

PD-ABG-717
84211

Semiannual 10

April 1, 1992 - September 30, 1992

2-4-93

Semiannual 10

April 1, 1992 - September 30, 1992

A I D S C O M

AIDSCOM

The Academy for Educational Development
1255 23rd St., N.W., Suite 400
Washington, DC 20037
Telephone: (202)862-1900
Fax: (202)862-1911

Project No. 936-5972
AIDS Technical Support:
Public Health Communication Component
Contract No. DPE-5972-Z-00-7070-00
Office of Education, Health, and Population
Bureau for Research and Development
Agency for International Development

AED

Table of Contents

Table of Contents	i
Common Abbreviations	iii
Executive Summary	1
Highlights	2
Program Close-out	3
Financial Analysis	3
Management and Administration	5
Project Summary	7
Research Program	9
Disseminating Findings	9
Supporting Theoretically-based Behavior Change Research	11
Analyzing Data and Writing Reports	12
Instrument Development	19
Data Archives Update	19
Field Data Collection Completed	19
Drafting Peer Reviewed Articles	19
Future Activities	20
Documentation and Dissemination	21
Africa	25
Highlights	28
Country Achievements	28
Ghana (Emphasis Country)	30
Malawi (Emphasis Country)	31

Republic of South Africa (Emphasis Country)	34
Swaziland	38
Tanzania(Emphasis Country)	39
Uganda (Emphasis Country)	41
Zambia (Emphasis Country)	43
Asia and the Near East	45
Highlights	47
Country Achievements	48
Indonesia	49
Philippines (Emphasis Country)	52
Morocco	56
Latin America and the Caribbean	59
Brazil (Emphasis Country)	64
Colombia	66
Dominican Republic (Emphasis Country)	67
Eastern Caribbean (Emphasis Country)	69
Ecuador	72
El Salvador	73
Jamaica (Emphasis Country)	74
Mexico	76
Appendix A: Diffusion Activities	77
Africa Diffusion	77
Asia Diffusion	79
LAC Diffusion	80
Appendix B: International Travel	83
Appendix C: Subcontractor Reports	85
Center for International Health and Development Communication Annenberg School of Communication University of Pennsylvania	87
Center for Communication Programs School of Hygiene and Public Health The Johns Hopkins University	89
Porter/Novelli Omnicom PR Network	91

Common Abbreviations

AED	Academy for Educational Development
ASC	Annenberg School for Communication
CBO	Community-based Organization
CDC	Centers for Disease Control
JHU	The Johns Hopkins University
KABP	Knowledge, Attitudes, Beliefs, and Practices
KAP	Knowledge, Attitudes, and Practices
MOE	Ministry of Education
MOH	Ministry of Health
MTP	Medium-term Plan
NGO	Non-governmental Organization
PAHO	Pan American Health Organization
P/N	Porter/Novelli
STD	Sexually Transmitted Disease
WHO/GPA	World Health Organization/Global Programme on AIDS

Executive Summary

The AIDS Public Health Communication Project (AIDSCOM) completed its final phase of full-scale field work during the six month semiannual period covered by this report. Long-term behavioral interventions and related communications programs were completed in seven emphasis countries: Brazil, Dominican Republic, Ghana, Jamaica, Mexico, Philippines, and Zambia. Program evaluations, data analysis, and technical assistance will continue during the next six months in the remaining five AIDSCOM emphasis countries: Eastern Caribbean, Malawi, Tanzania, Uganda, and the Republic of South Africa. The project has provided 26 other countries with technical assistance since 1987.

This semiannual period has provided AIDSCOM further opportunity to develop, test, and refine the application of the Public Health Communication Framework (PHC) to HIV/AIDS prevention and control. The PHC concept draws upon and integrates the Agency for International Development's (A.I.D.) successful experiences in development communication and social marketing and focuses on planning, intervention, monitoring, and evaluation. During the previous six months, AIDSCOM focused on an analysis of PHC related to program effectiveness, especially with regard to behavior change interventions and their impact.

Results of the ongoing program analysis strengthen the project's conviction that behavioral and operations research must form the foundation for communication strategies to change behavior. The project continues to demonstrate that full involvement of the

target population significantly increases the effectiveness of behavior change interventions.

AIDSCOM interventions have illustrated how different populations can be reached, engaged, and persuaded to consider and to adopt behavior change for HIV prevention. The lesson is clear that although a general methodology appears to be applicable to most situations and populations, there is no one intervention strategy or communication message that is applicable to all members of target populations.

Given the demand for specialized applications of PHC and other behavior change methodologies, AIDSCOM has emphasized skills transfer and institutional support in all its emphasis countries and, to the degree possible, in the other countries that have received technical assistance. AIDSCOM has helped form non-governmental organizations (NGOs), provided funds and technical support to existing NGOs, established contractual relationships with private sector concerns, and collaborated with host governments to integrate these activities into national HIV/AIDS prevention programs.

During the remaining 12 months of the project, AIDSCOM will shift its focus from providing in-country technical assistance to data and interpretive analysis of the interventions and lessons learned through five years of experience with HIV/AIDS control. Project personnel anticipate a particularly valuable opportunity to publish an extensive collection of peer review journal articles, internal occasional papers, and a series of reports from the field, in addition to a final project report.

■ Highlights

Following are selected AIDSCOM highlights from April 1, 1992 through September 30, 1992.

Public Health Communication Manual

AIDSCOM submitted a review draft of the *Public Health Communication Manual* to A.I.D. colleagues and contract officers for comments and recommendations. The 200-page draft document presents 11 chapters, including three introductory chapters that review health promotion strategies, the Applied Behavior Change (ABC) Framework that has guided AIDSCOM interventions, and research methods, outputs, and lessons learned through the project. An independent reviewer from Stanford University, hired by A.I.D., provided an extensive examination of the draft text and offered several helpful recommendations. AIDSCOM has incorporated many of the suggestions, and will complete a final draft for review by A.I.D. contract officers. AIDSCOM/AED staff, with their colleagues at A.I.D., will also consider the most suitable and useful means for producing the publication.

Women Negotiate Safer Sex

As part of the Women in Development (WID) Project, AIDSCOM research staff helped complete three major research activities to assist women who must influence their partners' behaviors to ensure their own protection from HIV and sexually transmitted diseases (STDs).

- Data from a Phase I qualitative survey of 40 female insurance workers in Dar es Salaam, Tanzania, were analyzed and used to develop a Phase II quantitative survey.
- The Phase II quantitative survey of 194 female insurance workers in Tanzania was administered and analyzed.
- A Phase I qualitative survey was conducted with 40 married women attending a family planning clinic in Jakarta, Indonesia.

