The Writing on the Wall

HIV/AIDS Awareness Posters Targeting Women

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Cet article compare les affiches publiques pour annoncer la campagne de prévention au sida entre 1986 et 2004 par le gouvernement fédéral (Santé Canada), le gouvernement de l'Ontario (Ontario Ministry of Health) et par le Comité SIDA de Toronto (ACT). Il s'agit ici de noter la différence frappante dans le traitement de l'image des femmes et des hommes dans les affiches gouvernementales et les organisations communautaires.

HIV/AIDS continues to be one of the most urgent public health issues today. As of December 2003, women accounted for nearly 50 per cent of all people living with HIV worldwide (UNAIDS). According to Health Canada's most recent HIV/AIDS update, women represent 39 per cent of positive HIV test reports among those aged 15-29 years (Health Canada 2003).

HIV has challenged our ability to communicate about sexuality, the body, drug use, disease and treatment, as well as our attitudes toward a variety of lifestyles. In the absence of a medical cure or vaccine for HIV, the only means available for prevention is public information and education. One of the more common instruments of educational expression utilized by HIV/AIDS organizations has been poster campaigns. For many, this is the most accessible source of prevention messages. Recent controversy around the newest HIV/AIDS awareness campaign targeting men who have sex with men (the Assumptions campaign launched in July 2004 by AIDS Community Service Organizations), has brought the whole issue of sexual representation in HIV/AIDS awareness posters back to the forefront of sexual health politics, just as it was in earlier days of HIV/AIDS poster production. While the debate has been revisited about what is or is not appropriate for campaigns targeting men, the seemingly obvious and unaddressed question lingers, as it has for far too long—"what about women?" Despite an alarming increase in cases of HIV and AIDS in women and the controversial sexual politics surrounding HIV/AIDS, there has been little analysis of HIV/AIDS prevention and awareness poster campaigns targeting women.

This paper is drawn from a study I conducted comparing gender representation in 65 HIV/AIDS awareness posters produced between 1986 and 2004 by Health Canada (HC), the Ontario Ministry of Health (OMH), and by the community-based AIDS Committee of Toronto (ACT) (see Hunter). While representation of gender in these posters has changed over time and has varied according to the individual sponsoring organizations, the representation of males and females depicted by governmental and community-based organizations are strikingly different. Governmental posters targeting women focus less on sexuality and less on communication around safer sex than posters produced by the AIDS Committee of Toronto targeting men and women.

Theoretical Focus

One of the goals of this research was to understand HIV/AIDS awareness posters as texts, as social process, and to understand how visual representations of gender and sexuality are socially constructed. Sexist assumptions and lack of agency around female sexuality have been major areas of focus for feminists historically. Feminist approaches that challenge the power relations in society and focus on equality of opportunity will guide this analysis. Social structural differences in gender, power, sexual orientation, race and class prevent equal opportunities for women. By exposing differences and engendered inequalities in the way HIV/AIDS awareness campaigns target and represent women compared to the way they represent men, inequalities of opportunity become evident in the posters. Unlike the positive approach of safer sexuality in the posters targeting men, female sexuality is oppressed and denied. There is an avoidance of positive models of sexuality or models of communication about safer sexuality in the visual and textual representation of...
A critical area of consideration surrounding issues of gender, sexuality, hierarchy, power, and authority is the contradictions regarding women's sexuality. While female sexuality has been marketed profusely for commercial ends, it is denied and repressed in most Canadian HIV/AIDS prevention campaigns, where such messages around sexuality and safer sexuality are essential. HIV/AIDS posters targeting women do not evoke a sense of self-assurance or self-confidence in women around safer sex issues, leaving a sterile and vague message about sexuality for women. As in the wider cultural context, women are not empowered in their communication and negotiation efforts around safer sex, their decisions to use condoms, or in their decisions to explore other sexual experiences and options.

The influence of posters and their role in helping to shape perceptions about HIV/AIDS, gender, sexuality, sexual orientation, and perceptions about those who are infected with HIV is important to investigate. HIV/AIDS posters display a complex ideological declaration of the concerns of the sponsoring organizations in both visual and textual form. As James Miller argues, HIV/AIDS awareness posters are laden with "cultural expressions reflecting the divergent political interests, social agendas, and sexual concerns of their producers" (1). Critically assessing how HIV/AIDS is symbolically constructed through a poster is an essential part of understanding the ways in which this medium can manufacture, legitimate, and perpetuate particular meanings and relations.

