

## Key Findings from the Swaziland HIV Prevention Information Needs Assessment

The Southern African HIV/AIDS Information Dissemination Service (SAfAIDS), with support from the Knowledge for Health (K4Health) project, conducted a series of national HIV information needs assessments in southern Africa to support the planning and development of a knowledge management program. This program aims to increase the dissemination and use of accurate, evidence-based, and up-to-date information in order to improve HIV prevention in the region. The objectives of the 2009 Swaziland needs assessment were to understand the HIV knowledge management systems and resources already in place in Swaziland, to identify areas for improvement, and to contribute to information-sharing in the region. HIV prevention was a special focus.

The HIV information needs assessment in Swaziland was supported by the NERCHA-funded National HIV and AIDS Information and Training Centre (Info Centre), Swaziland's national resource centre on HIV and AIDS. The results of the HIV information needs assessment have been validated by Swaziland's technical working group on HIV Information and Knowledge Management, and the results will be used to inform on-going activities of the Info Centre.

### Methods

The Swaziland HIV Prevention Information Needs Assessment collected information from October to November 2009 using qualitative research methods. Study participants included government officials, parliamentarians, USAID/PEPFAR staff, regional HIV/AIDS coordinators, community healthcare workers, people living with HIV (PLHIV), members of civil society organizations and networks, youth-focused organizations, and community-based organizations (CBOs). They represented urban, peri-urban, and rural areas of the country. Informal briefing meetings were held with eight senior program managers at key stakeholder organizations, followed by individual interviews with twelve senior technical officers at coordinating and implementing organizations. Interviews were also conducted with two networks that promote media coverage of social issues and



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Colleagues networking and sharing at the Info Centre.

a national network for PLHIV. Three focus group discussions (FGDs) involving twenty-one participants were held with members of PLHIV networks, CBOs, and a consortium of non-governmental organizations (NGOs) involved in HIV activities.

The interview questionnaire and FGD guide explored the following research questions:

- **Information needs:** What are the health information needs of PEPFAR country teams, policy makers, opinion leaders, program managers, healthcare providers, and community health workers in Swaziland? How are they currently meeting these needs?
- **Networks:** What regional and national HIV information networks currently exist and what purpose do they serve? What lessons can be drawn from these networks?
- **Technology and tools:** What are the most promising technologies and tools to reach these audiences? What channels are organizations currently using to communicate with their staff, colleagues, partners, and clients?
- **Infrastructure:** What level of Internet access exists in Swaziland, and how does it vary within the country? What about mobile phone access?
- **Key stakeholders:** Who are the key HIV information stakeholders and opinion leaders? What topics are they most interested in?

## Findings

### Information needs

To improve their work, study participants expressed a desire for HIV information that is up-to-date, user friendly, contextualized, trustworthy, and practical rather than theoretical. In addition, policy makers and opinion leaders want information that is sensitive to the local culture since they use it to set standards and draft legislation. Program managers, healthcare providers, and community health workers stress the importance of convenient and accessible information. Funding partners believe more information is needed on what activities are taking place and who is funding them. In the few months preceding the survey, organizations and their staff were more likely to have sought information on male circumcision than any other HIV prevention topic.

### Information seeking and sharing

Most study participants use email to access information on HIV prevention, care, treatment, and support. They also look for information on the Internet, seek out information at meetings, and invite experts to speak at their organizations. Some turn to national structures such as the National Monitoring and Evaluation Office for information. A few have access to an intranet within their organizations.

Information sources vary somewhat by work setting. Donors primarily rely on colleagues, the Internet, and local network meetings for current, work-related information. Implementers seek information from a wider array of sources including colleagues, the Internet, manuals, textbooks, workshops, and meetings.

In most organizations, the first people to get new information are strategically positioned as directors, monitoring and evaluation officers, and strategic information officers. These individuals actively seek out information in order to provide direction to the organization on new developments. Most disseminate what they learn by email.

Although most people prefer receiving health information by email, SMS text messaging is actually the most common information delivery mechanism. All staff members have a mobile phone to access text messages. Technical specialists and health staff prefer receiving information at meetings. To share the latest HIV prevention information with colleagues, most use email, though some prefer passing along information at regular meetings. The most common way to share information with colleagues or staff members in remote locations is by telephone, or if that is not possible, in meetings. Mobile phones are considered the best way to communicate important information to staff in remote areas.