Findings from this research have more clearly identified the factors that influence women's risk of HIV infection and the strategies for empowering them to reduce that risk.

Diffusion Activities Accelerate

A primary emphasis for AIDSCOM during this period was to ensure that research findings and lessons learned during the previous five years of project activity be documented, published, and distributed for use by various audiences. An AIDSCOM paper, "AIDS Knowledge, Attitudes, Beliefs, and Practices (KABP) in Two Caribbean Countries: A Comparative Analysis" was accepted for publication by the *Journal of Applied Social Psychology*. In addition, the project published a series of reports from the field, *Preventing AIDS: Strategies that Work*, and a series of *Occasional Papers*. Publication under both these series will continue during the next reporting period.

International AIDS Conference

Four AIDSCOM staff from Washington, D.C., participated in the eighth annual international conference on AIDS, held in Amsterdam, The Netherlands. Abstracts of research conducted in Brazil, the Eastern Caribbean, and Ghana were presented in five poster presentations.

Collaboration in South Africa

AIDSCOM and A.I.D.'s relatively new AIDSCAP Project have cooperated to ensure continuity for an effective program of technical assistance to NGOs in South Africa. With buy-in funds from AIDSCAP, the AIDSCOM resident advisor now represents both projects and is collaborating with AIDSCAP to establish new HIV/STD prevention programs. During this period, 17 representatives of NGOs in South Africa were sponsored for travel and participation in national and international AIDS conferences and tours of African AIDS programs. A focus of the South African program is the development of an AIDS Resource Center for use by NGOs.

Counseling Program Thrives

The Indonesian Medical Association (IDI), with technical assistance from AIDSCOM, developed a diverse and culturally appropriate HIV counseling training program. IDI tested and translated an AIDSCOM-developed counseling training manual into Bahasa Indonesia. In addition, a train-the-trainer program has reached 69 participants from 14 regions of the nation. IDI successes have been complemented by a newly-established AIDS telephone hotline and the AIDS Counselors Association. These

activities have reached more than 3,500 individuals with HIV/STD prevention education messages and interventions.

Jamaica Targets Casual Relationships

The third in a series of national mass media HIV/AIDS prevention campaigns, the "Keep On Keeping It On" campaign, launched in September 1992, is the first to target a single behavior—consistent use of condoms in casual relationships. During the mid-1980s, many national programs in the Latin America/Caribbean region mounted information-based HIV/AIDS campaigns. In several of these programs, AIDSCOM successfully encouraged national planners to recognize that "education is not enough." As a result, more recent campaigns have been based on behavioral research that attempts to identify motivations for and resistance to behavior change among given populations. Jamaica's campaign is notable for its strong commitment to incorporate and integrate interpersonal communication into the mass media campaign.

Program Close-out

AIDSCOM proceeded with plans for program close-out during this semiannual period, with special emphasis on completing most country programs and contract deliverables related to technical programs.

- AIDSCOM participated in an extensive A.I.D. evaluation of AIDSCOM and AIDSTECH. Staff met with A.I.D. contract officers and with the evaluation team hired by the Agency for a general orientation to the scope of work for the project. In addition, AIDSCOM assembled the large number of documents requested by the evaluation team to provide a review of the goals, objectives, and programs of four representative emphasis countries. AIDSCOM's director also met with the member of the evaluation team who reviewed the fiscal and program management of the project. Presentation, discussion, and finalization of the evaluation team's report is expected

during the first month of the next semiannual period.

- The number of technical and administrative staff positions in Washington, D.C., and in field offices, was reduced to the level previously approved by A.I.D.
- Technical activity was virtually completed in all countries where AIDSCOM had conducted programs except for the following sites, approved by A.I.D. for close-out during the next two semiannual periods: the Eastern Caribbean, Malawi, Morocco, Tanzania, Republic of South Africa, and Uganda.

Anticipated close-out activities during the next six months include:

- completing the Final Project Report, the content outline of which has been approved by A.I.D.;
- finalizing country financial reports, pending submission of invoices and documentation from various vendors; and
- completing and receiving approval for all other project deliverables.

Financial Analysis

AIDSCOM'S total obligated funds for September 1987 to August 1992 were \$24,292,959, of which Central Obligations totalled \$10,057,328 and Mission buy-ins and Regional Bureau obligations totalled \$14,235,631. Total expenses through August 31, 1992 were \$21,073,190. The project ceiling is \$24,604,084. It is anticipated that there will be no further obligations of funds and that AIDSCOM will complete all remaining activities with the funds obligated to date.

Management and Administration

During this semiannual period, AIDSCOM management staff guided the project through a transitional phase toward project close-out. All contract deliverables and agreements with U.S.-based and local country subcontractors were reviewed to ensure that all requirements were being met and would be completed on schedule. Final contract amendments were drafted and reviewed or signed with AED's primary subcontractors (Porter/Novelli, the Johns Hopkins University, and the University of Pennsylvania). Local country subcontractors were contacted for concurrence in closing accounts, according to A.I.D. regulations.

Project staff maintained regular and frequent contact with contract monitors at A.I.D./Washington, including participation at monthly A.I.D. management meetings. As mentioned earlier, staff assisted with the A.I.D. evaluation of AIDSCOM activities through consultations with the external evaluation team.

AIDSCOM staff continued to coordinate the project's close-out activities with the AIDSCAP Project in those countries where collaboration was pertinent. AIDSCOM has made available its resource materials and professional articles to A.I.D./W and to AIDSCAP.

As AIDSCOM approached its final year of operation, a few key personnel changes required shifting in staff responsibilities with some increased difficulty in meeting earlier projected activity timelines. During this period, Michael Helquist became Project Director, following his position as Deputy Director. Ann Jimerson was promoted to Deputy Director; previously she served as LAC Regional Coordinator. Other AED staff have assisted AIDSCOM with fulfilling its goals and project requirements.

Project Summary

In 1987, the United States Agency for International Development (USAID) initiated the AIDSCOM Project to research and develop communications strategies for HIV prevention in the developing world. The Academy for Educational Development in Washington, D.C., received the contract to implement the new project under Contract number DPE-5972-Z-00-7070-00, AIDS Technical Support: Public Health Communication Component. The Academy's partners in this endeavor are the Johns Hopkins University, Porter/Novelli, the University of Pennsylvania's Annenberg School of Communication, and the PRISM/DAE Corporation.

