing, my first girlfriend, maybe I didn’t get infected, but as long as I go and cheat outside or sleeping around, I will get affected. The reason I say this is because he tried to get Cedric through Gadima. He didn’t get him then…. He came with plan B and said I will get him this time and he did (peri-urban male, 30+, Gauteng).

The ‘devil’
When asked who ‘Mr. V’ was, there was extensive discussion in one focus group; with most agreeing that he was ‘the devil’: an analogy that was made in two other groups as well. This characterisation of HIV was seen to take pleasure and satisfaction when people engage in riskier behaviour:

*By having many partners you make it happy…. when you’ve been drinking and you decide to have sex without using a condom, you make it happy (peri-urban male, 18-24, Free State).*

He was described as being ‘like the devil with a fork’, ‘an opportunist, always looking for chances’ (rural male and female, 25-29, KwaZulu-Natal). He was seen to ‘targets people like Satan’ (urban male, 30+, Eastern Cape); ‘he is our worst nightmare’ (peri-urban male, 25-29, Gauteng). Viewers positioned ‘Mr. V’ as a villain and blamed him for spoiling people’s fun:

*F7: People can’t enjoy having sex without thinking ‘I won’t have HIV’. If it weren’t for him, we would be sleeping around. So, just because of him, we’re not….*

*M2: Mr. V is the devil, it’s true, he is. Mr. V organises the party and everything, but he acts as if he’s not part of everything, and he knows that after everybody is happy here, I will catch someone, put the virus and everything. So, that’s Mr. V’s strategy, to catch ladies to come to him, and it’s not good like that (peri-urban female, 18-24, and male, 30+, Gauteng).*

This devilish ‘Mr. V’ was constructed as omniscient, knowing ‘everything about you’, but maliciously withholding the potential solutions for avoiding HIV until it is too late:

*Mr. V is not the virus, but the devil, because the virus is the devil itself. Why? Because you know in the last episode when Mr. V was actually revealing everything, that’s how the devil operates. The devil knows you 100%. He knows everything about you. On one hand he has solutions for you, but he has more problems for you. He gives you the problem, but once you get hurt, he will open your eyes. But your subconscious will always be there. It’s just that situations are actually much stronger than our subconscious (peri-urban female, 18-24, and male, 30+, Gauteng).*

Several participants felt that ‘Mr. V’ draws on people’s weaknesses, purposefully plotting his ‘attacks’, knowing that it is easy for him to win in the face of irresistible ‘parties and beautiful women’:

*F8: Mr. V was so clever in the way that he knew your weakness. He will look for your weakness, what’s your weak point…. that’s how he gets through to you….*

*M1: You know how the devil operates? He will give you something that you love the most, and then he knows that you are going to over-use it, and then he will attack. That’s how the devil operates. If you can think properly, Mr. V gave people parties, he gave Godwin beautiful women and stuff like that and then he attacked them with those. He uses the things you like to attack you. That’s what I’m thinking…. He’s the devil, no doubt about it…. At the end, when the devil has attacked you, he will actually give you possible solutions after you have a wounded body, and then you will see, ‘if I didn’t go there, this thing wouldn’t have happened’. That’s how the devil operates (peri-urban female and male, 18-24, Gauteng).*

*He doesn’t care who you are, once he finds your weakness, he will enter you (rural female, 30+, Free State).*
HIV was thus seen to be facilitated by temptation; ‘when you give in’ to temptation, despite knowing better. ‘He will attack you with something that you like the most’:

F3: I think Mr. V was also dwelling on the temptation factor….
F7: Mr. V tends to like it when you give in. We tend to give into things whereby we know that we need them at the end of the day. That’s our weakest point, so at the end of the day you give into wrong things. Just like Gadima… at the end of the day, she ended up sleeping with Godwin because she needed money (peri-urban females, 18-24, Gauteng).

As he was talking, I realised that Mr. V is like the devil, because the devil will always tempt you for something that you love the most. Like if you love partying, he will use partying to actually destroy your life. He also spoke about Rosie…. he knew that Rosie needed something that would keep her calm, relaxed…. so he wanted to attack Rosie there at the party, because he had an idea that Rosie likes parties. Godwin as well, he will attract Godwin with beautiful women like Bontle, Gadima, because he knew that this guy loved girls. So, what I’m saying is he will attack you with something that you like the most, which is not wrong for me. If you like partying, to love parties is not wrong, but we all know that your favourite thing can be toxic. So, that’s how he operates (peri-urban male, 18-24, Gauteng).

‘Mr. V’ was seen to distract people from properly thinking through the potential consequences of their actions. An example of this was made of Chloe, who ‘forgot the rules’ of her open relationship after getting ‘swept away’ by Mdu:

Because it was fun for her, she kept on going. Now, Mr. V gave the girl what she wanted most, but he didn’t give her the knowledge or that mind to think twice that ‘I’m doing this, but the consequences are this’. So, she didn’t think about that. She took her focus and put it on what she was having and enjoying for that moment, for that ‘two minute noodles moment’ (peri-urban male, 25-29, Gauteng).

‘Mr. V’ was also said to have single-minded determination, that if ‘he wants you, he will get you in the end’, which Cedric’s character exemplified (after some debate about whether he might have been infected by Nomzamo):

M1: Like Cedric, he mentioned that he doesn’t like Cedric, but he got Cedric through Nomzamo. It was like a slap to me, times two slaps.

F5: It’s a slap to me as well.

M1: Like as I’m saying, he might not get you when he wants you, but he will get you in the end (peri-urban male, 18-24, and female, 25-29, Gauteng).

Another in that group perceived Cedric differently, as having power over ‘Mr. V’ in the way he was able to let Gadima go and not perpetuate the web of secrets by cheating in his next relationship ‘because now I’m hurt, as a guy’.
The devil doesn’t give up…. Now, I’m saying it’s not the devil, it’s the virus. Why am I saying it’s the virus? Because Gadima’s boyfriend had that courage of thinking twice, and because he loved Gadima the most, he was able to let her go…. If it was the devil, I don’t think that guy would have made it that far (peri-urban male, 25-29, Gauteng).

The assumption here was that the virus was not really the devil, in that people have some agency in the face of temptation. Two female participants from the same group recognised that it is possible to listen to one’s conscience (which appears to be what is meant by ‘subconscious’). Though it can be difficult to do, it is a way to take away ‘Mr. V’s’ power:

F5: Once we don’t listen to our subconscious, that’s when Mr. V gets stronger and uses his strong powers to actually take control of us. Once you’re not allowing your subconscious to actually control you into taking the corrective and the right decisions, you’re actually giving Mr. V a whole lot of power and energy to actually give you whatever you want to do and lead you into temptation and end up infecting you with the HI virus….

F7: Mr. V, if this thing is your subconscious, you’d never listen to it when you’re doing something that you love the most and it’s going to tell you at the end of the day ‘what you’re doing is wrong, do this in order for you to be in the right place’. You never listen to it because you love the thing and it’s difficult to let go of something that you love. It’s difficult. It’s not going to be easy to say ‘no, let’s use a condom’, because I like it straight (peri-urban females, 25-29 and 18-24, Gauteng).

The docudrama brought ‘the message’ closer

It was evident that the docudrama prompted a great deal of personal reflection for many respondents on how they personally related to what was discussed in episode 26.

With the 26th episode I think like a lot of people’s lives changed, a lot of people got to understand themselves, got to understand what is going on, why is this happening, if this is happening, then how do I deal with it (urban female, 30+, Mpumalanga).

‘Mr. V’ was seen to provide viewers with a number of strategies to choose from in order to avoid HIV, including using condoms or abstaining from sex:

So, Mr. V was saying Intersexions does not mean that you must have sex anyway. What you must do is you must have a solution. Actually, let me say, you must have a choice when you’re a person that my choice is to condomise, my choice is to abstain (peri-urban male, 30+, Gauteng).

The theme of secrets and communication resonated for quite a few participants, including the next speaker who said this episode was his favourite. He understood that it is not so much ‘about who infected who…. It’s more about our lifestyle and the choices we make’ and the consequences that having secrets can carry:

Unlike season one, we didn’t see much [about being] HIV positive, we saw a lot about secrets and how people cover their secrets, in series two. Up to the last episode whereby, that’s what made it my favourite, they were pointing out the fact that it’s not really much about who infected you, or who is infected, it’s more about our lifestyle and the choices we make and how we choose to act on whatever happens around us…. It could link with the opening line: ‘our lives intersect in so many ways, bound together by the secrets we keep’, it was beautiful…. Culture, religion, norms and whatever, they are
all centred around some form of secrecy or clusters of information which some people may not have limits to, which have their own consequences. For example, he was talking about people going to the mountain.... until you go there, you don’t really know what happens.... But what if what happens there opens them to [medical problems].... The last episode could make you think about secrets actually opening you up to harm. It doesn’t give someone a chance to help. Now you become a victim of your own secrets, or of society’s secrets (urban male, 18-24, Gauteng).

Another participant agreed with ‘Mr. V’ that communication can prevent a lot of problems. She reflected on how HIV can come into a serious relationship or a marriage and therefore took a message that ‘protection’ is more about ‘looking out for yourself’ than ‘trusting somebody’ and that using condoms can be seen as an expression of love, not suspicion:

- It made you reflect on your life.... Especially with the part where he said that ‘in order to conquer this HIV we need to communicate’. That is when I thought that it is true because it could prevent a whole lot of things. Communication starting from educating adolescents and teenagers into using protection, into not stopping using protection until.... well with HIV now you realise that protection is not about being in a committed relationship or a marriage or trusting somebody, it’s just about looking out for yourself. I’ve learned that sometimes we use protection because you love your partner. Not because you suspect them or what, but because you love them (urban female, 25-29, Gauteng).

A major finding from this study was a new consciousness that reportedly emerged around the limits of trust and faithfulness. Like other participants described in the section on key messages about MCP, this participant said that after watching episode 26, she has a greater sense that being faithful is not a sufficient strategy against HIV ‘because I don’t know what he’s doing’:

- I think watching the last episode actually gave a lot of people that ‘reality slap’. Most of the people could relate to some of the things. I personally actually felt that ‘if I’m faithful to my partner, the chances of him being as faithful as I am to him are actually zilch, very slim. So, it’s just a matter of knowing what you want and protecting yourself from him, because I don’t know what he’s doing’ (peri-urban female, 18-24, Gauteng).

**Hearing the voice**

There was strong identification expressed with ‘Mr. V’s’ character. So much so that some reported a sense that his narration spoke directly to them. In this excerpt, a sense that he was personally warning the speaker is described, not generically as someone who is a member of society, but as if the episode was about ‘V... and me’ (naming herself). She ultimately describes her determination to ‘win’ rather than continue to act in a way that might ‘perpetuate’ HIV:

- It actually addressed you as a person, not just as a viewer, but as a person who is in a relationship, who is a woman, who is a man, who is this, who is that. So it addressed that actually, ‘if you are ignorant, you are perpetuating me. Like you, not society’. It was about [me], ‘if you don’t do this, you know you are perpetuating me, if you hide this information, if you are being ignorant..’ It was about V, because he called himself that and [me]. Like we’re having this conversation, and in my head I’m like, ‘but with me I’m going to win because I’m not going to perpetuate this anymore’ (urban female, 18-24, Gauteng).
In a powerful example, a participant shared how he related to ‘Mr. V’s’ narration of the scene from episode five with Rosie and Two-Step as it reminded him of a recent experience in which his sexual partner decided to remove the condom, which he did not question at the time even though ‘I knew that I had to use a condom’. He critically reflected about this moment and his capacity to ‘do things without even thinking’ and reportedly felt ‘guilty and embarrassed’ while watching this scene, for the way his conscience (which others referred to as the voice of ‘Mr. V’) goes away in the moment one needs it the most:

M6: For me, I was just watching, especially the Rosie episode when he was busy narrating on that. I had just slept with this person and I had unprotected sex…. I told my friend ‘eish, I slept with so and so’. He was like ‘that person was dating this girl’ and .... I know that girl and I know who she has been sleeping around with. So for me, it just all came to reality. It was just too much to bear that sometimes we do things without even thinking. I knew that I had to use a condom and I did use a condom, but then he took it out…. it just reminded me of my situation.... Like, I just felt guilty. I was very embarrassed because I knew, because I started off by using a condom, and then it went off and I didn’t even bother [laughs]. So, I didn’t even try to stop the person, like ‘hey, what are you doing now, why are you taking it out’.... Because at first, before the actual penetration, it was always like ‘no, put the condom on’, but it was when he took the condom out, that that subconscious voice was gone.

M1: It’s always there.

F5: But we don’t listen to it. It goes away.

M6: But I was just enjoying the pleasure and everything.

F5: So the subconscious was not there, but Mr. V was there and he was happy (peri-urban males and female, 25-29, Gauteng).

Another person imagined that if only the cautionary voice of ‘Mr. V’ had always been in everyone’s ‘subconscious’, ‘people wouldn’t be HIV positive’. He realises that ‘we all have that [voice] inside of us; we just don’t listen to it’:

I think if Mr. V had a different character, like a voice like in your head, almost like your subconscious, when you are about to sleep with somebody, that subconscious voice comes clearly in your head saying ‘if you’re going to sleep with him, you’re going to get AIDS’. If that had happened throughout most of our lives, then people wouldn’t be HIV positive. If there was a positive voice, almost like Mr. V but not Mr. V, saying ‘okay, there’s a beautiful girl, but do not go there because you will end up being HIV positive’, that would have been nice.... Or saying ‘take precautions, use a condom’. But I guess we all have that inside of us; we just don’t listen to it (peri-urban female, 25-29, Gauteng).

‘Mr. V’: a code to identify being HIV positive

An HIV-positive participant described his personal identification with the character of ‘Mr. V’ in great detail. Initially he described how watching the docudrama reminded him of his pain and regret that he did not ‘play safe’ in the past:
I can relate to Mr. V. There are people who are ignorant in using condoms and when they become sick with AIDS, you will hear a person say ‘eish, I was told to use a condom’. When you find the person maybe he is negative, he will be happy and say ‘it’s because I was using a condom’. So, if you take these two people who sit and listen to Mr. V, the one who is negative, he will be happy, the one who is positive, he will regret and say ‘eish, if I could have used a condom, I could not have Mr. V’.... I think what I was doing before I became [HIV] positive, then I said ‘oh, maybe if I could have prevented myself, I could have not got Mr. V, but now it’s too late’.... When I look at Mr. V yes, there was that pain.... the pain that this guy, he is talking about me actually, that I was careless and then that’s why I’m positive. So, if I could not have played unsafe, I could be negative (peri-urban male, 30+, Gauteng).

He goes on to describe his perception that ‘Mr. V is inside me’ and that ‘Mr. V’ warned him in the docudrama to ‘be careful’ and look after his body: ‘I’m living with Mr. V too, you see, and if I’m not careful, Mr. V is going to destroy my body, so I must be careful. This is what he was telling me’ (peri-urban male, 30+, Gauteng). The speaker also described a sense of shame that ‘Mr. V’s’ narration ‘exposed’ him and others who are living with HIV by describing how ‘he entered my body’. He also felt a sense that ‘Mr. V was talking to me’ and of responsibility for the fact that he is now HIV positive, thanks to his past behaviour which ‘invited Mr. V’:

Mr. V is inside me.... no one sent me there to call Mr. V. It was myself going there to the ladies. So, at the end, I think of others, how do they feel. Okay, I ask you and say ‘how do you feel living with HIV, how do you feel about that episode’? Others say ‘hey, he was exposing me’. I was sitting with people and then I thought ‘no, this guy is telling them how he entered my body’. So, I think no, it may give those people who are positive, who believe that skin to skin, when you are both positive, is safe, now Mr. V is exposing and said ‘you make me strong by doing that’, then you start to realise that ‘okay.... Mr. V was not talking to somebody else, for me. He was talking to me’, and then when I look back, those episodes were talking to me, because whatever I was doing, multiple partners, I was inviting Mr. V. So now I must take care of myself (peri-urban male, 30+, Gauteng).

Interestingly, the same participant reported that he was not the only person to adopt the terminology of ‘Mr. V’ to describe being HIV positive. It appears as if Intersexions has once again entered the public lexicon and that the term ‘Mr. V’ in particular has become a concept with which people living with HIV may choose to identify with:

I was surprised when I heard somebody say ‘I am having Mr. V’. ‘Oh, what is Mr. V?’ He said, ‘you don’t watch Intersexions’? ‘Oh yes, Intersexions, even me from the clinic, I know Mr. V’. So it gives the code that people must code themselves when they are positive.... I think I heard two or three people who say that. They are mostly ladies who are saying that (peri-urban male, 30+, Gauteng).

The interviewee elaborates how the term ‘Mr. V’ has provided people living with HIV with a ‘code’ with which they can discuss their HIV status or safely disclose to others. He explains that it is easier to say ‘I’m with Mr. V’:

M1: The message of Mr. V, he was relating how he infiltrates human bodies, and then when the person thinks ‘oh, it’s how we get HIV, no, I’m having Mr. V’, and people will take time who don’t know that you are HIV positive. Before we used to say ‘I received an SMS’ because it’s three [letters] ‘SMS’, now it’s one or it’s three, Mr. V, ARV. Then we relate to what Mr. V was saying.
Facilitator: Do you think it’s easier for people who are positive to now tell somebody else ‘I’m positive?’ ….They’re not saying ‘I’m positive’, they’re saying ‘I’m with Mr. V’, is it easier to say that?

M1: It’s easier, and respectable because the issue is Mr. V, so you know that ‘oh, Mr. V’, maybe if a person doesn’t know when you say Mr. V, ‘oh, it’s Vusi or Veliswa’, things like that, but to people who know, ‘oh, we are all in the same [boat]’. Because even me, it confused me when I started hearing that, ‘I’m Mr. V’. I said ‘who is Mr. V’? They said oh, ‘you didn’t see the last episode of Intersexions? I’m HIV positive’, so such things like that.

