Arvind Singhal P. N. Vasanti

THE ROLE OF POPULAR NARRATIVES IN STIMULATING THE PUBLIC DISCOURSE ON HIV AND AIDS Bollywood's Answer to Hollywood's Philadelphia

The purpose of the present article is to analyze the role of a popular Hindi film, Phir Milenge (We Will Meet Again), in stimulating the AIDS-related public discourse in India. Starring mega-actors and directed by an award-winning director, the Bollywood Hindi film Phir Milenge exemplifies what is commonly referred to as the entertainmenteducation communication strategy. We discuss the entertainment-education strategy in HIV/AIDS prevention, including the role of popular mainstream feature films in stimulating the public discourse on HIV and AIDS. Our multi-pronged research design to gauge Indian audience responses to Phir Milenge is described, and the results presented. Our findings suggest that popular, mainstream films starring megastars can help break the silence about AIDS, and move the discussion of HIV/AIDS from the personal-private to the public-policy sphere.

When Bollywood, one of the world's largest film industries with massive audiences makes a film [Phir Milenge] about AIDS, everyone has to sit up and take notice.

(Peter Piot, Executive Director, UNAIDS, quoted in www.sify.com/news/ fullstory.php?id=13549234, accessed on 4 October 2004)

'It is brave of the director, Revathy, to tackle a subject as prickly of AIDS without getting preachy, screechy, judgmental, or unduly sentimental' (a film critic quoted in www.timesofindia.indiatimes.com/articlesshow/msid-830933, accessed on 5 September 2004).

By mid-2004, an estimated 27 million people had died of AIDS and over 45 million people were HIV-positive. Of the 45 million HIV-positive people, the highest number of HIV-positive cases is in India – some 5.1 million people (www.unaids. org). Countries in sub-Saharan Africa are especially badly hit, although AIDS is a pandemic, spanning the globe and cutting across geographical boundaries (Singhal and

> South Asian Popular Culture Vol. 38, No. 1, April 2005, pp. 3–14 ISSN 1474-6689 print/ISSN 1474-6697 online © 2005 Taylor & Francis Ltd http://www.tandf.co.uk/journals DOI: 10.1080/14746680500118533

South Asian Popular Culture sap61773.3d 29/4/05 17:46:49 The Charlesworth Group, Wakefield +44(0)1924 369598 - Rev 7.51n/W (Jan 20 2003)

Routledge

Taylor & Francis Group



Rogers, 2003). In Zimbabwe, 45 per cent of children under the age of five are HIVpositive, and the epidemic has shortened life expectancy by 22 years. A 15-year-old in Botswana or South Africa has a one in two chance of dying with AIDS. AIDS deaths are so widespread in South Africa that small children now play a new game called 'Funerals' (Singhal and Howard, 2003).

Disturbingly, this global AIDS pandemic has spawned what some refer to as the world's new class of 'untouchables': People living with HIV and AIDS (PLWHAs) throughout the world face social marginalisation, alienation, and victimisation. Unfortunately, AIDS disqualifies people from being regarded as whole, intact individuals (Taylor, 2001). All too often, their human rights are violated (Alonzo and Reynolds, 1995; Herdt, 2001; Singhal, 2003a). In every nation, and among the members of every culture, the stigmatisation of people living with HIV and AIDS is a severe problem, although its nature and severity vary greatly by context (Singhal, 2003b). Stigmatisation occurs in various forms – from instilling fear and shame on those infected and affected by HIV, to social alienation and ostracisation, to human rights violations, to coercive government policies and laws (Malcolm et al, 1998; Singhal, Rogers, and Sharma, 2003).

AIDS is a disease of already-stigmatised groups. In the initial era of the epidemic in most countries, HIV infection began to spread through sexual networks of gay men, commercial sex workers, and/or intravenous drug users. These marginalised groups were already heavily stigmatised by society and this prejudice was carried over and strengthened by such individuals becoming identified as carriers of HIV. This 'double stigma' of AIDS stemmed from identification of AIDS as a serious illness, and from the identification of AIDS with already-stigmatised groups (Herek and Glunt, 1988). Moreover, these 'double-stigmatised' individuals were blamed for the problems of the group, shifting the blame from public spheres of action to the private. Such stigmabased violations greatly impede the notion of 'personhood' in communities and 'citizenship' in states (Herdt, 2001).

