9-1-1996

Talking AIDS in Hong Kong: Cultural models in public health discourse

R. Jones
City University Hong Kong

Recommended Citation
Jones, R., Talking AIDS in Hong Kong: Cultural models in public health discourse, Asia Pacific Media Educator, 1, 1996, 114-133.
Available at:http://ro.uow.edu.au/apme/vol1/iss1/12
Talking AIDS In Hong Kong: Cultural Models In Public Health Discourse

This paper explores issues of cultural models in the discourse of public health in a multicultural, multilingual context through a 'frame analysis' of 20 AIDS awareness campaigns aired in both English and Cantonese in Hong Kong from 1987 to 1994. Using a methodology derived from the work of Goffman (1974), and Gee (1990), it examines how the authors of AIDS awareness messages in Hong Kong project cultural models on several different levels of "framing" and how these models both reflect and validate dominant ideologies within the society.

Rodney Jones
City University Hong Kong

The first reported case of AIDS in Hong Kong was in February 1985. To date, 642 cases of HIV sero-positivity have been registered with the Department of Health, with 175 of those cases having progressed to AIDS. Most cases of HIV sero-positivity in Hong Kong are thought to have been infected through sexual routes with the number of those thought to have been infected through heterosexual contact almost double those reporting homosexual contact (Hong Kong Department of Health, 1995).

The strategy of the government in dealing with the issue has been to implement an AIDS prevention, care and control programme which has included the establishment of a counselling clinic for HIV testing and treatment, the formation of various government bodies (a special AIDS Unit in the Department of Health, the AIDS Foundation, the Central Advisory Council on AIDS), and the launching of a publicity programme by the Committee on Education and Publicity on AIDS (CEPAIDS) through the offices of the Government Information Services. Along with billboards, pamphlets, comic books and radio announcements, CEPAIDS has produced 20 AIDS awareness television "Announcements in the Public Interest" (API's) between 1987 and 1995, and aired extensively on both English and Cantonese channels.
A 1992 study commissioned by the AIDS Foundation (Hong Kong AIDS Foundation 1993) found that 92% of subjects reported television as a major source of information about AIDS, with 71% citing it as their main source of information. Similarly, in a study focusing on secondary school students (Betson 1993), 77% cited the mass media as their main source of information about AIDS.

There are indications, however, that the government's publicity campaign has not been as effective in eliciting behavioural change or increasing levels of knowledge as one would hope. For example, despite the emphasis in the government's API's on avoiding "casual sex", more than a quarter of the students questioned in the Betson study were uncertain as to whether they would practise "casual sex", one in ten indicated that they would not use condoms, even if they changed their sexual partners frequently, and only about half knew that other contraceptive choices (IUD, diaphragm, vasectomy and tubal ligation) could not prevent HIV infection.

The Foundation study also revealed that 41% thought that HIV could be transmitted through coughs and sneezes and as many as 77% of the respondents believing the virus to be transmitted through mosquito bites. The study showed a low degree of tolerance for people living with HIV/AIDS in the society, with almost 3/4 of the respondents indicating that they would "avoid" or "totally avoid" daily social contact with those infected. Criticism of CEPAIDS's awareness campaign has even surfaced within the government itself (Leong 1993).

The relative effectiveness of the government's API's in disseminating information or effecting behavioural change is, however, incidental to this study. What I am interested in is how the campaigns teach people to think about AIDS, and to talk about it, how they operate to reinforce and validate existing cultural models. This process is especially interesting in Hong Kong with its large expatriate community living side by side with its local Chinese population, a situation necessitating the government to take a bilingual and bicultural approach to public health education, to operate within two different sets of cultural models simultaneously.

I examine the issue of cultural models through an analysis of 20 API's on AIDS awareness produced by the government using Goffman's (1974) concept of frames ¹ to demonstrate how the messages construct a kind of boundary between the "infected" and the "immune".

Various researchers in fields as diverse as language teaching, linguistics, sociology and artificial intelligence have made use of frames to analyse human behaviour, interaction and communication (Goffman, 1974; Tannen 1990). Alternatively
Frames, Scripts, Schema And Cultural Models

referred to as scripts (Shank and Ableson, 1977), schema (Rumelhart, 1975), structures of expectations (Ross, 1975) and cultural models (Gee, 1990), the notion of framing is grounded in the idea that people organize information and knowledge about new events, objects or situations on the basis of their experience in a given culture. This experience leads them to build up certain structures of expectation through which they interpret and judge the world.