Facilitator: So, it’s helping people disclose?

M1: To disclose, to open up. You know, in the first dramas they were showing how people who are positive hide themselves and whatsoever, so in Intersexions it does not show a person having a secret. A guy is brave and goes and tells his girlfriend and says ‘I’m positive, so don’t get married’, such things like that. So, it makes people to be brave and say ‘do or die’ (peri-urban male, 30+, Gauteng).

Self-efficacy in the face of ‘Mr. V’s’ threat

Intersexions succeeded in arousing an extensive sense of fear and dread in response to both the character of ‘Mr. V’ and what he represents: the threat of HIV. As described above, many participants perceived ‘Mr. V’ as dark, mysterious, scary, arrogant, destructive, devilish, malicious, and out ‘to get you’. They also expressed a sense that the threat of HIV was more real and present as a result of viewing Intersexions, accompanied with a heightened awareness of their personal risk:

We saw that he is among us and in our midst and exactly how powerful he is (rural female, 30+, Free State).

_____________________________________

It scared me and I was already imagining what would happen to me if I had to be infected by it (peri-urban male, 18-24, Free State).

_____________________________________

The way he put it, it sounded very scary. I don’t want that man close to me. I felt like that, I felt very scared, and at the same time I’m okay, like warning people about abstaining and stuff (peri-urban female, 25-29, KwaZulu-Natal).

This sense of fear was not accompanied with a sense of paralysis or a sense that HIV infection is inevitable or that there is little one can do to avoid ‘Mr. V’s’ grip. Instead, responses indicate that Intersexions also succeeded in developing a high sense of efficacy to take action to alleviate this threat (after all, ‘I don’t want that man close to me ’). For example, some understood the ways in which people give HIV power, when in fact, one has the option to avoid the behaviours that ‘make him spread’:

We as human beings actually…. give the HI virus power…. but we don’t see just how much of that power we have in our hands…. It shows ‘how simple you guys make me spread like by hating him and sleeping with his girlfriend and then by doing that
you’re actually making me famous dudes. I’m all up to you’. He said it in this chilled manner. I feel like he was so chilled, the way he said it. He was so educative, yet so scary (urban female, 18-24, Gauteng).

Ignoring information about how to prevent transmission was seen as another way ‘Mr. V gets power’, which one person conceptualised as the inhibition of one’s conscience:

By ignoring that information, Mr. V gets power and once Mr. V is there, your subconscious stops…. He knew what to do, so his subconscious was still there. He used protection, and when he stopped using protection, the subconscious said ‘okay, now I’m leaving because Mr. V is now taking power, he’s like overpowering me’. So, his subconscious left. It’s almost like Mr. V scared the subconscious away. It’s the good guy and the bad guy. Your conscience would be the good guy and Mr. V would be the bad guy. So once the bad guy comes, there goes the power (peri-urban female, 25-29, Gauteng).

While much of the docudrama focused on what the characters did to aid ‘Mr. V’, many realised that he also specified a number of strategies to counteract his power; ‘Mr. V was actually telling us how happy he is when he gets us, but in that present moment, he was also telling us solutions, if you were listening properly’ (peri-urban male, 18-24, Gauteng). Participants indicated an understanding that despite ‘Mr. V’s’ strength and manipulative arrogance, he was said to be afraid of some things, including condoms, honesty and mutual faithfulness, therefore there is ‘still a light at the end of the tunnel’:

We can still kind of put HIV to shame by living the good life, living an honest life, staying away from multiple partners, staying away from cheating and lies and all of that. So Mr. V does have a weak point as much as he seems like the strong, macho guy getting everything confused and getting everybody infected or whatever, but there is still a light at the end of the tunnel (peri-urban female, 25-29, Gauteng).

It wasn’t happy that it didn’t get some of the people, but it also explained why it didn’t get some of the people. Obviously they did something right and you also turn to think that ‘this is something that I must also do’ (urban female, 25-29, Gauteng).

In the absence of a trustworthy, faithful partner, having the self-control to always use a condom for the full duration of sexual intercourse was one strategy named to reduce ‘Mr. V’s’ threat:

I think it’s just curiosity and excitement and wanting things that you know you can get, but only if you get them the right way. Like if I want to have unprotected sex, then I must be ready to have a faithful partner whom I can trust. Once I don’t have that, I need to have self-control in the fact that I am not going to sleep without a condom. Whether it’s you just inserting or whether it’s you withdrawing, the fact that there are so many liquids that get exchanged during sexual intercourse, even liquids that you don’t see, so rather use a condom before you even start anything. Whilst it’s erect, put a condom [on], then we can continue (peri-urban female, 25-29, Gauteng).

A sense of self-efficacy to act in the face of the temptation given by ‘Mr. V’ was often articulated in terms of choice: ‘AIDS has spoken so will you open yourself up to him or will you shut the door on him? ’ (rural female, 30+, Free State); ‘it’s about the present the past and the future because it teaches you things that you can adopt and change in your life, moving forward’ (peri-urban male, 18-24, Eastern
Cape). Another added that ultimately, *Intersexions* communicated that one’s health comes down to the ‘choices we make as individuals’, which one has power over:

For me, I think this has nothing to do with religion, this has nothing to do with the devil or God. It’s just the choices we make as individuals. I think that’s what…. the last episode really highlighted for me, that at the end of the day, we have choices. So, whatever choice you take, you’re going to get those results. So, it was those that made bad choices and they got infected, and it was those that made good choices in which the outcome was very nice. So for me, I think it’s the lifestyles that we live and that we are exposed to. I mean, people are still having sex, you see teenage pregnancy, you see people using drugs, people are getting drunk…. I think we should just stop blaming things on the devil, Mr. V is not a devil, it’s the choices we make (peri-urban male, 18-24, Gauteng).

A sense of self-determination and resolve was described as being the best way to control ‘Mr. V’. Nurturing one’s self-esteem with ‘positive things’ and planning ahead (e.g., by inserting a female condom before going to a party) were two ways this participant recommended for managing the temptations posed by ‘Mr. V’:

Mr. V gives us parties, he gives us cash, he gives us rich guys, he gives us all the temptations. So our subconscious, if it’s not well-fed, it cannot defend itself against these situations. So if my subconscious is well-fed and well-groomed and is strong enough, when I’m in a situation, Mr. V can’t take over. There is no way when I’m in a situation that is so intense that my subconscious doesn’t work. It has to work, because I would have been feeding it all along, feeding it positive things, positive thoughts, positive information, weigh out certain situations. Like for instance if you’re going to a party and you know you drink a lot and you might end up getting sex, take a condom. Female condoms can last up to eight or six hours. Put it in inside of you if know that that’s actually what is going to happen. It’s a way of actually even enhancing your subconscious that in case this happens, then I have protection. So, just feeding our subconscious so that Mr. V doesn’t take over (peri-urban female, 25-29, Gauteng).

A strong sense of self-efficacy was said to be the best way to control ‘Mr. V’. As the culmination of series two, a strong message of the docudrama was perceived to challenge social norms that suggest one has little control over sexual temptations, when in fact, one can always choose how to respond:

Episode 26, let me just melt it down into the simplest words - how powerless HIV actually could be. The potential of us as an educated, well-informed nation, how we could decrease it by simple choices that we make daily…. People like the excuse of ‘but there’s temptation, there’s that’, but at the end of the day, you don’t have to control things outside, but it’s you that can control and be like ‘if I decide that I’m in a relationship…. the intention of the relationship must mean something so much that even if something flashier comes, I’m not just tempted and giving excuses like, but there’s temptation’. There will always be temptation, so choose (urban female, 18-24, Gauteng).

**Overall effectiveness**

Overall, episode 26 was effective at reinforcing the educational messages that were present in each of the preceding episodes. The docudrama was appreciated for providing an overview of the whole series, linking different plot elements and educational content, and reiterating the main theme of
communication. While the dramatic device of the personification of HIV was less surprising than when viewers first encountered ‘Mr. V’ in Intersexions I, it was still effective at eliciting viewers’ attention, communicating information about the nature of HIV and provoking a renewed fear of HIV. For many, this fear was accompanied with efficacious knowledge of clear strategies that one can draw on to manage ‘Mr. V’s’ threat. It is safe to say that this episode helped the series achieve its objectives to provide viewers with a viewing experience that was challenging, insightful, and which successfully highlighted HIV educational content without being overly didactic.

**PORTRAYAL OF HIV**

The evaluation of the first season of *Intersexions* found that one of its key achievements was viewers’ development of strong, multifaceted understandings of HIV and AIDS. This evaluation found similar findings. Participants often spoke about the new insights they had gained about the nature of HIV. These were dynamic understandings which can be described as ‘actionable’ forms of knowledge in the way that they lent themselves to specific forms of action and behaviour change including HIV preventive behaviours such as testing and having safer sex. These new understandings about HIV can be summarised as:

1) **HIV does not discriminate**

Many participants reflected that everyone is potentially vulnerable to being infected by HIV, irrespective of their wealth, marital status, education, age or race. Anyone can potentially come in contact with HIV, especially if they or their partner are not faithful, if they act on their emotions, if they are dishonest, drink too much alcohol, etc.; one’s wealth or race will not protect against ‘Mr. V’:

> It really shows…. the HIV and everything is not only for those people who are from a poor background, but it goes for everyone and anyone (peri-urban female, 30+, Gauteng).

> HIV is here to stay and HIV is out for everyone, whether poor or rich, educated, uneducated or whatever culture you come from, whatever race you come from. So, it’s here, and it’s spreading, actually. It’s around us (peri-urban female, 25-29, Gauteng).

2) **HIV is a real threat**

A newfound sense of personal vulnerability to HIV was often described, as well as a sense that HIV is real and present, even in close proximity to one’s physical person: ‘*I did have a thought that you are at risk, you can get HIV anytime, anywhere*’; ‘*it taught me that AIDS is out there, it’s just that people are ignorant, AIDS is there*’. This understanding was coupled with the sense of how easily HIV is transmitted and that it only ‘*takes a split second*’:
By the time I continued to watch it, I became scared because I wasn’t aware. I know that HIV, how it’s transmitted, but I didn’t know it can be transmitted very easily (peri-urban female, 30+, Western Cape).

At the end of the day, sex is like two minute noodles now…. I told myself that this thing actually doesn’t need to take forever. It’s something that can be done in a split second and it will come with the consequence that might last a lifetime (urban male, 30+, KwaZulu-Natal).

Intersexions provided some participants with a new sense that HIV is present among us: ‘what happened before when I watched these episodes, before we didn’t agree this virus is there, but now we are starting to learn the virus is around’. Meaning, that everyone is affected: ‘whether you like it or not, if you’re not infected, you are affected and that is what Intersexions is trying to show us ’ (rural female, 30+, Free State). This sense of the reality of the threat of HIV formed the basis of what many described as greater concern about their partner’s sexual behaviour: ‘Intersexions shows how you may be with your partner, but you don’t know what your partner gets up to’.

No, there was this idea of ‘trust’. We test, then after that we say ‘we feel safe’, but people can still go out and do things (urban male, 18-24, Gauteng).

3) HIV is hidden

The understanding that HIV is a reality that is proximate to one’s own life and at the same time hidden, also emerged. Participants reflected how one cannot tell whether a potential sexual partner, is HIV positive based on physical appearance alone. One participant reflected how people like to see HIV, and people living with HIV, as far removed from oneself; she explained how the series emphasised that anyone (including the person she’s sat next to, or even herself) can spread HIV:

People always isolate HIV from themselves. Like ‘they might have it, but I can’t’…. It’s not written on your forehead that you might have it…. So you can’t really isolate yourself from it. You can’t say ‘them and me’. It’s possible the person I’m sitting next to or the person after that, or even myself, I can actually infect this person…. It made it so real (urban female, 18-24, Gauteng).

4) You can live well with HIV

Another key understanding that came up was the idea that one can live positively with HIV by accepting one’s status and living a healthy lifestyle. This came with the understanding that people living with HIV are not necessarily going to die, that there is treatment available that can help one to live well with HIV for a long time.

If you are HIV positive, it doesn’t mean like it’s the end of the world for you (peri-urban male, 25-29, Western Cape).

HIV is a silent killer. You can have it and not even suspect, so the sooner you get tested, the quicker you can get treatment to live a healthy life (urban female, 30+, Eastern Cape).

5) HIV is mainly transmitted through sexual intercourse
A message that HIV is primarily transmitted through sexual intercourse was also derived from the series, reinforcing the idea that HIV is connected with sex, rather than other means: ‘Mr. V was emphasising unsafe sex and infection, that if you don’t play safe, I will infect you’.

I’ve learnt that if you are not faithful and you have sex unprotected…. you will get AIDS, and AIDS kills. That you could see, even if you see somebody cheating, then the next thing is this person is going to get AIDS (urban male, 30+, Mpumalanga).

Intersexions II was understood to portray how a number of complex social factors impact HIV transmission. One person said that the series was not just about HIV, but ‘all the other issues that branch out of the HIV issue’. A number of associated issues were understood to facilitate the spread of HIV, including: substance abuse, transactional sex, communication, same-sex relations, gender and culture.

6) You can act against the threat of HIV

A number of participants reflected on the non-discriminatory, destructive and hidden nature of HIV by expressing a call for preventive action. The sense that one can take action against the threat of HIV was a key understanding derived from the series, and particularly from the docudrama (as discussed above). Conceptualised action primarily took the form of by being more open and honest in one’s relationships, more careful about consistently using condoms and/or by testing for HIV as a couple, rather than to take another’s word about their HIV status:

Now I had this thing of saying ‘just because this man is saying trust me, I’m clean or whatever’, go test. It’s like a repetition of those words in your head until you really want to go and test (urban female, 18-24, Gauteng).

Intersexions influenced me. I said ‘no, we must use condoms, because even if I trust you, even if you trust me, but still, we must use condoms’ (peri-urban male, 18-24, KwaZulu-Natal).

I think the message is that HIV is there, and accepting and learning about it…. It gave us the hope that we can still conquer it and not everybody could end up with it…. (urban female, 25-29, Gauteng).

PORTRAYAL OF GENDER

Focus group participants and interviewees were asked their thoughts on how gender was portrayed in Intersexions II. This inevitably generated a range of views about different characters as well as the male and female characters in general. A common theme among both the male and female characters was said to be ‘positive’ characters that got caught up in another’s deceit or destructive behaviour:

But as I look back at it right this moment, it was that positive, negative situation in one, how positive people, as we have contextualised them, met with people who were destructive or a hindrance or a hard lesson, basically (urban female, 18-24, Gauteng).
Portrayal of men

The characters seemed to fall into two camps, ‘good guys’ and ‘bad guys’. The male characters whose behaviour and portrayal of masculinity was most often criticised (though still regarded as realistic) included Musa, Godwin, Lwazi, Thapelo and Pastor Rex. They were variously criticised for cheating on their wives and for ‘using women’ and Godwin in particular for manipulating and blackmailing Gadima. This type of character was seen to conform to dominant gender norms that position men as having more relationship and decision-making power.

A big percentage of the [male] characters were very dominant, oppressive in a way…. They were very controlling and dominant and very aggressive about ‘I’m the man, I’m the head’ (urban female, 18-24, Gauteng).

Musa was particularly seen to represent a certain kind of gendered stereotype, of a rural man who expected his wives not to question him and for whom it was fine to have extramarital affairs. It was said that there are men like Musa, that ‘whatever the man says, goes’:

It’s how men are, for me. I wish I could see a man that is not working and the woman is working. I wish I could see that, but the way they portrayed men, they portrayed men as dictators, like Musa for example, because some men are dictators…. What I’m saying is it’s very, very normal that the man’s decision always is the one that actually passes. Whatever the man says goes, no matter what (peri-urban male, 18-24, Gauteng).

We still answer to the man even if we can be on par with them they still feel that they have more rights than us (rural female, 30+, Free State).

Musa and Lwazi were criticised for being ‘good fathers’ and providing poor examples to their sons:

The fathers were not good fathers. Their way of raising their sons was totally wrong because the sons turned out to be a bit more responsible more than their fathers. Thanks to their mothers I think…. their mothers played much more active roles in helping their sons cope, and how they relate with life and issues (urban male, 18-24, Gauteng).

While such characters were described quite negatively, most participants who discussed this issue eluded that the male characters were accurate representations of men, e.g., ‘because that’s what men, actually most men, do’.

Some of them really are like that because the things that they do really do happen, they are not pretending, it is what really happens…. We are taking about cheating…. things like going out drinking and meeting someone and going in without using a condom and contracting AIDS and spreading
The male characters were more often seen as the ones who ‘mistreated’ the female characters, rather than the other way around, though there were some noted exceptions. When asked what such characterisations said about South African men, a peri-urban female thought the series was ‘belittling’ men because while there are some men who behave badly, not all do. Another participant thought that the series’ portrayal of gender was unfair given how often male characters were depicted as ‘players’:

The way the portrayed men was not fair because most of the time, men were showed as players and as people who don’t care, as people who don’t mean it when they say ‘I love you’. I can say as men, we’ve lost our culture (urban male, 30+, Eastern Cape).

Two rural women thought that Intersexions put across a message that men are not trustworthy and are largely responsible for the spread of HIV:

F5: ‘Don’t tell yourself that the man is yours’, that is what we learned from those men….
F3: They also showed us that AIDS spreads mostly through them because of lacking trustworthiness and cheating. Men are the ones spreading AIDS with their mistresses and all these things, going with every skirt that passes by (rural females, 30+, 18-24, Free State).