AIDS-related stigma is so virulent (many say it is more virulent than the virus) because HIV/AIDS deals with taboo topics – sexual intercourse, morality, and death. If HIV/AIDS were *completely* taboo in a society, of course, there could be no communication of any kind about this issue, no effective intervention programmes, and no testing and counselling. In reality, the topic of HIV/AIDS lies somewhere on the continuum from relatively highly taboo to relatively less taboo; in most nations, HIV/AIDS is closer to the highly taboo end, especially in a country like India. The communication challenge is how to move the issue of HIV and AIDS from the taboo end toward the less taboo end of the continuum. Only by making a topic less taboo, can silence be broken at the individual, community, and national level. It is only through spurring private, public, policy, and media discussion that the issue of AIDS can become increasingly non-taboo and thus destigmatised (Habermas, 1989; Singhal, 2003a; b). Therefore, communication activities are really at the heart of overcoming stigma about AIDS.

The purpose of the present article is to analyse the role of a popular Hindi film *Phir Milenge (We Will Meet Again)* in stimulating the AIDS-related public discourse in India. Starring mega-actors – Shilpa Shetty, Salman Khan, and Abhishek Bachchan – and directed by an award-winning director, Revathy, the Bollywood Hindi film *Phir Milenge* exemplifies what is commonly referred to as the entertainment-education



communication strategy. We discuss the entertainment-education strategy in HIV/ AIDS prevention, including the role of popular, mainstream feature films in stimulating the public discourse on HIV and AIDS. Our multi-pronged research design to gauge Indian audience responses to *Phir Milenge* is described, and the results presented.

The entertainment-education strategy

The entertainment-education (E-E) strategy, widely used in health promotion, abrogates a needless dichotomy in almost all mass media content: that mass media programmes must either be entertaining *or* educational (Singhal and Rogers, 1999; 2002; Singhal *et al.*, 2004). E-E is the process of purposely designing and implementing a media message to both entertain and educate, in order to increase audience members' knowledge about an issue, create favourable attitudes, shift social norms, and change the overt behaviour of individuals and communities (Singhal and Rogers, 1999).

The E-E strategy contributes to social change in two ways: (a) it can influence audience awareness, attitudes, and behaviours toward a socially desirable end; here the anticipated effects are located in the individual audience members; and (b) it can influence the audiences' external environment to help create the necessary conditions for social change at the group or system level. Here the major effects are located in the interpersonal and social-political sphere of the audience members' environment. In this case, entertainment-education media serve as a social mobiliser, an advocate, or agenda-setter, influencing public and policy initiatives in a socially desirable direction (Wallack, 1990).

E-E programmes represent a viable weapon in the worldwide war against HIV/AIDS (Piotrow, Meyer, and Zulu, 1992). Such programmes utilise the popular appeal of entertainment formats (such as melodrama) to consciously address educational issues (Singhal and Rogers, 1999; Piotrow *et al.*, 1997). These interventions earn high audience ratings, involve audience members emotionally, and spur interpersonal conversations among audience members on various topics. E-Es ability to stimulate conversations can bring taboo topics like HIV/AIDS into public discourse. While audience members are usually reluctant to discuss the details of their personal life in public, they feel comfortable talking about the lifestyles of their characters, and commenting on the accompanying consequences.

E-Es appeal comes from its narrative approach, which is not perceived as didactic or preachy by audience members. Walter Fisher (1987) argued that humans are essentially storytellers (*homo narrans*) who employ a narrative logic in processing discourse. E-E programmes, whether on television, or radio or film, represent highly complex narratives with various protagonists and antagonists, plots and subplots, and conflicts and resolutions. E-E programmes also appeal to audience members because exposure is a pleasurable activity. E-E viewers enjoy conflict-laden, suspenseful drama. Repeated empathic distress from seeing a character in imminent danger often enhances the enjoyment of drama and the resolution of the threat (Zillman and Vorderer, 2000).



E-E programmes appeal to the emotions of audience members. Affect from a media character is communicated to audience members, often through the process of *parasocial interaction*, the tendency of individuals to perceive that they have a personal relationship with a media or public personality (Horton and Wohl, 1956; Sood and Rogers, 2000). Audience members perceive media characters as their personal friends (or foes). Audience members often talk out loud to their favourite characters, laugh and cry with them. The characters 'infect' the audience members with their feelings. Such is the power of entertainment-education in behaviour change communication.