When the information we receive in situations conforms to our internal frames, and when interaction proceeds according to the norms prescribed by the alignments we bring to it, processing takes place more or less automatically. When, however, actions or events occur which are not in the script, or when people’s behaviour does not accord with the alignment of the interaction, we must reassess the situation and take action to resolve the conflict between what we think should be happening and what is actually happening. Such action rarely involves revising our original frames, which are amazingly durable. Rather, we tend to search for reasons as to why the situation is not as it should be.

Most "out of frame" activity involves misunderstandings, momentary lapses of control, accidents, or unplanned interruptions. Some "out of frame" activities are even scripted into the original frame, such as a character’s asides to the audience during a play. On the level of interaction, "out of frame" activity may signal a change of alignment, or what Goffman (1981) calls "footing". Again, how changes in footing are executed, marked and accepted or rejected by participants depends very much on the participants’ expectations of what is proper in a particular situation. If participants believe that they are unreasonably being led onto "unfamiliar ground", they are less likely to follow, and more likely to question the motivations of the person with whom they are speaking.

Framing, therefore, is closely tied to notions of identity and the attitudes we have towards individuals and groups. We interpret and judge people and their actions according to how well they fit into the frames we bring to situations. Those who fit well most or all of the time we call "us"; those who don't fit, we call "them". In this sense, frames are also boundaries; they allow some participants to operate within the interaction, as long as they play by the rules, while others are excluded from the interaction, quite literally "out of the picture".

This relationship between framing and social identity is of primary importance in examining the discourse of AIDS. The way language is used to define boundaries between self and others, whether these "other's" are people living with HIV/AIDS, people who belong to groups perceived to be at "high risk" for AIDS, or
people from countries or regions with high rates of HIV sero-positivity, will determine how participants within the discourse will view AIDS, "others", and their own risk of infection. Public health messages, like the API's produced by the Hong Kong government, do much more than disseminate information. They create frames for understanding the issue and position participants within those frames. Just as texts "construct" ideal readers (Kress 1985), public health announcements construct ideal viewers and present them with a range of options on how to regard themselves in relation to the people and situations represented in the announcements.

Television commercials provide a particularly rich area for the analysis of frames and cultural models for several reasons. First, since advertisements are typically designed to fit the presumed attitudes and values of the target audience (Vestergaard and Schroder, 1985), they are often accurate reflections of the prevalent frames at work within a society. Whether they are actually effective or not, they at least presume to teach us who we are and who we should want to be by holding up prototypes of idealized group identity as well as reminders of the consequences of exclusion from the group.

Second, because of the time constraints of a thirty second commercial, authors of the message must pay special attention to the cues and markers that signal to the viewer the frame and footing she is meant to bring to it. Therefore, such signals tend to be far more salient than they might be in longer messages. Finally, television commercials do not just reflect frames and cultural models, they also help to create them. The frames through which we view reality come from our experience with the world, and in modern technological societies our experience with the "world" increasingly means our experience with electronic media.

Commercials have a special status among media messages. Since they are seldom viewed just once, but repeated, they become like rituals that gradually build into the scripts we bring to our social situations.

Media messages exist within several different related and inter-nested frames, or systems of expectations, whose boundaries are sometimes physical, sometimes temporal and sometimes determined by generic or cultural conventions or expectations. The way each of these frames is constructed and the extent to which what occurs within them is seen as "in frame" or "out of frame" helps determine how viewers interpret what is going on in the message and how it relates to them. In analysing the AIDS awareness television campaign of the Hong Kong government, I
RODNEY JONES: Talking about AIDS...

will first examine the dynamics of each of these inter-nested frames separately and then go on to explore how they work together to construct viewers' ways of seeing and being in relation to the topic.

The innermost frame, what I call the physical frame, is bounded by the screen of the television set. Like the border of a photograph, the television screen provides a space within which figures are situated according to certain conventions of the medium. The way these conventions are manipulated will affect how viewers regard the people or objects shown. For example, a scene shot in bright lighting with steady camera will create one kind of impression, while a similar scene shot in uneven lighting with an unsteady, hand-held camera will create a totally different impression.

Similarly, a person represented by a full facial shot looking directly at the camera projects one kind of identity, whereas the same figure, represented by shots of only her hands, legs or torso, or whose face is obscured through the use of electronic distortion will project a very different kind of identity.

The relationship between the visual channel and the audio channel can also affect how a viewer will interpret a scene: do the people in the scene speak directly to the viewer, or only to other people in the scene, or is the whole scene further distanced from the viewer through the "laminating" device of a voice-over (Goffman 1974)?

The next frame, the representational frame, is especially important in commercials which present a dramatization of some kind of "real life" situation. It includes the set of cultural expectations viewers bring to the people and situations represented on the screen, and how these expectations are activated through a kind of 'shorthand' consisting of various cues or signals (dress, setting, facial expressions, gestures, etc).