Cedric, Clyde, Ata, and Jama were seen as more positive examples of men, variously described as ‘honest’, ‘hard-working’, ‘supportive’, ‘helpful’ and ‘loyal’. Zolile’s transformation from his early days as a broken-hearted, reckless university student to someone who chose to end an inauthentic relationship and who was open about his HIV positive status to his current and former lovers was therefore seen as ‘a bit of a responsible male figure’. Clyde was seen as ‘a person of values who is very focussed, building his life and not playing around’; a female thought he showed Gadima a great deal of sympathy and care in the way he listened to her (‘wow, this guy loves her, he really cares’). Jama was described by one participant as ‘the male version of Lerato, forgiving and wanting to move on’ in the way he responded to learning his wife had conceived without him. Cedric was described by one urban male as ‘weak’, presumably for the way he did not conform to a dominant form of masculinity. With the exception of Zolile, however, most of these characters were regarded as having a minor role to play in their respective episodes.

Sdumo was seen to conform to some stereotypes, particularly in the way he was said to be ‘a ladies man’ and affected by peer pressure from his friends who were described as ‘typical young men in a typical scene’. This scenario of needing to ‘prove yourself’ as a man was said to ‘hit home’ for one participant: ‘You are sort of pushed to be a player because this girl wants you, this girl wants you, and you sort of need to prove yourself’ (urban male, 18-24, Western Cape). Sdumo was also seen to challenge stereotypes, however, in the way he sought STI treatment and disclosed about his STI to his recent partners.

Portrayal of women
There was considerably more discussion about the female characters that were depicted in *Intersexions*, many of whom were seen to be victims of male indiscretion (*'she gets cheated on and infected with sickness and it’s the woman. It is always the woman’*). They were broadly described as ‘vulnerable’, ‘easily tempted’, often ‘taken advantage of’, ‘used too much’, ‘gullible, they believe everything that is told to them’, and ‘victims of circumstances maybe they didn’t have control over’. ‘Most of the problems centred around them. If I were to put it, the blame will go to them before it comes out clearly, what the real issue is’ (urban male, 30+, Mpumalanga). These negative descriptions were nonetheless seen to reflect some of the challenges women face in reality:

*They are shown as being very vulnerable, they’re portrayed as doormats and their views aren’t valued…. Zolile’s mom, she was treated very badly by her husband. She was a doormat and the reason she eventually came out with the truth was because she was in vulnerable position. The series is actually a reflection of how women are treated in real life (rural male, 30+, Eastern Cape).*

However, the female characters were also described at times to be ‘strong’, ‘powerful’, and ‘role models’ to other women. One participant commented on how the series portrayed a number of classic South African prototypes, including contemporary and working class women, women seeking their dreams in the big city and so forth:

*The contemporary South African woman was there. Whether I as that contemporary woman would respond to the situation the way they did might be different, but in terms of contextualising and saying working class women who feel empowered, who are taking control of their lives, even if they’re married but they still want that independence, the youth who comes with big dreams to Joburg and meets certain challenges, that girl who is forced to go back home because life in Joburg failed, that woman who is giving everything to, who still believes in being the submissive woman, was there. Like every aspect I think was covered quite accurately. The response obviously is individually based, but every South African was there (urban female, 18-24, Gauteng).*

Like the male characters, the female ones also seemed to be divided into two types. Gadima, Bontle and Khany were regarded as ‘greedy’ women, ‘hungry for money and hungry for love or sex’ and willing to ‘do anything just to be in the spotlight’ without caring how their choices impact other women. Others said that Gadima and Bontle’s stories ‘showed women to be never satisfied in life’; ‘all of them were greedy and dissatisfied with what they had’. Gadima was described as naïve (‘how could she think that she stood a chance with another woman’s husband?’) and criticised for showing ‘us the weaker side of women’ and ‘trying to derail other women’. Episode nine was thought to give a message that ‘as a woman we need to know that we are not better than each other’ and should not betray each other as Gadima betrayed Thandeka. She appeared to garner harsher blame by female participants than Godwin did, for whom it could be argued was more at fault in that scenario.
F4: I didn’t like the one with that man that had a wife but still used the maid; it really pained me because I saw that people that are well off in life use other people..

F6: It doesn’t really pain me but it makes me angry…. The girl that was maid knew that the man was had a wife but she still slept with him knowing that he had a wife so was she looking at that man to leave his wife to be with her? (rural females, 30+, Free State).

Other female characters, including Lorraine, Nomzamo and Lerato, were more highly regarded and regarded for the strength they expressed alongside their vulnerability: ‘even if the vulnerable nature of being feminine was there…. they were portrayed as, I think, strong and as people who had taken initiative about their lives ’ (urban female, 18-24, Gauteng). Nomzamo was appreciated for being willing to ‘break the circle of lies and secrecy’. Lorraine was admired for being ‘herself, even if she wasn’t accepted’ by others and for standing up for ‘what is right’. Thandeka’s character elicited a great deal of sympathy, with some viewers imagining what it would be like to be in the same situation:

It also hurt me that the guy cheated on the girl and lied about going to work. When you have a man in your life and see such things, you begin to imagine it happening to you and it hurts. She really loved that guy but he was cheating…. I live with my man and I imagine how painful it is to be cheated on (rural female, 30+, Free State).

Lerato was often described as being ‘very strong’ and ‘that’s a woman’ in the creative way she protected her health by addressing her husband’s infidelity rather than ignore it, which ‘sent out the message: take care of yourself’. She appeared to be a very popular character, given the way she was seen not to conform to gendered expectations that would either have her leave her marriage in anger or submissively accept her husband. One participant said, ‘she is a good role model, she could stand up for herself and stand for what she believes in’, and another: ‘I wish we had more women like her’. She was also appreciated for demonstrating how many successful women may not be as happy as they are appear to be, as a lot is ‘hidden behind the doors’. One male participant, however, was adamant that her behaviour was ‘not real’ and ‘too much fairy-tale’, finding it implausible that a woman could respond in such a way (urban male, 30+, Eastern Cape).

Curiously, several participants thought both Lerato and Sindi were admirable for being willing to do anything for their marriage, and were thus constructed as ‘powerful’. Such a view indicates that some viewers may have taken an unintended message that women should do anything ‘to save their marriage’:

What I liked in Intersexions was the powerful women. Some women have lots of power. They are so wise…. [Lerato] realised that her man is cheating, but she didn’t break down or yell at the man. She…. bought condoms and just packed it there. You know, that’s a powerful woman, a woman who actually went to God and made some vows…. some women will do everything to save their marriages (peri-urban male, 18-24, Gauteng).
It encourages maybe married women you mustn’t give up on your man. You must stick to your man, no matter what, but be careful at the same time (peri-urban female, 25-29, KwaZulu-Natal).

While some participants uncritically expressed that episode 13 provided a message that a woman should stay in a marriage ‘no matter what’, others were able to read a demonstration of Lerato’s agency from the same storyline. Her choice to stay with Thapelo surprised many but was generally regarded as a decision that indicated her power, given the terms of engagement she set. Her mother, Palesa, was appreciated for voicing that it could be advisable to leave a cheating husband, ultimately giving a complex message that ‘there is no right or wrong way to do it’:

You know what, you can either stick with this person and do what she did and give him condoms; or you can leave this person. And I think this mother had left the father for that reason…. I also had to make that choice as well…. People sometimes they think that if you leave it means ‘you can’t tolerate or you are a coward’ or… ‘You must just stay because you are a woman and that is what men do’ …. Usually the older people would tell you that ‘you know what, stay with this person’. That lady [Lerato’s mother] showed me that, ‘no both ways it’s you choice, whatever makes you happy’. She also did it, and she sort of showed me that there is no right or wrong way to do it, whatever you want to do, if somebody cheats on you it’s your choice if you want to leave him or stay with him…. I had to go through the same thing, yes (urban female, 25-29, Gauteng).

Nokuthula, Zolile’s mother, garnered considerable debate, with some seeing her character as ‘too dependent on her husband’, ‘a witch’ and a ‘criminal’, for hiding the secret of who Zolile’s father was ‘so that it never comes out…. She’s not a woman of character, she knows no truth’. Meanwhile others thought she was a ‘strong’ character for enduring her marriage to Lwazi ‘all those years’ and choosing to stay ‘for the sake of staying in marriage’. An urban male critically read the same episode as an indication of Nokuthula’s submissiveness: ‘she knew her husband was having an affair. She was getting ready to leave and then he apologised and then she forgot everything and…. decided okay, I’m staying with him now’ (urban male, 18-24, Gauteng). Reflecting on the various secrets that women carried in the series, particularly Nokuthula’s, one participant surmised that ‘women are dangerous’:

I realised that women are dangerous in keeping secrets because they can keep secrets. When a child is born, it’s only the women who know who is the father. It’s only the women, because the father would be having faith, you see…. in reality, it is the mother who knows the child’s surname (peri-urban male, 18-24, KwaZulu-Natal).

Manzuza, Musa’s first wife, was perceived to be a somewhat typical rural woman, without a lot of agency, “raised to say ‘yebo, baba’ at all cost”, who would ‘lose herself just to be with that man…. who would cheat again if he got a chance to do it’ (urban female, 30+, Mpumalanga) and was “obliged to stay, ‘I must deal with it, whatever comes to me, it’s fine’” (urban female, 18-24, Western Cape). Two participants noted how Musa’s wives ‘wouldn’t even look him in the eyes’; ‘even when they were questioning Musa…. They were questioning him with fear’ (peri-urban female and male, 25-29, Gauteng).
Musa’s second wife, Madlamini, was universally perceived as a strong woman and a role model in the way she insisted on knowing ‘what was really going on’ with her husband and for ultimately choosing to leave him when the full nature of his deceit was revealed. The need for more rural characters like Madlamini was identified, who can model how women can ‘stand up for themselves, then the story of HIV will be limited’ (peri-urban female, 25-29, Gauteng). Madlamini was appreciated for challenging cultural norms of how a woman in a polygamous marriage should behave: ‘when a man is married to two women they have to respect him. They are not supposed to ask him where he has been and whatever’ (rural female, 25-29, Free State) and for demonstrating that she was not weak, just because she was in a polygamous relationship:

It does not mean that somebody is vulnerable because they are in such a relationship. But obviously because he didn’t honour their agreement or whatever, you could see that she was a strong woman. It does not mean that she is weak (urban female, 25-29, Gauteng).

F3: The fact that women are submissive to men so whatever happens to them, they don’t complain…. I mean it’s a true reflection of how women are treated culturally. We’re expected to be submissive and not have a voice....

M1: The second wife leaving was very defiant for me because in rural areas like that, women are usually submissive, they never question their husbands and they most certainly don’t use condoms. But she defied that norm and even went as far as leaving the marriage because she wasn’t being treated the way she should and as she was leaving, she gave the first wife a box of condoms, telling her to take care of herself, even though it went against her culture (rural female and male, 30+, Eastern Cape).

Grace, Gadima and Rosie were identified as resilient women, given how they ultimately rose above their misfortune and sought a ‘fresh start’. Grace touched some participants, who identified with her mistreatment by Pastor Rex and the strength she demonstrated upon returning home, including how she ‘mothered’ Ata’s family:

If Grace was never tempted by the priest she would have never been sick. She was living fine on the streets because she had no virus and now she ends being sick and neglected. It pains me to a point of tears (rural female, 30+, Free State).

Grace, I think I saw a lot of strength in her actually…. having to go back home and just accepting your situation and deciding that ‘okay, this is who I am, this is the life I’m going to live from now on’, I think it was just part of accepting who she actually was, like accepting her circumstances. So, I really think she was strong (urban female, 18-24, Gauteng).

Likewise, Rosie and Gadima were seen to find the strength to ‘dust yourself up and try again’:

It doesn’t matter where you’ve been, what happened, how it happened, as long as at the end of the day you will find strength to get up and dust yourself up and try again, because when you shift focus…. when you close the door behind you and look in front of you, you will actually see the door that you need to open. Rosie, after the miscarriage, after the Two-Step thingy, she found her strength to go back to school and made something better of herself. Gadima, after lying, cheating.
Several women shared how they personally related to Rosie and the way she managed to overcome hardship to try and ‘live a better life’:

She [Rosie] understood that she made a mistake and tried to live a better life.... I relate to her because I had my share of mistakes, but now I know, and I’ve learnt from them and I grew from them and now I’m trying to live my life as best as I could. Whatever I’m doing now, I think twice. I don’t just do things (peri-urban female, 25-29, Gauteng).

After the knocks she took, she was able to go back to school and get whatever she wanted.... If she can do it then why can’t I do it? (urban female, 30+, Mpumalanga).

Finally, a male participant described how he took away a general lesson from Intersexions that men should ‘accept women as equals’:

After watching some of the episodes, I learnt that we don’t appreciate that we’ve got women around us that take care of us, like our mothers and our sisters and our girlfriends or our wives, until we put them in the deep end where they’ve got to struggle because of our own mistakes. So what I’ve learnt is that we need to embrace them and respect them by all means, which is something in our culture once again, something that’s not easy to happen, although we try. But we still see them as objects. You can have sex with her, you can rape her, you can beat her, you can do everything, but I’ve learnt from the series that we need to accept women as equals, as human beings, and respect them. That’s what I’ve learnt (urban male, 30+, Mpumalanga).

PARTY OF CULTURE

Participants were also asked to give their views on the way in which culture was portrayed in Intersexions II. Responses often centred on the episodes that were set in rural areas: the framing story (episodes 1, 2, 19, 25), Sdumo’s return home (episode 10) and his father’s polygamous marriage (episode 12). The fact that rural characters were often depicted was widely appreciated by participants who generally felt it was depicted realistically:

The series shows both cultures, urban culture, which yes, it’s real. Rural culture, which is real. and it made people to respect their culture.... Intersexions was not destroying culture, it was saying ‘stick to your culture, but be careful’.... It was accurate because what is happening in our culture, especially urban, it’s what Intersexions was showing, especially in relationships. Go to the rural.... when it shows this guy from town [Sdumo] and he came with the car, the people in the rural area, they took that person as a rich person, and everybody wants to be next to that person, which is what is happening. It is exactly what is happening (peri-urban male, 30+, Gauteng).
As circumcision was already discussed under ‘key themes’, this section will briefly look at the specific portrayal of polygamy and fertility. In episode 10, Musa, encourages his son Sdumo to ‘test drive’ more than one woman, as if it was like buying a car. Although some participants found this scene surprising, others thought it was true that there are men who pressure their sons to have multiple partners to demonstrate their masculinity:

My favourite episode is the Sdumo part. The thing is, I grew up in the rural areas, you know what I’m saying? You know Sdumo had to sleep with these two girls just to please his father. When you grow up in the rural areas, there are certain things that you have to do, not for yourself but for the father (peri-urban male, 18-24, Gauteng).

F6: The most surprising moment was when he actually encouraged his son, when the guy was dating two girls and he was like ‘no, don’t choose between the two of them, just call them, sit them down and tell them you are the first wife, you’re the second wife’. I was like, I mean, he’s the father. According to him yes, he is building him, but for me, I mean can a father seriously encourage such behaviour? So, I think it just caught me by surprise, that oh, my goodness.

F5: This is exactly what I’m talking about, because to her it’s surprising, but the father was actually very clear. It wasn’t like ‘no, you can cheat, you can go undercover’, he was like ‘you can have two wives’, because to him that’s normal. That’s culture, let me say. I mean, even our President has five wives now. So, that is culture to him, it’s not wrong, and he was being transparent from where he came from, from the cultural perspective he came from. ‘sit them down and tell them you’re number one, you’re number two, you’re not hiding anything’. It was a way of life for him and to someone who is not exposed to that, it’s like ‘but, don’t you know you’re supposed to only have one wife?’ (urban females, 18-24, Gauteng).

Episode 12, ‘Worlds collide’, appeared to be quite popular among participants; in it, Musa, kept an affair secret from his two wives and was eventually caught. The episode was appreciated for highlighting the potential risk of HIV within polygamous marriages:

I liked the character of the man who was a polygamist because it’s something that happens. People take it as tradition but I like that it shows that even in traditional beliefs or values, there is the risk of getting HIV (peri-urban male, 18-24, Eastern Cape).

Several participants did not buy the premise that Musa needed to cheat in the way that he did; e.g., ‘I think if it happens, it doesn’t happen like that’. His behaviour was criticised as selfish, as traditionally a
husband in a polygamous marriage is supposed to attain consent from his wives if he wants to take a third wife:

He was allowed to have many women, so why would he choose to cheat and not tell his wives that there is another lady that he might be interested in if that is their agreement or their whatever, but on the other hand they say you are supposed to, traditionally, you are supposed to consult the other wives if there is another one to join. So yes, he didn’t do that (urban female, 25-29, Gauteng).

The important thing is your first wife, engage her, she is the one who is going to take the decision that you can take another one. If she disagrees, then you can’t take another wife. If she agrees, then you can take another one. That’s cultural, especially with Zulus and even in Swati (peri-urban male, 25-29, Mpumalanga).

The episode provided a platform to critically debate the merits of polygamy:

M4: When I was watching Intersexions, so I saw on Intersexions, but our President is busy doing that thing, and also our forefathers. So now I was confused, I don’t know which one we must follow....

M2: I think polygamy is not right because if I marry a woman, I must be fair to her, and I’m not allowed to cheat or to have another wife, because she is going to get pain. I think she is my first and my last.

F1: You know.... Who am I to judge you? ....At the end of the day it’s all about choices. What is good for you, what is right for you, because now if I say ‘polygamy is not right’ and he or she feels she is okay about that, why not? I mean, I even prefer polygamy than cheating. It’s like more the same of cheating, but now it’s an understanding between three or four people. It’s better that way than leaving my own husband and go and cheat somewhere else. So it’s all about communication and understanding and respecting the person, and all about choices. If I’ve made that choice it’s my choice and I have to live with that (peri-urban males and female, 25-29, Gauteng).

Several understood Musa’s character to undermine the cultural practice by ‘cheating’ in his marriage, e.g.:

F7: That polygamy, I’m not for it, and I will never be for it. I don’t like the fact that he had so many wives, he had two wives, like the old one, and at the end of that episode, the young one leaves and the old one is like ‘no, she’s going to stick to him’. Like, I don’t see why. He betrayed both of them.... I can still understand why the old lady would want to stay, because she’s old.