Entertainment-education and HIV/AIDS

The entertainment-education strategy has been consciously applied to HIV/AIDS prevention in the following forms (Church and Geller, 1989; Piotrow *et al.*, 1997; Rogers *et al.*, 1999; Singhal & Rogers, 1999; 2003; Valente and Bharath, 1999):

- radio and television soap operas, for instance, Twende na Wakati (Let's Go with the Times) in Tanzania, Soul City in South Africa, Ushikwapo Shikimana (If Assisted, Assist Yourself) in Kenya, Tinka Tinka Sukh (Happiness Lies in Small Things) in India, Nshilakamona (I Have Not Seen It) in Zambia, Malhacão (Working Out) in Brazil, Sexto Sentido (Sixth Sense) in Nicaragua; and Kamisama Mo Sukoshidake (Please God Just a Little More Time) in Japan;
- talk shows such as Good Times with DJ Berry in Uganda and Erotica in Brazil;
- popular music and celebrity concerts, for instance, Franco Luambo's hit song *Beware of AIDS* in the Democratic Republic of Congo and the *Hits for Hope* concerts in Uganda;
- competitive events like bicycle rallies in Uganda, soccer matches in Cameroon, and condom-blowing contests in Thailand; and
- feature films such as *Philadelphia* produced by Hollywood and *Phir Milenge* produced by Bollywood (the Bombay film industry) in India.

Research evaluations of these programmes suggest that the E-E strategy – through its use of formative research, audience segmentation, a multi-media campaign approach, media celebrities, and other creative techniques such as humour, animation, claymation, and others - can effectively promote HIV/AIDS prevention behaviour (Piotrow et al., 1997; Valente, 1997; Church and Geller, 1989; Singhal and Rogers, 1999; Vaughan et al., 2000). For instance, in Japan, the number of HIV tests and requests for HIV/AIDS counselling more than doubled from July to September, 1998, thanks to a popular melodramatic television series, Kamisama Mo Sukoshidake (Please God Just a Little More Time), which told the story of a high-school girl who became infected with HIV from commercial sex work (Singhal and Rogers, 2003). In the US, incorporation of a HIV/AIDS storyline in the 2001 broadcasts of Bold & the Beautiful significantly boosted health-seeking behaviour, as measured by the spikes in telephone calls to the CDC National STD and AIDS Hotline (Kennedy et al., 2004). In Brazil, Malhacão, a Brazilian version of 'Baywatch', got a significant boost in audience ratings (37 percentage points) when the teenage star of the show, Erica, learns that she is HIV-positive (Singhal and Rogers, 2003). When Erica wrestled with such dilemmas as whether or not she could have boyfriends, be able to marry, or have



children, it spurred numerous conversations in Brazil about HIV and AIDS, amplifying the public discourse on the topic (La Pastina, Patel, and Schiavo, 2004).

HIV/AIDS feature films

Filmmakers in several countries have tried to raise public awareness about HIV and AIDS; however, most of these efforts have come from independent filmmakers. Examples in the US include Derek Jarman's *Blue*, Cyril Collard's *Savage Nights*, and John Greyson's *Zero Patience*. Mainstream feature filmmakers in most countries have been gun shy of this sensitive public topic. Exceptions include *A Death in the Family* (New Zealand), *The Navigator* (Australia), *Via Appia* (Germany), and *Peter's Friends* (UK), and others (Baker, 1994).

Hollywood's Philadelphia

Perhaps Jonathan Demme's film *Philadephia*, released in Hollywood in 1992 and then globally distributed, is the best-known feature film to tackle HIV and AIDS. However, even *Philadelphia*, a TriStar Picture, was treated with soft gloves. The motion picture company consistently refused to acknowledge it as a film about gays or AIDS. It was sold as drama. *Philadelphia* was a super box office hit, bringing in over \$72 million dollars in the first 18 months of its release, tripling the \$25 million it cost to produce (Baker, 1994). More importantly, *Philadelphia* brought the issue of HIV and AIDS to the attention of a wider public, which included gays and straights, black and white, and poor and upper class Americans. Tom Hanks' performance as Andrew Beckett, the gay lawyer who was persecuted by his employers, won Golden Globe and the Oscar in the Best Actor category.

