Exploring a Model of Symbolic Social Communication

The Case of 'Magic' Johnson

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Abstract

We propose a model of symbolic social communication to explain the process whereby sociocultural identity mediates relationships among receivers. sources and messages to shape message effects. This exploratory study examines how two at-risk groups of African American men responded to various HIV prevention messages delivered by celebrity and professional sources. We interviewed 47 men from a homeless shelter and 50 male college students. Members of both groups were likely to select Johnson as the best person to deliver HIV prevention messages among a list of African American celebrity and professional sources. Results suggest the symbolic meanings embedded in celebrities and message topics are important and enduring influences on message effects. The images and ideas that a source represents are transferred to the advocated behavior, attitude or knowledge change and thus shape how messages are interpreted and received. Further understanding of how culture influences the effects of persuasive messages is critical for the improvement of health-communication campaigns.

Keywords

celebrities, communication, HIV/AIDS, media, source credibility

ON 7 NOVEMBER 1991, Earvin 'Magic' Johnson announced he was immediately retiring from the National Basketball Association because he was infected with HIV, the AIDS virus. The media reacted with grief and salutations, lauding this great player's career and his courage in going public (see Kalichman, 1994, for a more in-depth discussion of media coverage of Johnson's announcement). At the same time, AIDS activists and educators discussed the enormous potential Johnson's announcement represented: here was a bona fide superstar whose celebrity status in the psyche of mainstream USA had the capacity of generating unprecedented publicity. Johnson's disclosure was seen as particularly helpful for efforts to reach heterosexuals and minority groups, especially African Americans.

African Americans are disproportionately represented among HIV-positive/AIDS-infected persons (CDC, 1990; Renzullo, McNeil, Wann, Burke, & Brundage, 1995; Rosenberg et al., 1992), accounting for over 30 percent of the reported AIDS cases (CDC, 1991). An increasing proportion of HIV infection is occurring among African American youths and women (Dicks, 1994). These facts make HIV prevention for African Americans of paramount concern.

Johnson's announcement of his own HIV infection presented a serendipitous opportunity for reaching African Americans, particularly heterosexual men. In fact, research demonstrates the announcement produced immediate changes in perceptions of risk among African American men (Kalichman, Russell, Hunter, & Sarwer, 1993b). The announcement also led to increased public requests for AIDS-related information from hotlines (CDC, 1992; Tesoriero & Sorin, 1992). Kalichman and colleagues (1993b) observed a large increase in inner-city men's interest in obtaining information and number of AIDS-related conversations immediately following the announcement. In addition, numerous studies report increased HIV testing following Johnson's disclosure (Cohn, Miller, Yamaguchi, & Douglas, 1992; Gellert, Weismuller, Higgins, & Maxwell, 1992; Kalichman, 1994; Langer, Zimmerman, Hendershot, & Singh, 1992; Sims, 1991; Tesoriero & Sorin, 1992). It is noteworthy that African American men were substantially more likely to indicate that the disclosure influenced their concern about AIDS (Kalichman & Hunter, 1992).

The African American community, however, is diverse which suggests that not all African American men responded to Johnson's announcement in similar ways. Perceptions of a celebrity and the message he or she is delivering likely differ among various audience subgroups. Our article examines the relationship among celebrity endorsers, AIDS-related health promotion messages and audience members. Specifically, we analyze how two at-risk groups of African American men responded to various HIV prevention messages delivered by celebrity and professional sources.

Sociocultural influences and HIV prevention messages

Discussions of how to reach various target groups for HIV prevention messages typically tout the importance of creating culturally relevant messages. Such assertions rest on the assumption that messages that are tailored to be sensitive and appropriate to a particular group's culture will be more informative, persuasive and ultimately effective (Airhihenbuwa, DiClemente, Wingood, & Lowe, 1992; Bowen & Michal-Johnson, 1990; Dressler, 1991; Jackson, Burns, & Gibson, 1992; Kalichman, Kelly, Hunter, Murphy & Tyler, 1993a; Marin, Marin, Perez-Stable, Sabogal, & Otero-Sabogal, 1990; Mays, 1989; Michal-Johnson & Bowen, 1992; Nickens, 1990). Singer (1991) explains that a group's history, language, values and beliefs importantly influence group members' healthrelated knowledge, attitudes and behavior. In other words, the way people think about and make decisions concerning their health is importantly influenced by the elements of the society and culture with which they identify.