F5: The polygamist, I think that does happen.... it was on point, because you get some polygamists, they aren’t satisfied in the relationship; they have maybe two or three wives and then they still continue pursuing another wife....

M1: My father is a polygamist. I grew up in a polygamist relationship, or whatever.... I think it wasn’t done the right way.... I don’t think he did it right, because in a way he was cheating, and I don’t condone cheating. So, in that episode no, I think he was wrong in that sense, but it’s not done like that (urban females and male, 18-24, Western Cape).
A male participant disliked this episode, believing that it could be interpreted as ‘endorsing polygamy’, which he found ‘disrespectful to women’:

I hate that they show it on TV, because even as a guy I won’t lie, it seems appealing being able to sleep with different wives on different nights, but in all honestly I find it disrespectful to women. At the end of the day you need to love one person and love requires attention. And showing it on TV for me makes it seem like we are endorsing polygamy (peri-urban male, 18-24, Eastern Cape).

The decision of his second wife, Madlamini, to leave the marriage was understood to break a cultural taboo. This element was generally appreciated as a demonstration of courage (‘that woman knows her value’) instead of passive acceptance, and possibly an example of how culture is changing:

One of his wives leaves him in the end and to me that showed that that woman knows her value because many people will allow their husband to have another wife, but this woman decided that this is not for her in the end. I admire that woman’s courage because when you are married it is very difficult to leave your husband and for me that showed that that woman had a lot of courage. It is not even allowed in our culture (peri-urban male, 18-24, KwaZulu-Natal).

There’s a saying in Zulu, I don’t know about in Xhosa, but as a woman ‘you don’t leave marriage’. No matter how bad it is or whatever, you don’t leave marriage, and you find that well, our mothers and our grandmothers, maybe they experienced it, but they will never, but then obviously we know we have been modernised now and whatever (peri-urban female, 30+, Western Cape).

The fact that this part of the story challenges a cultural norm that suggests ‘a woman should stick to the marriage no matter what’ was well received by the participants who critically reflected about the portrayal of marriage in this story. Madlamini was thus seen as a role model for demonstrating that women have the ‘right to walk out of a relationship like that’:

In our culture, we are taught that a woman should stick to the marriage, no matter the circumstances. Even if a man brings a woman into your bed and sleeps with a woman in your bed, in our culture, you should stay there. So we’ve got education that you actually have a right to walk out of a relationship like that, or a marriage like that, but then there comes another psychological thing that people get used to being abused in such a way that they are addicted to it. If they get somebody that treats them good, then they don’t feel quite right that they belong because they are so used to the cycle of being abused…. because their minds are now being programmed in that way (peri-urban female, 25-29, Gauteng).

In episode 22, ‘Keeping up appearances’, Sindi asks her husband’s best friend to impregnate her after unsuccessfully being able to conceive with him. Some participants empathised with Sindi, suggesting that she was forced to do so, given strong cultural expectations that she should bear a child. One person described the cultural practice of ‘ugungeni’ (translated as ‘entering’) that requires a husband’s relatives to have sex with his wife to ascertain whether she is infertile:
Yes, you see the problem is that most of the time when we don’t have kids in a marriage situation, most of the time the blame doesn’t go to the man, it goes to the woman.... In the past, the olden days, old people had the best way to find out where the problem is. Is the problem with the man or the woman? They would somehow send the man somewhere to other relatives and then ask one of his brothers to see if they meet sexually, is there anything that’s going to happen.... In Zulu we call it ‘ugungeni’.... it’s like you enter this person for a short period, while this guy is not here, to see exactly where the problem is.... that was the way that they used. But nowadays, we don’t do those things anymore. Then it becomes difficult, because automatically the blame is shifted to the woman.... Really, I felt for her (urban male, 30+, Mpumalanga).

Furthermore, the portrayal that adoption would not be regarded as a serious option was accepted by some participants, giving dominant cultural norms about the importance of demonstrating one’s fertility as a woman. Her choice to have sex with someone else in order to conceive was thus understood as a legitimate strategy to save her marriage:

The reality was actually putting pressure on her that the parents, the family wanted a baby, so you cannot.... go outside and adopt a baby and come with that baby. ‘We need to see her pregnant, we need our heir. We need our very own, we need to see her pregnant’. As I’m saying, the reality sometimes contradicts us from making positive decisions (peri-urban male, 25-29, Gauteng).

\[\text{M1: I admired her actions.... Let me tell you something, I’m not trying to be stereotyped or something, but us as the black community, I cannot say that ‘my wife is pregnant’ where my parents didn’t see her being pregnant. So, adoption and stuff like that won’t work for us.... Not that I would like that happening to me, being a victim of that, but I can understand....}\]

\[\text{M4: I tend to agree with him, because in situations like that.... you have to think fast and you have to do something that’s going to help you. Because in our black society, like whatever you do in your relationship, it has to include both parents of the parties. Usually the parents of the guy, they are usually mostly the dictators, mostly the father, because you’re going to hear things like ‘I won’t have a grandson or a grandchild that is going to be carried by another woman’, or ‘I won’t have my grandson being grown in a test tube or something’, so something needs to be done. So, I don’t blame her with what she did, it’s just being versatile in her thinking, because we always have this thing that ‘I’m doing this for now, but I have this faith in God that God will bless me in a different way’.... It’s rare to find that she would confess during the pregnancy or when the child is there, knowing that she really loves that guy (peri-urban males, 25-29, Gauteng).}\]

**PORTRAYAL OF RELIGION**

Participants were asked for their views about how religion was depicted in *Intersexions*. Pastor Rex was seen as the primary character to portray religion and there were mixed feelings about him; some felt he misrepresented Christianity and thus religion was not accurately portrayed, while others thought there are pastors like him. Pastor Rex was criticised for not practicing what he preached, which some felt was accurate, having known religious leaders who were deceitful, manipulative or abusive. He was said to be
realistic, as there are some pastors who have ‘ulterior motives’ and are ‘busy checking out who’s…. wearing a short skirt’ while they preach:

F3: The person that I didn’t like is the pastor because he preaches the word of God and he does the opposite…. He’s the person that I hated and I compared him to another pastor…. Indeed I thought that pastors are deceiving us, we no longer have role models….

F: You find that while the pastor is preaching he is busy checking out who is who and ‘she’s wearing a short skirt I desire her’. F3 is right because while we confide in pastors, they are looking at us with ulterior motives (rural females, 18-24, 30+, Free State).

Pastor Rex was said to be ‘a hypocrite’ for having a ‘holier than thou’ attitude, only to then having a secret affair with Grace and then deny his own responsibility from the pulpit.

Pastor Rex is a hypocrite. He’s teaching, he’s standing in the pulpit and he’s preaching how you’re supposed to be holier than thou, and then mind you, he is having a relationship with a woman, with the person he’s helping. On top of it, they’re not even married, and thirdly, he stands again in the pulpit and he’s like ‘she led me to temptation’. Like how do you say that? Like how do you say that as a pastor, knowing that it takes two to do anything, and then on top of it she’s pregnant. She didn’t even get to tell him I’m carrying your child and if she did, what was going to happen? (urban female, 30+, KwaZulu-Natal)

I think he was just faking himself. That’s what I think about him. Such things happen in the churches. You will find that pastors will be having sex with the church members secretly…. That pastor there, like many other pastors, he would justify himself. I remember, if I’m not mistaken, he had sex with that lady he was helping. Yes, now in the pulpit, he was just justifying himself like any other pastor would do, justifying himself that ‘it is actually Eve who came with the sins, who gave Adam the sin’ (peri-urban male, 18-24, KwaZulu-Natal).

One participant admired Pastor Rex for trying to care for the needy and sympathised that some in his church did not know the full story:

I think the one of a pastor helping the vulnerable girl, it touches me a lot. It is one of the things that are happening in most cases in the churches whereby pastors are being followed and being accused and they end up failing to do their work as they wish or as the Holy Spirit commands them to do. It touches me a lot because lot of elders of the church always look at things and always talk without knowing the full story or the understanding of everything that is happening (rural male, 25-29, KwaZulu-Natal).

Some felt that in this light, Pastor Rex’s portrayal as a helpful pastor accurately portrayed religion by revealing that some religious people are judgmental, self-righteousness and have an expectation that nobody sins; another justified his behaviour as falling ‘off the wagon’:

I liked the episode where the pastor found that girl in the street. I also liked it because it showed the episode where the pastor found that girl in the street and it also showed that the
people in the church are so judgmental. They don’t accept other people (peri-urban female, 25-29, Gauteng).

So it really shows that you can fall off the wagon sometimes, like even with the Pastor Rex story, because you know Christians are very self-righteous, everybody is perfect, nobody sins. So I was just glad that this season also went to the church, because I remember at our church we showed that episode…. and we had a discussion. It was so interesting (peri-urban male, 25-29, Gauteng).

Other participants disliked the portrayal of Pastor Rex as a deceitful character and thought it was thus not an accurate portrayal of pastors in general, e.g.:

It was nice, but somewhere, somehow, it wasn’t that good... Like the episode…. with the pastor, I mean pastors are respected people. He or she cannot just take anyone, even from the street, and just make them their partner. I didn’t believe it and I didn’t like it…. Because pastors are, as I said, they are respected people... They were not portrayed accurately (peri-urban male, 25-29, Gauteng).

A participant who did not agree with everything liked Pastor Rex did, still appreciated the fact that he openly embraced people with different sexual orientations, such as Two-Step, and that he ensured that his church was inclusive of sexual minorities:

I liked Pastor Rex. I didn’t like everything he did, I just liked the fact that he embraced gay people and he was able to talk and he was able to see other people in the light of God, showing that it doesn’t mean that when you have a different sexuality you’re not allowed to actually be in God, because that’s what our society kind of brings up. So, that for me was nice because he allowed gay people into the church (peri-urban female, 25-29, Gauteng).

The portrayal of Pastor Rex appeared to trigger discussion among some Christians. The next speaker acknowledged that while there are people like Pastor Rex who misrepresent Christianity, they were encouraged to try to be ‘different young Christians’ as a result:

The Grace and Pastor Rex episode was quite something that triggered conversation amongst my Christian friends. Not denying it, but it was like what that person did, that’s misrepresenting Christianity…. going against what they preach and stand for, whereby we are these young, passionate Christians who believe…. you have to practice what you preach. So, it was just encouraging ourselves that ‘you know what? We can’t be perpetuating these stereotypes which stem from the truth in society, but let’s just try and be different young Christians’ (urban female, 18-24, Gauteng).

COMPARISON WITH INTERSEXIONS I

There were several distinctions that were made by participants when they were asked about how Intersexions II compared with Intersexions I. The current series was described as ‘more mature’ for having gone further than the first series in terms of the ‘in-depth’ content it covered:

The first season was all about lust and then people just having sex and just showing how HIV was just spreading. But at least in the second series there was no mediocrity. It just went in-depth. It just covered bits and bits of everything. So for me, it feels like the veil and lies were just removed (peri-urban male, 25-29, Gauteng).
These participants appreciated the way both seasons provided an opportunity to ‘connect the dots’ at the end and thought that the second series built on the first, with the addition of secrets and other structural factors that contribute to the spread of HIV:

F3: The first one was like an alert to me, because I watched it maybe in the middle, and I liked connecting dots at the end. But the second one came with another idea, because I was thinking to myself ‘okay, here’s another one, it’s the same as the last one’, but here we’re told about secrets, we’re told about not only about HIV, but other secrets as well, how people get out of the closet and all that stuff.

M6: I would take some of her words, I think the first one was more about HIV and AIDS. I’m not saying the second one isn’t…. But this one, it’s more of that one…. It’s like an improvement.

F9: I agree with him. The first one was basically about ‘you should know that this is the exponential growth of HIV. This is how you get infected, and this is how the cycle goes’. The second was we’re still talking about that, but now we’re including all the other structural factors that might contribute to that (urban females and male, 18-24, Western Cape).

When compared to the previous series, participants felt that the second series covered diverse lifestyle issues such as relationships, same sex relationships, corrective rape, and drug abuse; however it was also seen to have fewer HIV-positive characters.

Relationships, cheating, HIV, the parents having affairs, it just touched on a lot of things…. The first one was more like a chain, it was showing us the chain of the HIV, and it didn’t have a lot of these other issues. This one got a lot of messages across. I think in the beginning, obviously you know it’s Intersexions you want to find out where is this virus is starting and going…. I was a bit confused on what was going to happen…. It didn’t highlight the other issues as much as this one did (urban female, 25-29, Gauteng).

One person thought that Intersexions II achieved something similar to Intersexions I, which emphasised how the main character, Mandisa, was part of a sexual network. He thought the second series went further in portraying how HIV is present in different scenarios:

How in the first episode the main character was always asked about how many partners she had slept with and she would always say she can count the number of men she has slept with on her one hand, but this time around they did it in a different way, they opened up and they showed us that even in varsity this happens, the lecturer, this happened over there and when it came to the final episode…. the truth got exposed (urban male, 30+, Eastern Cape).

Some participants felt that the second series dealt with how a variety of lifestyle choices can affect HIV infection risk:

Intersexions was the first of its kind, so when season two came I wanted to watch but I was kind of sceptical because usually when something is that nice, it’s hard to live up to that standard. I watched because I wanted to see what things would be in this season of Intersexions that weren’t in the other…. I liked season two more than season one because…. most of the situations shown in season one, most of the HIV transmission happened through partying and drinking and many people felt because they don’t drink or party, they aren’t at risk of getting HIV. But then season two showed that even if you don’t drink and party…. you’re still at risk of getting HIV…. Season one tended to portray people with an outgoing lifestyle as the people at risk of getting HIV, season two brought it
back that no matter what your lifestyle is, you’re still at risk of getting HIV (peri urban male, 18-24, Eastern Cape).

Participants were generally more likely to say they preferred series two over series one, though there were some who felt like the second series was not quite at the same level, particularly the docudrama:

In terms of meeting and filling the shoes of season one, I don’t know…. I actually watched most of the episodes of season one. The reason why I feel like I wasn’t even that motivated to watch season two…. is because I didn’t really feel like it filled the shoes of season one (urban female, 18-24, Western Cape).

The first [series] was more powerful than the second. If you look at the first one, it was most direct into HIV and it was threatening people, you see, that you know, you sleep together, you are already gone…. the end of the first series was more scary than the end of the second one (peri-urban male, 30+, Gauteng).

Series two was said to feature a wider range of characters and ages, including school children, nurses, pastors, parents and lecturers:

The first one…. did not engage everybody. But the second one, a school kid can watch it, an unemployed lady or guy can watch it. A very successful young man or woman can watch it…. A church person can watch it and everybody can relate to it honestly. The parents can relate to it, because the first one even though there were adults, the teachers and everybody, but it was mostly the youth, but the second one it intersected everyone, the church, everybody (rural female, 25-29, KwaZulu-Natal).

Nevertheless, there were quite a few young people who felt that series two specifically related to them as youth, for example:

I think the reason why people like season one the best is because there has never been something like that on TV before, so it was like really hard-core that everybody has seen that. Season two was mostly for us, the younger generation (urban female, 18-24, Western Cape).

**COMPARISON WITH OTHER TELEVISION DRAMAS**

*Intersexions* was compared with other television drama series including *Soul City*, *Generations*, *Yizo Yizo*, *Tsha Tsha*, *Soul City’s Untold Stories*, *Soul Buddies*, *Heartlines*, *4Play: Sex Tips for Girls*, *Isidingo*, *Rhythm City*, *Muvhango*, *Gazlam* and *Zone 14*. *Intersexions* was described as original, unique, ‘something new’, on ‘a league of its own’, and to ‘stand alone’ from these other programmes, some of which were perceived as tiresome and ‘predictable’ in comparison. The next excerpt describes how *Intersexions* successfully harnessed a sense of anticipation and hype that the other local television drama series have not:

M1: One thing I like about it, in a way it’s interconnected, but at the same time it’s something new. Like for Generations, I haven’t watched it in two years, but I just need to watch one episode and I know what’s going on. So, it depends how you want to look at it, but with *Intersexions*, if you miss
one episode, you need to watch it. You need to go back and watch and catch up and see how it got there. That’s how it differs for me.

F5: I think the reason why everybody loves it, for me personally this is why I love Intersexions, is because like the anticipation of it coming again was so big that you just want to watch season three, if there is going to be one. I hope there is going to be one. With other series like Generations and Muvhango and Isidingo, Rhythm City, those ones, you see it every single day and you get tired of it. It’s like ‘oh, I don’t need to watch it today….’ I’ll watch it on Sunday or Saturday, or I’ll catch it again’. So with Intersexions, they created a hype that you just want to watch it (urban male and female, 18-24, Western Cape).

Another comparison was made, that most drama series portray a story, while Intersexions is more realistic (‘Intersexions is life’) and less dramatic (‘there’s no unnecessary twists like in soapies; it depicts our lives just as they happen’). The mix of settings was also seen to set it apart:

It was the way they delivered the message. Like it was something that is real, I would say, something that is happening. Intersexions is different from other series like that, and it’s happening like in different places. It takes you from rural areas and you go to town, and you can easily follow the story (urban male, 18-24, Western Cape).

Some thought Intersexions was so realistic, it was as if ‘hidden cameras’ were used, not actors:

F: I also wanted to say that Intersexions is real and its shows and teaches us things that we can apply in our lives because they are things we can relate to. Also it opens up the path of communication between you and your children….

F6: It doesn’t feel like you’re watching a drama, it doesn’t feel like it’s a storyline, it feels like they used hidden cameras and just taped, everyday real people and situations. Intersexions is real (rural females, 30+, Eastern Cape).