Bollywood's Phir Milenge

Twelve years after *Philadelphia* was released in Hollywood, the world's biggest motion picture enterprise, the Bombay-based Hindi film industry (commonly referred to as 'Bollywood') released *Phir Milenge*¹. The film was directed by Revathy, a well-known actress of South Indian films, who made her Bollywood directorial debut in 2002 with an award-winning film titled *Mitr (My Friend)*. Revathy was highly inspired by *Philadelphia's* audience reach: 'We wanted to make a film not for film festivals but for the masses, using the powerful medium of cinema to talk about the issues that influence life (quoted in *Asian Age*, 2004, 4). An estimated 15 million people in India go the movies every day.

The Story of Phir Milenge

Akin to *Philadelphia, Phir Milenge's* storyline revolved around discrimination against an HIV-positive employee in the workplace, and a lawyer's fight against the victim's persecution. However, Revathy, changed the gender of the persecuted to be a woman in order to also address gender discrimination. Further, a mandatory romance was introduced to suit the Indian audience's palate.

Phir Milenge's story revolves around Tamanna (played by actress Shilpa Shetty), a successful businesswoman, who meets her old boyfriend Rohit (played by actor Salman Khan), a musician, after a period of ten years, during a College reunion. They enjoy some intimate moments. Seven months later, Tamanna finds out, during a routine blood test, that she is HIV-positive. The doctor (played by Revathy) explains to her the difference between being HIV-positive and having AIDS. The news shatters Tamanna's world. Her attempts to trace Rohit (who is in New York) are in vain. Tamanna discloses that she is HIV-positive to her younger sister, a close circle of friends, and to her mentor at work.

Upon overcoming her initial shock when Tamanna returns to work, she learns she has been fired on grounds of incompetence. Further, her HIV-positive status is stigmatised and she faces various acts of prejudice and discrimination. A persecuted Tamanna tries to hire a lawyer to fight this injustice. Most lawyers refuse to accept her case when they learn she is HIV-positive. Finally, after some initial reluctance, Tarun (played by actor Abhishek Bachchan) takes up her case. Guided by his former law school professor, Tarun learns that there are no laws in India to uphold the rights of people living with HIV and AIDS. Tarun loses the case in the lower court but is determined to appeal the decision. Meanwhile, Rohit returns from the US and Tamanna visits him. Rohit now has full-blown AIDS and is now in his last stage of his life. He tells Tamanna that he did not know he was HIV-positive when they met at the College reunion. He dies in Tamanna's arms.

Tarun eventually wins Tamanna's discrimination case in the higher courts, hailing a victory for the stigmatised, persecuted, and discriminated underdog. The film ends by showing Tamanna on the cover of a business magazine.

Research questions

Drawing upon the previous sections, especially the literature on entertainmenteducation initiatives to combat HIV/AIDS, our present study on *Phir Milenge* in India was guided by three research questions:

- 1. How did viewers of *Phir Milenge* perceive the film's entertainment and educational value?
- 2. How did viewers of *Phir Milenge* interpret the film's HIV and AIDS plot, especially the content about stigma and discrimination, care and support, and the preservation of rights of people living with HIV and AIDS?
- 3. What role can popular feature films play in stimulating the public discourse on HIV and AIDS?

Methods of data collection

We drew upon various data-collection methods in order to address our research questions, including (a) a structured survey interview of *Phir Milenge* viewers; (b) indepth personal interviews with a sample of the film's viewers; (c) a personal



conversation with the film's director Revathy (conducted in July 2004 in Kolkata, India); and (d) archival materials, newspaper clippings, and web-based reviews of the feature film.

Phir Milenge was released in the last week of August 2004, across movie halls in India. Within two weeks of its release, over a three day period, from 7–9 September 2004, a team of five researchers from the Centre of Media Studies (CMS), New Delhi, interviewed 200 *Phir Milenge* viewers as they exited from four movie halls – PVR Saket, Janakpuri Cineplex, Shakuntalam, Pragati Maidan, and Satyam, Patelnagar – in New Delhi. A brief questionnaire was administered to them to gauge their motivations for watching *Phir Milenge*; the degree to which the film was recommended to them by others; their perceptions of the plot, acting, direction, music, and treatment of HIV/AIDS in the film; their ratings of *Phir Milenge* in comparison to the Hollywood film *Philadelphia*; the degree to which they learned from *Phir Milenge* about prevention, transmission, and treatment of HIV and AIDS as also about AIDS-related stigma and discrimination; and how likely they were to recommend the film to others.