The generic frame is the space within which the commercial exists as a commercial. It is bounded temporally by the split second of white space which occurs before and after it, and is also constrained by viewers' expectations of what a commercial should be and do. These expectations involve fulfilling certain generic conventions typical of television commercials regarding such issues as length (usually 30 seconds), rhetorical structure (usually problem-solution structure) and purpose (to get the viewer to take some kind of action).

When commercials fail to fulfil expectations, they can alter viewers' perceptions of the framers of the message or the product represented, sometimes negatively, and sometimes positively. Public health messages hold an ambiguous position within this frame since they usually have no product to offer, often seek to discourage behaviour rather than encourage it, and sometimes,
most conspicuously in the case of AIDS awareness messages, aim to discourage behaviour (sexual activity) likely to be encouraged by other commercials broadcast within the same period of television viewing (Price 1989).

Despite the avowed intention of the Hong Kong government to alert the general public to the dangers of HIV infection and its relevance to them, the AIDS awareness campaigns actually serve to distance viewers from the problem by presenting AIDS and people associated with it as "out of frame" on the physical, representational and generic levels of the discourse. The effect is it robs the issue of practical relevance and denies figures affected by it the "rights" and status afforded to "in-frame" participants.

On the physical level, they cease being subjects of photographic representation and become objects for study and surveillance. On the representational level, they are prohibited from participating in normal discourse altogether, becoming instead topics of other people's discourse. And on the generic level, they are denied the chance of redemption typically afforded to characters in commercials. Such "out-of-frame" status is portrayed in the advertisements not just as the consequence but as the cause of HIV infection.

The underlyng message of the AIDS awareness campaign in Hong Kong is that AIDS is the result of violating cultural models and acceptable forms of alignment in human interaction, that the way to prevent it is to conform to the established norms, and that the government's role in 'educating' people about AIDS is to remind the public of the boundaries society sets for normal behaviour and interaction and of the penalties reserved for those who "break frame".

The way frames are drawn, however, will vary in different contexts. The "Guide to Safer Sex" produced by the Hong Kong Ten Percent Club, an advocacy group for gay rights, for example, presents participant identity and status in a very different way than the government produced API's because the former approaches the issue through different frames of what is expected and acceptable in education, communication and human relationships.

The value of using frame analysis to examine AIDS education messages is that comparative studies across cultures or across groups within a culture can illuminate how different communities construct frames around potentially disruptive issues—how and where they draw the line, when it comes to speaking of topics like sex, drug use, and death.
Out-of-frame status in the AIDS campaign is perhaps most noticeable on the physical level, where figures are presented as literally not fitting into the frame of the television screen. In more than half of the advertisements, characters associated with AIDS are shot out of frame. Sometimes the camera reduces the figures to a collection of ‘detached’ body parts, as in Girls, in which the individual perceived at risk for HIV infection is presented in succession of shots of her feet, legs, crotch, arms and hands, her face not becoming visible until the end of the advertisement, or Mouth which features a series of eleven disembodied mouths.

The effect of this technique is to rob the figures of their identity, turning them into mere specimens. In other advertisements (Homosexuals, Sharing Needle) the off-centre and out-of-frame positioning of figures, and our inability to clearly distinguish their faces, gives the impression that what we are seeing is being filmed surreptitiously, imbuing the scenes with an air of criminality.

Usually a figure's status as either "AIDS carrier" or "AIDS victim" is signalled by their position in relation to the camera, "victims" pictured in frontal shots, looking directly at the camera, "carriers" with their faces hidden or cut off, or with their backs to the camera, or entering the frame from the side, literally invading the picture. Sometimes the "carrier" figure is shown physically drawing the "victim" figure out of the frame, as in Bar, in which the young male victim clothed in a football jacket is pulled through the doorway of a bar by an older male "carrier" figure, or Family in which the man representing the "victim" is literally pushed by a "bar girl" out of the picture onto, we presume, a waiting bed.

Distance is further created by the interaction between visual and audio channels. Only in the ads featuring film stars Jackie Chan and Do Do Cheng (AIDS Stuntman, Woman Protection), do figures on the screen directly address the viewer. Those portrayed as either AIDS "carriers" or "victims" are never afforded such intimacy. Rarely, in fact, do we even hear what the characters say to each other, apart from muffled or distorted utterances (Homosexuals, Family). Rather, the figures are far removed from us, performing a kind of pantomime which is commented upon by the mouthpiece of authority embodied in the voice-over (a deep, adult male voice in all the ads). This distancing is most dramatically seen in Sharing Needle in which even the voice-over is momentarily dispensed with and the action is described in a series of subtitles:

- This group is about to share a needle to inject drugs.
- One of them is an AIDS carrier but he doesn't know it.
  Neither do the others.
- Now they will all be infected with AIDS.