Intersexions was perceived to be more educational and true to life than the popular SABC1 programme, Generations, making it easier for viewers to relate. For example, several focus groups criticised Generations for portraying upper class characters that were more difficult to relate to (‘not everyone is like Queen’), while Intersexions provided a range of characters, making it easier for viewers to find some characters to ‘see myself in’:

The thing is though in Generations, not everyone is like Queen, whereas Intersexions, it’s different characters, and you’re like ‘hey, I can relate’, because honestly, I don’t relate to all the episodes, but there are certain episodes where I’m like ‘whoa, I see myself in it’. So I think that definitely worked, because it’s more realistic, it’s more what’s going on in life, other than just a storyline, for me at least (urban male, 18-24, Western Cape).

It’s very different…. I prefer Intersexions. I mean, everyone in Generations is rich. It’s like there’s no truth, there’s no reality. But when you talk of Intersexions, it’s something we see and it’s something that we go through especially as youth, and it’s something that we can relate to, and it’s something that we can even learn from, take something out of it, because I may not be in a society that is having drugs and alcohol abuse, but now I know there are other young people who are involved in that thing (peri-urban female, 25-29, Gauteng).
The inclusion of lasting storylines about HIV and sexual behaviour was seen to set *Intersexions* apart from entertainment programmes like *Generations*:

*Intersexions* is unique and teaches us the reality about people and not just about their snobbishness and that if you are rich you can get whatever you want. Other programs like *Generations*, you find people doing whatever and sleeping around but you never hear of them having HIV. *Intersexions* is unique.... [in *Generations*] you only hear of miscarriages (rural female, 30+, Free State).

*Intersexions* was appreciated for its educational content, and not just about HIV, but also about many ‘everyday issues’. It was described as ‘thought-provoking’ and was seen to contribute towards ‘nation-building’ in the way it put important, socially relevant messages across, without ‘tiptoeing around issues’. ‘Other shows don’t show issues very clearly. *Intersexions* was making clear that HIV can get into anybody, anywhere’ (peri-urban male, 30+, Eastern Cape). Viewers often expressed a particular impatience with the programmes like *Zone 14* and *Generations* that claim ‘they teach the youth, but when you tend to watch them, you don’t find anything educational. What you find.... is storylines that you know wouldn’t happen in everyday life’ (peri-urban male, 25-29, Gauteng). Many wished that *Intersexions* would replace *Zone 14* as a continuing series that runs daily:

*F5*: You can cut the episodes of *Zone 14* and put *Intersexions*....

*M2*: Comparing it with other dramas, especially *Zone 14*, I don’t see any message at all. They don’t teach anything. I don’t actually understand what they are doing there on that drama. But *Intersexions*, they are doing a lot of things and they’re teaching us a lot of things, and it can teach our kids. I mean, there are a lot of things that we can see through *Intersexions*, which means if they can remove *Zone 14*, I don’t see the reason why *Zone 14* must play on SABC 1. *Intersexions* is perfect. I can actually watch it every day, like *Generations*, and in my life I didn’t watch *Zone 14*, because I tried to watch, but I didn’t get the message.

*M6*: I think what makes *Intersexions* stand out from other series is that it’s very thought-provoking. It covers everyday issues that we deal with, and that people can relate to. So I think that’s what makes it number one.

*M1*: If you want to build a nation, you must put education first, so you cannot be televising series that are not educational and think that you’re going to build a nation. So if I was the owner of SABC 1, *Intersexions* would be running by now, *Zone 14* would be out, running on other channels (peri-urban female and males, 22-33, Gauteng).

*Intersexions* was seen to share some aspects that participants thought made *Heartlines* and *Gazlam* successful. One said that *Intersexions* is ‘as raw and in-your-face as *Gazlam* was’ and another that the series was edgy and ‘intriguing’, like *Heartlines*: ‘I think *Heartlines* was just good. It was a drama series, it was also educational, and it was intriguing, that you wanted to know what was going to happen. It had that edge that *Intersexions* had’ (urban female, 18-24, Western Cape).

One participant said that *Intersexions* improved on *Tsha Tsha*, in the way it featured more characters and ‘shows the way people are living now, the way things people do now in these days’ (peri-urban female, 25-29, KwaZulu-Natal). Another participant saw the aim of *Tsha Tsha* to de-stigmatise HIV, while
Intersexions changed with the times, in addressing the ‘need to know how people get infected’ (urban female, 18-24, Western Cape).

M5: It’s hard to compare Intersexions to anything else because there have been programmes like Tsha Tsha that dealt with HIV but not the way Intersexions did; Intersexions is in a league of its own.

F2: There was a show on eTV called 4Play: Sex Tips for Girls, but it was about women who got together and spoke about their sexual encounters, it was also very similar to Intersexions (peri-urban male and female, 18-24, Eastern Cape).

Soul City was often compared to Intersexions. While both programmes educate viewers about HIV and AIDS, Soul City was said to differ in its focus on one main character who is HIV positive whereas in Intersexions, many characters might be. Soul City was also said to feature a specific issue for a whole season, whereas Intersexions focused on a different issue in each episode.

In terms of the concept, it’s similar to Soul City…. And maybe like Gazlam…. These shows are like educating us about what is happening in reality, like what we encounter out there all the time…. I like Intersexions, because I don’t really watch Soul City and the others. Maybe I watch one episode and then after five weeks watch another one…. (urban male, 18-24, Western Cape).

Intersexions’ approach to HIV education was seen to be more subtle and more thorough than Soul City’s, while the storylines were said to be more intriguing:

The difference between the two is that with Soul City people are taught and they go to clinics are told that ‘there is something called AIDS and this is how it is contracted’. With Intersexions I have never seen people being taught that ‘there is AIDS and so on’, from the beginning they started acting and there was no people going to the clinic and being taught or receiving counselling about AIDS (rural female, 30+, Free State).

I like the way they showed that HIV is affecting those people, I can’t say it’s similar. It’s more. It’s better than the other shows that we used to watch, because they didn’t show exactly the way of the process of those things (peri-urban female, 25-29, Western Cape).

M4: I’m sorry to say this, but it beats Soul City....

M6: I think HIV is a cliché right now. Okay, we know it’s there, but come up with stories that intrigue us. We know that HIV is the main element, but at least there’s a bit of an intrigue element added to it.... It’s not like Soul City.

M2: Actually, at the same time as my brother is saying, M6, they are talking about HIV and AIDS, but each and every day it talks about one thing. Intersexions tells us about HIV and gives us a solution and the way to handle yourself if you find out that you are positive. So, Intersexions is better than other stories about HIV and AIDS (peri-urban males, 23-33, Gauteng).

Many participants reported being able to identify with the characters in Intersexions more easily than in Soul City. Intersexions was also said to provoke a deeper level of personal reflection:

Soul City is talking about HIV and AIDS, but it’s talking about ordinary things that maybe you cannot ask yourself a question at the end of the day. You look at Intersexions, when you look at it, it
gives you that thing that ‘you must think how, let me go back to this last episode’, which makes people think if I’m having external relationships while having a wife in the house and then having my children and that girl having her children, so it gives me, at the end, what are we going to do, because these two children are in love. You ask yourself a question and you want to follow what happened (peri-urban male, 30+, Gauteng).

GENERAL DISLIKES

The participants were asked whether there was anything they disliked about *Intersexions II* and a number of discrete aspects were generated. While ‘Mr. V’ was perceived to offer a number of HIV prevention tips and strategies in the final episode, a few people said they wish they saw more solutions portrayed throughout the series, including characters that modelled prevention, were in happy relationships, were faithful, communicated well with their partners or children, a non-judgmental nurse, someone who models positive living, and so forth. One said she would have liked to see ‘a hero or a surviving relationship…. one with trust and honesty and people that truly love each other’, another, ‘a happy ending’:

> What I didn’t like about it is the sense that it focused so much on the problems of society and okay this is the problem, these people cheat, these people lie and whatever, but not much on the solution. I only saw the solution part of it like in the last episode when the HIV virus interlinked everything. When he said ‘if you didn’t do all these things, I wouldn’t be as powerful as I am’. So I feel like if it integrated solutions in there, like for instance…. if they showed another perspective of how nurses should be or whatever, it would have been helpful (urban female, 18-24, Gauteng).

I loved it, but most of the time they never showed us the things that people should do to protect themselves…. Maybe one character could say ‘no, I’m not going to do this, maybe let’s go for an HIV test, because before we engage ourselves into sex’ or something (peri-urban female, 25-29, KwaZulu-Natal).

They should’ve had situations where people attended workshops on HIV prevention so that if they still chose to have sex without a condom, then it would be their own fault (peri-urban male, 18-24, Eastern Cape).

In the beginning we see the intro and as it continues we see people that are not being faithful, cheating and spreading AIDS, there is no happy ending. The only ending there is to all this is death. We are going to see people getting sick and dying, unless we see someone that admits to being HIV positive who goes and takes ARVs and starts life afresh and even so they will meet someone and else and so it goes (rural female, 30+, Free State).

A rural female thought that the whole series ‘was heart breaking. There was nothing that made one to feel happy’. Another participant expressed that he would have liked some episodes to go into greater depth about why ‘people who didn’t use condoms didn’t want to’.

There were a number of participants who complained about the amount of sexual content, while others did not appear to mind (‘it was definitely more sexual [laughs]. It was really more sexual than the first
one’). One person described how the sex scenes became ‘a bit too monotonous’ and said that consequently, a lot of viewers seemed quicker to express their titillation on social media rather than their engagement the educational message:

*It was a bit too monotonous, in terms of the message, even though it had different twists.... it would be the deaf or people of different sexual orientations. But I think at some point it was actually getting more concentrated on sexual actions, which I think had an effect. When I followed the hashtags on Twitter, people actually deviate from the message and zero in on the sexual acts. That happens every week, because I was passionate about following the hashtag on Twitter.... I found that week in, week out, it’s just the same things that excite people and they miss the message behind the episodes.... I think we all agree, tone down the sexual aspect.... It’s too much, there should just be a bit (urban male, 30+, KwaZulu-Natal).*

The view that the series’ was too sexually explicit, particularly for younger viewers, will be explored further under ‘Production values’. There was of course discussion about characters that some participants did not ‘like’ because of their behaviour, particularly the storylines that featured same-sex relationships, which was already discussed. Regarding the plot, though, one person wished that the situation around the ‘corrective rape’ that happened to Lorraine had been covered in more depth, particularly to model how to report such crimes:

*It should have dealt with Lorraine’s case as well. It should have just dealt with her struggles of dealing with that situation because she was raped and then after that she was just lost in her own world. She did not want to report the case to the police, because nobody was there, I think if there was a character that was put there to just give Lorraine a voice to speak out her feelings (peri-urban male, 18-24, Gauteng).*

Many participants complained that a series of *Intersexions* is only 26 episodes long, which they thought was ‘too short’. They expressed a desire to see the programme broadcast more often, in large part, to guard against viewers ‘going back to their old ways’; after all, ‘for teaching a society, 26 episodes is very, very short!’:

*I do wish though that Intersexions was a regular show or even a soapie. The season was too short and I think it would have a lot more impact if it played constantly because people are going to forget all the things they watched in Intersexions and go back to their old ways, so it should carry on (rural male, 30+, Eastern Cape).*

**TARGET AUDIENCE**

There was some debate about who the primary target audience for *Intersexions* was. This was because some participants mentioned that they had watched it with their kids, parents and other family members, while others disagreed that it was not suitable for children because of some scenes and episodes that had
strong sexual content. Nevertheless, the majority agreed that the primary target audience of *Intersexions* was either young people or anyone who is sexually active, regardless of gender, age, or race because its educational content about HIV cuts across the general population (*whoever is watching is learning something*; *HIV is not in respect of age, race or whatever*).

*It is for any person that is already sexually active, no matter the age, gender or race. There are elderly people out there doing questionable things (rural female, 30+, Free State).*

*Personally for me, I think it was all-inclusive. It included everyone, because even if maybe there were no grannies and grandpas there in the scenes, but whoever is watching is learning something (urban male, 18-25, Gauteng).*

*I think it targets everyone but more especially on the youth because most of the things that were shown in Intersexions were the things that are done by this generation and when you check the statistics on HIV it shows that youth is more infected (rural male, 25-29, KwaZulu-Natal).*

*It catered to each and every person. This kind of a situation can happen to any and every person…. Each and every person is participating in what took place on Intersexions…. I can’t say that it was only made for women, us men also do experience it. Children…. also need to have experience about this for when they grow older one day (peri-urban male, 18-24, Free State).*

The fact that so many different types of characters were portrayed was seen to expand the target audience: *‘there were kids from the university, there were people in church, there’s 16-year-olds in clinics, people my age. Everyone was involved and everyone had to watch it’ (urban female, 30+, Mpumalanga).*

*This season is targeting everyone, every age group including the older people. Because of the first storyline with Zolile’s dad and Nomzamo’s mom, even the older people in my family were interested in that storyline. It was appealing to all age groups, it ties everyone in, it didn’t leave anyone feeling left out (peri-urban male, 18-24, Eastern Cape).*

One participant indicated that using more middle-aged actors would make it easier for adults to relate:

*I feel some of the people of my age are somehow left out. I don’t know, because the actors are young, there are instances where I will relate much better to an issue if it was someone of my age (urban male, 30+, Mpumalanga).*

A couple participants thought that some *‘grannies’* would not find the series as appealing and that some *‘judgmental’* people would dislike it, believing *‘it promotes gays and lesbians, at it makes you sleep with other men’.*

**PRODUCTION VALUES**
During the evaluation, participants were asked to give their opinions about the overall production value of the series, including its age appropriateness, aspects of the series that were not clear and those that were clear, mixing different languages, races and locality types, music, the previously on scenes, repeated lines and the visuals of the series.

**AGE APPROPRIATENESS**

There were contradictory findings about the age appropriateness of the series. Some participants described that they were content with watching the series with their families, including their own children. These participants allowed their children to watch *Intersexions* because they saw it as something they could learn from:

*I was comfortable to watch it with my mother, because not everything was revealed. Like in most cases you would use your own mind, 'cause okay, you would see people kissing and touching, maybe taking off their clothes, that was it. We didn’t see breasts. No we didn’t see breasts, we didn’t see thighs, we didn’t see izibunu [bums]. We didn’t see anything. I watched it with my eight-year-old child, she could learn from it as well (urban female, 30+ Mpumalanga).*

There were some participants who felt that instead of having a parental guidance warning at the start of each episode, that parents should be encouraged to watch *Intersexions* with their children as it was perceived to be an incredible conversation starter, allowing for the introduction of difficult or rarely spoken about content to be discussed.

*M6: ...that can make parents understand that they need to watch Intersexions with their children, like sort of a warning or message that says: ‘parents, please watch with your children’ instead of the PG warning....

M2: It is a must that parents watch such dramas with their children so that at the end of the story, they will start explaining. They will start talking as we sit here as a family, as maybe one of us in the family has encountered such a problem and never told anyone about it. At the end of the episode you must talk about what was happening, so that if there is someone within the family encountering that problem they will get help. Not that parents must say, ‘go to sleep’ (rural males, 25-29, KwaZulu-Natal).*

Among participants who were more concerned about the age appropriateness of the series’ content, a common concern was that the sexual content of the series warranted that younger children should not view the programme. Participants generally thought children aged 13 and younger should not be exposed to the series because of the sexually explicit content. A couple participants even considered it to be inappropriate for anyone under 18 years of age to watch. In two instances, participants spoke about how they watched the series except when they went back to their rural homes, where different rules governed the viewing context:

*It was very sexual and explicit, especially for the prime time that it was playing at. I never really thought about that because I’m here at varsity, I watch it on YouTube all alone, and I’m like, ‘this is fairly educating’ .... I’m from Pretoria in Ga-Rankuwa; when I went back home.... my one friend was*
complaining how he can’t watch that episode with his young sister because it was too explicit, especially for the timeframe that it’s on, the 8:30 slot.... For me, I didn’t find it problematic, but in that context of the people that I was around and their concerns for their little brothers and sisters (because obviously by that time they haven’t slept), it got me thinking that ‘oh, actually, even if I don’t see a problem, there is such a problem for such a market’ (urban female, 18-24, Gauteng).

Similarly, a rural female described how in her home context, despite her age, she too was told to go to bed by her mother’s church group friends, rather than be allowed to watch the series, as it was disapprovingly perceived by the church group: ‘sometimes it happened that mom’s church members would come over and they voiced their displeasure in watching it and then we were forced to switch it off and go to bed’ (rural female, 25-29, KwaZulu-Natal).

There were a handful of participants who thought that the series had too much graphic sexual content. The most commonly described storyline that created discomfort and fuelled debate among viewers who participated in this research, was the episode in which two adult males, Two-Step and Sizwe, openly kissed. Some participants deemed this content to be unsuitable for young viewers, and at times, participants expressed their own sense of discomfort with this episode: ‘I think I became uncomfortable for the first time when I saw the episode with Two-Step.... I’m not homophobic but I found it too uncomfortable, like watching two men kissing each other and all that (urban male, 18-24, Gauteng).

Another episode that a lot of guys had a problem with was, because I remember I didn’t watch it that night, but it was when there were those two soccer players. I was like ‘what’s going on, why everybody is going on about it’. So I went online, and I was like ‘yoh! Like, yoh! Like, wow!’ But I didn’t have a problem with that [laughter]. But.... it was like hard-core, like on the line.... I thought it would be like Jason in Generations, little peck, peck and hug.... People were like ‘you’re weird for liking it. Why did you like it?’ I loved it. I loved that episode... Some of them [my friends] were like ‘it shouldn’t have been aired’, like it’s 13 age-restricted and children are going to be seeing gay guys kissing and that kind of stuff (urban female, 18-24, Western Cape).

A rural participant described his discomfort with episode six, though this was couched in talk about culture:

You see our main challenge here, especially here in the rural area, we are more cultural. When you watch that episode with children with gays and all those things, you see the society around the rural area, they do not like gays and lesbians; it’s like Intersexions is promoting the gay and lesbian lifestyle.... That is why here you do not find gays and lesbians which come out with their status.... because they get discriminated and all those things around here. It’s not like in the township or town where they are easily accepted. It’s like ‘Intersexions is teaching the young kids to think...’, that is the belief.... When you are watching with the children, there are these sections with sexual scenes, that is why parents did not watch it with their kids. They tell them to go and sleep because of these scenes (rural male, 25-29, KwaZulu-Natal).