What was the profile of our respondents? Some 46 per cent of the 200 respondents were female and 54 per cent were male, and some 60 per cent of them were in the 16 to 25 age group, and the remaining 40 per cent were over 25 years of age. Some 44 per cent of the respondents were students, 7 per cent were homemakers, and the remaining 49 per cent were employed as teachers, government officials, and in private occupations.

In addition to administering the structured survey protocol, two CMS researchers conducted in-depth interviews in New Delhi with an additional 20 viewers of *Phir Milenge*, comprising both male and female respondents. Openended questions were asked to obtain insights on how the respondents felt when Tamanna was fired by her employers, whether or not one should blame Rohit and Tamanna for their HIV-positive status, and what did they learn from the film about HIV and AIDS prevention, care, and support, including issues of stigma and discrimination?

Findings

Here we present the main findings of our study, organised around our three research questions. We draw upon the structured interview responses as well as the in-depth interview transcripts in answering our posed research questions.

Perception of entertainment and educational value

Research question 1 asked, 'How did the viewers of Phir Milenge perceive the film's entertainment and educational value?'

Some 24 per cent of our 200 respondents noted that their primary motivation for coming to see *Phir Milenge* was because of its educational HIV/AIDS content, 35 per cent came primarily for its entertainment value and to see its star actors, 6 per cent came primarily because of Revathy's direction; 16 per cent came because of high recommendations from others, and the balance 19 per cent gave other reasons such as 'I wanted to watch a film,' 'I got a free ticket from a friend,' and so on.



Table 1 suggests that viewers' rated *Phir Milenge* quite highly in terms of its entertainment and educational content. Over 97 per cent of the viewers rated the melodramatic plot of *Phir Milenge*, the quality of its direction and acting, and its sensitive treatment of HIV and AIDS as being either awesome or good. As one respondent noted: 'It's a very bold attempt ... very different ... very well acted. The direction is brilliant. I enjoyed every moment of it. It may not become a box office hit but as a movie I thought it was really good.' Another said: 'I liked the whole movie. I mean I didn't find any single dull moment.'

Viewers, in general, felt that *Phir Milenge* did a good job of balancing its entertainment and educational content. Some 61 per cent (n=132) believed that its educational content surpassed its entertainment content, 6 per cent felt that its entertainment content surpassed its educational content, and 29 per cent felt there was an optimal balance. The remaining 4 per cent rated the films content as neither entertaining nor educational.

Some 40 per cent (n=80) of our 200 viewers of *Phir Milenge* had watched the hit Hollywood film Philadelphia. Of these, 45 per cent rated *Phir Milenge* as good as or better than *Philadelphia*.

AIDS-related learning from Phir Milenge

Research question 2 asked, 'How did viewers of Phir Milenge interpret the film's HIV and AIDS plot, especially the content about stigma and discrimination, care and support, and the preservation of rights of people living with HIV and AIDS?'

Some 64 per cent (n=138) of our 200 respondents reported learning about HIV and AIDS-related issues from *Phir Milenge*. Of these, 42 per cent believed their primary learning was about how HIV and AIDS is transmitted, including the importance of avoiding unsafe sex through the use of condoms; 30 per cent believed their primary learning was about the insidious discrimination of HIV/AIDS patients and the importance of upholding their rights; and 28 per cent reported that their primary learning was about the importance of caring and supporting those living with HIV and AIDS.

AIDS transmission and prevention. The in-depth interviews added more nuanced explications of respondents' AIDS-related learning. Many respondents framed their

Attributes of Phir Milenge	Viewers' ratings of Phir Milenge			
	Awesome	Good	Poor	Totals n=200
Melodramatic plot	16%	81%	3%	100%
Quality of acting	19%	79%	2%	100%
Quality of direction	20%	77%	3%	100%
Quality of music	16%	70%	14%	100%
Treatment of HIV and AIDS	5%	92%	3%	100%
Overall film rating	17%	80%	3%	100%

TABLE 1 Viewers' perceptions of the various attributes of Phir Milenge.

111836

learning in terms of learning the difference between HIV and AIDS, of how AIDS is transmitted, and how to prevent its spread. As one respondent noted: 'Ya, I came to know a lot about HIV and AIDS.... I am embarrassed to say I did not know the difference between them. I thought people with HIV are doomed ... but the movie tells us that only after HIV attacks the cells does the patient get AIDS. It can take two years or 20 years.' Another respondent noted, 'To prevent HIV, one must not practice open pre-marital sex. Take precautions.'