Methodology

The framework developed for the analysis of differences in gender representation included contextual analysis, interviews, and content analysis including concepts borrowed from semiotics. Contextual analysis situates the posters in terms of their historical chronology. For the most part posters have been produced as a response to specific issues, medical concerns, or news events that were considered relevant at the time of their production.

Information gathered from interviews conducted with key informants from 22 different governmental and community-based HIV/AIDS organizations in the Toronto area during the years 1993, 1994, 1995, 1997 and some follow-up interviews during 2003 and 2004 were an important part of this research. Interviewees included representatives from the federal government (Health Canada, Canadian Public Health Department, Canadian AIDS Society), the provincial government (the Ontario Ministry of Health), provincial organizations (Haemophilia Ontario), health departments (Toronto Public Health Department), medical clinics (HIV Clinic, Addiction Research Foundation), and educational leaders from 15 community-based HIV/AIDS organizations, including the AIDS Committee of Toronto, Black Coalition for AIDS Prevention, Prostitutes' Safer Sex Project, Youthlink Inner City, 2 Spirited People of the First Nations, and Voices of Positive Women. The information gathered from the interviews contributed useful information on poster production and meaning, enabling more thoroughness in the development of themes within the analysis.

The application of content analysis and the incorporation of some concepts from semiotics assisted in uncovering the structure and underlying assumptions of the posters. Visual content analysis was used to create a systematic, observational method for categorizing the way HIV posters represent women and men. Manifest coding was utilized to determine visible, identifiable characteristics of each poster while latent content revealed the meanings embedded within the poster images and text.
Semiotics, often used in the examination of textual material, provided a structure for analyzing the way in which signs in texts function within a particular environment. Concepts borrowed from semiotics such as signifier, signified, content, form, frame, discourse, intertextuality, oppositions, associations, denotation and connotation were used to provide a framework for evaluating and interpreting the images, texts, and the broader underlying values represented in the posters. Within this framework, the following questions guided the analysis: What do these posters symbolize and signify? Who produces the posters? Who is the assumed audience or target population? What are the meanings behind the posters? How do these posters represent gender and sexuality?

Out of the 22 organizations represented in the interviews, it was three organizations that provided enough posters for full contextual analysis. Of the 65 posters included in this analysis, 35 came from ACT and a total of 30 came from Health Canada and the Ontario Ministry of Health. This number of posters allowed for a qualitative evaluation about the messages delivered as “the significations of the posters becomes clearer when they are seen in the context of other similar works” (Morris 233). This concept of intertextuality, which involves the analysis of the relation within texts and between texts (Berger 1987a, 1987b; Morris; Smith 1984, 1990), was applied to the poster analysis. The denotative and connotative meanings through which posters communicate, as well as several oppositions will be highlighted in reference to the social construction of gender in the posters.

Discussion

Basic findings of this research revealed main themes structured around pairs of oppositions; specifically, the use of fear and avoidance of sexuality in governmental HIV/AIDS awareness posters compared to an approach of safer sexuality in community-based HIV/AIDS awareness posters. These themes are used in part as a means of classifying men and women, classifying masculinity and femininity as social constructions, and classifying matters of sexuality in relation to HIV/AIDS education. The themes and oppositions associated with sexuality or avoidance of sexuality in HIV/AIDS awareness posters are explored.

Clear Contrasts

There are many contrasts in the representation of gender and sexuality in the posters produced by governmental organizations compared to those produced by community-based organizations such as ACT. While all three organizations strive to reduce the transmission of HIV through education, they deliver their messages in distinctly different ways reflecting their divergent ideological positions. In earlier years the HIV/AIDS prevention posters targeting women produced by Health Canada
Canada used the risks and the use of fear and moralizing. The Ministry and Health Health Canada used the risks and dangers associated with sexuality as a fear mechanism for social control. For example, the “Can You Get AIDS From…” campaign (OMH 1988) used photographic images that presented cautious and fearful teenagers contemplating the risks associated with everyday activities such as sharing food, using a public toilet, drinking from a fountain, or kissing. This theme of fear often supplanted accuracy and truth. This is evidenced by the use of the acronym “AIDS,” rather than the more accurate “HIV,” which hovers boldly over the photograph in each poster. The question raised in these posters was so overwhelming that the informative value of the photographic image was lost; the viewer may have interpreted the image as showcasing risky behaviour rather than risk-free behaviour. The images in these posters contradict and work against the intention of the campaign. For example, one of the posters in the series depicts a young Asian woman, standing outside the door of one of a chain of washroom stalls. With the foreboding question, “Can You Get AIDS From…?” looming above the photograph, the viewer may think that entering a public washroom is risky business: pick a stall and take your chances.

