

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

Paul Hutchinson, Eva Silvestre, Philip Anglewicz, Evan Cole, and Dominique Meekers

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 Swaziland component of the program was implemented by Lusweti and the Southern African HIV and AIDS Dissemination Service (SAfAIDS). The main objective of the external evaluation was to assess the net effect of exposure to specific components of the program on key indicators of HIV knowledge, attitudes, and behaviors, after controlling for other factors or programs that might also concurrently influence or determine those outcomes.

DATA AND METHODS

Data for this evaluation come from a nationally representative survey of male and females aged 15-49. A sample of 3,972 men and women was selected with assistance from the Central Statistics Office through a stratified, three-stage cluster sampling design. A structured, interviewer-administered questionnaire documented respondent's personal experiences with HIV/AIDS, sexual behaviors, HIV testing and treatment and gender-based violence. Approval for the study was granted by the Scientific and Ethics Committee of the Ministry of Health of Swaziland and by the Institutional Review Board of the Tulane Human Research Protection Program.

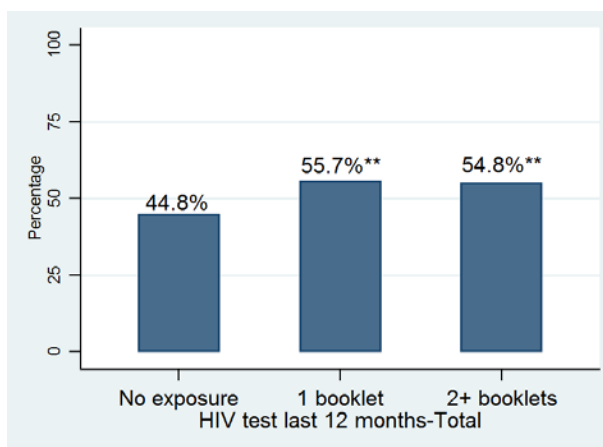
Multivariate statistical methods were used to test for significant differences in key programmatic outcomes between individuals who self-reported exposure to program interventions relative to those individuals who do not report such exposure, controlling for observable characteristics of those respondents.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

FINDINGS: ONELOVE

Overall, nearly 85% of respondents reported that they had been exposed to at least one OneLove media intervention, including 65.1% of men and 69.8% of women who had listened to any of the Lusweti/OneLove radio programs. Exposure to television was lower; 40.8% of respondents were exposed to OneLove television programs, but half of all respondents had seen at least one of the OneLove booklets.

Differential effects of exposure to Lusweti/OneLove on multiple partnership outcomes were evident for males and females. For example, women exposed to one radio program were less likely to have had multiple partners in the last year (3.8% versus 8.4%), and those exposed to any radio or any multimedia were less likely to report currently having more than one partner (e.g. 2+ channels 1.4%, 1 channel 1.5%, no exposure 12.2%). Exposure to two or more radio programs (67.0% versus 60.4%) and one booklet (69.2% versus 60.8%) were positively associated with condom use at last sex, while exposure to two or more radio programs (64.5% versus 55.5%) and one media channel (63.1% versus 53.0%) had positive effects on condom at last sex with a regular partner among the total population. Among men, a dose response

Exposure to print materials and HIV testing in the last 12 months, total population



effect was evident for exposure to OneLove radio on condom use at last sex (2+ radio programs 73.9%, 1 radio program 71.5%, no exposure 57.6%) and on condom use at last sex with a regular partner (2+ radio programs 68.6%, 1 radio program 63.2%, no exposure 53.4%).

Nearly all program exposure indicators registered measurable positive impacts on testing behaviors, including ever being tested for HIV or being tested for HIV in the last 12 months. For example, exposure to 2 or more radio programs was significantly associated with testing in the last 12 months for the total population, while exposure to television was significantly associated with both ever being tested and being tested in the last 12 months for both the total population and for men (49.8% versus 34.2%). In a similar vein, exposure to OneLove media significantly influenced stigma and treatment outcomes. The willingness to care for a person on ART was significantly associated with exposure to both levels of radio (2+ radio programs 91.9%, 1 radio program 92.9%, no exposure 86.3%) and multimedia (2+ channels 90.8%, 1 channel 92.3%, no exposure 85.1%).

There were limited effects of exposure to program media on outcomes related to the exchange of gifts or money for sex, although attitudes towards such exchanges were less favorable among men exposed to the program. For example, among women, exposure to one booklet (49.8% versus 33.8%) and one media channel (41.4% versus 28.8%) was associated with higher reports of receiving gifts in exchange for sex with their last partner.

FINDINGS: SAFAIDS

Exposure to SAfAIDS materials was positively associated with several outcomes related to HIV communication. For example, 59.1% of exposed men reported discussing HIV/AIDS with their children as compared with 40.7% of unexposed men. Approximately 95.6% of people exposed to SAfAIDS materials agreed that one's sex life can improve with communication with a partner, as compared with 92.3% of the unexposed.

Men exposed to SAfAIDS interventions had higher knowledge about PMTCT and ARVs. For example, 70.8% of respondents exposed to SAfAIDS materials knew that ARVs can prevent MTCT during breastfeeding as compared with 55.0% of the unexposed. However, there were no measurable effects of exposure to SAfAIDS activities on knowledge among the female sample. There were also no measurable associations between exposure to SAfAIDS activities and outcomes related to multiple and concurrent partnerships and condom use in either the male or female samples.

With respect to gender-based violence, there was no evidence of differences between the exposed and unexposed in self-reports of experiencing forced sex or physical violence. Nonetheless, the likelihood of reporting such violence (to family, friends or authorities) was higher – 85.3% versus 64.1% - among those exposed to SAfAIDS materials. There were also differences across the genders regarding the activism of community leaders; 79.5% of men agreed that leaders speak out against gender-based violence as compared with 69.8% of unexposed, but this was difference is not significant among women.

CONCLUSION

The effects of the Regional Program interventions varied greatly depending on the nature of the intervention and behavioural outcome examined. The analysis demonstrates that some forms of media may be more appropriate to address specific outcomes or may be more successful with men or women.