

## External Evaluation of the Southern African Regional Social and Behavior Change Communication Program, as Implemented in Mozambique

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### OVERVIEW AND OBJECTIVES

The Southern African Regional Social and Behavior Change Communication Program, funded by the British Department for International Development (DfID), aimed to reduce HIV infection by increasing health awareness and by facilitating social and behavioral change through the use of both mass media and community-based activities. The Mozambique component of the program was implemented by N'weti - Comunicação para a Saúde!, the Southern African HIV and AIDS Dissemination Service (SAfAIDS), and the Community Media Trust. This evaluation assesses the net effect of exposure to N'weti, SAfAIDS, and CMT interventions on key indicators of HIV knowledge, attitudes, and behaviors.

### DATA AND METHODS

Data for this evaluation come from a nationally representative survey of male and females aged 15-49. A sample of 5,056 men and women was selected through a stratified, three-stage cluster sampling design. A structured, interviewer-administered questionnaire documented respondents' personal experiences with HIV/AIDS, sexual behaviors, HIV testing and treatment and gender-based violence. This study was submitted to and approved by the Comité Nacional de Bioética em Saúde and by the Institutional Review Board of the Tulane University Human Subjects Research Protection Program.

Multivariate statistical methods were used to test for significant differences in key programmatic outcomes between individuals who self-reported exposure to program interventions relative to those individuals who do not report such exposure, controlling for observable characteristics of those respondents. Two different estimation methods were used to calculate program effects: (1) multivariate regression analyses, and (2) propensity score matching (PSM).

### FINDINGS: N'WETI - COMUNICAÇÃO PARA A SAÚDE!

Overall, 9.9% of respondents reported having heard at least one of the OneLove radio programs, while 14% reported having seen a OneLove television program. For both media, exposure was considerably higher in urban areas – 24.6% for radio and 37.6% for television. Only 4.2% and 3.7% of respondents respectively reported having seen a *Love Stories in the Time of HIV* film or the Untold Stories drama series. Exposure to OneLove print media was higher, at roughly one-third of respondents. Overall, 20.1% of respondents, representing approximately 2.4 million people in the country, had been exposed to one of the domestic violence films. Exposure to the domestic violence TV spots was somewhat lower, at 11.9% overall, and 37.0% in urban areas. The most popular TV spot was *Tipos de Violencia*, which was seen by 8.1% of respondents.

Exposure to the OneLove programme had little measurable effect on outcomes related to multiple and concurrent partnerships. For example, 28.6% of males exposed to OneLove radio reported having multiple partners in the past year, nearly identical to the 28.1% of unexposed males ( $p=0.501$ ). For women, the results were similar – 6.9% of women exposed to OneLove radio had multiple partners in the last year as compared with 7.5% of unexposed women ( $p=0.743$ ). Nonetheless, there was evidence that exposure to OneLove media affected community norms; individuals exposed to any OneLove print messages were 8 percentage points more likely to agree that people in their community speak openly about the risk of HIV from multiple partnerships (31.3% versus 22.9%,  $p=0.13$ ). Across all media, those exposed to OneLove media were more likely to know that STIs increase the risk of HIV infection, to know that the risk of HIV infection decreases for circumcised men and to know of a place to get HIV information. These effects appeared stronger for women than men.

There were clear effects of exposure to OneLove media on the use of condoms, including overall use and use with specific types of partners. Among all respondents, those exposed to any OneLove media were approximately 7 percentage points

more likely to have used a condom with a regular partner. Even larger effects were apparent among men. Males exposed to a single OneLove channel were 10.0 percentage points more likely to have used a condom with a regular partner (23.9% versus 13.8%,  $p=.008$ ), while those exposed to two or more OneLove channels were 7.2 percentage points more likely (21.0% versus 13.8%,  $p=.064$ ). Across all media, those exposed to OneLove media were more likely to agree that “condom use in marriage accepted,” with effect sizes ranging from 6-8 percentage points.

While exposure to OneLove media had clear effects on norms and knowledge related to HIV testing, there was no evidence that OneLove affected actual testing behaviors. Respondents exposed to any OneLove print media and a single OneLove media channel were more likely to agree that “community leaders encourage HIV testing.” Exposure to OneLove media was not statistically related with two measures of personal experiences with HIV/AIDS – either supporting someone on ART in the last 12 months or being willing to care for someone on ART – but it was related to knowledge surrounding ART and whether or not a respondent had ever participated in PMTCT program.

Approximately 6.4% of female respondents reported experiencing forced sex in the last 12 months, and 5.4% reported experiencing physical violence. Respondents exposed to the N’weti domestic violence programs are more likely to report that they have done something to help end domestic violence in the community and more likely to report having heard of the new domestic violence law.

#### FINDINGS: SAF AIDS

Approximately 8.0% of respondents in the national sample, representing nearly 1 million Mozambicans, reported exposure to SAfAIDS programs. Nonetheless, familiarity with the SAfAIDS name and logo were low (1.3% and 1.8%, respectively). The sampling plan, however, also included a component of over-sampling in areas targeted by SAfAIDS. In these areas, approximately one-fifth of respondents reported any exposure to SAfAIDS materials. Even in these areas, only 0.1% of respondents had participated in the *Changing the River’s Flow* Programme and only 0.5% had seen the Programme bag. There was little evidence that exposure to SAfAIDS interventions was associated with reductions in multiple and concurrent partnerships (Table 40). Those exposed to SAfAIDS activities were just as likely to have had multiple partners in the past 12 months (19.1% versus 17.8%,  $p=.701$ ) and in the past 3 months (12.3% versus 13.2%,  $p=.773$ ). Similar null results were evident for other behaviours as well, including HIV testing and treatment, condom use, other HIV risk factors, discussions about HIV/AIDS. Further, SAfAIDS exposed women were no more or less likely to report being victims of sexual violence in the last 12 months (5.6% versus 6.7%,  $p=.663$ ). Nor were they more or less likely to report being victims of physical violence (4.7% versus 5.9%,  $p=.444$ ).

#### FINDINGS: COMMUNITY MEDIA TRUST

Approximately 16% of respondents reported exposure to any CMT activity, mostly exposure to *Desafio* (14.4%), with considerably higher exposure (37.5%) evident in urban areas. Approximately 1.9 million people were exposed to at least one CMT intervention activity, while approximately 1.7 million people were exposed to or recalled *Desafio*.

There was limited evidence that exposure to CMT activities reduced HIV prevention behaviors, such as multiple partnerships or condom use. Nonetheless there is evidence that CMT exposure affects norms, attitudes and knowledge. For example, exposure to at least one *Desafio* episode was significantly associated with respondents disagreeing that they need someone to fill the gap. Exposure to any CMT material was significantly associated with knowing that the risk of contracting HIV is reduced for a circumcised man among the total population, among men, and women (treatment effects are between 13 and 14 percentage points for all three groups). Respondents exposed to *Desafio* episodes were more likely to report that they are often/very often sexually satisfied with their regular partners. Women exposed to at least one episode of the program were also more likely to agree that women can ask a regular partner to use a condom (37.8% versus 28.4% among unexposed). While respondents exposed to any CMT activity or any *Desafio* episode were more likely to report discussing their most recent HIV test results with someone (a finding that is significant for both exposure measures among the total population and among women, but not among men), all other outcomes relating to HIV testing were not significant.