AIDSCOM is an initiative of the Offices of Education, Health and Population of the Bureau for Research and Development of USAID. The project relies on the shared resources of USAID's Bureau for Research and Development, its regional bureaus, and country USAID Missions to assist national AIDS committees in their HIV prevention efforts. AIDSCOM builds upon USAID's successful experience with public health communication, social marketing, and disease prevention to create a framework uniquely suited to HIV prevention needs in country-specific contexts. AIDSCOM works closely with AIDSTECH, USAID's program of general technical support, to complement the World

Health Organization's leadership in global HIV prevention and control activities.

The purpose of AIDSCOM is to research, develop, and evaluate a range of effective public health communication strategies and methods for the prevention of HIV infection and AIDS in developing countries. AIDSCOM applies and further develops the use of behavioral research and communication methodologies such as media campaigns, telephone hotlines and educational materials, prevention counseling, and condom marketing to inform people about HIV infection and to understand, motivate, and support the process of adopting specific risk-reduction behaviors to slow the spread of HIV.

Since 1987, AIDSCOM has conducted assessments of HIV prevention opportunities and programs in some 67 countries worldwide and implemented extensive technical assistance in 42 of those countries. AIDSCOM assists governments and a wide variety of non-governmental and private organizations throughout Africa, Asia, the Caribbean region, Latin America, and the Near East. AIDSCOM's emphasis countries include Brazil, Dominican Republic, Eastern Caribbean region, Ghana, Jamaica, Malawi, Mexico, Philippines, Republic of South Africa, Tanzania, Uganda, and Zambia.

Research Program

A IDSCOM research activities during this reporting period focused on:

- discussing AIDSCOM research results at two international conferences,
- providing technical assistance to program staff in conducting theoretically guided research to design and evaluate interventions,
- analyzing data and writing research reports,
- developing instruments,
- continuing to define available and new SPSS data sets for quantitative studies carried out worldwide, and
- drafting articles for publication in peer reviewed journals.

■ Disseminating Findings

Research findings were disseminated through presentations at two international conferences: the VIII International Conference on AIDS, in Amsterdam, The Netherlands, July 19-24, 1992; and the Congress of Iberian-American Psychology in Madrid, Spain, July 6-10, 1992.

AIDSCOM staff prepared and discussed five posters at the **VIII International Conference on AIDS**.

- *Policy and Controversy in Condom Marketing Campaigns*, M. Helquist (presenter), A. Schneider, C. Francis, S.E. Middlestadt, M.A. Eustace.

This poster described the development of a condom promotion campaign that used mass media to target

sexually active youth in three Eastern Caribbean countries. Analyses revealed a high degree of sexual activity among youth, parental disapproval of condom use, and parent's desire to protect their children. A radio, print, and interpersonal campaign targeted parents with the message, "When you can't protect them anymore...condoms can." Parents were urged to talk with their teenagers about sexual responsibility and safer sex. Much public discussion and controversy resulted. After three months, campaign impact was studied through a general population survey in St. Vincent and the Grenadines (n=300). Results of the survey revealed high recall (greater than 70%) of and positive response to public discussion about the campaign. There was strong evidence that the general public approved of the campaign and that it had increased discussion about AIDS and sex between parents and children. Similarly, qualitative research confirmed that the campaign was viewed with high regard.

- *Street Outreach to Contact Bisexual Men*, S.E. Middlestadt (presenter), R. Parker, D. Zucker, N. Costa, and P. Longo.

This poster reported on the feasibility of contacting bisexual men through street outreach, studying their sexual behavior and self-identity, and comparing their sexual activity with that of homosexual and heterosexual men. Brief street interviews were conducted with 2,236 men intercepted at five locations in Rio de Janeiro, Brazil. The men were asked with whom they had sex during the last year (men and women, men only, women only), how frequently they used condoms, and to describe their sexual identity. Twenty-one percent of the sample

had sex with men and women, 14 percent with men only, 58 percent with women only, and 7 percent had no sex. The three groups of men differed in their use of condoms. More bisexual men than heterosexual men "always" used a condom when they had sex with women during the past month. Similarly, more bisexual men than homosexual men "always" used a condom when they had sex with men.

The research concluded that contacting men at cruising locations is two-to-three times more efficient than at other street locations as a channel for reaching bisexual men for either research or intervention purposes. Further, bisexual men and their male and female partners are at high risk of HIV and represent an important mechanism for spreading HIV to women in Brazil. While these men appeared to be aware of their risk and were using condoms to some extent to protect themselves and their partners, risk reduction programs are needed that specifically target this population.

■ *Integrated Strategies Targeting Female Sex Workers and Clients in Rio de Janeiro*, N. Costa, D. Zucker (presenter), C.D. Guimaraes, E.F. Coelho.

This poster described the development of integrated communications strategies to promote safer sex behavior and condom use among female sex workers and their customers in ways that are compatible with a pleasure seeking environment. Suggestive posters and condom displays were designed and a community radio system was created to reach both the women and their customers. Planning and execution of the program were carried out by/with the sex workers, with community support. A knowledge, attitudes, and practices (KAP) survey, using focus groups, a questionnaire, and condom use audit cards, both before and after the interventions, was used to evaluate the campaign. Survey results indicated a marked increase in condom use after the campaign. It appeared to have lessened the negative image associated with condom use. A compilation of data from condom use audit cards indicated that customer's use rose from 59 percent to 80 percent during 8 months. The posters, displays, and radio program were considered important in effecting changes. They were thought to be particularly

effective because the messages had a humorous tone and were in local language. This intervention provided women with a medium they could control and which is virtually self-sustainable through the sale of advertising to local businesses. The program also generated interest among state health officials, celebrities, and politicians who wish to contribute to or participate in AIDS prevention programs.

■ *Evaluation of a Workplace-Based Peer Education Program in Uganda*, S. McCombie (presenter), F. Rwakagiri, S. Bukombi.

This poster described an impact evaluation of a Ugandan program to train peer educators to disseminate information about HIV/AIDS prevention and promote sexual behavior change. A dramatic film, *It's Not Easy*, was produced to be used as part of the program. Between March 1990 and October 1991, three KAP surveys related to HIV/AIDS were conducted at eight work sites. The 1,599 persons (predominantly urban and educated) were interviewed in English, Luganda, or Swahili. Respondents from sites where more than 50 percent of employees reported exposure to the program were significantly more likely to have used condoms during the last two months than those from sites where less than 50 percent had been exposed. In an analysis of individual exposure to the program, attending talks and seeing the film were associated with intervening knowledge that predicted condom use: 1) knowledge about AIDS transmission routes and 2) knowledge about the incubation period of the disease. The program was associated with increases in knowledge, changes in perceived norms, and increased condom use. However, condom use remains relatively low, suggesting the need for caution in assuming an impact on HIV transmission rates in this high prevalence population.