The other specific episodes that elicited some discomfort were the sex scenes between Thapelo and his backup singer and Zolile and Nomzamo. One participant mentioned that it was sometimes difficult to watch it with his mother because she was cautious about sex scenes because his younger siblings would also be watching it:
It happened to me, I was watching with children at home; I did not finish that episode and went to bed early. I found it hard to continue watching with them, I left them to watch to find a lesson. I think it was at the time that this boy and girl were, when he was in love with his sister. I felt that awkward (rural male, 25-29, KwaZulu-Natal).

I wish I would watch it with the rest of my family, but because of sometimes maybe the sex scenes... I know it’s not like explicit stuff, but eish, you know, sometimes.... My mother did not want my younger siblings to watch it.... They are five and six (peri-urban male, 18-24, Gauteng)

CLARITY

There was general agreement among participants that what was portrayed in the series was clear, including the passing of time, the overall message and the relationships between characters.

Every single episode of Intersexions was clear because it had a beginning and an ending. If on this episode they showed a gospel singer even on the next one we will get see their activities and how it all ends with them. Yes, it was clear (rural female, 30+, Free State)

Everything was clear. The characters linked to each other. Everything was clear. Everything was the truth. Everything was being put the way it happened, the way it’s happening in our lives. Like today, I’m going to say maybe someone saw himself or herself when they watched Intersexions, so from point A until the last point it was perfectly done. You’ve got a question for the story and at the end of the day, your questions were answered. Like Gadima’s story happened a long time ago but as time goes on, it took us back to her and it got solved (urban female, 30+, Mpumalanga).

Some particularly enjoyed it when the settings would shift or the storyline was not clear, finding the process of ‘putting the pieces together’ satisfying:

It’s kind of difficult to summarise actually, because you can watch it this week, it will be like you can follow what’s happening, and then the following week, it’s like on some other level. But it was very interesting.... Sometimes you wouldn’t follow exactly where it’s going until the last second, and then you start to put the pieces together (urban male, 30+, KwaZulu-Natal).

There were some participants who voiced some frustration over the series format, which tended to move between settings and storylines without necessarily connecting to the previous episode. This was said to be especially confusing for viewers who had missed some episodes or were watching Intersexions for the first time, unless someone else was able to explain the plot to them:

One thing I didn’t like was how one week they would show a particular storyline, then the next week, they wouldn’t carry on with that same storyline, they would change or start a new storyline. It was confusing especially for those who didn’t watch every single episode, every single week. I wish they would start a storyline and finish it before going to another one (urban female, 30+, Eastern Cape).

M1: It was just annoying for people who aren’t familiar with the shows format because they would be watching this particular storyline, then it would all of a sudden jump to the next one, it would’ve been easier if they had featured Mr V maybe saying that ‘we are going too pause this storyline for a moment and focus on whatever else’, just so the audience could understand.
More especially for first time viewers. Because even with me I never watched the first season, so I would get confused when I watched an episode with Zolile and Nomzamo, then all of a sudden I see Rosie and her mother (rural male and female, 30+, Eastern Cape).

I did not watch the first episode because I was patrolling. When I watched the second episode, I was confused and I almost walked out because I felt like I was wasting my time. My neighbour was watching it with me and told me what I had missed in the previous episode. Everything became clear from there (urban male, 25-29, Free State).

One participant complained about the length of time between the initial framing story and the point at which it was revisited, towards the end of the series: ‘the first episode took too long to get the picture of what was happening’ (rural male, 30+, KwaZulu-Natal).

**UNINTENDED MESSAGES**

Over the course of the discussions, it appeared that a few unintended messages were derived from the series. One person felt that the series communicated a gloomy, resigned message that there are ‘no stable relationships’ in life and that no matter whether ‘you’re gay, a pastor, or a singer…. We are all stuck in this life’ (rural female, 18-24, Free State). Another said he knew some viewers who believed *Intersexions* promoted lying and cheating, however, he realised that such storylines were there to highlight ‘the consequences of doing so’:

> People were saying that Intersexions was about promoting cheating and lies and in my mind I thought that was wrong because there are always two sides to any story, so yes they could be showing people cheating and lying on Intersexions, but they’re doing that so that we can learn and see the consequences of doing so (rural female, 30+, Eastern Cape).

As already discussed in the communication session, it could be said that another unintended message that emerged was the heightened concern that many participants said they now felt as a result of an overly literal reading of the framing story about the possibility that one’s partner (of future partner) might unknowingly be a blood relative. Likewise, a couple female participants developed a new concern about bisexuality as a result of watching *Intersexions*; this was described both in terms of wondering ‘is my boyfriend straight?’ and in no longer trusting that it is safe to share a bed with a gay friend. Lastly, one person thought episode 22 communicated that a woman should secretly try to get impregnated by someone else if her partner isn’t able to:

> I don’t understand why is it that if you want to have a child you should end up deciding alone to go and get someone else. I think you should discuss it as a couple that for you to have a child you should end up doing this. Even the father, if he could say that they should adopt or something not that she should decide alone to cheat. So that didn’t teach me a good thing (rural female, 18-24, Mpumalanga).

**LANGUAGES, RACE AND SETTINGS**
Overall, participants appreciated the representativeness of the series, including the way the series incorporated urban, peri-urban and rural settings, and that it made use of a range of languages, including isiZulu, isiXhosa, Sesotho, isiNdebele, Sepedi, SiSwati, Setswana, Afrikaans and English. When questioned about the value of using different languages and locality types, the consensus among participants was that it was very ‘south African’, representative of the country’s diversity and made the series accessible to a wide range of people from different races, cultural groups and geographical locations. There was one person, however, who found it difficult to follow the subtitles during the episodes that were in isiXhosa and isiZulu and thought more viewers would have understood if there were episodes in Setswana or Sesotho.

\[\text{If it was the same, exactly as it is but that all the characters used English as a language, it would be totally different. Like it would just be different, the message.... It’s so diverse, like the Xhosa language, all the elements they’ve put together. It makes it so real, so original, that we can even relate to it very well (urban female, 18-24, Gauteng).}\]

The inclusion of characters across racial groups was seen to demonstrate that the series was not targeted at a specific demographic group, such as black viewers, and that HIV can infect anyone regardless of their ethnicity, language and social status:

\[\text{F1: That just goes to show that Intersexions has no prejudice to race nor culture, it targets everyone that lives in this world and doesn’t discriminate.}\]
\[\text{F: There is a myth amongst black people that it was created for them, so it was teaching us and it doesn’t only target black people only, but other races as well (rural female, 30+ Free State).}\]

\[\text{It also showed me yet again that it doesn’t mean that if you are Caucasian you cannot be infected by AIDS, if you speak Sesotho you will not get AIDS. It doesn’t mean that if you are Shangaan you will not get AIDS or if you are Afrikaans you will not get AIDS. It was infecting any and every person with no preferences. It doesn’t choose based on whether you have money or you don’t have money, nor whether you have many cars or not. It infected each and every person (peri-urban male, 18-24, Free State).}\]

The portrayal of several interracial relationships between the characters was also appreciated:

\[\text{F7: I think another thing that was nice about this season, or this whole show, is interracial relationships.... and I liked the fact that [Mdu] was learning so that he could communicate with [the deaf character, Amy]. I loved that. I liked the fact that it wasn’t only gays and lesbians, or just like normal people. It was like a mixture, black and white and old and young.}\]
\[\text{F5: I also liked the interracial relationships, I think it’s very awesome....}\]
\[\text{M1: Also, no offence, but I’m glad they used white people in it.... the first season, I saw very few white people and it seemed as though we live in these two different worlds, but now it’s not. At varsity you will have a white girlfriend or a coloured girlfriend or whatever, and it’s something that’s happening. So, I like that they used that, and it makes it more realistic (urban females and male, 18-24, Western Cape).}\]
The races were very mixed…. I guess the majority were blacks but it had all the others. It had the white lady who dated Sdumo and there was also the white couple with the open relationship thing, the one with the white lady who dated Mdu also touched on the issue of mixed relationships and what not and what other race did I see? There were a few coloured people, or mixed people I think that I saw and yes. There was this other lady who was deaf (urban female, 30+, Gauteng).

It was also noted that the use of sign language in episode 18, ‘Love is deaf, not blind’, along with the subtitles used in every episode, further extended the series’ appeal and accessibility to include viewers who are hearing impaired. In fact, that the series included an impaired character interacting with a non-impaired character was an additional aspect that was completely new for one particular viewer. ‘For the first time, I saw a person who cannot speak having a relationship with a person who can speak. The lengths the dude went to in order to get her to understand it was, wow!’ (rural female, 18-24, KwaZulu-Natal).

Participants commonly expressed appreciation that they were able to relate to the stories that were portrayed in different contexts and across locality types. The series structure that shifted between locality types was perceived to indicate that HIV can cross geographical barriers to infect people from urban, rural and peri-urban areas:

That for me made the message clear because these kinds of issues are not only taking place in the cities. In some instances you find the virus in the city and you bring it back home, at other times you get it at home and you take it to the cities. They were showing that it is not only in the city where you can contract HIV nor is it only in the townships where you can get it. HIV is everywhere and there is no place where it does not exist (urban male, 18-24, Free State).

Several participants spoke about the realism of the portrayal of rural areas in the series as one of the strongest elements in Intersexions; the portrayal of life and people as it is: ‘the setting in the rural area was spot on, that’s how rural life really is really like’ (urban female, 30+, Eastern Cape) and ‘it was depicted realistically. Rural life was shown as it really is; city life was shown as it is. They did it properly’ (rural female, 30+, Eastern Cape). This choice was thought to help rural viewers to identify with the series:

I liked the setting. I liked the fact that they started out in the rural areas. When they start programs in an urban area, rural people don’t like it because they feel as though it’s not talking to them, but they started in a rural setting (urban male, 30+, Eastern Cape).

One participant resonated with the constant shift between urban and rural settings in describing how this captures a core part of the migratory experience of black South Africans. This was seen to contribute to the series’ originality, making it uniquely ‘south African’:

I think one of us said earlier that the context of shifting from rural to urban, that it is mostly based on black people’s lives. It feels so original and connected to our lives somehow. I don’t know about everyone, but for me, most movies, documentaries and everything we watch, American stuff, Hollywood productions and stuff [do not], so finding something like this, which is a South African
product and it’s so influential and teaching so much. It makes it so valuable, the information we’re getting out of it (urban female, 18-24, Gauteng).

One participant summarised the series’ approach, referring to it as the ‘rainbow nation’, distinctly South African as it is inclusive of ‘so many races in it…. is kind of key to saying this is South Africa’ (urban female, 18-24, Gauteng).

PERFORMANCE QUALITY

The quality of the acting in Intersextions was often appreciated; the performances were said to be ‘the cream of the crop’ and ‘brilliant, it was on point’. ‘What made me not to turn to another channel was that I think the characters, it was actors that we knew, people we knew that they were good in acting’ (peri-urban female, 25-29, Gauteng). Some particular performances were admired: Lerato Mvelase (Lorraine): ‘she was an exceptional actor. She can be whatever she wants to be’; Luthuli Dlamini (Prof. Zakes) ‘that guy is always good. He’s on point’; ‘brilliant actor, Zakes, I like him as an actor’; Bonang Moremi (Koketso): ‘Brilliant actress’; Khanya Mkangisa (Nomzamo): ‘I like her, and let me say her acting, her character…. She behaved exactly like a girl when she loves a man’; Akin Omotoso (‘Mr. V’): ‘his voice, the way he spoke you really felt it’; and Phila Madlingozi (Zolile): ‘the one who stands out for me is Zolile…. Because when he loves somebody, he loves somebody…. He was familiar with what he is doing and he was not a fake, an actor, let me say. What he was doing, it was real’.

The fact that the series featured new actors (‘fresh faces’) was also appreciated (‘I liked that you used new actresses that we’ve never ever seen’):

We don’t know all the actors. At the same time, they’re good actors. Because most series, you know their faces, we know the acting styles, it’s like this, but with Intersextions, it’s new people, it’s fresh faces (urban male, 18-24, Western Cape).

It has a nice star cast…. It was obviously actors that we’ve seen before, like most of them…. It was like the cream of the crop of acting in South Africa (urban female, 30+, KwaZulu-Natal).

That many of the actors were less familiar seemed to help viewers believe their performances; in contrast, one participant struggled with Nokothula’s character, having known the actor to play bourgeois characters in other programmes:

I think her character does not fit for that, the rural part of it. Why? Because she has been in other dramas, acting bourgeois, in high society. When you look at these women, all the women, they are new in acting, let’s say we’ve never seen them in other dramas. Their characters, it’s reality (peri-urban male, 30+, Gauteng).

MUSIC AND VISUAL QUALITY
Overall, the music that was played in the series was generally well liked. Participants described the music as ‘nice’, ‘unique’, ‘interesting’, ‘acceptable’ and ‘likable’ and as one of the elements that kept them watching the series.

_They were corresponding to whatever was happening. If it was nice the music would be nice. If it was sad, the music would be sad. It was acceptable for me (urban female, 30+, Mpumalanga)._

_I liked the music, the pictures. Those are things that make us keep on watching all the time (peri-urban female, 30+, Western Cape)_

Most participants appreciated the visual format of the series. When asked about the visual look of the series, many participants mentioned that the camerawork and high quality of cinematography was one of its strengths.

_The shooting was brilliant. Some shots I remember, especially with the last ones, you could see her like through the coat hanger. Like the camera is in such a way, it seems too realistic, like I’m looking into her life. So, that for me was good (urban male, 18-24, Western Cape)_

**TITLE SEQUENCE**

The title, *Intersexions*, was seen to build viewers’ motivation to watch the series (*the title is attracting enough for one to want to follow*). The exact phrasing in the title sequence *our lives intersect in mysterious ways, bound by the secrets we keep, open to the harm that secrets hide*, however, was not well recalled by most. When reminded of what it said, participants generally thought the title sequence was an indication that people from various places are interconnected by the secrets that others keep.

_At the end I understood what it meant by ‘our lives being bound by those secrets’ and how people’s lives intersect. In the beginning I was wondering what it meant but after seeing the different scenes of people from Matatiele and people from Johannesburg and how they lives intersect, I understood how the secrets from Matatiele connect with the people here in Gauteng (rural female, 30+, KwaZulu-Natal)_

_With me it clicked after the first episode, what the show was about. There’s a shot with photographs of different people and the thing is they all end up at one place. All those people were connected to each other and the secrets that they keep are the ones that keep the connection. When we don’t know each other and have never met we might still be connected because of a secret (rural female, 30+, Free State)_.

There was a general sense from participants that the title sequence was *so true*, that secrets can be dangerous because they can lead to negative consequences. It was also mentioned that the title sequence led some participants to reflect on their own positions in the web of secrets and sexual networks.

_In the beginning I was wondering what it meant but after seeing the different scenes of people from Matatiele and people from Johannesburg and how they lives intersect, I understood how the secrets from Matatiele connect with the people here in Gauteng (rural female, 30+, KwaZulu-Natal)_

_With me it clicked after the first episode, what the show was about. There’s a shot with photographs of different people and the thing is they all end up at one place. All those people were connected to each other and the secrets that they keep are the ones that keep the connection. When we don’t know each other and have never met we might still be connected because of a secret (rural female, 30+, Free State)._
one day perhaps the children falling in love with one another not knowing as a result of this secret (peri-urban male, 18-24, Free State).

Whenever I heard that line I would always think about my own life and how I could be linked to anyone, without knowing, through sex (rural male, 30+, Eastern Cape).

The title sequence aroused some interest to watch the series and to find out how secrets would turn out to connect the series’ characters:

It referred back to the theme of keeping secrets and it peaked my interest in the show and made me want to watch and see exactly how our lives intersect through secrets (urban female, 30+, Eastern Cape).

The slogan is talking about the secrets we keep. When it plays, you can see how people are keeping their secrets and how their secret is exposed. So it makes a person to concentrate and see what kind of secret. Maybe even myself I am keeping a secret. If a person will understand the slogan, you want to understand and follow what this slogan is (peri-urban male, 25-29, Gauteng).

The visual look of the title sequence was specifically appreciated, particularly for its use of newspaper headlines.

‘PREVIOUSLY ON’ CLIPS

Overall, participants who commented on the ‘previously ons’, described these clips as effective in reminding them about what had happened in previous episodes and a useful means of catching up with missed episodes. They were also seen as providing a hint about what the upcoming episode would be about.

They help if you have missed an episode, then you can have a clue of what happened. I agree that they are necessary for one to know where the current episode is going (rural female, 30+, Free State).

I enjoyed it because it helped me catch up on the episodes that I had missed. I was able to catch up and get some of that guidance (peri-urban male, 18-24, Free State).
When it starts, it shows you what happened previously, so you can catch up if you want. Even if you missed you will see that ‘okay, after they have met, this and that happened’, so you can see one plus one equals two (urban male, 18-24, Western Cape).

All these devices were helpful, especially the ‘previously on’ bit because like I said I couldn’t always watch Intersexions so the ‘previously on’ helped me catch up a little on the various storylines (urban female, 30+, Eastern Cape).

Two participants noted that they were sometimes left feeling confused by the ‘previously on’s’; one participant complained that they covered too much information from multiple past episodes: ‘it’s almost like it will be five different stories or themes, and then the actual episode that’s going to play is about something else’ (urban female, 30+, KwaZulu-Natal). Another participant had difficulty connecting with the ‘previously on’s’: ‘I didn’t obviously connect the previous, it wasn’t obvious.... It wasn’t predictable for those who are a bit not clever’ (urban female, 30+, Gauteng).