Stigma and discrimination. Several respondents framed their learning from *Phir Milenge* in terms of heightened awareness of stigmatisation and discrimination of HIV/ AIDS patients: 'It teaches us about how AIDS patients are treated and the difficulties they have to go through', a respondent noted. Another said, 'I came to know how HIV patients are discriminated.' A third said, 'We should not discriminate against any person having this disease.' A fourth added, 'HIV patients should be treated as normal human beings.' Lastly, a respondent noted, 'The message from *Phir Milenge* is clear ... AIDS is not transferable the way people think it is. So people should not discriminate against people with HIV.'

Almost all our respondents showed overwhelming disgust at the discriminatory firing of Tamanna from her employment because of her HIV-positive status. They felt that such stigmatisation and discrimination is abhorrent. As one respondent noted, 'The firing was not good. AIDS can happen to anybody. This does not mean that we stop them from engaging in normal activities. And removing the person from the job – this is not fine.' Another respondent simply said, 'Disgusting.' A third said, 'Oh! That was terrible

I mean that was very wrong.' A fourth said, 'I am angry ... such discrimination should not be there.' Finally, a respondent noted, 'It was very bad, 100 per cent wrong.' Several respondents, in fact, emphasized that instead of firing Tamanna, the employers should have tried to help her.

Testing and treatment. Some respondents noted that they learned from *Phir Milenge* about testing for HIV and the treatment possibilities for AIDS. As one noted, 'HIV/ AIDS is a disease that can be fought. That gives people hope.'

Stimulating the public discourse on AIDS

Research Question 3 asked, 'What role can popular feature films play in stimulating the public discourse on HIV and AIDS?'

An overwhelming 99 per cent (n=198) of our 200 respondents emphasized that the Bollywood Hindi film industry should tackle issues such as HIV and AIDS. They noted that they would be open to watching entertaining films that also addressed relevant and contemporary social themes.

Further, it seemed that *Phir Milenge* was generating a high degree of buzz among the Indian moviegoers. For instance, 44 per cent (88) of our 200 respondents noted that *Phir Milenge was* recommended to them by others. Of these, 29 per cent noted that three or more people recommended the film to them. Further, after watching



the film, 87 per cent of our 200 respondents said that they would enthusiastically recommend the film to others, especially to their friends. Clearly, conversations about *Phir Milenge* occurred in people's social networks, spurring both private and public discourse on the topic of HIV and AIDS.

Despite its potential for commercial success, *Phir Milenge*, unlike its Hollywood counterpart *Philadelphia*, has not been a box-office success. In fact, it seemed to have earned better ratings from film critics than the mass general audience. Box office collections for *Phir Milenge* were not as expected in India, USA, or UK. The weekend *Phir Milenge* was released; it was number five on the box-office charts, behind other Bombay formula films like *Dhoom* and *Mujhse Shaadi Karogi*. In the UK, it was number 20 in terms of net receipts, and in the USA it was number 62 (http://www.indiafm.com/boxoffice/overseas/01sep04.shtml, 24 September 2004).

None the less, *Phir Milenge* received several rave reviews and free mass media publicity because of the sensitive manner in which it dealt with HIV/AIDS. Its director, Revathy, was featured in dozens of newspapers and newsmagazines, and its three actors in protagonist roles – Shilpa Shetty, Salman Khan, and Abhishek Bachchan – received kudos in the popular press for their efforts in reducing stigma and prejudice for those infected with HIV/AIDS. The Indian public learned that most of the film crew, including *Phir Milenge's* actors, contributed some of their time to this effort *pro-bono*. Further, the film donated some of its box office receipts to AIDS-related causes in India, including to an AIDS non-governmental organisation, Ashray in Bombay, where actor Salman Khan and his mother volunteer (http://www.apunkachoice.com/movies/mov391/http://www.apunkachoice.com/movies/mov391/, 22 September 2004).

Further, UNAIDS, the main UN organisation fighting AIDS entered *Phir Milenge* in the competition for the 2004 Cannes Film Festival. Such publicity for *Phir Milenge* has helped amplify, even if on a limited basis, the public discourse on HIV/AIDS in India. If *Phir Milenge* wins any national or international awards, it may return to Indian theatres for a second round of box office collections.