Culture refers to a set of shared behaviors and ideas (Nobles, 1985), in other words, a framework of language, customs, knowledge, ideas and values that provides people with guidelines for interpreting reality and living (Mukerji & Schudson, 1991). Culture is manifest in 'social settings in which a certain reference framework has taken concrete form or has been institutionalized and orients and structures the interaction and communication of people within this historical context' (Servaes, 1989, p. 390). Among African Americans, prominent cultural themes

include historical facts such as abuse and oppression and economic constraints; values such as the church, the family and community; and a shared language (Airhihenbuwa et al., 1992; Bowen & Michal-Johnson, 1990; Duh, 1991; Mays, 1989).

Subcultures frequently exist within broader cultures and may differ in important ways from the primary cultural group. These include age and gender groups who, while incorporating primary cultural themes, focus on other issues such as gender roles or power differentials. Moreover, subcultures may incorporate primary cultural themes, but interpret them as more or less important or entirely different. For example, sociocultural identity has been shown to vary within primary cultures (Aoki, Ngin, Mo, & Ja, 1989; Earls, 1993). Sociocultural identity is 'fluid, situational, and changeable' (Wu, 1990, p. 1), which implies that it forms the context according to which people understand and respond to health-promotion efforts.

Cultural norms defining gender roles, language use, the willingness of partners to talk about sex, as well as partners' social and economic lives, all affect responses to HIVpreventive messages (Aoki et al., 1989; Cochran, Mays, & Roberts, 1988; Marin, Marin, & Juarez, 1990; Mays, 1989; Mays & Cochran, 1988; Singer, 1991). In addition, the way a person views himself or herself in relation to atrisk groups also affects the way he or she responds to information about HIV because of issues relating to guilt, stigma and prejudice (Valdiserri et al., 1989). For example, many African Americans reacted to early efforts at AIDS education with feelings of suspicion and mistrust (Airhihenbuwa et al., 1992; Dalton, 1989), perhaps because of feelings that AIDS was a White gay men's disease (Mays, 1989) and because of distrust of the predominantly White institutions who were conducting the education programs (Dalton, 1989; Mays & Cochran, 1988).

Symbolic meanings of sources and endorsements

The popular press touted Johnson's special ability to reach heterosexual, African American males (cf. Kalichman, 1994). These claims were based on Johnson's image as a great guy, a regular guy (Johnson, 1991). It was thought that

Johnson's positive image, his appealing demeanor, generalized popularity and close connection to his community would transfer to HIV-preventive behaviors, rendering them more viable for straight (heterosexual) Black men. Implicit in such a process is a connection between the content of a health message and the group that is receiving it.

We suggest the phenomenal world is perceived, interpreted and understood by the individual based on the values, beliefs and assumptions of his or her culture. Culture invests experience with a particular set of meanings, including those attributed to sources and the messages they deliver (McCracken, 1986, 1988). McCracken (1989), in discussing celebrity endorsement of products, describes this process as 'meaning transfer'. The celebrity represents a set of 'meanings' which is specified by status, class, gender, age, ethnicity, as well as personality and lifestyle type. The symbolic properties residing in the celebrity move from the celebrity to the consumer good and from the good to the consumer. The social symbolic meanings that a particular celebrity embodies are likely relevant for health-promotion messages he or she might deliver.

Sociocultural factors and perceptions of sources

The source for an HIV prevention message (e.g. Magic Johnson, the Surgeon General or a person with AIDS) has received a lot of attention as a way of rendering the advocacy culturally relevant and attractive to various at-risk groups, and thus more effective. Sources importantly shape the effectiveness of messages, providing the audience with information above and beyond the arguments presented in the message (Hovland, Janis, & Kelley, 1953; Petty & Cacioppo, 1981). For example, the attitudinal effects of communicator credibility, or overall believability of the source, have been extensively studied. Hass (1981) concluded that the 'superiority of high credibility over low credibility' is a 'pervasive finding' (p. 155). Another important attribute of those modeling behavior is attractiveness. Depiction of famous, prestigious or beautiful people is more likely to influence people to perform a certain behavior than will less attractive models (Bandura, 1986). Source similarity, however, also has powerful persuasive impact,

and considerable research demonstrates that when audience members feel that a source is similar to themselves, or to how they would like to think of themselves, they will be more easily persuaded (Perry & Bussey, 1984; Petty & Cacioppo, 1981).