According to study participants, presentations are the best way to disseminate information within an organization because they give people an opportunity to ask questions and to get clarity on difficult issues. Brochures, fliers, and job aids are also recommended.

All of the organizations represented in the needs assessment rely on print materials to share information, including books, newsletters, magazines, IEC materials, reports, posters, brochures, and flyers. A few also employ videos, DVDs, and CD-ROMs. Selected organizations use flip charts to reach target audiences.

"I think for me it's very important that we improve IEC availability as we know where the resource center is because we tend to have no IEC, then now its World AIDS Day we produce IEC but there is no IEC for the rest of the year. Like when I want prevention IEC, where do I go, when I want PMTCT where do I go, when I want IEC on whatever is there where do I go, is it really available?"

— Key informant interview

### Barriers to accessing and applying information

The weak reading culture in Swaziland makes it difficult to disseminate written information. The fact that most HIV information packages are in English and use medical and technical terminology exacerbates the problem, creating substantial barriers to accessing and applying HIV information. Using the local language (siSwati) instead of English is an important way to make HIV information materials accessible to end users. In parts of the country near the border with Mozambique, study participants also recommend using Portuguese.

"...I feel the information should be straight to the point and also be graphically oriented because even though we are professionals, one cannot escape the fact that reading for some of us is a difficult task. The documents should be user friendly and encouraging to read for everyone to easily get the latest HIV information."

— Focus group discussion respondent

While most study participants said they would prefer to use the Internet for information sharing, not everybody has access. The managing offices of all of the organizations represented in the needs assessment have Internet connections, but lower-level coordinating offices generally do not. Internet access also suffers from frequent power interruptions.

In contrast, everyone has a mobile phone which they use for multiple purposes including text messaging, verbal communication, and, on occasion, accessing the Internet. However, airtime is expensive, which may discourage people from sharing information over mobile phones. In fact, the lower cost of email is one reason people cite for using email rather than mobile phones for information sharing. Study participants also complained that organizations are not

always willing to share information with one another and that research conducted in Swaziland is not routinely disseminated within the country. However, simple lack of time may be an even greater constraint for accessing the latest information, including seeking information from colleagues.

Information sharing within organizations suffers because staff members who attend workshops are not given sufficient time to share what they have learned with co-workers. Applying new information at work also is a challenge given heavy workloads. In addition, new information tends to arrive in the middle of work plans and budgets, so there is no demand to report on it and hence little motivation to apply it.

Very few organizations encourage staff members to update their knowledge. Staff turnover is high, and once people are trained with the latest information, they tend to look for jobs at a better paying organization. Study participants noted that the same individuals always attend conferences—people who do not usually work in programming or implementation. Most study participants said they were part of the review process for national training manuals and guidelines, and they pointed out that everyone would eventually be updated because the government is standardizing service delivery.

### **Developing information resources**

Most of the organizations represented in the needs assessment develop HIV information resources as part of their work including posters, pamphlets, and flip charts. The exceptions are organizations that coordinate rather than implement HIV activities. The resources produced cover a wide range of HIV prevention topics including male circumcision, prevention of mother-to-child transmission, HIV testing and counseling, multiple concurrent partnerships, abstinence for youth, positive prevention, infection prevention, and post-exposure prophylaxis.

One of the biggest challenges in developing HIV information resources is the need to translate information from English into siSwati. Translating HIV terminology without changing the meaning is especially difficult. Another challenge is organizations' unwillingness to support one another by sharing the latest information. Organizations find it difficult to exchange information both because they do not attend regular meetings together and because of limited funds. Study participants suggested that a strong coordinating body with the authority to convene all HIV partners could facilitate information sharing. Study participants also thought that technical assistance could facilitate the development of HIV information resources by ensuring that there was a person dedicated to doing the necessary research and making sure those materials could be understood by the target audience.

All of the organizations also adapt HIV information resources—often from international organizations such as the World Health Organization and UNAIDS—to fit



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Dignitaries at the launch of the Swaziland Info Centre.

local circumstances. According to study participants, the key challenge is localizing the messages that need to be packaged. They believe that technical assistance, financial support, and capacity building would facilitate the adaptation process.