The way the message is presented suggests either that the
figures on the screen are so 'foreign' to us that any commentary on them requires the 'translating' device of written subtitles, or that the activity they are engaged in is simply beyond the pale of spoken language. In either case, one wonders how intravenous drug users, the professed target audience, might react to being portrayed in this manner. The only reasonable conclusion seems to be that the advertisement is designed not to advise IV drug users to avoid sharing needles, but to advise "normal" people to avoid IV drug users.

Other advertisements use the interaction between visual and audio channels to present conflicting information, wherein the message implied in the visual frame disclaims the content stated in the oral message. Geis (1982) has shown that contradictory visual and oral messages are typical of television advertising. The effect of this technique is often to undermine the message which is more difficult to process: if the visual message is written language, the oral message will take precedence. If the visual message consists of dramatic, easily interpreted images, it is likely to have salience over the oral message.

Examples of how images undermine words can be seen in Safer Sex, the voice-over of which encourages condom use, but which shows a figure picking up a box of condoms, and then replacing it unopened on a nightstand, as if he has decided either to forgo condom use or forgo sexual activity altogether. A similar mixing of messages can be seen in the government's first AIDS awareness API, Pyramid, whose oral message declares that "AIDS is not restricted to homosexuals" and that "it can be passed from man to woman and woman to man", while the images presented consist of pink male icons like those found on the doors of male public lavatories multiplying exponentially to form a pink triangle which fills the screen, not so subtly reinforcing the notion that AIDS is a disease of gay men.

Perhaps the most telling aspect of television commercials is the way they reveal the ideological lens through which cultures view people and behaviour. Most advertisements, as Vestergaard and Schroder (1985:141) point out, assert and presuppose certain rules of behavioural normalcy which arise from and protect the dominant ideology in a society. Other critics, like Barthes (1957, 1972) see advertisements as expressions of complex systems of codes, mythologies, which help hold societies together.

In the present analysis, the way in which commercials represent human behaviour and interaction as it is or as it should be is referred to as the representational frame. This frame operates in Hong Kong's AIDS awareness API's in much the same way as
RODNEY JONES: Talking about AIDS...

physical frame does, drawing boundaries between the sorts of behaviour and interaction that are considered 'normal' and desirable ('in-frame'), and those that are considered 'deviant' and undesirable ('out-of-frame') and presenting individuals and groups associated with or affected by AIDS as outside the limits of what is proper and acceptable.

"The rule of behaviour that seems to be common to all situations," says Goffman (1963:11), '...is the rule obliging participants to "fit in".' This 'fitting in' is accomplished by individuals through reference to various culturally determined maxims, among which are rules of setting (what is proper behaviour in particular places), rules of status (what is proper behaviour for individuals based on their role in society), and the rules of exclusion (who is permitted to participate in the discourse, and who is not). In most situations, participants who 'play by the rules' are rewarded, and those that violate them are punished in some way.

Examples of violation of rules setting can be seen in Bar. The advertisement takes us into a typical "straight" bar, with all the accoutrements to signal the kind of place it is: dim lighting, rock music, wine glasses hanging above the bar, and 'ladies of the evening' perched expectantly on bar stools. The camera goes on to record the interaction between a man and a woman: the woman sits down next to the man, the man looks at her with interest, she lifts the cherry from her drink, holds it before her face, smiles coyly, rubs her leg up against his, all familiar signs of growing involvement between participants in this setting.

Meanwhile, another man sitting behind the couple spots a younger man sitting alone at a table, walks up to him, says something in his ear, and then walks out the door with him. "You may be the next victim," the voice-over warns as the camera moves into a close-up of the glass door of the bar which magically transforms into the shape of a skull. The "deviance" of the two men is highlighted in this advertisement not just by their sexual preference, but by their violation of the rules of setting. Not only do they "break frame" by establishing same-sex interaction in a heterosexual context, they also flout the conventions of communication associated with this place. Rather than using the standard subtle signals of attraction demonstrated by the "normal" couple, one man simply approaches the other, says a few words, and ushers him out the door. While the "straight" couple might be equally at risk of HIV transmission, it is clearly the "deviant" couple that is singled out for punishment.

The portrayal of rules of status takes on special significance for viewers in a Chinese culture which traditionally values conformity to strictly prescribed role norms determined by one's...
position within the family and the society. (Yang 1993). Transgressions of such norms are seen as dangerous not just for the individual, but for the group of which he is a part.