Conclusions

AIDS is a disease of ignorance and intolerance, as well as a biological illness. When the mass media profile AIDS as a disease of gays, injecting drug users, and commercial sex workers, it perpetuates stigma. Fear, prejudice, injustice, and stigma are every bit as dangerous, if not more so, than the biological virus. Further, taboos surrounding HIVAIDS often prevent recognition, discussion, and acceptance of safer sex practices, and serve as a barrier to testing, counselling, treatment, and care. Stigma is one of the major barriers to effective communication about AIDS.

AIDS stigma evokes negative reactions – denial, shame, fear, anger, prejudice, and discrimination – which manifest themselves in interpersonal and group relationships. Hence, communication strategies need to be at the heart of all efforts to overcome the stigma of HIV and AIDS. Although useful lessons about combating stigma have been learned, few anti-stigma programmes have been very effective, as they do not take into account communication theories. Wearing down the mountains of stigma requires repeated efforts over dozens of years. Communication strategies, especially popular, mainstream films starring mega stars (such as Tom Hanks and Denzel Washington in Hollywood; and Shilpa Shetty, Salman Khan, and Abhishek Bachchan in Bollywood) can help break the silence about AIDS, and move the discussion of HIV/AIDS from the personal-private to the publicpolicy sphere, thus gradually overcoming its taboo status.

However, E-E efforts centring on mainstream feature films that address HIV/ AIDS are few and far between. Further, research on the efficacy of these interventions is even scarcer. The present article attempted to fulfil this lacuna.

Acknowledgements

We thank the following co-researchers of the Centre for Media Studies, New Delhi, India for their assistance in data-collection: Alok Srivastava, Dipti Kulkarni, and Kalpana Bindu. We also thank Revathy, the Director of *Phir Milenge*, and Professor David Gere of the University of California in Los Angeles for their encouragement in researching art initiatives to combat HIV and AIDS.

Notes

1 Much like Hollywood, Bollywood has been gun shy of producing issue-based feature films. In recent years, Bollywood had produced, as a rare token, films dealing with gay issues such as *Mango Souffle* and *Bombay Boys*, and a film dealing with female sexuality called *Girlfriends*. Another Bollywood film, *Nidaan*, tried to tackle HIV/ AIDS but not with the kind of megastars that *Phir Milenge* had.

References

- Alonzo, A. A. and N. R. Reynolds. 'Social Stigma, HIV and AIDS: An Exploration of a Stigma Trajectory'. Social Science and Medicine 41 (1995): 303–15.
- Asian Age. 'Phir Milenge to Give Voice to AIDS War, says Revathy'. 9 October (2004): 6.
- Baker, R. The Art of AIDS: From Stigma to Conscience. New York: Continuum, 1994.
- Church, Cathy A. and J. Geller. 'Lights! Camera! Action! Promoting Family Planning with TV, Video, and Film'. *Population Reports* J-38 (1989): 1–48.
- Fisher, Walter. Human Communication as Narration. Columbia, SC: University of South Carolina Press, 1987.
- Habermas, Jurgen. 'Civil Society and Political Public Sphere'. The New Conservatism: Cultural Criticism and the Historians' Debate. Ed. S. W. Nicholsen. Cambridge, MA: MIT Press, 1989. 328–87.
- Herdt, G. 'Stigma and the Ethnographic Study of HIV: Problems and Prospects'. *AIDS and Behavior* 5 (2001): 141–9.
- Herek, G. and E. K. Glunt. 'An Epidemic of Stigma: Public Relations of AIDS'. American Psychologist 43.11 (1988): 886–91.
- Horton, D. and R. R. Wohl. 'Mass Communication and Para-Social Interaction: Observation on Intimacy at a Distance'. *Psychiatry* 19.3 (1956): 215–29.