The posters, still displayed today, “You’re Sleeping With Every Partner Your Partner Ever Had” (a simple photograph of a sterile white packaged condom, disassociated from any individual, set against a sombre black background, OMH 1990) and “If Mr. Right Refuses to Wear a Condom … He’s Wrong” (a yellow stylized heart, set against a red background, HC 1990), raise doubt and anxiety in visual and textual form, without offering practical suggestions about ways to communicate with one’s partner(s) about safer sex. This utilization of fear delivers a heightened sense of panic, suspicion and helplessness. As a result of the content of such messages, people may become overwhelmed with the magnitude of HIV, and the way in which it is spreading, without receiving any practical advice about how to avoid HIV.

In more recent years Health Canada continued with this theme of caution and uncertainty by asking, “Could you recognize the face of AIDS? Are you sure?” (2003). Health Canada has also expressed concern with issues of stigma, discrimination, and isolation affecting those with HIV. In a 2003 campaign Health Canada depicted images of people who experience daily isolation and discrimination because of their HIV positive status. The text alongside the image of a young woman states, “Because of HIV, Sara’s friends don’t talk to her anymore. Don’t add to her isolation.” In two of the four posters of the 2004 campaign headlined “It’s Not HIV That Isolates Me, It’s You! HIV Does Not Discriminate. Do You?”, a young black or young white woman is set apart from a group of classmates. The personal handwritten text of one of these posters states “When people close to me found out about my infection, no one wanted to share anything with me anymore … not even the bathroom.” Although the point of these posters is to reduce the discrimination and isolation faced by Canadians living with HIV/AIDS, or in this case women, it is that very discrimination which is portrayed in the images, along with a fear based mentality which was exemplified in the first wave of governmental poster campaigns. In keeping with the theme of the campaign, acceptance and support by family and friends may be a more suitable and positive way to depict these women living with HIV and AIDS rather than reinforcing fear and discrimination.

The only recent Ontario Ministry of Health poster centres on a contemplative photograph of a pregnant woman and states “HIV testing is important for you and your baby” and asks “Have you been tested?” (2003). Pregnant women and mothers are often present in HIV/AIDS discourse due to concerns about infection to their babies. Many prevention programs and services have been more concerned with women’s reproductive function and health than with focusing on women’s sexuality and communication around safer sexuality (Booth; Connell; Loppie and Gahagan). Women are seen as “vectors of disease and sources of infection” (Connell 69) or to put it more bluntly, “when women are not vaginas waiting to infect men, they are uteruses, waiting to infect fetuses” (Patton 109). This tendency to blame women for HIV transmission is especially apparent in the case of sex workers who, although scapegoated in AIDS discourses, are primary advocates of safer sex (Meaghan; Sacks). In earlier years, even ACT, an organization that prides itself on its positive sexual imagery, denied women positive sexual representation and depicted women behind closed doors. The poster “Lesbians are talking about AIDS” (1990) depicts two females against a brick wall, out of public view. They are wearing jeans, tee shirts and...
sunglasses. This poster intensifies a relatively hidden and less vocal presence of lesbians, in comparison to the posters targeting gay men. The private, almost secretive image of the women is also in keeping with the typical way we see female gender, and particularly lesbian women who face multiple oppression because of their gender and sexual orientation. The poster "The Woman With AIDS..." (ACT 1990) and the remake, "The Woman with HIV..." (ACT 2000) echoes this secretiveness and keeps women in a private domain, represented indirectly by the closed or slightly open doorways to six different residential homes. The intention of the poster is to remind the viewer that even "the girl next door" could have HIV or AIDS or could be participating in risky behaviours that could lead to HIV transmission.

Apart from these earlier posters targeting women, ACT's posters portray sexual partners as openly acknowledging and incorporating safer sex, in a sex positive and gay positive context. In contrast to governmental HIV/AIDS posters, ACT's posters explicitly and implicitly promote condom use and safer sex with a "take control" attitude, practical text and explicit images, such as in the poster "Welcome to Condom Country ... Ride Safely" (2001). In addition to informing men about ways to take control of their own sexual lives, some ACT posters targeting men also simultaneously deliver congratulatory messages to their viewers, such as in the posters "Nobody Does It Better ... Or Safer" (1990) and "Safer Sex: Keep it Up!" (1991). These headlines help to promote, encourage, and support safer sex between men.