Source attributes are some of the reasons why Johnson was thought to be such an effective source for AIDS risk-reduction messages for African Americans: he's African American, he's straight, he's HIV positive and he's a sports superstar. Perceptions of source attributes such as credibility, attractiveness and similarity are importantly shaped by a person's cultural affiliation. For example, research indicates that African Americans perceive African American male newscasters to be the most credible, followed by White male, African American female and, lastly, White female newscasters (Johnson, 1987).

Fairchild, Stockard and Bowman (1986) demonstrate that African Americans seek out programming that includes representatives of their own ethnic group or portrays ethnically relevant life experiences (Howard, Rothbart, & Sloan, 1978; Hur, 1978). Advertising targeting African American cultural values and using models perceived as similar to observers has been shown to be more effective with this group (Pitts, Whalen, O'Keefe, & Murray, 1989; Rokeach, 1960). It is clear that many African Americans are more likely to attend carefully to HIV prevention messages delivered by people of color than by White, male, middle-class experts (De La Cancela, 1989; DiClemente & Houston-Hamilton, 1989). Furthermore, AIDS-information messages specifically framed within a cultural context have been demonstrated to be more likely to enhance perceptions of risk and subsequent behavior change, including HIV testing, than are untargeted messages (Kalichman et al., 1993).

Differences in how sources are evaluated also occur within ethnic groups. According to Michal-Johnson and Bowen (1992), Black professionals such as teachers or doctors may not be as credible as well-known sports figures to young urban African Americans. Moreover, young urban Blacks of the 'hip-hop generation' reject Black mainstream culture and its messengers (e.g. the Reverend Jesse Jackson) as thoroughly as they reject White mainstream

culture (Tucker, 1992). This demonstrates that within an ethnic/racial group, there are diverse subcultures whose members respond very differently to mass media messages.

Symbolic social communication

We propose a model of symbolic social communication to describe how culture influences the relationships among audience members, sources and messages to shape effects. This model provides us with a way to think about claims made regarding Johnson's particular ability to 'reach' straight African American males. In fact, research demonstrates that in the short term. Johnson's self-disclosure of HIV seropositivity did increase concern about AIDS, interest in getting more AIDS information and concerns about the possibility of an acquaintance contracting HIV, especially among African American men (Kalichman, 1994). Moreover, research indicates that following Johnson's announcement, people who felt more personally involved with the basketball star were more likely to be concerned about AIDS, had greater concern about the risk of AIDS to straights, reported a greater reduction in high-risk sexual behavior and increased condom use and increased their AIDS-related interpersonal communication with friends and sexual partners (Brown & Basil, 1992). Although many of these effects did not persist over time (cf. Kalichman, 1994), these findings reveal that responses to Johnson's announcement were shaped by people's perceptions of the association between themselves and Johnson. This suggests that the extent to which the cultural meanings symbolized by Magic were relevant and desirable importantly shaped his influence.

The preceding review of theory and research suggests that sociocultural factors define what source attributes are perceived as similar, attractive and credible. Previous investigations of the influence of Johnson's self-disclosure have compared African American males to men belonging to other ethnic groups. Racial/ethnic groups, however, are heterogeneous and ambiguously bounded (Barth, 1969; Isajiw, 1980; Smith, 1983). This means that there is a great deal of diversity within African American men. Our study, therefore, examines how two groups of at-risk African American men responded to Johnson as a source for HIV prevention mes-

sages, as well as how these men responded to other celebrity and professional African American sources. In this article, we examine three research questions:

- 1. What is the relationship between the group and the celebrity? We investigate how members of two different groups of straight African American men perceive Johnson as a source for HIV prevention messages. This enables us to determine how audience sub-groups differ in the meanings they associate with a celebrity endorser.
- 2. What is the relationship between the celebrity and the message? We examine how two groups of African American men respond to various HIV prevention messages including those advocating testing and those advocating condom use, and also responses to messages framed in terms of knowledge, attitudes or behaviors. This enables us to ascertain whether subgroups respond differently to diverse messages from the same celebrity endorser. In other words, we examine whether the symbolic meanings associated with the celebrity are better suited for certain messages within specific atrisk groups.
- 3. What is the relationship between the group and the message? We investigate how two groups of African American men respond to HIV prevention messages delivered by a variety of male African American celebrities and professionals (e.g. doctors, ministers). This addresses the issue of how the meanings symbolized by various sources fit with different types of AIDS risk-reduction messages for two African American subgroups.