■ *Condom Use Among Female Sex Workers and Their Clients*, R. Santo, (presenter), R. Pareja.

This poster compared knowledge, attitudes, and practices of female sex workers about condom use with those of their clients. The study also identified the KAP of female sex workers regarding sexually transmitted diseases (STDs). Eight focus groups each were conducted with female sex workers (65) and with men who are regular clients of sex workers

(80). No differences were found among reasons given by sex workers and their clients for not using condoms. The major difference in their reasoning was in the emphasis and importance given to arguments against condom use. Reasons for not using condoms centered around macho image, physical inconvenience, symbols of trust/mistrust, and infidelity with steady partners. Men reported a high incidence of STDs. Many did not trust medically prescribed treatment for STDs, resorting instead to folkloric remedies. Results of the study led to developing guidelines for program interventions and implementation plans.

The senior researcher presented preliminary results of a research project in the Dominican Republic at the **Congress of Iberian-American Psychology** in Madrid.

■ *Increasing Condom Use Intention and Behavior of Sexually Active Men from the Dominican Republic: The Comparative Effectiveness of Social Norms, Condom Skills, and Perceived Susceptibility*, O. Hernandez (presenter), R. Pareja, A. Jimerson, S.E. Middlestadt, E. Puello, B. Betances.

This paper described educational interventions designed to increase sustained condom use with different types of sexual partners as an important technique for controlling the spread of HIV/AIDS and other STDs. Previous research identified three major constructs as potential determinants of condom use: social norms perceived from potential partners, condom skills, and perceived susceptibility to HIV/AIDS.

A sample of 301 sexually active men aged 15 to 78, with a mean age of 40, was selected randomly from the employee lists of a sugar mill in the port of Haina, the Dominican Republic. Participants were randomly assigned to one of five intervention groups: social norms, condom skills, perceived susceptibility, social norms plus condom skills, and a no-intervention control group. Immediately after the intervention, a knowledge, attitude, belief, and practice (KABP) survey was administered and participants were asked to return in two-to-three weeks for a delayed post-test. Preliminary results suggest that condom use intentions of study partici-

pants who received condom skill training, alone or with social norms, are significantly different from intentions of those in the control group.

■ **Supporting Theoretically-based Behavior Change Research**

Members of the AIDSCOM research team made two technical assistance visits during the reporting period. The research director and associate traveled to Tanzania on separate visits. The director provided technical assistance to the members of the AIDS in the Workplace/Women in Development (AIWP/WID) Project and the condom social marketing research team. The associate worked with the condom social marketing research team.

The research director worked with AIWP/WID staff to review and analyze results from the Phase I study of 40 women to determine salient consequences and referents with respect to communicating and negotiating with sexual partners. Based on this analysis, she developed a survey instrument for the next phase of the study, a quantitative survey to be administered to a sample of 194 women.

The research director also supported the condom social marketing research team in Tanzania. During a workshop with the team, she presented results of an analysis of the first wave of data and described the logic of the next steps in the evaluation research. During the previous reporting period, the team conducted a review of traffic counts of young men exiting different retail outlets during one-hour time spans. Based on the review, the researchers concluded that it would be feasible to set up a consumer intercept of young men concurrently with conducting retail audits. The consumer instrument was then pre-tested and revised and interviewers trained for administering it.

The research associate worked with two Tanzanian condom social marketing supervisors to review Wave 1 and 2 collections of data from retail audits. The supervisors reported several logistical difficulties that were encountered during data collection and described steps taken to resolve them. Ramifications of the difficulties for the research design and data

analysis were discussed. Wave 3, the final data collection, was planned.

Problems during the first two collections occurred primarily because the interviewers did not always know at which outlets to conduct their retail audits. To resolve the problem, a systematic computer list of the outlets, with location information and identification, was created. The list will be used by the interviewers during the final collection and also by the supervisors to check the completed audits as they are returned.

■ Analyzing Data and Writing Reports

During this reporting period, AIDSCOM staff continued to collect data and conduct analyses to assist in designing and evaluating HIV/AIDS prevention interventions.

Developing strategies to help women negotiate safer sex with their sexual partners. The Women in Development (WID) Project targets adult women from the general population and focuses on their relations with husbands and steady partners. These women may be at risk for HIV/AIDS not only because of their own behavior but also because of the behavior of their sexual partners. Thus, interventions are needed to increase their communication and negotiation skills and to provide social support to help them influence their partners' behavior. Three major research activities were completed for the WID Project:

- data from the Phase I qualitative survey of 40 female insurance workers in Dar es Salaam, Tanzania, were analyzed and used to develop the Phase II quantitative survey;
- the Phase II quantitative survey of 194 female insurance workers was administered and analyzed; and
- the Phase I qualitative survey was conducted with 40 married women attending a family planning clinic in Jakarta, Indonesia.

Phase I in Tanzania: Qualitative study of 40 women. During the last reporting period, 40 female

insurance workers employed by BIMA in Dar es Salaam were interviewed for Phase I. The women were randomly selected from BIMA personnel files. The interviewers used a structured interview schedule. The questionnaire consisted primarily of open-ended questions designed to elicit salient consequences and salient referents as outlined by Fishbein and Ajzen and to identify potential strategies for initiating communication, discussion, and negotiation. During this reporting period, the responses were transcribed, translated to English, and content analyzed.

Table 1 shows the results of the content analysis of questions about two behaviors:

- "talking (kuzungumza) with my husband (mume wako) or permanent partner (mpenzi wako wa kudumu) about things you could do to protect yourself from AIDS," and
- "asking/convincing/insisting (kumsihi) that my husband or permanent partner use a condom every time."

The study concluded that the high-level, professional women who participated in the survey in Tanzania have a high awareness and basic understanding of AIDS, and have been thoroughly exposed to media information about the disease. In addition, they have positive attitudes, perceive positive normative pressure, and have positive intentions with respect to both talking with their husband/steady partner and asking or convincing him to use a condom every time. Given how long Tanzanians have been faced with the HIV epidemic and that the women in the study were urban, educated, and working, it is not surprising that they are initiating discussion. This finding has important implications for the content of HIV/AIDS interventions. It implies that Tanzanian women may be ready to share strategies, skills, and social support for more difficult behaviors.

Phase II in Tanzania: Quantitative study of 194 women. During this reporting period, 194 women were interviewed with an assisted self-completion questionnaire for Phase II of the AIWP/WID Project. The questionnaire consisted of close-ended ques-

Table 1. Negotiating condom use among professional women in Dar es Salaam: salient consequences (advantages or positive outcomes and disadvantages or negative outcomes) and salient referents (those who might approve or disapprove).