Although ACT uses healthy and sex positive expressions such as "Safer Sex" in the captions of the posters targeting the male population, the more fear inducing word "AIDS" was historically a component of the captions and text of the posters produced by ACT which targeted women—"The Woman With AIDS..." (1990), "Lesbians Are Talking About AIDS" (1990), and "Love is a Serious Thing ... What's happening with you and AIDS?" (1990). ACT's posters produced in later years however which specifically target lesbian and bisexual women use captions such as "Latex. The Risks! The Rules!" (1994), "Grrls on Grrls" (1996), "Women Lovin' Women" (2003) and "Doin' Boys" (2003) (image of two women and a man). The use of the word AIDS is avoided in the text of these posters for the more empowering expressions "Healthy-Sex-Life," "Know Your Risks!" and "Know the Choices!" These are similar to the type of "take control" and sexually explicit posters targeting men with respect to making choices and taking responsibility for one's sexual health.

Still overall, few posters portray women's sexuality and agency. With the exception of the recent posters targeting women from ACT, posters targeting women do not provide room to explore a positive model of female sexuality, where a woman is presented on her own behalf, making demands and taking control of her own life. This is a very different approach from the posters targeting men who have sex with men, where the "taking control" aspect of men's sexual lives and sexual health is reinforced. Neither Health Canada nor the Ministry have addressed the absence of the portrayal of women's sexuality or the absence of communication strategies with partners about prevention and safer sex options, and posters produced by ACT simply do not target or portray heterosexual women.

**Safer Sex: Partner or Opponent**

ACT positions itself as a partner with the viewer of the posters targeting men (and in later years the posters targeting women) offering inviting slogans such as "Get the Facts, Take Control," "Know Your Risks!" and presenting safer sex options with slogans such as "Discover the Options," "Make Choices," and "Know Your Choices!" ACT does not dictate, as do several governmental posters, what the viewer must or must not do to stay healthy. In the posters produced by ACT, men are represented as comrades and allies around sexuality and condom use. Conversely, governmental posters which target the "general heterosexual population" present men and women as opponents around safer sex negotiation and the use of condoms. For example, in the poster "If Mr. Right Refuses to Wear a Condom ... He's Wrong." (1990), condoms appear to be an inconvenience for a resistant partner. The male of the implied couple in the poster presumably wants to have sex without a condom; otherwise the woman wouldn't be trying to convince the viewer that he's "Wrong" if he refuses safer sex. The male is implicitly presented as the carrier of the virus and the woman's role is to coerce him and to take care of both of them. There are no examples or models of effective communication strategies offered to the viewer. Although the text "if you care for one another, take care of one another" addresses both men and women, the male in the poster was invited to tune out long before this point, diminishing his responsibility for caring.

Although women may be the main educative force in promoting safer sex in heterosexual relationships, patriarchal social relations hinder the adoption of safer sex practices for many women. Heterosexual women are still in the situation of negotiating sexual relationships with men in a society where sex is largely defined in terms of men's needs (Holland et al.). As Janet Holland, Caroline Ramazonoglu, Sue Sharpe and Rachel Thomson contend:

The control that men exert over women in the private sphere and in private matters of sexuality cannot be separated from the overall legitimation of male dominance, the greater value placed on men in Western cultures, and the dominance of patriarchal political and economic institutions in the public sphere (650).

The many issues surrounding HIV and AIDS cannot be examined in isolation. Markers of identity such as gender,
culture, race, power, and sexuality are intimately connected with negotiations around safer sex (Bain; Dowsett; Gavey, McPhillips and Doherty; Kumar, Larkin and Mitchell; Mane and Aggleton; Tharao and Massaquoi). These issues are vital to explore because the rates of infection among heterosexual women are rapidly increasing. Between 1985 and 1997, fewer than 40 per cent of women in Canada with HIV positive test results were infected through heterosexual contact. This increased to 82.4 per cent by 2003 (Health Canada 2004a). As of June 2003, of all cumulative AIDS cases in women in Canada, 68 per cent were attributed to heterosexual transmission (Health Canada 2004b). Throughout the world, “more than four-fifths of all HIV-infected women have contracted the virus through heterosexual transmission” (Health Canada 2001; Kumar et al.; Larkin; Wingood and DiClemente).

There are many complex social structural, political, and systemic economic inequalities that lead to risk factors for women and inhibit opportunities for safer sex negotiation and agency. Women who face sexual oppression, sexual abuse, racism, diminished educational and occupational opportunities, poverty, and culturally sanctioned gender roles have little power. Those who have unequal access to social and economic resources, who lack power and knowledge to negotiate safer sex have the least control over their sexual decision-making and are most vulnerable to HIV infection. Some women and their children may be financially dependent on a partner who is engaging in high risk behaviours, but they would be abandoned or abused if they insisted on the use of condoms during sexual activity. For many women, empowerment is only a word and the threat of abandonment and/or violence is more immediate than the reality of HIV transmission (De Oliveria; Dowsett; Godin, Gagnon and Lambert; Gómez and Marin; Kumar et al.; Loppie and Gahagan; Sacks; Tharao and Massaquoi; Wingood and DiClemente).