The AIDS awareness campaign of Hong Kong presents HIV/AIDS not just as a threat to the individual, but as a threat to familial and social harmony. Consequently, images of personal death prevalent in Western AIDS awareness campaigns (tombstones, revolvers pointed at the temple, the 'Grim Reaper') are not nearly as prominent in the Hong Kong Ads, replaced instead by images of familial dissolution and social ostracism (Husband, Girls). Even in Family, which portrays a man’s funeral, the most disturbing consequence of his infection seems not to be his own death, but the fact that he can no longer fulfil his responsibilities within the family.

Another aspect of norms of status that sets the Hong Kong advertisements apart from Western is the role given to women in the campaign. Western scholars like Treicher (1988) have pointed out the virtual invisibility of women in the early medical and popular discourse on AIDS. Lupton (1994:79) observes that news coverage of AIDS in the West has tended to portray women as passive victims, "at the mercy of male promiscuity". Swanson (1993), in his analysis of twenty-two U.S. public service ads on AIDS, notes that in nearly half the commercials women are seen as ‘victims’, and in most cases they are ‘portrayed in positions of powerlessness’(17).

In Hong Kong, however, women command more prominent and more active status in the advertisements. Females are featured in thirteen of the twenty studied, and, in an interesting reversal of the trend noted by Swanson, it is the women in the Hong Kong advertisements that are usually seen as "AIDS carriers", while the men more often take on the status of "victims", even when they have the potential to infect others; men are granted a kind of "moral immunity".

Women who violate the frame of traditional female passivity are represented as shameless seductresses. For example, the culpability of the husband who dies, presumably as the 'result' of an evening with a prostitute, in Family is never an issue; rather it is the woman who is portrayed as the villain. Even the wife is denied the "victim" status accorded to her husband, despite the possibility that he may have infected her. The reason for this may be the position of privilege men retain in relation to woman in Hong Kong society, a situation reflected in Do Do Cheng's comments in Woman Protection: "You know, we women spend a great deal of time in front of the mirror protecting our appearance...And mostly its for the man in our lives."

One of the most interesting aspects of the AIDS awareness
Generic Frame campaign in Hong Kong is the way cultural norms are expressed in the advertisements through the functioning of rules of exclusion. As stated above, most of the advertisements portray individuals affected by AIDS as silent, denied a right to speak. In addition, many of the advertisements portray them as not only being denied discourse, but as becoming the object of other people's discourse, the topic of gossip.

Examples can be seen in AIDS & Travellers, in which two men are heard talking about a colleague's sexual adventures while the colleague himself is pictured first on an airplane returning from what we presume to be a sex holiday, and then in a hospital bed:

A: Have you seen Steve?
B: No. He's not back yet. Been off somewhere chasing the girls again.
A: Yeah, though it's all very well, I wouldn't want to be messing about with all this AIDS around.
B: Not likely. It's just not worth it.
A: Well, that's his problem..

And in Girls, where a teenage girl calls her classmate with some news about a mutual acquaintance:

Girlfriend: Hey, I heard some gossip today.
Sally: What, what, what?
Girlfriend: Do you remember meeting Raymond...at Alex's party?
Sally: Raymond? He's cute.
Girlfriend: Well...
Sally: ...well, what?
Girlfriend: I heard that he's got AIDS!

This theme of the "AIDS carrier/victim" as the object of gossip seems particularly prevalent in the API's, not just in the television spots, but in print material as well. Another instance can be seen in a CEPAIDS produced AIDS education comic book called Ah Bo's First Time. The story opens with a man looking for his friend Ah Bo in the shop where he works. The shopkeeper tells him that Ah Bo no longer works there:

Shopkeeper: Ah Bo...he's really done it this time.
Friend: What's the matter with him?
Shopkeeper: He's in the hospital. I heard he has AIDS. He's dead for sure.
Friend: What? Ah Bo has AIDS (Chinese pun: "love-death disease")?
Shopkeeper: That's AIDS. But he might as well be dead. And if you're his friend, you probably have it too!

(Translation mine)
Rather than calling attention to the shopkeeper's intolerance, the materials seem to treat this attitude as natural and acceptable and go on immediately to relate the story of Ah Bo's gradual corruption, beginning with an argument with his wife, moving on to his attraction to pornographic magazines, involvement with suspicious characters, use of heroin, his eventual contraction of HIV through sharing a syringe, and ending with a final scene featuring his wife kneeling by his bedside, a stark morality tale in which sex and drug use are oddly conflated and the source of all the trouble can be traced back to the breakdown of the family.

This prevalence in the Hong Kong API's of 'being talked about' presented as a consequence of 'deviance' and/or HIV infection can perhaps best be understood in the framework of Chinese cultural beliefs and methods of socialization. "Chinese are well known," says Yang (1993:44-46) "for their high sensitivity to others' opinions" and they often "define themselves (by)...others' accumulated impressions of them". Good reputation results in an individual feeling he or she has mien-zi (face), while a bad reputation reflects back not just on the individual, but also on the group of which he or she is a member.