Each ‘previously on’ featured the replay of two key lines, Zolile asking his father, ‘what are you hiding’ and Khanya and Sizwe asking ‘is there something you’re not telling me?’ Although most of the participants could not spontaneously recall these lines, they were able to remember them as soon as they were read out. Participants readily understood that the main theme that emerged from the repetition of those lines was about secrets and lies. Two participants described these lines as implying that secrets have a way of coming out and that the characters knew that they were being lied to.

I remember Zolile asking his dad ‘What are you hiding from me?’ and then another, Khanya said the exact same thing to Zolile; that usually happened when someone was lying, so it was highlighting the theme of lies and secrets (rural female, 30+, Eastern Cape).

Those secrets always find a way to come out. Those who are being lied to always have that thing, ‘there’s something that I’m not being told here’ (urban female, 18-24, Western Cape).

It appeared as if these specific lines did not have the same impact as the key phrases from series one, such as ‘do you know who your previous lovers slept with’ and when Mandisa said she could count the number of people she has slept with ‘on one hand’. For example, one participant could not recall ‘what are you hiding’ but felt she would never forget the lines form the first series:

Eish [sigh] I only remember from the first Intersexions, that one I don’t forget, when she said, that girl said, ‘the men that I have slept with, I can count them with my one hand’.... Intersexions 2? Ah, I can’t remember (urban female, 30+, Mpumalanga).

**DETERMINANTS OF EXPOSURE**

Participants said they were regular viewers of SABC 1 and eTV, followed by SABC 2 and SABC 3 and indicated that that the promotional adverts that were aired during Generations and other programmes
was the most significant determinant of initial exposure. Other participants mentioned that their first exposure with Intersexions came from hearing it advertised on the radio or by overhearing neighbours and friends discuss the series.

I first heard about Intersexions from my neighbour…. She told me about Intersexions, that things that were happening in Intersexions are realistic things that happen around us. I was quite curious to watch it. I sat down and watched it…. I have realised that the things that are happening on Intersexions are realistic. They are based on the life that we live, things that affect us. That is why I became interested to watch the rest of the episodes (urban male, 25-29, Free State).

I heard about Intersexions from my friend’s brother. My friend and I, we like girls a lot, so his brother told us that ‘people like us should watch Intersexions because we would learn a lot from it’. We asked him what Intersexions is, he said ‘it is a story about HIV and AIDS awareness, about trust, honesty, faithfulness and secrets on TV’. We decided to watch it but I had already missed the first two or three episodes…. We watched it the following Tuesday and we were hooked (urban male, 25-29, Free State).

Interpersonal communication, be it with friends, neighbours or family members, appeared to motivate a number of participants to start watching. Some recalled overhearing conversations about the storylines, how realistic Intersexions was, and even debates about the early episodes, e.g. ‘I heard people talking about episode one…. so I was interested and decided to start watching’, and:

What motivated me, or how I heard about Intersexions, basically…. I heard a debate whereby three guys were talking about Intersexions…. The story that the lady was talking about whereby there is this father who wanted this girl and this boy to separate because he knew that they were related. So I was interested in that, so when I went home that day, I tuned in (peri-urban male, 25-29, Western Cape).

Most participants reported watching Intersexions I and as a result, were drawn to the second series, in part, to find out whether those same storylines would continue or if new information would be covered.

M1: I was so interested in watching it because I saw the first Intersexions. What made me curious the most is that I thought they covered everything in the first series…. so I wanted to see something new, what is this that they are coming with now…. 

F3: I first saw the advert before the first series played, and I got triggered by the name, Intersexions. So it was just most definitely that I had to watch. It was interesting and everything, but then looking forward to the second series, it was me being curious, wanting to know if it’s going to continue or if it’s going to be a totally different angle of things…. 

M6: I was also curious. I saw from season one that they covered HIV, how that whole chain, how HIV was actually transferred. So I got the whole storyline for season one, so I actually wanted to know what season two had for us (peri-urban males and female, 18-24, Gauteng).

From the first Intersexions, when it came on screen, it was one of the only shows which captured AIDS in one box, showing how everything links up. I think that’s what took most of our hearts. So now when the promos came out that season two is coming, I wanted to see how it will evolve and how it will incorporate even further information about the link between our lifestyle and the disease. So that fuelled your watching, because you knew each story evolved and each character came across a
different network which connected to the rest. That was one of the best things which you guys came up with (urban male, 18-24, Gauteng).

A number of factors were identified to motivate participants to continue watching the series, including the anticipation of how the characters and storylines would unfold—particularly given prior exposure to *Intersexions* that left an expectation that this series would be similarly unpredictable; ‘I wanted to see what’s going to happen, what’s going to be the solution, what’s going to happen. That kept me following the episodes’ (urban male, 30+, Mpumalanga).

That is what made me to love to watch it and also made me to want to know what will happen at the end because I saw it at the beginning that ‘hayi…’, so I wanted to know ‘will the child end up knowing at the end who her real father is. Will the mother end up telling the truth or they will just find out by themselves?’ (rural male, 18-24, Mpumalanga).

You stay for the whole six days wondering, ‘I can’t wait for Tuesday’, Tuesday comes, you look at and then you go like ‘ah, it’s finished and it’s ok, I’ll watch it next week. I wonder what’s going to happen’, so it keeps you like motivated to watch and gets you talking with the people that you’re with (urban female, 30+, Mpumalanga).

The unexpected dramatic twists within each episode were said to motivate a number of participants to view it continuously and take measures to find out what transpired during any missed episodes. Many participants appreciated the unusual format, which featured a variety of characters; the desire to find out how the different stories were connected kept them watching the series:

For me, it’s the intrigue. It’s not like you’re watching a soap opera where it’s sort of like obvious what is going on. You just know, it’s very predictable, ‘oh, this is what’s going to happen’. With *Intersexions* you never know what’s happening, because you never know. They introduced a lot of characters, so it’s not like your normal series where you have like your main characters. It’s just different characters, different stories, so that really kept me watching, yet they always connect (peri-urban male, 18-24, Gauteng).

One moment you are looking at the train, then you want to know what’s going to happen to the train and they shift your focus from the train to the taxi, you are watching the taxi but you know that the taxi is actually coming from the train so you watch that, and when you are focusing on the taxi, then comes a bakkie and it’s the same pattern, so you are watching this but your brain still tells you that ‘you don’t know what happened before’ so you need to watch more so you can know really that from the train track to the taxi rank, from the taxi rank to the bakkie, how did that happen, because the guy comes from the rural areas and the girl and stuff, but at the end of it all, it all ended in one place (urban female, 30+, Mpumalanga).

Across all the evaluation sites, there was a strong consensus that *Intersexions* reflected what happens in everyday life. Participants described being enthralled by these realistic depictions because it was easy to relate to the stories and the characters, having had similar experiences or knowing others who had, e.g. ‘what kept me watching, it’s because it’s about reality, what is happening usually in our community’ (peri-urban male, 25-29, Mpumalanga); ‘what kept me watching *Intersexions* was the storyline, the issues that they were talking about is something that we as a community, we relate to’ (peri-urban
female, 30+, Gauteng): ‘the show is about day to day life, all the things that we go through. So that’s what interested me in the show’ and ‘I watched it because it relates to what happens in my neighbourhood, it’s almost like the same thing’ (urban males, 18-24, Western Cape).

The educational content was reported to be another reason viewers tuned in, e.g.: ‘I kept on watching because it teaches us about many things. Like family secrets, that you mustn’t keep a secret on your family, it’s going to break it up. That’s why I kept watching’ (peri-urban male, 25-29, Mpumalanga).

Participants in a rural focus group agreed that the HIV content was particularly important for viewers in rural areas:

I was motivated to watch because I knew that it teaches about HIV and AIDS. It is not often that people like us in the rural areas are reached by that kind of information apart from TV so the more I hear and watch about it, the more knowledge I will acquire (rural female, 30+, Free State).

A participant who was living positively with HIV mentioned that she was initially aware of the first Intersexions and vaguely remembered that it dealt with HIV issues. She tested HIV positive in July 2012, which motivates her to watch the series in order to learn more about HIV.

I was more interested [in the second season] because…. I was diagnosed last year…. So then I was very interested in more…. I was very anxious to see what was on the series and if it could help me and if it was what I was going through (urban female, 25-29, Gauteng).

Some participants who were also peer educators mentioned they were motivated to watch the series in order to share what they learned with other youth:

I followed it because I’m a peer educator and I work with people most of the time. I first saw season one, so I was interested to watch season two, and there were things that they were doing on Intersexions that will help me with my work on a daily basis (peri-urban female, 25-29, Mpumalanga).

I’m working with young people, so I just tell them to live a happy and good lifestyle. When I watch it, I gain more information, then when I attend schools to do my sessions, then it becomes easier for me to do my sessions (peri-urban male, 25-29, Mpumalanga).

With the second one, Intersexions II, you would make sure that you watch it no matter what. Also because of the project that I am currently involved with works with young adolescents, we try to educate them so I get a lot of information from Intersexions that I spread to them (urban female, 25-29, Free State).

Several common barriers that hindered participants viewing were identified, including work, personal commitments, sports, sleeping early, and competition with other household members to watch other programmes.

Studying, because we’re doing our second year and we have a lot of work to do…. If we didn’t watch it on Wednesday, we’ll probably watch on the weekend, and on the weekend the Internet is off, so then we’ll have to catch up at some other time (urban female, 18-24, Western Cape).
Technical problems and interruptions to one’s electrical supply as a result of load shedding, cable theft or bad weather was a barrier that negatively affected viewing, especially in rural and peri-urban localities and many participants reported missing some episodes as a result. Some participants mentioned not being able to watch Intersexions because of the perceived high sexual content of the show, in contexts where young children were present. Some young adults found it uncomfortable to watch the programme with older or more conservative family members present.

*Sometimes I would be at my sister’s place in Brackenfell. We are born-again Christians, and like their pastor, so there is that barrier where they’re like ‘no, you can’t be watching this’. So when it was starting to be more interesting, they’d be like ‘why would you be interested in watching people’? To them, it was we just want to watch people have sex. So, it’s kind of like that narrow-mindedness (urban female, 18-24, Western Cape).*

*My dad, my dad would not allow us to watch Intersexions because he felt that there was too much sex there. He would send my younger siblings to sleep every time it was playing. I only managed to watch it because I stood up to him but I would still be uncomfortable to watch it with him especially when they showed that episode with two dudes kissing. I felt like running out of the room (urban male, 25-29, Free State).*

Regular viewers shared a number of strategies for how to catch up on what happened during an episode they were not able to watch. Some asked others to fill them in on what happened, such as a neighbour, colleague, family member or friend: ‘I would ask my neighbour to fill me in on what happened’ (rural female, 25-29, KwaZulu-Natal); ‘we would talk about it during lunchtime where I volunteer. If I missed an episode, definitely they can fill me in’ (peri-urban female, 25-29, Gauteng). One loyal viewer recalled how she was once unable to watch due to a lack of electricity; her sister provided her a live update by typing up everything that happened:

*I did not miss an episode but there was no electricity on Tuesday…. I called my sister who stays in town…. as she was watching it and she would type it to me…. She would tell me what is happening: ‘Two-Step is doing this, he is now talking to a pastor, he is driving, he is listening to the radio show’, up until the electricity came back (rural female, 25-29, KwaZulu-Natal).*

Participants across the evaluation sites reported using social media platforms such as Facebook, Twitter, and WhatsApp to catch up on what others had to say about any episodes they missed (see the earlier section on social media for more detail). Urban participants were the most likely to view missed episodes on YouTube, with a couple peri-urban participants also reporting having done so. Knowing this was an option took the pressure of needing to be available when Intersexions was broadcast.

*I would definitely go and watch it, because if I didn’t watch it, my roommate will come in crazy, saying ‘Intersexions this and this and this happened’. So then I’m like ‘okay, I’m definitely watching it tomorrow on YouTube’ (urban female, 18-24, Western Cape).*
Some viewed missed episodes via their university’s Internet service or even at work the following day (‘I’d watch on YouTube when I get to the office’); however, the cost of mobile data inhibited one person from making a habit of it:

When I heard about it, I wanted to catch up on all the episodes that I didn’t watch. I went on YouTube and I spent R30 just trying to catch up. So, it was expensive, I’m like ‘no, I’m not going on YouTube anymore…. that’s a lot of money’; I would ask people on Facebook, and they’re all like ‘go on YouTube and watch it’ (peri-urban female, 25-29, Gauteng).

Four focus group participants reported watching most of the Intersexions II episodes on YouTube, either because they had limited television access at university or because their schedule made it difficult, e.g.:

I watched all the episodes alone in my room on YouTube…. with Intersexions, obviously we lead a busy life as students, there’s always work to do and stuff like that, so I’d always catch it the following day actually, on Wednesday, or later that night on YouTube, all of them (urban female, 18-24, Gauteng).

**FUTURE DIRECTIONS**

Many participants expressed a desire to see Intersexions continue as an on-going series broadcast each day or every week (‘you can cut the episodes of Zone 14 and put Intersexions ’). A participant suggested that the series should have an hour-long timeslot while another said that there should not be so much time between seasons: ‘you need to end and start a new one immediately, because we are looking forward to season three’. Most indicated that they would like to see the series continue in the same format (‘keep on telling the whole truth’; ‘the way it is structured it is fantastic they should keep it like that’; ‘our lives are connected in mysterious ways—I think they need to use that concept but bring something new, something fresh’), though having a documentary, reality show, or radio drama also came up. One person suggested having a more interactive storyline, e.g., that ends with a cliff-hanger so that viewers could ‘vote’ on what should happen next. A female interviewee thought that the next season should be even more powerful, ‘it’s not powerful enough’ and a few people thought that the sex scenes should be less explicit (‘tone down the sexual aspect’).

When asked what they would like to see in a possible third series, many participants mentioned that they would like to see some of the same storylines continue in order to find out what happened to the main characters, particularly Zolile and Nomzamo, or to see some degree of transformation in other characters, e.g., Godwin should apologise to his wife, Agnes should become ‘a better nurse’ and Zolile should demonstrate how to live positively with HIV. Others thought that there should be a greater effort made to portray some characters in healthy relationships or which practice HIV prevention, rather than so many broken and vulnerable characters; ‘showing someone at a tavern drinking responsibly, being trustworthy and faithful to your wife…. also trusting yourself’. Individual participants mentioned
wanting to see episodes that featured long-distance relationships, religious people (particularly Muslims), sex workers, older people, and more intercultural relationships. A few people wanted to see townships used as a setting more often, e.g.:

*I would like them to go deeper into the townships because they’ve showed rural areas, they’ve shown urban areas, so they should show township situations, like the story MI was telling us about the chain game guys play, where five of them have sex with one girl, things like that (peri-urban male, 18-24, Eastern Cape).*

In terms of educational content, several recommendations were made for particular themes to cover, including health in general, gender-based violence, rape, traditional circumcision (and the norm about needing to have sex thereafter), and healthy relationships (*’tips on what you can do if you would like your relationship to be strong. I think that this would decrease HIV and STI’s’*). Additional themes that were proposed include:

- **Prevention:** a focus on how to prevent HIV, including through MMC, STI treatment, consistent condom use and how to effectively negotiate condom use was suggested. One participant said he would like to see more strategies depicted, e.g., *‘come with solutions that if ever you are Gadima, how do you pick yourself up’*.

- **Serodiscordancy:** before watching episode 24, many participants indicated that they were not aware that serodiscordant relationships were possible and expressed an interest in learning more about what contributes to such situations; *‘we would like Intersexions to…. teach us about how it happens that one partner is positive and the other stays negative’*.

- **Positive living:** having more characters that know they are HIV positive was also suggested in order to demonstrate how to live well with the virus and how it impacts their lifestyle beyond the moment of testing. It was thought that the portrayal of an HIV-positive couple would encourage couples to test for HIV and not feel they must hide their status.

*Positive living. Most of the people, you don’t see what happens then, and it’s like oh, here’s this guy, you find out he’s HIV positive, I’m sitting here, I’m positive, and I just found out and I don’t know what to do about it, but he’s still continuing as if everything is normal. We need to kind of see that change in lifestyle (urban female, 18-24, Western Cape).*

- **HIV treatment:** some indicated that they would like more information about HIV treatment and adherence, the progression of the virus, post-exposure prophylaxis and feeding options for HIV-positive mothers.

*People who are living with the virus, sometimes they struggle to adhere to the treatment because of nutrition, because of food, lack of food, and understanding what is healthy food. The other thing that can maybe be covered is sustaining the treatment, sticking to it (urban male, 30+, Mpumalanga).*

*They should educate people on the fact that HIV treatment has improved and that people no longer take many different pills, there’s just one pill, the fact that people are scared of taking ARVs, they*
should educate people properly on taking care of themselves when they have HIV (urban female, 30+, Eastern Cape).

I think a lot of people don’t know what exactly are you supposed to do and what constitutes as mixed feeding and what doesn’t, when to stop the medication, and when the baby must stop (urban female, 25-29, Gauteng).

- **Adolescent sexual and reproductive health**: a couple people thought there should be an episode featuring teenage characters in order to give more detailed information about STIs, teenage pregnancy, sex at school, drug abuse, bullying, cybersex and other aspects of adolescent sexual health. ‘I think you can actually do an episode that would actually speak to learners and have them educated as well, because I think they are somewhat excluded from the target audience’.

- **Transactional sex**: a continued emphasis on the risks of transactional sex for both young men and young women came up in some groups. One person thought that strategies to avoid being tempted by ‘sugar daddies’ and ‘sugar mommies’ should be covered as part of this.

They should show people, ladies especially, innovative ways of making money, innovative ways of making themselves stand up, because I think they didn’t show it that much that women can actually stand for themselves. They don’t need sugar daddies only to live…. in the next series they can show us that poverty is a state of mind (peri-urban female, 25-29, Gauteng).