There have been dramatic increases in HIV and AIDS rates among Black and Aboriginal women in Canada and yet educational materials and posters targeting Black, Aboriginal and Asian women are very limited or culturally inappropriate (Alliance for South Asian AIDS Prevention; Tharao and Massaquoi). One poster in this sample that approaches a positive representation of sexuality is “Love is a Serious Thing…What’s Happening With You and AIDS?” (1990), produced by ACT in conjunction with the Black Coalition for AIDS Prevention (BlackCAP). The close up image of a black woman’s face depicts a serious and solemn expression. Although this may be an appropriate emotion to convey, no suggestions are given in image or text about how to negotiate safer sex. Instead the viewer is left pondering the question, “what’s happening with you and AIDS?” and told to “Take no risks.”

In order for women to negotiate safer sex options with men, it is necessary to promote communication between partners around safer sex rather than presenting men and women as opponents. A positive model of female sexuality and communication about sexuality is needed to ensure that women have a greater chance of safer sexual encounters (Bird et al.; Connell; Fenaughty and Namyniuk; Goméz and Marin; Holland et al.; Miles; Triese et al.). Posters targeting men who have sex with men emphasize safer sexuality and communication about safer sex. Overall, there is reluctance to present heterosexual women as empowered in their communication with friends, lovers, and partners.

Conclusions

This examination of HIV/AIDS awareness posters targeting women produced by Health Canada, the Ontario Ministry of Health and the AIDS Committee of Toronto has been useful as a means of understanding the ways through which HIV, AIDS, gender, sexuality and related social, political, and cultural issues are constructed and represented in public discourse. The conflicting discourses of gender and HIV/AIDS have serious implications for public attitudes, personal beliefs systems, sexual health, the formation of public policies around HIV/AIDS educational programs and treatment, and most importantly, reducing the rate of HIV transmission.

ACT has attempted to empower and depict sexually positive representations of safer sex for men. In more recent years ACT has expanded its focus to include positive representations of safer sexuality for lesbian and bisexual women. The posters addressing women produced by governments (and until recently by ACT) are much less sexually explicit and show women as less confident and more private about sexual issues. Posters targeting women have also utilized themes of authority, fear and mortality more often than those produced by ACT targeting men. Clearly, differences in gender representation exist between the HIV/AIDS posters produced by governmental organizations and those produced by community based agencies. Future research will explore the reasons behind such divergent constructions of gender.

Strengthening and reinforcing the abilities of women and their partners to protect themselves from HIV/AIDS is a priority. HIV/AIDS infection rates are rising among women in Canada and throughout the world. Past and present HIV/AIDS awareness campaigns may have reached part of the population, but clearly a more effective strategy in addressing women and safer sex is needed if there is any hope of reversing this trend. A more positive portrayal of women’s sexuality and communication strategies among safer sexuality must be incorporated into the HIV/AIDS awareness posters produced in Canada. In December 2004, the theme of World AIDS Day was “Women”. It is hoped that this day of awareness provided a foundation for further educational initiatives and political resources to support women in the many issues they face surrounding HIV and AIDS.
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1Themes associated with culture, race, ethnicity, poverty, HIV testing, drug use, harm reduction, and sex workers, although interesting and relevant are beyond the scope of this paper, which specifically focuses on HIV/AIDS awareness campaigns and women’s health issues in general.

References


DONNA J. GELAGOTIS LEE

Residency at the Island Clinic

I wait, like an object, in the plastic chair beside the open door that frames the sea, rocks tumbling to its lips. The room has two doors and both are open and the sea breeze fills the space. I notice the table, the implements on the table, and then I see blood and blood-stained gauze and cotton and tweezers with blood on them. I feel my stomach begin to turn as I realize suddenly that the blood is dried and that a fly is inspecting the implements, all laid out in the open like the sea and its many instruments. The doctor walks in through one of those doors from the street and I think: she is younger than me. She instructs that it’s nothing, that it happens on the islands this time of year: I think I’ve never heard of a virus that pounds the side of your head at certain times of the year and on certain islands but I am happy to be leaving the room full of implements, happy to have them remain there on the table untouched, on their white linen, like objects to be admired, beside an open door.

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