### **Networks**

Most study participants belong to national networks covering HIV-related issues, and some give guidance to those networks. Some of the organizations represented in the needs assessment are affiliated with regional and international networks, benefitting by receiving new information as soon it becomes available, and in some cases, by receiving technical support. Most individuals have not encountered any barriers to participating in local or online network events, although some preferred not to discuss this issue. Similarly, most organizations have not experienced any challenges participating in or benefiting from a network.

### **Key stakeholders**

Key stakeholders of information sharing and dissemination range from donors to implementers, and most of them are interested in HIV prevention information. Swaziland has a coordinating body known as the Swaziland Behaviour Change and Communication (SBCC) committee, which is a national clearinghouse for this kind of information. However, implementing partners such as NGOs tend to bypass established structures and use information from other countries as-is, without sending it to the SBCC committee. Local networks also help communicate standardized information. Health professionals are key stakeholders at the implementing level.

## **Implications and Recommendations**

Organizations focused on HIV-related activities in Swaziland are looking for up-to-date, evidence-based information that can help reduce the HIV infection rate. They also want to learn about new developments in a timely manner. Study participants made the following series of recommendations

to improve access to the latest HIV information, to promote information sharing between and within organizations, and to broaden the dissemination of HIV prevention information.

### ***Repackage content***

Most HIV information arrives in English, using highly technical terminology and complex language that is not suitable for most healthcare workers or the broader population in Swaziland. Organizations need to repackage this content and produce user-friendly information resources on HIV prevention that can be easily digested by a broad audience. Such resources should employ simple language, keep technical terminology to a minimum, and translate information into siSwati and where needed, Portuguese.

### ***Strengthen electronic communication systems***

Weak infrastructure limits access to the Internet, frustrating efforts to both access and share new HIV information electronically. Organizations need to make the Internet accessible for all of their offices, including lower-level outposts. Mobile phones offer a highly effective, but expensive way to share information, especially with staff in remote locations. Organizations should consider how they can address the high cost of airtime, perhaps by supplying staff members with mobile phones that come with a certain amount of prepaid minutes.

### ***Promote internal information sharing***

Staff members receive valuable new HIV information when they attend conferences and workshops. The best way to exploit this resource is to encourage them to share the information with co-workers and to apply it on the job. Organizations need to set aside time after staff return from workshops so they can teach their colleagues what they have just learned. They also need to offer staff members the support they need to apply the new information to their work.

### ***Strengthen a central resource center***

In 2007, NERCHA, with technical support from SAfAIDS, established a National AIDS Information Centre in Manzini. The Info Centre, as it has become known, provides a valuable resource to program managers, academics, students, and community based organizations who are implementing HIV prevention, care, or treatment initiatives. While the Info Centre is recognized as a place to seek and share HIV information, its central location limits its reach, as many

people who need the information are unable to visit in Manzini. For this reason, it should develop and implement strategies to reach out to communities. Study participants strongly believe that there should be one central place where people can go to access HIV information.

It was also highlighted that the central resource center should play a role in standardizing and disseminating HIV information throughout the country.

### ***Disseminate local research***

People inside Swaziland may be the last to learn about research studies conducted in the country. Study participants recommend establishing a mechanism to track HIV/AIDS studies that take place in Swaziland and ensure that the findings are disseminated systematically within the country before they are reported and published internationally.

### ***Strengthen national HIV information coordinating mechanisms***

There are many organizations at work in Swaziland to combat the HIV epidemic, but they rarely share information or coordinate their efforts. Currently, there is a committee to guide the development of social behavior change information, and a technical working group on HIV information and knowledge management. These groups have been functioning at national level for several years, though a number of local organizations were not aware of their function or how to contact these committees. With links to both committees, the Info Centre can play a key role in collecting as well as guiding the production of high quality materials for Swaziland. The National AIDS Information Centre, with support from NERCHA, can play a stronger role in coordinating and guiding organizations involved in the development and dissemination HIV prevention information.

### ***Strengthen networks***

Although needs assessment findings suggest the importance and potential benefits of joining a network, existing networks receive little recognition or support. Recommendations include formalizing and recognizing existing networks, funneling technical and financial support to them, and building links between networks.

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“...having a central place where things come in and then have a well coordinated way to get that information back [out]... you know, coming and going.... If that principle were adopted, it doesn't matter whether [there] is texting or computers ... or door-to-door talking, you know, so as long you know what the model or the system is supposed to be, then you can design the tools and go on with anything.”

— Key informant interview