- **Sexual minorities**: a continued focus on how communities can support sexual minorities and address the problem of ‘corrective rape’ was mentioned. A further need for a more accurate portrayal of same-sex relationships was also mentioned, both in terms of having a ‘full storyline’ about a lesbian character and showing ‘normal, healthy gay relationships’.

I think if we could see stories like the gay part, we should also see a community accepting the gays the way they are and stop raping the lesbians and show a way of accepting them in the community (rural female, 18-24, Mpumalanga).

- **Tuberculosis**: one participant thought that the next series should include information about TB, particularly co-infection with TB and HIV:

It must include TB, because people with TB and people with HIV, there are some people who still don’t understand that if you are taking TB treatment, some stop ARVs, so that it goes together. I think that must be added (peri-urban male, 30+, Gauteng).

**CONCLUSION**

The overall objective of the evaluation was to obtain perspectives on how the television drama series, Intersexions II, was received by South African youth and adults that represented diversity of geographies, cultures and languages spoken in South Africa. This was achieved through conducting
twelve in-depth individual interviews and fourteen focus group discussions with a total of 122 participants across six South African provinces.

SERIES’ AIMS

Intersexions II was variously described in ways that indicated that the series was an extraordinary success among participants, who said it was ‘an eye-opener’, ‘intriguing’, ‘suspenseful’, ‘unpredictable’, ‘prophetic’, ‘ambitious’ and ‘life changing’. The series was lauded for its astounding realism and was often referred to as a ‘reality show’ in the way it ‘exactly’ depicted ‘the things that you see happen in life’. There was a deep appreciation from participants of the series’ depiction and mirroring of ordinary South African life, including various geographical settings, characters from diverse backgrounds and races, identifiable situations, and drama that resonated with the experiences and life-worlds of South Africans. Based on this research, it is clear that the aims of the series were fulfilled, as Intersexions II:

1) reflected SABC 1’s values of being South African, responsible, authentic, inclusive, honest and straight forward, bold and energetic. The mix of urban and rural settings, cultures, provinces, languages, types of characters and scenarios was strongly appreciated for reflecting South Africa’s cultural diversity, contributing to its realism and entertainment value and for making it possible for just about anyone to relate to what was portrayed in its episodes;

2) provided a viewing experience that was challenging, insightful and which resonated with its target audiences. Intersexions was thought to do something ‘no one has ever done’ in its unpredictable approach to television drama and in the way it dealt with sensitive subjects, even while making people ‘uncomfortable’ or ‘stepping on toes’. The meaningful engagement with the series content that was consistently described indicated that the majority of viewers resonated with and were sometimes confronted by what was depicted, with many engaging in considerable self-reflection about their own lives and relationships as a result;

3) presented rounded, believable characters in credible situations who are challenged to make consequential choices regarding their sexual behaviour. The drama series’ realism was said to set it apart from other television programmes; viewing Intersexions sometimes felt like ‘looking at the mirror’, so real it ‘made you search yourself’, or like watching a televised version of one’s own life, the scenarios were that realistic;

4) creatively assimilated a deep understanding of the HIV epidemic, human emotions and socio-historical processes. Respondents often described having developed a greater sense that HIV is real and present, that ‘you are at risk and can get HIV anytime’ and that ‘HIV is here to stay’ through viewing Intersexions. The second series was broadly perceived to be about more than
just HIV, but all the other related issues that ‘branch out’ or contribute to HIV transmission. The series was also seen to present compelling characters and was appreciated for its portrayal of cultural practices and a range of behaviours which increase the risk of HIV infection;

5) highlighted behaviours associated with increased risk for HIV infection without being didactic or ‘preachy’. There was a very strong sense that the drama series was highly entertaining, in addition to being educational. Participants often spoke about how the original and fresh approach taken to communicate messages about HIV contrasted similar programmes with the storylines, characters, production quality and unusual format succeeding in creating a series that achieved dramatic merit while also being informative.

EDUCATIONAL OBJECTIVES

This evaluation reported on participants’ multifaceted perceptions of Intersexions II and provided an in-depth account of how they engaged with the series in terms of identifying with characters and storylines, gaining new knowledge, self-reflection on key sexual and reproductive health themes, interpersonal communication with others, and self-reported attitude and behaviour change.

The series’ overall educational objectives were to emphasise: 1) the risks of keeping secrets that can impact on one’s own and others’ sexual and reproductive health including risk of HIV infection; 2) the importance of knowing one’s partner well before commencing a sexual relationship; 3) the concept of sexual networks and concomitant risk of HIV infection; 4) how multiple and concurrent sexual partnership increase HIV risk; 5) HIV risk-reduction practices, such as treating sexually transmitted infections, promoting the uptake of medical male circumcision, using condoms, reducing one’s sexual partners and use of post-exposure prophylaxis; and 6) tolerance and acceptance of the lesbian, gay, bisexual, transgender and intersex (LGBTI) community. These objectives (and their associated behavioural outcomes) were evaluated by exploring to what extent the series 1) prompted viewers to interact with others about the messages in the series, 2) increased individual’s perceived risk and their ability to avert risk, 3) either challenged or reinforced existing cultural norms and values that impact HIV transmission, and 4) resulted in individual or collective behaviour change.

Findings indicate that the key prevention themes that were portrayed were closely related to the reality of participants’ lives and the challenges some experience in their relationships. Intersexions II was seen to reinforce the concept of the ‘sexual network’ that was first presented in Intersexions I, while also portraying many other contributing factors that impact HIV risk. Intersexions II appears to have helped many viewers reach another level of understanding, moving beyond just basic awareness about HIV to asking critical questions about the subtle ways HIV risk plays out in relationships.
The overall theme of communication or ‘sexual secrets’ was well received by the regular viewers who were interviewed. A message about the importance of being honest with one’s partner, friends and family was often articulated, with honesty being identified as a key strategy to avoid unnecessary conflict, protect one’s health and to achieving ‘real love’. The idea that one’s secrets ‘will catch up with you’ was also frequently expressed as a reason to be truthful in one’s relationships. Substantial evidence was found of regular audience members honestly reflecting on their lives, relationships and the secrets that they have kept from significant others or feel have been kept from them (and the actual or potential impact on their personal and sexual relationships).

Regular viewing of the television series resulted in individuals asking themselves the questions that the series put to its audiences; questions that demand honesty and integrity in thinking about life and the decisions that are taken every day that, whether intentionally or not, affect others. A primary example of this is the one of the series’ biggest achievements: a greater awareness among viewers of the limits of trust, that others may not be as honest as they appear. This was articulated as scepticism about trusting a new partner’s word when they say ‘I’m clean’, e.g., or critical reflection about whether a sexual partner is faithful. This understanding was coupled with a sense that one should be ever vigilant and take action to protect oneself by using condoms consistently or testing for HIV as a couple. Other life lessons that were said to be derived from watching the show, included: ‘there’s more to a person than what you see on the surface’, ‘be loyal and faithful because we have seen how relationships break so hence we must be loyal to our partners and trust each other’ and about the importance of trust and respect in general.

Like Intersexions I, the second series also succeeded in encouraging open and honest communication within relationships. By providing realistic characters and storylines to discuss, the series created much needed spaces within both sexual relationships and families to discuss sexual behaviour, relationship values, previously held secrets and other forms of communication. The episodes became more than ‘just an episode’ in the way they prompted meaningful conversation and critical reflection about issues that were previously considered too taboo to comfortably discuss; this was most notably said to be the case within households.

There were some reports given of participants who acquired new knowledge from viewing Intersexions II. This new information included the possibility of serodiscordancy, the existence of bisexuality, that post-exposure prophylaxis can prevent HIV transmission, that one should not have sex until a circumcision wound is healed, that MMC provides only partial protection against HIV, and the importance of treating STIs as directed. While the majority of participants did not report learning new information per se, Intersexions II was instead seen to help many respondents achieve a level of consciousness about their personal risk to HIV; e.g. many expressed a sense that the threat of HIV was more real and present as a result of viewing Intersexions II. Other reported insights into the nature of HIV that participants gained included: HIV does not discriminate, is a real threat, is hidden, is mainly
transmitted through sexual intercourse and that one can act against the threat of HIV and live well with HIV. It should be noted that some educational content did not appear to stand out or was not communicated clearly, namely messages about post-exposure prophylaxis, PMTCT, paediatric ART, serodiscordancy in relation to Grace and Ata, and Sindi and Thulani’s discussion about whether either had tested or had recent unprotected sex.

In regards to the sub-theme on same-sex relationships, Intersexions had a significant impact in affecting some viewers’ perceptions. Many participants gained new insight into the challenges that sexual minorities face, found their existing supportive attitudes reinforced, or reported becoming more tolerant of, comfortable with or empathetic towards sexual minorities after viewing the series. Some gained insight into the fluidity of sexuality and the subjective emotional journey that a person who has same-sex relationships may go through. Numerous participants were affected by the portrayal of corrective rape, with many reporting greater empathy towards lesbian women as a result. Not all engaged with this theme as positively, however; some reported a partial shift in attitude that indicated some greater acceptance while still holding onto a prejudiced view, while others’ negative opinions on same-sex relationships were left unchanged and possibly strengthened through exposure to the series.

The final docudrama was effective at reinforcing the educational messages contained in the preceding episodes and was appreciated for providing an overview of the whole series, linking different plot elements, and reiterating the main themes of communication and HIV prevention. While the dramatic device of the personification of HIV was less surprising than when viewers first encountered ‘Mr. V’ in Intersexions I, it was still effective at eliciting viewers’ attention, communicating information about the nature of HIV and provoking a renewed fear of HIV, coupled with strategies to manage ‘Mr. V’s’ threat.

**BEHAVIOURAL OUTCOMES**

It was not expected that audiences who watched the television series would have made significant behavioural changes immediately, given that individual and collective behaviour change takes place over a period of time and behaviour is influenced by many factors of which mass media exposure is just one. Nevertheless, similar to the first series, many participants reported that their engagement with Intersexions II had a substantive personal impact on them. This impact took various forms, including identification with characters and storylines, internal reflection and realisation, attitude shifts, and in many instances, extended to taking concrete action to reduce risks of HIV infection. Actions included self-reported accounts of at least ten regular viewers deciding to test for HIV, and notably for at least five participants, taking action to test for HIV as a couple, rather than individually. The specific portrayal of a couple that tested together for HIV in one episode modelled this behaviour effectively and provided the motivation for at least one couple to follow suit.
Quite a few participants reported an increase in their personal condom use as a result of their engagement with *Intersexions*. For some, this behaviour change existed at the level of conceptualisation (action they *might* or *will* take), but most described enacting this change by either introducing the practice of using condoms in existing relationships or using them more consistently overall. For some, this decision came from a new realisation that ‘feeling safe’ is not a sufficient reason to have unprotected sex. Two women notably shared how their engagement with *Intersexions* motivated them to introduce a new practice of condom use into their serious sexual relationships: in one instance, with the father of her child, in the other, with her husband. The series was also credited for its helpful portrayal of young women who carry condoms, rather than rely on male sexual partners to provide; while this was only portrayed in two scenes, it stood out strongly to many of the regular viewers who participated in this research and was credited for strengthening a social norm that women should take action to protect themselves from HIV.

*Intersexions II* succeeded in raising awareness about the potential negative health consequences of having multiple concurrent sexual partners and in some instances, contributed to a renewed desire to reduce one’s number of sexual partners; it is notable that at least seven participants reported that their engagement with *Intersexions* contributed to their making an actual change in the number of sexual partners they had, including four males who described making quite drastic changes from having many sexual partners to choosing only one (or none for the time being). In each example, it was clear that *Intersexions* led them to think more critically about their personal sexual network and HIV risk and act accordingly, e.g., deciding that ‘I don’t want to be a Zolile anymore’.

In a powerful example of how identification with a television drama series can lead viewers to reflect on how the dramatic content relates to their personal lives, an urban male participant shared how specific storylines prompted him to reflect on his past sexual behaviour and his personal sexual network, which led to the key realisations that he may be exposing his primary partner to HIV (or vice versa) and that trust requires open communication. *Intersexions* was credited for helping create a ‘comfortable space’ to discuss their relationship, including their sexual histories; through this open communication they agreed to test for HIV together for the first time, re-introduce condoms into their relationship and he reduced his number of side partners.

There were two accounts given of self-reported behaviour change around medical male circumcision; one participant indicated that the series’ portrayal of MMC helped him understand its protective benefits and overcome his fear by setting a clear intention to have the procedure. Episode eleven provided the necessary motivation for another participant to move from merely intending to get circumcised, to taking action to do it.
Several participants reported becoming more accepting of sexual minorities as a result of the storylines that featured characters in same-sex relationships. One reported being more comfortable around gay men as a result of his engagement with those episodes, while another reportedly decided not to act on his previous desire to rape a lesbian woman. Another participant learned that he ‘shouldn’t hide who I am’ and resolved not to date two genders at the same time in the future.

Other examples of behaviour change derived from engagement with Intersexions included greater recognition of the importance of knowing one’s sexual partner well and communicating honestly in sexual and family relationships. Several participants reported that watching Intersexions led to a more communicative relationship with their sexual partner or made it easier to discuss aspects of their relationships that would have otherwise been difficult to raise without the series having provided a platform to do so. Others expressed making conscious attempts to set personal limits, such as by having set rules around alcohol intake and undertaking not to have sexual intercourse when under the influence of alcohol. Four participants decreased their alcohol use as a result of Intersexions and a fifth reported changing his behaviour by always carrying condoms when he drinks. Intersexions was also reported to have had a positive influence on the way two HIV-positive participants approach their ART.

The power of mass media to inspire health-promoting behaviour change as seen in both Intersexions I and II is unprecedented. Once again, Intersexions was found to create much needed spaces for interpersonal dialogue and discussion of critical sexual and reproductive health issues to occur. One could speculate that by moving viewers beyond the simple ‘ABC’s’ of HIV prevention (abstain, be faithful, use condoms) to asking critical questions about the quality of their relationships and the ways that communication and secrets in particular contribute to HIV risk, Intersexions may have contributed to a more complex and multifaceted shift in the national consciousness around HIV prevention.

RECOMMENDATIONS

The series’ evaluation yielded a number of recommendations.

1. Given the tremendous success and popularity of both the first and second series, a third series of Intersexions should be developed. As evidenced by both the viewership ratings and this qualitative research, Intersexions has achieved a strong reputation and a loyal following. Both evaluations indicate that engagement with the series contributed to numerous instances of meaningful attitude and behaviour change; the unusual dramatic approach should be continued given its established success in a context of HIV communication saturation and ‘fatigue’.
2. There were many requests for *Intersexions* to be broadcast more frequently as a daily or weekly programme, or at least with a shorter gap between seasons than occurred between series one and two.

3. Like the first season, *Intersexions II* should be made available in a DVD format, with an accompanying discussion guide to facilitate its use in non-broadcast environments.

4. The intense research and development processes that contributed to the broad success of series one and two, by helping ensure that HIV messaging was accurate, relevant, clear and evidence-based and that the characters and storylines were realistic, should be continued.

5. Research that includes both qualitative and quantitative methodologies should be planned for, in order to measure the long-term impact of entertainment education television series like *Intersexions* and their corresponding mass media. The findings from this report should be used to inform the development of questions related to *Intersexions* for the next National Communication Survey.

6. Future evaluations of *Intersexions* should plan to include an evaluation of all mass media initiatives using *Intersexions*, as this would provide an integrated, overall evaluation of the programme as a whole, rather than focusing only on a reception analysis of television audiences.

7. Further research is needed to understand the nature of viewers’ engagement with social media to evaluate the effectiveness of social media in health communication strategy and in fulfilling the series’ objectives. An in-depth analysis of *Intersexions’ Facebook* and *Twitter* data would greatly enrich this analysis.

8. There is strong potential to build on the important start the series has made in developing viewers’ perceptions and understandings of sexual minorities. The fact that exposure to the series led to significant change in attitudes and new learning around acceptance and support of and critical reflection about violence towards sexual minorities is promising and there is a need to take this forward. A future series should pick up on these developments amongst the series’ viewership with new storylines about sexual identities and promote new learning that encourages viewers to move beyond their prejudice to greater acceptance and empathy. This content could include, for example, a character that is deeply homophobic and realises this is due to his own fear and insecurities about his sexuality after having a transformative experience when he befriends someone who is homosexual or bisexual.

9. Likewise, *Intersexions II* was greatly appreciated for raising the issue of interfamilial communication and for its role in promoting greater communication within households about sexual and reproductive health. This theme should be reinforced and specific strategies to
overcome such established taboos should be addressed through complementary campaigns, a possible third series, and in an accompanying discussion guide.

10. In terms of HIV content, potential gaps that are still perceived to exist in HIV communication programmes include:

i) This evaluation uncovered that there are still significant misconceptions related to HIV infectivity. The need for greater education about serodiscordancy and the actual infectiousness of HIV at different stages of infection in order to counteract prevailing myths about immunity is needed. For example, it appeared that some of the confusion about Veliswa’s HIV-negative status was linked to a misguided sense that HIV is highly infectious per sex act. Whether in a discussion guide, a third season of Intersexions or through other communication programmes, there is a need to repeat information about viral load and the period of infectivity, both in mass media formats and interpersonal fora.

ii) Some participants seemed unclear about the length of the window period, how often they should test for HIV, and may regard regular HIV testing as a prevention strategy in itself. It is recommended to address this potential misunderstanding and the difference between HIV testing and HIV prevention in an accompanying discussion guide or in the next series, if there is one.

iii) Other potential HIV content that was regarded as relevant and could be included in the next series includes: continued focus on the sexual network, sexual violence, the link between tuberculosis and HIV, how to live well with HIV and ART, how to manage HIV in relationships, adolescent sexual health (including teenage pregnancy), the prevention of mother to child transmission (PMTCT), and repeated information about post-exposure prophylaxis.
Table 3: Demographic profile of focus group participants in relation to age, gender, locality, education level and occupation

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Table 4: Demographic profile of interviewees in relation to age, sex and locality

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