Wilson (1980), in a comparative study of the socialization of Chinese school children in Hong Kong, Taiwan, and New York's Chinatown, and Caucasian and African-American children in New Jersey, found that the group from Hong Kong most overwhelmingly believed that "the worst way to be punished" was "in front of others" rather than alone, with Chinese children from Taiwan and the US holding similar opinions. Caucasian and African-American children were much more evenly divided in their ideas of which sort of punishment they feared most. "Punishment by group sanction," Wilson notes, "is early, intensely and increasingly feared by Chinese children" (p.127).

It is therefore easy to see how exclusion and loss of reputation function in the Hong Kong AIDS awareness advertisements to deter viewers from violating social norms. The 'social death' resulting from expulsion from the group and 'loss of face' is in some ways seen as even more threatening and anxiety producing for this particular audience than is the physical death that can result from HIV infection and AIDS.

When a television viewer is presented with a commercial, a certain set of expectations is activated based on the viewer's previous experience with television commercials in her particular culture. Viewers, for example, expect that the commercial will last for only a certain amount of time, that the intent will be to persuade, that the message will most likely have a problem-solution format with some product being represented as the
solution to some problem relevant to their lives, and that the name of the product will be emphasized at the end of the commercial, usually along with some visual icon (a symbol or picture of the product itself) (Coleman 1982, Vestergaard and Schroder 1985).

Furthermore, viewers from different cultures may have their own particular models through which to interpret commercials. For example, Kumatoridani (1982) points out that Japanese commercials tend to be less direct, straightforward and argumentative than American commercials. Similarly, Schidmt et al. (1990:19) in a comparison of American, Chinese, Japanese and Korean television commercials, found that American advertising is far more 'persuasive', employing stronger suggestions and more imperatives, 'while Asian advertising emphasizes other functions like informativeness... and entertainment value.'

While the AIDS awareness API's of the Hong Kong government in many ways conform to viewers' expectations of the genre, they also confound those expectations in significant ways, both on the level of universal conventions and on the level of culture specific norms of communication. Not surprisingly, differences can be seen between the English and Cantonese versions of the government's AIDS awareness API's broadly in accordance with the observations of past researchers on differences between Eastern and Western advertising. English versions often use much more direct and personalized language; Cantonese versions take a more distanced, impersonal approach:

English version: Think about AIDS, it could happen to you.

Chinese version: [Face up to AIDS, and take the initiative to prevent it.]

(Girls, Husband)

Examples can be found in which the English versions make use of strong imperatives, while the Cantonese versions structure the same information in the form of polite requests:

English version: Use condoms for safer sex..

Chinese version: [To prevent AIDS, please use a condom...]

(Use Condom/MTR)

The wording chosen, however is highly dependent on the contexts in which the message is presented. When the topic turns to less "socially acceptable" behaviour such as sexual relations outside of marriage, the generalizations of Schmidt et al. are often reversed, with the Chinese translations tending to be more strongly worded. In Safer Sex, for example, what is expressed as a suggestion in the English version becomes a warning in the Cantonese advertisement, with very different advice given in the different languages:
English version: If you carry on with a dangerous lifestyle, at least use a condom.
Chinese version: [If you have doubts about your partner, you’d better use a condom.]

(Safer Sex)

In most cases, condom use is presented as an enabling action (for safer sex) in the English commercials, whereas in the Cantonese versions it is represented rather as a preventative measure. Similarly, sexual activity tends to be couched in more negative, judgmental terms in the Cantonese versions, as in the slogan below in which what is presented as an objective numerical equation in English becomes a moral judgement in the Cantonese version:

English version: The more sexual partners you have, the more chance of being infected.
Chinese version: [The more indiscriminate sexual partners (promiscuity), infection chances higher.

(Pyramid)

Furthermore, what is continually referred to as "promiscuity" (or "indiscriminate sexual intercourse") in Cantonese is softened in English versions to the more euphemistic "casual sex".

Beyond the level of language, television commercials tend to make use of generic conventions that are similar across cultures. Among these conventions are the problem-solution format, in which the product is presented as the solution to some individual or group’s problem, and "meaning transfer" (Vestergaard and Schroder, 1985), in which positive attributes of a person, place or lifestyle are transferred onto the product.

Although the AIDS awareness API's of the Hong Kong government make use of these conventions of television advertising, the way they are used is often somehow slanted or even reversed, thereby situating the advertisements and the characters they present outside the generic frame.