Methods

Pre-test study

Because we were interested in how culture influences perceptions of message sources, we collected data regarding the types of people African American men think about when asked to list the names of potential African American spokespersons regarding AIDS. We conducted 13 face-to-face interviews with African American men outside a homeless shelter and at a community college. Respondents were asked to volunteer the names of African American men for the following categories: (1) looked up to

and trusted, (2) knowledgeable about AIDS; (3) athletes; and (4) credible AIDS spokesmen. Respondents were also asked to name African Americans who were not committed to the African American community, but were well-known and credible. The results of these interviews were analysed to inform choice of potential sources for HIV prevention messages tested in the study described below.

Participants

In December 1991, 97 African American men were recruited over a five-day period, approximately one month following Earvin 'Magic' Johnson's announcement regarding his seropositivity. Participants were drawn from two populations who were being recruited for ongoing HIV studies in urban Los Angeles. No one selected for this study was at the time enrolled in any other HIV study.

Shelter men Face-to-face interviews were conducted with 47 men from a shelter for the homeless. Previous data collected on other men from the shelter indicated: (1) mean income was \$2-3K per annum; (2) mean education was 11 years of school completed; (3) average 85 percent correct on HIV related knowledge tests; (4) average of 2.2 female sexual partners in the previous month; (5) 63 percent prevalence of ever having had sex with men, (6) 68 percent history of sexually transmitted diseases; (7) 16 percent prevalence of ever using intravenous drugs; and (8) 16 percent HIV seropositivity. Mean age for the men in this study was 35.

College students Paper-and-pencil questionnaires were completed by 50 men enrolled at a southern California university. Previous data on other students in two similar southern California universities indicated: (1) average 83 percent correct on HIV related knowledge tests; (2) average of 2.3 female sexual partners in previous six months; and (3) 17 percent history of sexually transmitted diseases. Mean age of students in this sample was 20.

Procedures

All participants were approached by Black female interviewers who stated they were from the Black Community AIDS Research and Education Project. The men were informed that the survey was anonymous and that they would receive \$5.00 for their participation. Upon consent to participate, the 20-minute interview began or the questionnaire was administered to assess: (1) men's familiarity with Johnson and his personal and professional life; (2) media and interpersonal sources used in information-seeking about Johnson since his announcement; (3) rating of Johnson's credibility as a spokesperson for the African American community on HIV disease; (4) perceptions and characteristics of behaviors that could detract from that credibility; (5) perceptions of the credibility of other Black celebrities and professionals (doctors/ ministers) for HIV prevention messages; and (6) attitudes about ties to the African American community (items drawn from the National Survey of Black Americans [Jackson, Tucker, & Gurin, 1987]).

Results

African American identity

We posit that social and cultural influences shape how people respond to celebrity endorsers and the health-promotion messages they advocate. A strong manifestation of the importance of such sociocultural forces to an individual is the strength of the person's ties to his or her community. In this study, we asked shelter men and students to rate how strongly they identified with the African American community and how important they felt it was to be closely affiliated with this community.

Table 1 demonstrates that students and shelter men had strong bonds with the African American community: both groups reported that over 70 percent of the people they talked to, spent time with and trusted were African American. Although both groups reported that they were strongly connected with their community, the data indicate that students identified more strongly with being African American than did shelter men. Students were more likely to agree that 'being Black is more important than being American' (F(1,95) = 8.14, p < .01), and to report that they had 'been treated badly or unfairly because [they were] Black, (F(1.95)) =7.77, p < .01). Moreover, when asked how they referred to themselves from a list of racial/ethnic labels (e.g. Black, African American, African, American, Black-American), students were more likely to refer to themselves as African American or African (t(81) = 2.13, p < .05) than were shelter men. Students seemed more likely to agree that it was important to affiliate with African Americans. For example, students reported more agreement with statements such as, 'Blacks should shop in Black owned stores' than were shelter men, although this difference only approached statistical significance (F(1,95) = 3.43, p < .06).

Examining the intensity of group members' responses to the African American identity questions reveals that the various dimensions of these community ties were differentially salient. Self-identification ('being Black is more important than being American' and 'referring to self as African American/African') yielded significant between-group differences, whereas items such as voting for Black candidates and shopping in Black-owned stores did not. Moreover, half the students referred to themselves as African American/African; 47 percent of the shelter men referred to themselves as Black-American.

