Communicating for Health

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Films on AIDS

An assessment of 16 French films giving information on AIDS was made by people in the health, social work, teaching and other professions. Their observations are outlined below and the qualities required in such material are discussed.

The production of audiovisual material for educational purposes is a response to the needs for a reduction in teacher numbers, an increase in audience sizes, and the use of persuasive images to convey messages or information to the public. Given the economic advantages and the effectiveness of these products, it was inevitable that films would be marketed with the aim of advising the public about AIDS prevention. In 1987 and 1989 many such films were made in France, both by official organizations specializing in AIDS control and support for HIV-positive people and AIDS sufferers, and by groups of professionals directly concerned with these matters.

Professionals often have difficulty in deciding which audiovisual products are best suited to their needs in terms of the nature and quality of the prevention message put across. For this reason the Centre for Preventive Medicine at Vandoeuvre-les-Nancy and the Higher Council for Sex Information concluded that health and education workers needed an opportunity to watch and comment on a range of material. Consequently, in 1988 and 1989 some 180 people in the health, social work, teaching and other professions were invited to view 16 films (see box) and to complete assessment forms. The most acclaimed films were outstanding in the quality of information given and in the emotional and human dimension.

Information

The participants in the assessment held that, in order to be both useful and accessible, the information given should present an overview of AIDS and its prevention without going into excessive technical detail. Full coverage of basic information was considered valuable in helping to dispel misconceptions. A potted history of the disease and its social consequences was generally welcomed as long as the film-makers restricted themselves to salient points.
It was felt that information should be imparted in a fresh, spontaneous and dynamic way without being too alarmist, aggressive or peremptory. Attempts by the film-makers to use original kinds of presentation met with mixed reactions. Whereas gentle humour was usually well received, some highly original approaches, including the use of cartoons and unusual visual and sound techniques, were rejected by most viewers.

An audience is not won over by a dreary film, a harrowing tale, or an over-dramatic presentation with ugly and violent images, discordant and inappropriate music, and a mawkish tone.

The human dimension

The participants considered that if a film showed no feeling, sensitivity or sincerity, its message would probably not be put into practice. It is essentially the accounts of men and women who are directly involved with AIDS (seropositive people, AIDS sufferers, their near ones, and those who treat them) which give films the emotional charge without which any attempt to inform or make aware can be expected to fail. Similarly, a film with no place for non-specialists or scenes from daily life would be seen as artificial, too intellectual, and lacking in realism and warmth. The participants believed such films would be relatively unlikely to make audiences more responsible. In order to combat prejudice and intolerance and to make for the full integration of seropositive people in society, films on AIDS should touch on the social problems caused by the disease, the psychology of AIDS patients and seropositive people, and the difficulties encountered by their families and by health workers.

The participants also believed that the overall treatment of the mentality of the target audience was important: AIDS prevention should be dealt with in relation to the other facets of people's behaviour, and sexuality should be portrayed in the context of the other aspects of daily life, so as to make acceptance of the preventive message easier than it would be otherwise.

A film should be sufficiently lively and aesthetically appealing to engage and persuade the audience. If a story is being told, the screenplay should be interesting and not devoid of humour; pleasant music should be used to move the audience or enable it to identify with the characters portrayed. An audience is not won over by a dreary film, a harrowing tale, or an
over-dramatic presentation with ugly and violent images, discordant and inappropriate music, and a mawkish tone. If emotional subtleties of human relationships are portrayed, the makers must know exactly which group they are addressing.

Messages

The dominant message, of course, is that of AIDS prevention, along with information on how the virus is propagated, what risks attach to various types of behaviour, and what precautions can be taken to avoid the disease, the aim being to change the behaviour of the audience if necessary and dispel misconceptions. In this area, the films often stress personal responsibility and the need for the individual to take effective measures.

Next to prevention the most obvious theme is that of the life of seropositive people and the attitudes of those around them. The words of seropositive people, AIDS patients, their relatives, and medical staff are used to convey the message that seropositive people should enjoy the support and company of others, that intolerance and rejection must be overcome, and that improvement of the quality of relations with patients should be encouraged.

Also touched on are the need to tailor information to suit the selected audience, the need for better awareness of the idiosyncracies of certain groups in society, and fear of AIDS.

Target audiences

All the films were judged suitable by some participants for a wide audience comprising adolescents (in certain instances even children), young adults, adults and families.

Films in descending order of ratings received

2. Vidéo-clips Aides, by G. Coyne and J. van dem Borgh (no date) (AIDES, BP 169, 75643 Paris Cedex 10)
3. Elisa (1988) (Sections départementales MGEN)
4. Le Sida, vivre avec, by F. Rouleau (no date) (AIDES, BP 169, 75643 Paris Cedex 10)
8. Les maux d’amour, by A. Siboulet (no date) (Institut A. Fournier, 25 bd St Jacques, 75014 Paris)
10. Trente et demi, by M. Brack (1989) (ASAPS, 26 bd Haussman, 75311 Paris Cedex 09)
11. Double-contrainte, by G. Brunet and M. Lemercier (no date) (Ministère des Affaires sociales et de l’Emploi, 1 place de Fontenoy, 75007 Paris)
12. Spots LRS Nice (no date) (LRS de Nice, 8 rue de l’Hôtel-des-Postes, 06100 Nice)
13. Aides, by F. Rouleau (no date) (AIDES, BP 169, 75643 Paris Cedex 10)
15. Sida et parenthèses, by M. Lecomte and L. Braghiotti (no date) (Charonne, 21-23 rue des Filles du Calvaire, 75003 Paris)
16. Sid en ville, by Dr Espinoza and Dr Chevallier (no date) (APSP, BP 95, 94265 Fresnes)

A detailed report on the films is available from the Centre de Médecine préventive, Vandœuvre-les-Nancy (FF. 50 + postage).
Some participants regarded all the films as potentially suitable for health professionals. However, in regard to AIDS prevention, certain films were seen as more suitable for specific audiences, such as parents of adolescents, patients and their families, women and future mothers, and risk groups.

Public reactions

The participants predicted that if negative public reactions to the material occurred, they would comprise:

— indifference and boredom;
— fear, mistrust, anxiety and unease, sometimes to the point of panic and rejection of the message;
— further confusion and uncertainty;
— refusal to take part in discussion.

The likely positive public reactions were given as:

— curiosity, a desire to ask questions and find the right information;
— development of awareness of the problems related to AIDS, of the need to assume personal responsibility and to have respect for others; deep understanding and new vigilance; reflection on personal behaviour as regards AIDS and its victims, making for greater tolerance; acceptance of a new and more general way of behaving in love-making;
— reduction of anxiety;
— engaging in debate or discussion with organizers of film showings;
— interest, amusement, emotion and hope, perhaps evoked through identification with the characters portrayed.

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Large- or small-screen images can certainly be used to induce people to question their attitudes and behaviour regarding AIDS. However, it should be borne in mind that there are risks in any more or less verifiable manipulation of the mind, and that this is likely to be particularly true in the sensitive area of AIDS prevention.

It would seem that any new film should fulfil the following requirements if it is to be scientifically valid and acceptable in human and sociological terms:

— the information provided should be neutral, precise and clear;
— the human and social dimensions should be given prominence;
— a message should be provided which is easily identifiable and recognizable as essential to prevention;
— the film should be aimed at a clearly defined audience;
— reactions to the film should be anticipated, since they will determine the effectiveness of subsequent prevention activities.

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