For example, while most of the commercials present the problem half of the problem-solution formula (imminent or actual HIV infection) they fail to offer any solution (see Bar, Family, Youth & Prostitution, AIDS & Travellers, Girls, Husband ). The characters are thus seen as irredeemable and disempowered, denied the chance for a happy ending usually granted to people in television commercials.

When they are offered a way out, as is the character in Homosexuals, the solution is a negative one, retreat and avoidance. The possible positive solution, condom use, is hardly ever offered, and if it is, it is usually presented as an unsatisfactory second choice: Condoms offer some protection, but the best defense is to avoid
casual sex. You never know who could be an AIDS carrier. (Bar)

By failing to complete the problem-solution structure that viewers bring to the advertisements as part of their expectations about what commercials should offer, the government API's reinforce a view of AIDS which sees it as totally unmanageable and sees people living with HIV/AIDS, or even those just participating in high-risk behaviour, as both helpless and hopeless. What the government is selling in the ads is not prevention, but fear.

The same kind of distortion occurs in the use of "meaning transfer" in the advertisements. Vestergaard and Schroder (1985:153) define it as the process by which advertisers get viewers to associate their products with some desired image or quality by presenting the commodity juxtaposed with some object or person whose possession of that quality is obvious to the viewer. In the AIDS awareness API's this mechanism operates in reverse.

First, the quality or image transferred is usually negative rather than positive, sometimes undermining the very message the advertisements hope to put across. For example, despite the government's desire to promote condom use, condoms are presented in contexts which many viewers would frown upon: a cheap 'love hotel' in Safer Sex and a scene reminiscent of a "Category III" (adult) movie in Use of Condoms. When condoms are associated with positive figures, as in the ads featuring film stars Jackie Chan and Do Do Cheng, they are so far removed from the context of sexual activity that the ads' messages are obscured.

Second, rather than some commodity taking on the characteristics of an individual or object, in the AIDS awareness API's individuals take on the characteristics of the "commodity" - AIDS. Thus, by virtue of their association with a "killer disease", AIDS "carriers" become themselves "killers" wilfully searching for their next "victim". The symbol used in the early advertisements to represent AIDS - a black pyramid - becomes less prominent in later spots, with the people in the ads themselves becoming symbols of disease and death. This rather abstract icon, it seems, is no longer necessary, replaced as it is by the more familiar icons of "gay men", "drug addicts" and "prostitutes".

Given its penchant for dramatization, hyperbole and problem simplification, one has to wonder how appropriate the genre of television advertising is for transmission of AIDS knowledge and awareness. In fact, seen from a purely educational point of view, what is most conspicuous about the government API's is how little information they actually contain. Lacking in detail about the actual modes of transmission, the types of sexual contact involved in transmission, the availability of HIV antibody testing and conditions which may make testing advisable, or even...
the fact that AIDS is caused by a virus, the advertisements give the impression that AIDS is caused by people, and that your only hope of avoiding it is to avoid those people.

The commercials do, of course, give viewers the opportunity find out such information by calling the phone number that flashes on the screen momentarily at the end of the ads. Requiring viewers to make such an effort, however, seems a rather inefficient way to disseminate such important information. The government's most recent ads, Salon and Mouth take this technique to an almost absurd extreme, extorting viewers to find out about AIDS with the slogan, 'The More You Know, The Less the Risk', while at the same time managing to give no information whatsoever about HIV/AIDS in the advertisement apart from a government telephone number.

Recent work on the role of media in public health has concentrated on the use of rhetorical devices in constructing and organizing AIDS discourse. Metaphor, for example, has been widely studied, with researchers pointing out how AIDS has been linked to images of war, poverty, deviance, personified death, criminality/punishment and plague (Alcorn 1987; Ross 1989; Sontag 1989). Others, taking a social constructionist approach, have attempted to trace the ideological models through which AIDS is viewed and how it has been constructed to validate and strengthen existing divisions within society (Patton 1990; Watney 1989).

Media critics have examined how AIDS news coverage and education tends to be couched in the form of melodramatic morality tales with inevitably tragic endings in which AIDS is rhetorically framed as enigmatic, violent, plague-like and caused by deviance, and people affected by it take on the opposing roles of innocent victims and guilty agents (Goldstein 1991; Lupton 1994; Treicher 1993).

Finally, educationalists have shown how public health messages about AIDS often present vague or contradictory ideas which emphasize cultural notions of duty, virtue and morality at the expense of providing practical information (Baggaley 1993, Bolton 1992). Nearly all of these observations, based on public discourse in the United States, the United Kingdom and Australia, also hold true for Hong Kong.

Educational materials produced by the government consistently represent AIDS as a mysterious "killer disease", stalking the Territory vampire-like, searching for its next "victim". Characters in AIDS awareness API's are alternatively portrayed as wilful and dangerous "AIDS carriers" or innocent bystanders HIV infection is represented as a social rather than a medical
problem, the consequence of immoral or deviant behaviour.

