

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

Susan Watkins, Paul Hutchinson, Dominique Meekers, and Jennifer Wheeler

## 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 behavioural change through the use of both mass media and community-based activities. The Malawi component of the program was implemented by Pakachere, the Community Media Trust (CMT) and the Southern African HIV and AIDS Dissemination Service (SAfAIDS). This evaluation assesses the net effect of exposure to the partners' interventions on key indicators of knowledge, attitudes, and behaviours of HIV and other risk factors.

## DATA AND METHODS

Data for this evaluation come from a nationally representative survey of male and females aged 15-49. A sample of 5,149 men and women was selected 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. This study was submitted to and approved by the College of Medicine Research Ethics Committee in Malawi.

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). All estimations focused on the effects by type of media component and by a variable capturing the number of media the respondents were exposed to.

## FINDINGS: ONELOVE

Approximately two thirds of the Malawian population was reached by the OneLove program through radio, television or print media. The largest audience was reached through radio, by which an estimated 4,026,211 Malawians were exposed to the OneLove programs.

Exposure to OneLove had effects on several of the key behavioural outcomes under study, particularly condom use. Those exposed to print materials (11.2% versus 6.6% among unexposed) or two or more media channels (10.5% versus 6.0% among those unexposed) were more likely to have used a condom at last sex with a regular partner. Among young women aged 15-24, exposure to radio had a strong effect on this outcome (19.1% among high-frequency listeners versus 8.5% among unexposed), and exposure to print media was associated with condom use at last sex with any partner (26.0% versus 17.3%). Exposure to television was only significantly associated with condom use at last sex among those with multiple partners in the past year (48.1% versus 26.9%). Exposure to print material was the only exposure measure that was associated with HIV testing within the past year (a difference of 5.4 percentage points between exposed and unexposed).

The OneLove program, however, had large and consistent effects on intermediate outcomes, particularly those associated with increased communication regarding HIV. Exposure to the radio programs and exposure to print materials were found to be significantly associated with the discussion of HIV/AIDS within sexual partnerships or with friends/community members (the treatment effects were between six and nine percentage points). Exposure to television was associated with discussion of HIV/AIDS with children (an effect of 12 percentage points). Both exposure to the radio programs and to the television programs were associated with the belief that sexual communication between partners improves one's sex life (effects of 3.3 and 4.3 percentage points, respectively).

## FINDINGS: SAFAIDS

Only a small percentage of respondents reported ever hearing of SAfAIDS (7%), however, nearly 85% reported having heard at least one of the slogans associated with SAfAIDS intervention. Two measures of exposure to SAfAIDS were defined for the analysis: 1) A composite index measuring exposure to each element of the SAfAIDS project (0-5); 2) an index measuring the number of SAfAIDS slogans recognized. Both measures showed the greatest effects of SAfAIDS exposure on behaviours relating to HIV testing, community norms (associated with HIV risk, testing and treatment), attitudes about HIV, and specific knowledge about ART. Notably, there was a 12 to 13 percentage point difference in ever receiving an HIV test for respondents exposed to SAfAIDS programs with the highest intensity (83.0% versus 70.2%) and those who recalled all 4 SAfAIDS slogans (80.1% versus 68.0%) as compared with unexposed respondents. Large effect sizes for the highest intensities of exposure were also found for variables measuring whether leaders within the community: 1) encourage HIV testing (89.0% versus 77.7%); 2) encourage HIV-infected people to get treatment (90.7% versus 76.3%); and 3) speak out against gender-based violence (91.3% versus 79.8%).

While reporting of forced sex was linearly related to exposure to SAfAIDS (a potential consequence of increased awareness of or confidence in reporting violence), high levels of exposure to the SAfAIDS program also increased the likelihood that someone who experienced forced sex reported the incident to anyone, especially a family member. Among respondents who experienced forced sex, only 15% of those who did not recall any slogan reported the incident of forced sex to anyone, as compared with 33.4% who recalled all four SAfAIDS slogans and 37.3% among those exposed to the highest category of intensity of exposure.

## FINDINGS: CMT

The analysis of the effectiveness of CMT interventions focused on two indicators of exposure: 1) intensity of exposure to the Tigonjetse–Beat It! Radio program (4 categories); and 2) a multimedia measure of exposure comparing no exposure, exposure to the national radio only, exposure to the community activities only, and exposure to both. Nationally, 25% of respondents reported listening to Tigonjetse–Beat It! at least once, and XX% reported participating in a community-level activity.

Several indicators of knowledge and improved attitudes regarding HIV showed effects with the highest levels of exposure to the radio program, namely, knowledge that TB can be cured if you are HIV positive (63.3% versus 48.5% among unexposed); knowledge that people on ART need to take treatment for rest of their lives (85.8% versus 76.4% among unexposed), and disagreement with the statement “When you learn that you have HIV, your life is over” (89.8% versus 80.4% among unexposed). Exposure to CMT interventions had limited or inconsistent effects on other indicators and sometimes resulted in effects contrary to the hypothesized direction. Only when respondents were exposed to both the radio program and to the community activities was an effect on uptake of HIV testing found—65.7% of those exposed to both components of the program had an HIV test in the past year, as compared with 59.1% of those unexposed.

## CONCLUSION

While the effects of exposure to the regional program on outcomes of multiple and concurrent partnerships was limited, exposure to the interventions by different partners resulted in strong effects on increasing condom use (Pakachere); uptake of HIV testing (Pakachere, SAfAIDS and CMT); promoting dialogue about HIV (Pakachere); changing community norms and attitudes (SAfAIDS); promoting reporting of sexual violence (SAfAIDS) and increasing specific components of knowledge of TB and ART (CMT).