Salient Consequences or Outcomes
Will protect me from AIDS
Will make him angry
Will help me convince him to use condoms
Will help me convince him to stay with one woman
Will strengthen our relationship
Will make him go with other women
Will make him think I have other men
Will help him change his behavior
Will make him use a condom
Will help me lead a long and happy life
Will break our relationship
Will be expensive
Will prevent pregnancy
Will lead to a condom getting stuck inside
Will make him complain of less satisfaction
Will make me think I am safe when I am not
Salient Referents
Her husband or partner
The two people (woman and her husband or her partner)
Her parents
Her other relatives
Her friends
His relatives and friends
Doctors
Office mates
Church leaders

tions developed based on the analysis of the Phase I open-ended qualitative questionnaire. Questions focused on basic demographic and media information, knowledge about HIV/AIDS, sexual behavior, and perceptions of the value of strategies for negotiating condom use. The questionnaire was divided into four sections with five-point Likert-style items for assessing intentions, attitudes, beliefs about consequences, perceived social norms with respect to communication, and negotiation behaviors with partners.

Four behaviors were assessed:

- discussing with my partner ways to protect both of us from AIDS (“kujadiliana na mpenzi wako kuhusu njia za kuwaepusha vote wawili kutokana na UKIMWI”);
- forcing my partner to use a condom (“kumlazimisha mpenzi wako kutumia kondom”);
- using a condom with my partner (“kutumia kondom na mpenzi wako”); and
- refusing to have sex if my partner won’t use a condom (“kukataa kufanya mapenzi iwapo hatumii kondom”).

Each woman was asked to think about one partner while answering the questions. Married women were asked to think of their husband (mume) and unmarried women were asked to think about one main partner, their fiancé (mchumba) or their best, closest boyfriend (rafiki maalum).

The Phase II study was conducted to collect information that would be used to design the Phase III intervention. The first task was to select the behavior that would be targeted during the intervention. Table 2 gives the percentages of the 194 respondents who reported engaging in the four behaviors. These results indicate that discussing AIDS was the easiest behavior; more of the women did it. Forcing and using reflected a similar level of difficulty, somewhat more so than discussing AIDS. Refusing to have sex when a regular partner did not use a condom was the most difficult of the behaviors.

Table 2. Percent of professional women who practiced four HIV/AIDS-related behaviors in Dar es Salaam.

Behavior	Percent Reported Behavior
Ever discussed ways to protect against AIDS with partner (e.g. husband/steady boyfriend)	90%
Ever forced partner to use a condom	53%
Ever used a condom with partner	52%
Ever refused sex if partner did not use a condom	39%

Based on these results, it was recommended that discussions with women during Phase III should begin with the behavior of discussing with their partner. Not only would this be a safe way to start, but it is likely that there is still opportunity for changing and increasing this behavior. For some of the women, it is expected that the group discussions will present a good opportunity to go beyond initiating the discussion to more difficult behaviors such as getting him to use a condom and using a condom. About half the women have already tried these behaviors and, therefore, should be able to share their positive and negative experiences. It might also be useful to elicit from the women other desired behaviors beyond these four.

A next step in Phase III was to analyze the determinants of the four behaviors under study. What underlying attitudes, beliefs about consequences (perceptions of the likelihood of various outcomes of performing the behavior), and normative beliefs (social pressure perceived from significant others in the environment) are more strongly associated with each behavior? The underlying determinants to be studied were taken primarily from the Theory of Reasoned Action. In brief, the Theory of Reasoned Action postulates that a behavior is predicted from intention to perform a behavior, which itself is predicted from a combination of subjective norms and attitudes toward the behavior. Subjective norms

and attitudes are themselves predicted from normative beliefs about salient referents and behavioral beliefs about the consequences of performing the behavior.

Understanding the associated behaviors will help planners identify potential points of intervention. An examination of the differences in attitudes, beliefs, and perceived social pressures between doers and nondoers will show what might need to be changed to facilitate practicing the behavior of interest. For example, analyses revealed that there are large and strong differences between doers and nondoers of their perceptions that other people think they should discuss, force, use, and refuse. The more a woman believes that others think she should do it, the more likely she is to do it. This supports the group format for Phase III, if social support for the targeted behaviors can be developed during the group meetings.

Results from this research were used to plan the Phase III pilot intervention, which entailed organizing activities and discussions for 100 of the women who participated in this study. Although primarily directed toward transferring the negotiation skills of the women who reported each behavior to the women who did not, Phase III activities and group discussions also will attempt to influence the intermediate intervention points. That is, the activities will influence these women's behavioral and normative beliefs, attitudes, self-efficacy, and intentions to perform each of the behaviors.

Phase I in Indonesia: Qualitative study of 44 women. An open-ended elicitation study was conducted with 44 married women attending family planning clinics in Jakarta. The interview schedule was modified from that used in Tanzania. It assessed two behaviors, talking with your husband about sex and ways to protect you and your family from AIDS and asking your husband to always use condoms. Indonesian women found it easy to talk to their husbands about AIDS prevention, but not necessarily about intimate sexual issues. Table 3 gives the most frequently mentioned advantages and disadvantages and the most frequently mentioned referents for this sample of married women.

Table 3. Salient consequences and referents for talking about and using a condom: married women in Jakarta, Indonesia.

Salient Consequences or Outcomes
Will keep family healthy
Will show openness between husband and wife
Will keep husband from having sex with other women
Will help him become informed about AIDS
Will protect me from AIDS
Will protect me from diseases
Will prevent pregnancy
Will make him angry
Will hurt his feelings
Will cause a quarrel between us
Will make him think I do not trust him
Will reduce his sexual satisfaction
Will reduce my sexual satisfaction
Will make me feel ashamed
Salient Referents
Parents
"Saudara" (relatives from same generation)
Neighbors
Friends
Husbands
Relatives from husband's side
Religious teachers
Doctors

Comparing Three Strategies to Encourage Sexually Active Men in the Dominican Republic to Use Condoms. Previous research in Latin America and the Caribbean revealed that condom skills, perceived norms for condom use, and perceived susceptibility to HIV/AIDS are determinants of condom use. To understand the relative effectiveness of these determinants, an experimental study was designed and conducted among sexually active men at a sugar mill in the port of Haina, Dominican Republic. The 301 men were randomly selected

from personnel lists and randomly assigned to one of four experimental conditions or a control group. Participants in the experimental conditions viewed and listened to a story presented via flip charts and tape recordings that depicted conversations between men and women about condom use. Each experimental treatment lasted approximately 15 minutes and was presented twice. It was assumed that messages would be heard/understood during the first presentation and reinforced during the second. The first presentation was guided, the second was not.