Question 1: The relationship between the group and the celebrity

In order to investigate how members of different sociocultural groups might differ in their perceptions of a celebrity endorser, we examined how shelter men and students differed in how they learned about Johnson's announcement, in their knowledge of Johnson and in their perceptions of Johnson as a source for HIV prevention messages.

The groups did not differ in how they learned about Johnson. All respondents received information from television, approximately 75 percent of both groups received information from the radio and slightly more (77 percent) shelter men than students (66 percent) received information from newspapers. Students, however, discussed Johnson's announcement significantly more than did shelter men (t(96) = 2.16, p < .05).

While all participants correctly identified Johnson as having recently resigned from professional basketball due to HIV infection, students knew more about Johnson's personal and professional life (t(96) = 2.96, p < .01). This four-question index measured knowledge concerning where Johnson and his parents live,

Table 1. African American Identity: Identification with the black/African American community for the two groups¹

Question	Students	Shelter men	
'being Black is more important than being American'	5.9 (1.5)	4.7* (2.5)	
'Blacks should always vote for Black candidates'	3.8 (1.9)	3.5 (2.4)	
'Blacks should shop in Black owned stores'	6.1 (1.4)	5.3 (2.3)	
'Black men should not date White women'	4.0 (2.2)	3.2 (2.2)	
'been treated badly or unfairly because Black' ²	1.9 (0.4)	1.7** (0.4)	
percentage 'referring to self as African American/African'	50	28*	
'percentage of people talk to and spend time with who are African American'	73.4 (21.8)	79.4 (19.3)	
'percentage of people whose opinions you trust who are African American'	78.9 (20.6)	78.6 (23.5)	

^{**} p < .01, * p < .05

where he went to school and his status as a new parent.

Both groups agreed that Johnson was 'a good person to represent and speak on behalf of the African American community regarding AIDS'. On a seven-point scale, shelter men reported higher agreement (M = 6.4, SD = 1.4) than did students (M = 5.8, SD = 1.6), although this difference only approached statistical significance (t(94) = 1.86, p < .06). The groups were similar in their ratings of most attributes regarding Johnson's credibility as an HIV spokesperson. Shelter men, however, rated being infected with HIV as more important for Johnson's credibility (M = 6.4, SD = 1.2) than did students (M = 5.4, SD = 1.9) (t(96) = 2.96, p < .01). Students, on the other hand, were more likely to rate the appointment of too many White advisers to Johnson's Foundation board as detrimental to his credibility (M = 4.9, SD = 1.6) than shelter men did (M = 3.6, SD = 2.6) (t(96) = 2.85, p < .01).

To examine more closely differences in how members of these two groups perceived Johnson as a spokesman for HIV prevention messages, we examined the correlations between perceptions of the source attributes. Table 2 indicates the structure of students' perceptions differed from the structure of shelter men's perceptions. For students, being infected with HIV (a credibility attribute) was significantly associated with two attractiveness attributes (being a basketball star and a TV star) and a similarity attribute (being straight) (average interitem correlation = .43, p < .01). On the other hand, for shelter men, the structure of perceptions was much more diffuse: many of the items were correlated, and there was no clear pattern. Interestingly, although being infected with HIV was associated with the other credibility measure (someone I can trust) (r = .35, p < .05), it was not associated with any other source attribute.

Question 2: The relationship between the celebrity and the message

We argue that a celebrity's specific image and history will render him or her differentially appropriate for various messages among diverse sociocultural groups. To examine this proposition, we investigated how the two groups differed in whether they thought that Magic was a good person to deliver HIV prevention messages relating to both condom use and testing. In addition, we framed these messages in terms of knowledge, attitudes and behavior to help us discern if apart from topic, type of message elicited different responses from the two groups.

We used multivariate analysis of variance (MANOVA) to test whether there were differences between the two groups regarding their likelihood of selecting Johnson for the six HIV prevention messages. Table 3 indicates that overall shelter men and students did respond to Johnson in slightly different ways (F(1,95) = 2.06, p < .06). There was only one significant between-group difference: shelter men were more likely to select Magic for a behaviorally oriented HIV testing message (F(1,95) = 6.67, p < .01).

¹ The first four questions in this table were drawn from the National Survey of Black Americans (Jackson et al., 1987) and measured on a seven-point scale.

² This question was scored 'no' as 1 and 'yes' as 2.