Not one of the government's television spots gives clear information on the actual mechanics of HIV transmission (or the difference between HIV and AIDS) and condom use is only mentioned in six of the twenty ads, most of them instead cautioning against the vague, undefined practice of "casual sex" and implying that those infected with HIV somehow deserve their fate because of a failure to take responsibility for their own safety, the safety of their family members and the safety of society.

These judgements are expressed not just on the sentential level, but also on the supra-sentential level of framing. The notion of "frames" and boundaries is, in fact, of primary importance in the study of social responses to disease. Society's first response to outbreaks of disease has typically been the drawing of boundaries between the sick and the well, boundaries that often mirror and reinforce those present in existing cultural models.

Quarantine, as Musto (1988:77) points out, is often "a response not only to the actual mode of transmission, but also to a popular demand to establish a boundary between the kind of person so diseased and the respectable people who hope to remain healthy". Such "rituals of exclusion", as Foucault (1978:98) calls them, need not be physical, but may operate through the patterns of division and segmentation at work within the prevalent discourse of a society. Anthropologist Mary Douglas (1966:113) takes this idea one step further, suggesting that societies define illness and pollution based on existing boundaries of social order; the "polluting person" is one who has violated these boundaries, who has "crossed some line which should not have been crossed".

Several of the researchers mentioned above have applied the idea of symbolic or metaphorical quarantine to the discourse of AIDS. Lupton (1994:135), for example, in her analysis of the language of invasion in popular and medical writing about AIDS, notes that figures of speech can act to "construct a cordon sanitaire between the contaminated and those at risk of contamination".

Patton (1990:99) uses the same phrase, claiming that "the categories of science, especially the conjuncture of epidemiology and virology, have placed a barely invisible cordon sanitaire around minority communities, "deviant" individuals, and around the entire continent of Africa." These writers use the term cordon sanitaire as a metaphor for the way language creates and reflects divisions between people.

"Frame analysis", however, takes a slightly different approach, suggesting that language need not "create" a cordon sanitaire, but that such boundaries already exist implicit in the 'frames' that operate in all communication. Rather than mere symbolic boundaries, these frames constitute practical borders of
inclusion and exclusion in discourse. What isolates individuals and groups in AIDS discourse is not just the way they are rhetorically labelled, but also where they are placed in relation to these borders as a whole.

In Hong Kong, the frames surrounding the topic of AIDS construct a system of inclusion and exclusion revolving primarily around the family unit. Within the frame of respectibility and immunity are situated loyal husbands, careful wives, obedient sons and daughters, good citizens. HIV/AIDS and those associated with it are exiled from this frame, existing in a world whose values are portrayed as diametrically opposed to those of the family, a world of predatory homosexuals, desperate drug addicts and prostitutes.

The greatest danger of AIDS as presented in the commercials is not that more drug users, gay men or sex workers might become infected, but that the virus, and somehow the values associated with it, will breach the cordon sanitare that surrounds it and threaten the stability of the family. AIDS, the government reminds us in a recent poster campaign, "is every family"s problem".

Other cultures exhibit similar systems of inclusion and exclusion in the ways they frame the topic of HIV/AIDS. The boundaries at which these frames are drawn, however, in terms of particular individuals within that society will differ in different cultures. The framing of the family evident in the Hong Kong advertisements, for example, is less prevalent in American public health materials, which focus more on individual responsibilities and choices. Frame analysis can provide a way to further explore such cultural differences and ways in which communication about AIDS research, politics, scholarship and education can take place more efficiently across cultures.

Notes

1. The way the frames are arranged reflects a kind of hierarchy: the physical pictures (shots) exist within stories (plots), which exist inside the commercials (spots). This hierarchy, however, is not meant to reflect a process through which viewers process these frames in a "bottom-up" way. In fact, research has shown that the way viewers process information within these frames is highly individualistic. For a discussion on how mental processing of public health commercials is affected by culture, see Jones, 1996.

2. Translations from the Chinese are enclosed in brackets [ ].
References


Jones, R. (1996). "Responses to public health discourse: a cross-cultural frame analysis", City University of Hong Kong Department of English Research Monograph No. 10. Hong Kong: City University of Hong Kong.


RODNEY JONES: Talking about AIDS...

Rodney Jones is lecturer in TESL and Professional Communication at the City University of Hong Kong. An earlier draft of this paper was presented at the SEAMEO Regional Language Centre Seminar, Singapore, April 17-19, 1995. I would like to thank Dr Ron Scollon and Mr. Barry Lowe for their helpful insights and comments. Email contact: enrodney@cityu.edu.hk