- Kennedy, May G., Ann O'Leary, Vicki Beck, K. Pollard and P. Simpson. 'Increases in Calls to the CDC National STD and AIDS Hotline Following AIDS-Related Episodes in a Soap Opera'. *Journal of Communication* 54.2 (2004): 287–301.
- La Pastina, Antonio C., Dhaval S. Patel and Marcio Schiavo. 'Social Merchandizing in Brazilian Telenovelas'. Entertainment-education and Social Change: History, Research, and Practice. Eds A. Singhal, M. J. Cody, E. M. Rogers and M. Sabido. Mahwah, NJ: Lawrence Erlbaum Associates, 2004. 262–79.
- Malcolm, A., P. Aggleton, M. Bronfman, Jane Galvao, Purnima Mane and S. Verrall. 'HIV-related Stigmatisation and Discrimination: Its Forms and Contexts'. *Critical Public Health* 8.4 (1998): 347–70.
- Piotrow, Phyllis T., D. Lawrence Kincaid, Jose Rimon II and Ward Rinehart. Health Communication: Lessons from Family Planning and Reproductive Health. Westport, CT: Praeger, 1997.
- Piotrow, Phyllis T., R. C. Meyer and B. A. Zulu. 'AIDS and Mass Persuasion'. AIDS in the World. Eds J. Mann, D. J. M. Tarantola and T. W. Netter. Cambridge, MA: Harvard University Press, 1992. 733–59.
- Rogers, Everett M., Peter W., Vaughan, Ramadhan M. A. Swalehe, Nagesh Rao, Peer Svenkerud and Suruchi Sood. 'Effects of an Entertainment-Education Radio Soap Opera on Family Planning in Tanzania'. *Studies in Family Planning* 30.3 (1999): 193–211.
- Singhal, Arvind. 'Overcoming AIDS Stigma: Creating Safe Communicative Spaces'. Journal of Communication Studies 2.3 (2003a): 33–42.
- Singhal, Arvind. 'Focusing on the Forest, Not Just The Tree: Cultural Strategies for Combating AIDS'. *MICA Communications Review* 1.1 (2003b): 21–8.
- Singhal, Arvind, Michael J. Cody, Everett M. Rogers and Miguel Sabido, Eds. Entertainment-Education and Social Change: History, Research, and Practice. Mahwah, NJ: Lawrence Erlbaum Associates, 2004.
- Singhal, Arvind and William S. Howard, Eds. The Children of Africa Confront AIDS: From Vulnerability to Possibility. Athens, OH: Ohio University Press, 2003.
- Singhal, Arvind and Everett M. Rogers. *Entertainment-Education: A Communication Strategy* for Social Change. Mahwah, NJ: Lawrence Erlbaum Associates, 1999.
- Singhal, Arvind and Everett M. Rogers. 'A Theoretical Agenda for Entertainment-Education.' *Communication Theory* 12.2 (2002): 117–35.
- Singhal, Arvind and Everett M. Rogers. *Combating AIDS: Communication Strategies in Action*. Thousand Oaks, CA: Sage, 2003.
- Singhal, Arvind, Everett M. Rogers and Yogita Sharma. 'Communication Strategies to Overcome AIDS Stigma'. *Kentucky Journal of Communication* 22.2 (2003): 79–93.
- Sood, Suruchi and Everett M. Rogers. 'Dimensions of Intense Parasocial Interaction by Letter-Writers to a Popular Entertainment-Education Soap Opera in India'. *Journal of Broadcasting and Electronic Media* 44 (2000): 386–414.
- Taylor, B. 'HIV, Stigma and Health: Integration of Theoretical Concepts and the Lived Experiences of Individuals'. *Journal of Advanced Nursing* 35 (2001): 792–8.
- Valente, Thomas W. and Uttara Bharath. 'An Evaluation of the Use of Drama to Communicate HIV/AIDS Information'. *AIDS Education and Prevention* 11 (1999): 203–11.
- Vaughan, Peter, Allyene Regis and E. St Catherine. 'Effects of An Entertainment-Education Radio Soap Opera on Family Planning and HIV Prevention in St Lucia'. *International Family Planning Perspectives* 26.4 (2000): 148–57.
- Wallack, Lawrence. 'Two Approaches to Health Promotion in the Mass Media.' World Health Forum 11 (1990): 143-55.

Zillman, Dolf and Peter Vorderer, Eds. *Media Entertainment: The Psychology of its Appeal*. Mahwah, NJ: Lawrence Erlbaum Associates, 2000.

Arvind Singhal. *Address:* School of Communication Studies, Ohio University, Athens, OH 45701, USA. [email: singhai@ohio.edu]

P. N. Vasanti. *Address:* Director, Centre for Media Studies, Research House, Saket Community Centre, New Delhi 110017, India. [email: pnvasanti@cmsindia.org]