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Table 2. Group differences regarding Johnson's source attributes: Correlations among source questions for students and shelter men

	Students							
	1	2	3	4	5	6	7	8
1. Basketball star	1.00	.71**	.38**	.41**	.16	.06	.36**	.07
2. TV star		1.00	.31	.43**	.23	02	.25	.08
3. Straight/heterosexual			1.00	.34**	.10	00	.01	.11
4. Infected with HIV				1.00	.21	01	.14	.21
5. African American					1.00	.27	.08	.31
6. Someone can trust						1.00	.13	.35
7. Financially successful							1.00	.12
8. Connected to community								1.00
	Shelter men							
	1	2	3	4	5	6	7	8
Basketball star	1.00	.42**	.43**	06	.25	.27	.44**	.34
2. TV star		1.00	.31*	00	.02	.30*	.36*	.33*
3. Straight/heterosexual			1.00	.05	.15	.32*	.43*	.28
4. Infected with HIV				1.00	.12	.35*	.11	.02
5. African American					1.00	.29*	.34*	.29
6. Someone can trust						1.00	.31*	.883
7. Financially successful							1.00	.30*
8. Connected to community								1.00

^{**} p < .01, * p < .05

We also examined within-group differences to determine whether Johnson was better suited for knowledge, attitudinal or behavioral messages for both condom use and HIV testing among shelter men and students. Table 3 reveals that the pattern of results was similar for both groups. For shelter men responding to condomuse messages, the attitudinal message yielded almost three times as many selections of Magic as did the knowledge message (t(46) = 4.36, p < .001) or the behavior message (t(46) = 5.15, p < .001). Likewise, students selected Johnson as a

source more for the attitudinal message regarding condom use than for the knowledge (t(49) = 2.72, p < .01) or behavior (t(49) = 4.26, p < .001) messages. For the HIV antibody testing messages, the two groups also responded similarly. Shelter men selected Johnson about twice as often for the behavioral messages than for knowledge (t(46) = 3.11, p < .01) or attitudinal (t(46) = 4.69, p < .001) messages. Students were also likely to select Johnson more for the HIV antibody testing behavior messages than for the attitudinal message (t(49) = 2.44, p < .001) messages (t(49) = 2.44, t(49) = 2.44

Table 3. Selection of Johnson as a source for HIV-prevention messages: Percent of men choosing Magic Johnson as the best spokesperson for six HIV messages and a control message

Topic and message level	Studen	its	Shelter men		
	Condom use	Testing	Condom use	Testing	
Knowledge	34	22	19	29	
Attitude	57	16	55	23	
Behavior	20	34	12	59	
Control ¹	60		63		

¹ The control question was behavior focused and read 'I can contribute to help educate the black community about AIDS.'

.05), although the difference between selecting Johnson for the behavioral and knowledge messages was not significant.

We also included a single question about contributing to help educate the Black community about AIDS. Johnson was selected by over 60 percent of both groups. Johnson was more salient for this type of indirect, general message than for more direct, specific educational messages.

Question 3: The relationship between the group and the message

We investigated how the two groups of at-risk African American men reacted to other potential sources for HIV prevention messages to examine group differences in the relevance and appropriateness of various celebrities. Respondents were asked to select the 'best person' to deliver HIV prevention messages from a pool of celebrity and professional (e.g. doctors, ministers) African American men. Results demonstrate that Johnson was singularly popular as a source for the knowledge, attitude and behavior messages (see Table 3). Of all the sources tested, Johnson was, overall, the most frequently selected person.

Table 4 presents the two individuals (except

Magic Johnson) selected most often for both condom use and HIV testing messages framed in terms of knowledge, attitudes and behavior. For HIV testing, both groups tended to select 'experts' (e.g. a Black MD or Bill Cosby who plays an MD on TV) for knowledge and attitudinal messages; whereas for condom use, Johnson was the most frequently selected source for knowledge and attitudinal messages. The groups differed in terms of the individuals they selected for the behaviorally oriented condom use message (χ^2 (5) = 19.32, p < .001): shelter men were most likely to select Bill Cosby or a Black MD, and students were most likely to select Arsenio Hall or Johnson. The groups also differed in terms of their preferred sources regarding HIV testing behavioral messages (χ^2 (5) = 11.54, p < .05): shelter men were most likely to select Johnson, whereas students selected Michael Jordan, Magic Johnson and Eddie Murphy.