The interventions were articulated around constructs taken from three behavior change theories relevant to health: Social Learning Theory, the Theory of Reasoned Action, and the Health Belief Model.

- The experimental condition based on Social Learning Theory stressed condom use skills, the correct way to put a condom. It showed a man demonstrating for another man how to put on a condom correctly, using a beer bottle as a prop.
- The experimental condition based on the Theory of Reasoned Action stressed perceived social norms, the normative belief that women want their male sex partners to use condoms. It showed two women talking and being overheard by a man. The women were discussing the misperceptions men believe women have about condoms and their benefits.
- The experimental condition based on the Health Belief Model stressed perceived susceptibility to HIV infection. Men discussed the rapid spread of AIDS in their country and communities. The intervention suggested that Dominicans might reduce their vulnerability to AIDS by wearing condoms.
- The fourth experimental condition was a combined intervention that included presentations related to condom use skills and social norms.
- The control group received no intervention.

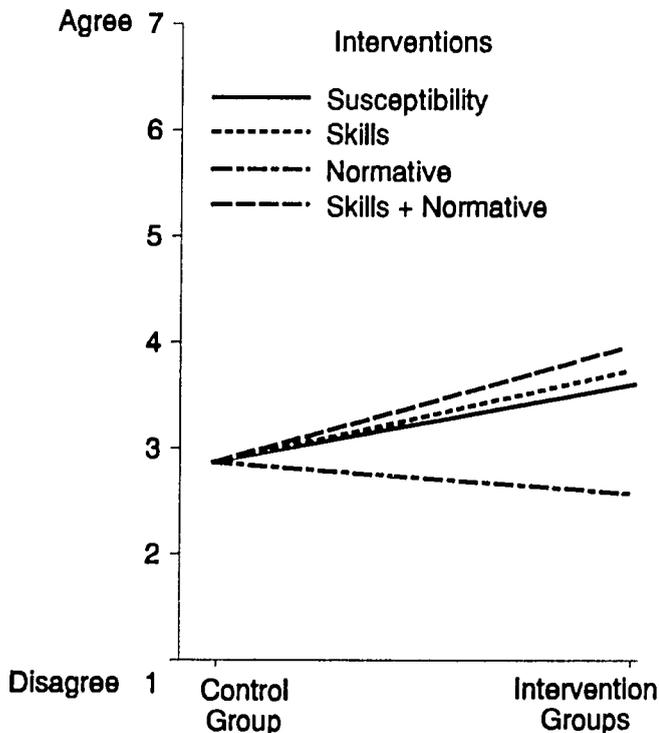
Immediately after each intervention (or in place of the intervention for the control group), the men's beliefs, attitudes, and intentions to use a condom with female prostitutes, casual "pick-up" female sex partners, and "steady" female sexual partners were measured using a seven-point Likert-type scale. Each respondent was read a statement and asked if

he agreed or disagreed. Then, he was asked to rate the level of agreement or disagreement by choosing from three options, such as little, strongly, or very strongly. The questionnaire included a sexual behavior grid through which respondents were asked to report their sexual activity for the two weeks before the study. A delayed KABP was administered two-to-three weeks later.

Responses to the immediate post measurement were analyzed. Until now, the analysis has focused on condom use attitudes and norms and intentions concerning pick-ups and steady partners. Figure 1 presents the mean score of each group for the question, "Would you try to use a condom the next time you have sex with your steady partner?" Due to the random assignment process, differences between the groups are attributable to the interventions. To illustrate the differences, Figure 1 uses lines originating from the control group's mean score to connect with each intervention group's mean score. Scores are based on a seven-point scale. One indicates strong disagreement and seven strong agreement.

The men in the study were not inclined to intend to use a condom with a steady partner. Members of the

Figure 1. Effect of four interventions on intention to use a condom with a steady female sex partner.



control group disagreed moderately with the statement. Three interventions increased agreement with intentions to use a condom, and one intervention decreased agreement. Intentions of the group that received the combination intervention increased the most. A pattern similar to that shown in Figure 1 was repeated for many other questions, for example, being predisposed to use a condom, believing that using a condom is a good idea, etc.

These findings differed from the expectations of field staff. Staff originally anticipated that the interventions would not significantly change intentions to use condoms with steady partners and, if they did, the intervention generating the largest difference would be that which stressed susceptibility.

Exactly why normative messages had a negative affect when presented alone, but had a positive affect when combined with skills is being studied. It may be that the intervention did not properly convey the normative message. The normative message was conveyed in a negative format. That is, it was argued that women do not think x, y, or z. Another way of expressing the same idea would have required saying that women were convinced of x, y, or z. Formulating the message in a negative manner may have brought about unanticipated consequences. Other explanations are also being explored.

Evaluating the Tanzania Condom Social Marketing Program with Outlet Audit and Consumer Intercept Data. The Condom Social Marketing (CSM) Program in Tanzania seeks to increase availability of the *Salama* condom through using an existing private sector distribution system. To assess changes in condom availability, the CSM evaluation plan included three measurement waves (Fall 1991, Spring 1992, and Fall 1992) and two types of surveys (outlet audits and consumer intercept surveys).

Outlet audits were conducted in Dar es Salaam during all three waves. The list of outlets to be audited was drawn randomly from a list of all outlets identified in a census of buildings conducted in ten commercial zones of Dar es Salaam in early 1991. It was estimated that these ten zones represented 80 percent of the commercial area of the city. Three types of outlets were audited: pharmacies, including all chemists and medical supply stores; general

merchandise shops, including retail outlets where soap, toothpaste, and sundries could be purchased; and leisure outlets, including bars, hotels, night clubs, restaurants, and guest houses. During the second and third waves, an intercept survey of young male consumers was to be administered concurrently with the outlet audit.

The first wave of data collection (audits in 403 outlets) was conducted during the previous reporting period. Because *Salama* distribution began in June 1991, but was limited, this wave is considered as the baseline. Broader distribution of *Salama* condoms began in November 1991. During this reporting period, the second of the three data collections was conducted. It included 341 outlets and 318 consumers.

The first goal of the evaluation was to determine if condom availability was increasing: Were more outlets selling *Salama* condoms in Wave 2 than in Wave 1? In addition to increasing the overall availability of condoms, the CSM program sought to increase the extent of the availability by establishing availability in a variety of outlets and across the entire city. Given the nature of the distributor and the product, it had been anticipated that most pharmacies would sell the new brand. Pharmacies, it was learned during the retail census, were concen-

trated in two of the ten commercial zones, City Center and Kariakoo. Thus, a second question was to learn if availability was increasing in all three types of outlets and/or in all zones of the city.