Discussion

Results generally support the tenets of the model of symbolic social communication which proposes that culture influences message effects by shaping interrelationships among receivers,

Table 4. Selection of alternative sources for HIV-prevention messages: Percent of men choosing other sources as spokespeople for six HIV messages and a control message

Topic and message level	Students		Shelter men		
Testing					
Knowledge	Black doctor	43	Black doctor	38	
	Bill Cosby	12	Bill Cosby	15	
Attitude	Black doctor	35	Black doctor	40	
	Bill Cosby	27	Bill Cosby	21	
Behavior	Michael Jordan	39	Michael Jordan	21	
	Eddie Murphy	20			
Condom use					
Knowledge	Black minister	19	Jesse Jackson	30	
	Jesse Jackson	17	Black minister	19	
Attitude	Michael Jordan	14	Jesse Jackson	30	
	Black minister	12	Michael Jordan	9	
	Eddie Murphy	12	Black minister	9	
Behavior	Arsenio Hall	33	Bill Cosby	29	
	Prince	14	Black doctor	21	
Control	Black doctor	15	Black doctor	17	

sources and messages. We examine this model in the context of celebrity message sources. First, we posit that the way a person receiving the message perceives and evaluates the celebrity endorsing the message is mediated by the person's sociocultural values and beliefs. Second, the congruence between the meanings symbolized by the celebrity and the message he or she is endorsing is also determined by the receiver's sociocultural identity. Finally, the associations and beliefs the receiver has regarding the message topic and content stem from the receiver's relevant social and cultural reference groups.

In this study, we examined how the symbolic social communication model applied to HIV prevention behaviors delivered by a celebrity source (Magic Johnson). We interviewed two atrisk groups of African American men to compare responses of members of two subgroups of an ethnic/racial group who differed in age, education and risk factors (prevalence of intravenous drug use and sex with men, history of sexually transmitted diseases, HIV seropositivity).

The groups were similar in the number and type of information sources regarding Johnson, although they had different levels of knowledge of Johnson's personal and professional life. The groups also differed in their overall assessment of Johnson as a good HIV spokesperson. For most of the source attributes, the groups were similar. Their perceptions regarding the importance of being HIV seropositive and the detriment of appointing a lot of White advisors, however, were different. There was some indication that the dimensions of attractiveness and trustworthiness were different for the two groups. For instance, being HIV positive was associated with positive assessments of Johnson as a spokesperson regarding AIDS among students. In fact, for this group, Johnson's serostatus was clearly related to source similarity and attractiveness attributes. Among shelter men, however, the structure of source attributes was more diffuse. It is likely that, for this group, a general liking for Johnson and regard for his status as a star and success rendered him desirable as a source to endorse AIDS education messages.

The type of HIV preventive strategy advocated and whether the message was framed in terms of knowledge, attitude or behavior also influenced group members' responses to Johnson as a potential message source. Interestingly, both groups had similar preferences as to when Johnson was most appropriate. Students and shelter men selected Johnson over 50 percent of the time for the attitudinal message advocating condom use. This level of selection was exceeded only by the extent to which shelter men selected Magic for the behaviorally oriented HIV testing message. These results reflect the power of realism, especially for shelter men (Mays, Flora, Schooler, & Cochran, 1992). The message 'it is important to wear a condom every time' is one that Johnson can poignantly endorse. Furthermore, a message that says, 'I've been tested for AIDS—just do it' is also a literal reflection of reality for Johnson.

Both groups were most likely to select Johnson as the best person to deliver HIV prevention messages among a list of African American celebrity and professional sources. In addition, shelter men and students selected 'experts' such as MDs, ministers, Bill Cosby and Jesse Jackson for factual and attitudinal messages (the attitudinal messages here were more factually oriented than emotional). For behavior messages, however, the groups diverged and selected socioculturally specific, salient role models. Shelter men selected both role models like Bill Cosby and a Black MD and sports stars like Johnson and Michael Jordan. These choices suggest a more generalized concept who makes a good endorser—people who are strongly identified as credible and/or attractive can deliver any message. On the other hand, differentiated roles models were more apparent among students who selected Eddie Murphy, Prince, Arsenio Hall and Michael Jordan, as well as Johnson, to deliver behavior messages. The students appeared to discriminate between sources depending on the specific message being delivered, selecting more expert sources for informative or attitudinal messages and attractive role models for more behaviorally oriented messages.

We found that the two different sociocultural subgroups differed in their strength of ties of the African American community. Although both groups identify strongly with the African American community and tend to affiliate predominantly with other African Americans, students appear to espouse a more Afro-centric selfimage. For both groups, however, strong bonds with their sociocultural groups likely reinforce group norms and values. This suggests that the symbolic meanings embedded in celebrities and message topics are important and enduring considerations when discussing message effects.

Caveats

This article is exploratory and has many of the problems typically associated with such research. The sample sizes are small and limit our ability to detect differences. The need to be timely resulted in limited pretesting of questionnaires, stimulus materials and procedures. Because of inadequate measurement, questions suffered from low reliability which limited our ability to detect differences. In-depth pretesting is needed when working with groups such as indigent men whose physical environment, educational background and state of mind may not be ideally conducive to survey research. Furthermore, differences in the method of administering the survey, reading it to shelter men and giving it to students to fill out on their own may have resulted in differences in responses (while these were not obvious to us in data cleaning and analysis, they still may exist).

Survey-research methods are limited in their ability to allow us to test fully the model of symbolic social communication. For example, the method of matching sources and messages required the participant to engage in an process where the message was read and the participant chose a picture of the appropriate source. This matching process was more abstract than it need be in a laboratory setting where a participant could, for example, view the celebrity delivering the message on a TV or computer screen.

Future research

This first exploratory study was designed to examine general research questions and to point to directions that could be studied subsequently in a more systematic manner. First, more work is needed to distill the elements of culture that will be most productive for understanding sources and messages. In this study, African American/Black identification, which incorporated issues of racism, affiliation and oppositional culture (Ogbu, 1985) varied between subgroups. It was, however, important for both groups in determining their selection of Johnson and other

sources. The extent and nature of sociocultural identification needs further research.

Second, it appears in this study that the dimensions of attractiveness and trust are key to source appeal. However, it appears that the components of these dimensions differ for various sociocultural groups (or subgroups). Many studies of source issues, however, are conducted with White undergraduates and the presentations of attractiveness and trustworthiness likely reflect the values of this group. The effects of culturally determined perceptions of source attributes on evaluations of messengers and messages need further study.

Third, we suggest that the model of symbolic social communication is dynamic because of the flux of cultural and social norms, mores and fashions. This study was limited to one point in time. We speculate that perceptions of Magic Johnson and his ability to inform African American men effectively about HIV likely differ today from when his disclosure was front-page news. This suggests the utility of longitudinal research to examine the symbolic social communication model over time to determine how a celebrity's history and future affect his or her appeal.

Health-communication implications

While additional research is necessary to explicate and test a model of symbolic social communication further, this study has some important implications for health communication. In much of the public health and communication literature, authors caution about using celebrities because their popularity is unstable and they are differentially effective for diverse groups of receivers (Atkin & Wallack, 1990). We argue that celebrities can be a powerful tool to enhance message-tailoring for specific audience subgroups. The symbolic social communication model suggests that use of celebrities should be based on research about a source's perceived attributes and assessment of appropriate message formats among specific audiences. The effects of celebrities, however, may be related to their personal and professional careers, and these changes may affect campaign outcomes.

This article also points out the role of expert sources. Certain messages, such as those concerning knowledge and attitudes, may be most effective when delivered by experts. Behaviorally oriented messages, on the other hand, may benefit from being delivered by attractive role models who are popular among the target audience. An innovative use of local role models is demonstrated by Kelly and colleagues (1991) who trained local popular individuals to endorse safe sex behaviors to influence community-wide behavior change in a gay community.

The symbolic social communication model posits that meanings are transferred from sources to messages. The process whereby the images and ideas a source represents are transferred to the advocated behavior, attitude or knowledge change is an important mediator of message effects (Appendix A). Audience members' sociocultural identity shapes perceptions of sources and thus how messages are interpreted and received. Further understanding of how various components of culture influence the effects of persuasive messages is critical for efforts to improve health-communication campaigns.

Appendix A

Knowledge, attitude and behavior items

- 1. A person having sex should get tested for the AIDS virus every six months. (K)
- 2. It is crucial to wear a condom every time you have sex. (A)
 - 3. I practice safer sex-you can too. (B)
- 4. Condoms and spermicidal jelly are the best ways to protect yourself from getting the HIV virus sexually. (K)
- 5. Getting tested for the HIV virus is something a smart Black (person) should do. (A)
 - 6. I've been tested for AIDS—just do it. (B)

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