Table 4 shows the percentage of outlets selling *Salama* condoms in each wave: overall, by type of outlet, and by type within location. Location was dichotomized between those two zones (downtown) where half the pharmacies are concentrated, and the other eight zones (other areas) where the remaining pharmacies were widely dispersed. Key findings included the following.

- Condom availability is increasing; the percent of outlets selling *Salama* condoms almost doubled in the six months between the two waves.
- As expected given the nature of the distributor and the product, availability was and continued to be highest in pharmacies. The increase in availability between Wave 1 and Wave 2 occurred primarily in pharmacies and, more specifically, in pharmacies outside the two downtown commercial zones. Because the percentage of downtown pharmacies selling *Salama* was relatively high to begin with (41 percent), the percent selling downtown (close to the central distribution point) may have reached its ceiling soon after the product was introduced in June.

Table 4. Percentage of outlets selling *Salama* condoms in Dar es Salaam, Tanzania.

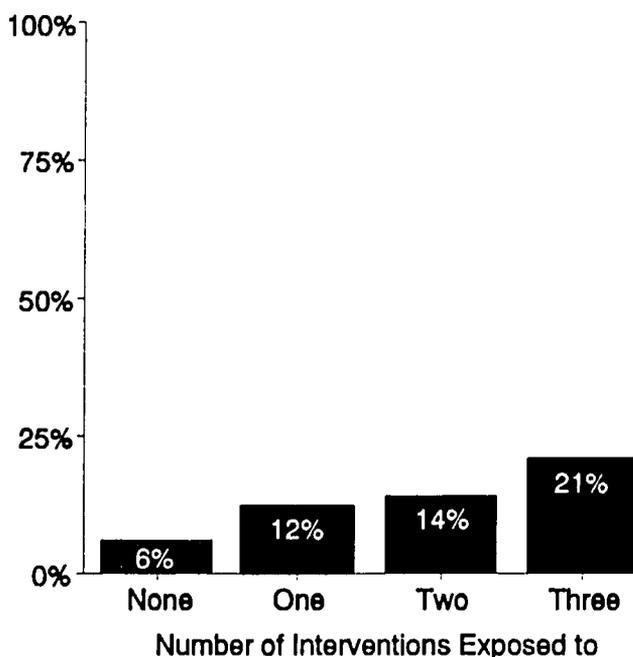
	Overall*	Type of Outlet			Location					
		Pharmacy*	Shop	Leisure*	Downtown			Other Areas		
					Pharmacy	Shop	Leisure	Pharmacy*	Shop	Leisure*
Wave 1 (Aug-Sept 1991)	8%	29%	6%	1%	41%	4%	8%	19%	7%	0%
Wave 2 (Apr-May 1992)	15%	48%	6%	7%	50%	1%	0%	45%	10%	9%

* The difference between Wave 1 and 2 in the percentage of outlets selling *Salama* is statistically significant at $p < .05$, based on chi-square test.

- While the percentage of leisure outlets selling *Salama* is still relatively low, there was a statistically significant increase in availability from one percent in Wave 1 to seven percent in Wave 2. This increase occurred only in the eight zones outside of downtown. It may be that downtown leisure outlets face strong competition from the pharmacies.
- Few shops (six percent) reported selling the *Salama* condom. The census showed that shops might be an ideal retail outlet because they were numerous throughout the city. The two most cited explanations from shop managers for not selling condoms was that they are against their Muslim religion or their sale would conflict with the “family” nature of the shop.

Evaluating the Impact of the Uganda Workplace Peer Education Project. In 1989, The Federation of Uganda Employers (FUE) and the Experiment in International Living (EIL) began implementing a program to train peer educators to more effectively communicate HIV/AIDS prevention messages. Peer educators were taught to use three approaches with their coworkers, informal talks, formal talks, and a dramatic film titled *It's Not Easy*.

Figure 2. Relation of condom use during the last two months to exposure to interventions, Uganda Workplace Project.



The evaluation of the Uganda Workplace Project is based on three waves of data collected in 1990 and 1991 and 1,599 face-to-face interviews at eight organizations throughout Uganda where FUE and EIL had implemented training programs. During the previous reporting period, preliminary analyses were conducted by the research officer from the Annenberg School of Communication. These analyses suggested that the program had an impact on knowledge, attitudes, beliefs, and practices. The analyses were finalized during this reporting period.

Data indicate that the project had a major impact on increasing condom use, a key safer sex behavior. Exposure to the interventions and condom use were positively associated. Figure 2 relates the percentage of people reporting condom use during the last two months to the number of program interventions to which they were exposed. Condom use was also positively associated with knowledge about AIDS and social pressure (norms) to use condoms, both of which were positively associated with program exposure.

Evaluating the Impact of a General Awareness Mass Media Campaign in Ghana. The Ghana mass media, general AIDS awareness campaign was broadcast on television and radio during ten months. The electronic media campaign was supported by posters, comics, and other print material. Central to the campaign were three television and several radio advertisements that sought to inform young Ghanaians that:

- AIDS exists in Ghana,
- they should be concerned,
- it may take five years after infection before symptoms develop, and
- they should talk about AIDS with their families.

During this reporting period, the research officer from the Annenberg School of Communication completed field work on a follow-up KABP survey of Ghanaians aged 15 to 30 years old who live in Cape Coast and Techiman provinces. Preliminary analyses compared these data with 1,499 responses to a baseline KABP conducted with 1,553 young Ghanaians.

Data showed that awareness of AIDS as a serious disease affecting Ghana, knowledge of its latency period, and knowledge about AIDS transmission had increased between the baseline and the follow-up surveys. There also was evidence of behavior change. Specifically, the age of first sexual intercourse and the percent of the population using condoms increased, particularly among single people or those who reported more than one sexual partner. While there are a variety of reasons knowledge is increasing and behavior change is occurring, analyses suggested that exposure to the campaign contributed at least partially to the changes.

Evaluating the Zambia Radio Drama. In Zambia, AIDSCOM has provided technical assistance to develop and broadcast a radio drama. During this reporting period, a research officer from the Annenberg School of Communication completed the field work for a follow-up survey in Copperbelt and Northern provinces to judge the coverage and affect of the drama. Preliminary analyses indicated that 49 percent of the total population of Copperbelt and Northern provinces owned a radio; 45 percent of the total population had heard the radio drama. Analyses to compare the follow-up survey to the baseline survey will be completed during the next reporting period.

In addition to using data collected during the provincial surveys, the impact of the radio drama will be assessed through response to two audience participation contests and through depth interviews being conducted with 90 people. The contests involved asking questions during the radio program and having listeners mail their answers to radio stations. The 1,680 responses to the second contest were received from eight of the nine provinces in the country. The depth interviews focus on comprehension of the messages in the drama.

Formative Research for a Mass Media Campaign in Morocco. Analysis was conducted of a national quota sample of 1,342 Moroccans collected in 1991 under technical direction of the World Health Organization (WHO). Data showed important knowledge and information gaps about HIV/AIDS, its transmission, and its prevention. For example,

only 73 percent of the population had even heard of AIDS. Only one third of the population mentioned sexual transmission when asked how AIDS was transmitted. While most respondents had heard of condoms, few mentioned condoms when asked how HIV infection might be prevented. This analysis will be used to help design a mass-communication strategy to educate Moroccans about HIV/AIDS.

■ Instrument Development

The AIDSCOM research team made two advances in instrument development during this reporting period. The WID Project in Tanzania developed an assisted self-completion instrument to obtain five-point agree/disagree judgements for a variety of intention, belief, and attitude variables. Also in Tanzania, the project developed a consumer intercept methodology, which was pre-tested and administered for evaluating the Condom Social Marketing Project.

■ Data Archives Update

Nine new data sets were added to the AIDSCOM data archives during the reporting period:

- a general population KABP survey with 307 parents, teenagers, and other adults from St. Vincent to assess the impact of the "Parents and Youth campaign;"
- a media tracking survey of 225 adults and teens in the Eastern Caribbean to monitor the "Choices" radio drama;
- an immediate and a delayed follow-up survey of 301 young Dominican men working at the sugar mill in Haina;
- a qualitative KABP survey of 40 women in Tanzania;
- a quantitative KABP survey of 194 women in Tanzania;
- a baseline audit of 403 retail outlets (Wave 1) and a first follow-up of 341 retail outlets (Wave 2) in Tanzania; and
- an intercept (Wave 2) survey of 318 young male Tanzanian consumers at retail outlets.

■ Field Data Collection Completed

Field data collection was completed for the following data sets (Data definition and archive procedures are underway.):

- a KABP survey, conducted in three waves, of 1,599 Ugandans working in organizations where FUE or EIL established peer-education programs;
- baseline (1,533) and follow-up (1,499) KABP surveys of Ghanaians to evaluate a mass media campaign;
- baseline and follow-up KABP surveys of adults from two provinces of Zambia to assess a radio drama,
- a baseline general population KABP survey of 1,342 Moroccans used to formulate an AIDS mass media strategy;
- baseline (300) and follow-up (300) KABP surveys of young adults to evaluate the *Barkada* mass media campaign in the Philippines;
- a follow-up KABP survey of 31 Tanzania and 61 Uganda peer educators to assess the impact of their training; and
- a qualitative KABP survey of 44 Indonesian women.

■ Drafting Peer Reviewed Articles

AIDSCOM research and program staff continued their efforts to draft, revise, and submit articles that describe the project to peer review journals. Two articles were submitted to peer reviewed publications. One, "AIDS Knowledge, Attitudes, Beliefs, and Practices (KABP) in Two Caribbean Countries:

A Comparison," was accepted for publication in *The Journal of Applied Social Psychology*.

■ Future Activities

During the next reporting period, the research team will complete final analyses for examining the impact of HIV prevention programs. In particular, in collaboration with the Annenberg School of Communication and other research subcontractors, staff will complete major impact evaluations of the following programs:

- the radio drama in Zambia,
- the Ghana "Get Protection" mass media campaign,
- the Philippines "Peer Pressure" campaign,
- the "Parents and Youth" campaign in the Eastern Caribbean, and
- the *Salama* condom social marketing program.

In addition, the research staff will complete analyses, write reports, and draft articles for several behavioral research studies, including:

- the experimental study of strategies to promote condom use among sexually active Dominican men;
- the WID Project that seeks to encourage and enable women not in the commercial sex industry to communicate about and negotiate safer sex; and
- the comparative study of patterns of sexual behavior and determinants of risky sexual behaviors among men who have sex with men in the Dominican Republic and in Brazil.

Documentation and Dissemination

This reporting period has been distinguished by significant achievement in documenting AIDSCOM activities and disseminating information about lessons learned and research findings to a broad-based audience of development professionals. In addition to semiannual reports, briefing papers, and regular briefings to A.I.D. staff members, both in the United States and abroad, AIDSCOM inaugurated two publication series, *Preventing AIDS: Strategies that Work* and *AIDSCOM Occasional Papers*, and published several papers and articles in journals and newsletters.

Preventing AIDS: Strategies that Work highlights lessons learned from AIDSCOM's country program activities and includes articles such as "The Applied Behavior Change (ABC) Framework," "How to Get What You Want from an Advertising Agency," "Consumer Research and Condom Promotion in Tanzania," and "How Personal Testimony can Motivate Change: Experiences from Côte d'Ivoire." Upcoming titles are expected to include: "Talking About Sex and Partners in Luganda," "School-based Programs: Building a Community Response in Malawi," and "Defining Public Information Messages on AIDS in the Philippines."

Strategies papers, through mass mailings and special requests, have been distributed to more than 600 professionals and organizations around the world. In addition to limited AIDSCOM promotion of the papers, other organizations, such as NCIH, the United Nations Development Programme (UNDP), the World Health Organization (WHO), and the U.S. National Commission on AIDS, have announced the series and have requested and distributed multiple copies of the papers.

AIDSCOM Occasional Papers, which provide in-depth, specialized information on a variety of HIV/AIDS-related research and programs, have included titles such as, "Social Marketing and the Prevention of AIDS," "Sexual Practices and Behavior in Jamaica: A Review of the Literature," and "More than Mothers and Whores: Redefining the AIDS Prevention Needs of Women." Nearly 250 copies of each of these papers have been distributed to selected professionals working in development, health, and behavioral sciences. As a result of special requests from AIDS professionals in several country programs, some of the papers have been translated into Spanish and French.

Newly published or about-to-be-published articles in peer-reviewed journals included "AIDS Knowledge, Attitudes, Beliefs, and Practices in Two Caribbean Countries: A Comparative Analysis," in the *Journal of Applied Social Psychology*. In addition, AIDSCOM authors were well represented in the Oxford University Press publication, *AIDS Prevention Through Education: A World View*, and AIDSCOM programs were described in *AIDS Health Promotion Exchange* (WHO), *Frontlines* (A.I.D.), and *Focus: A Guide to AIDS Research and Counseling* (University of California, San Francisco).

A complete list of informational materials distributed by AIDSCOM staff and programs, organized by region, is in Appendix A of this report.

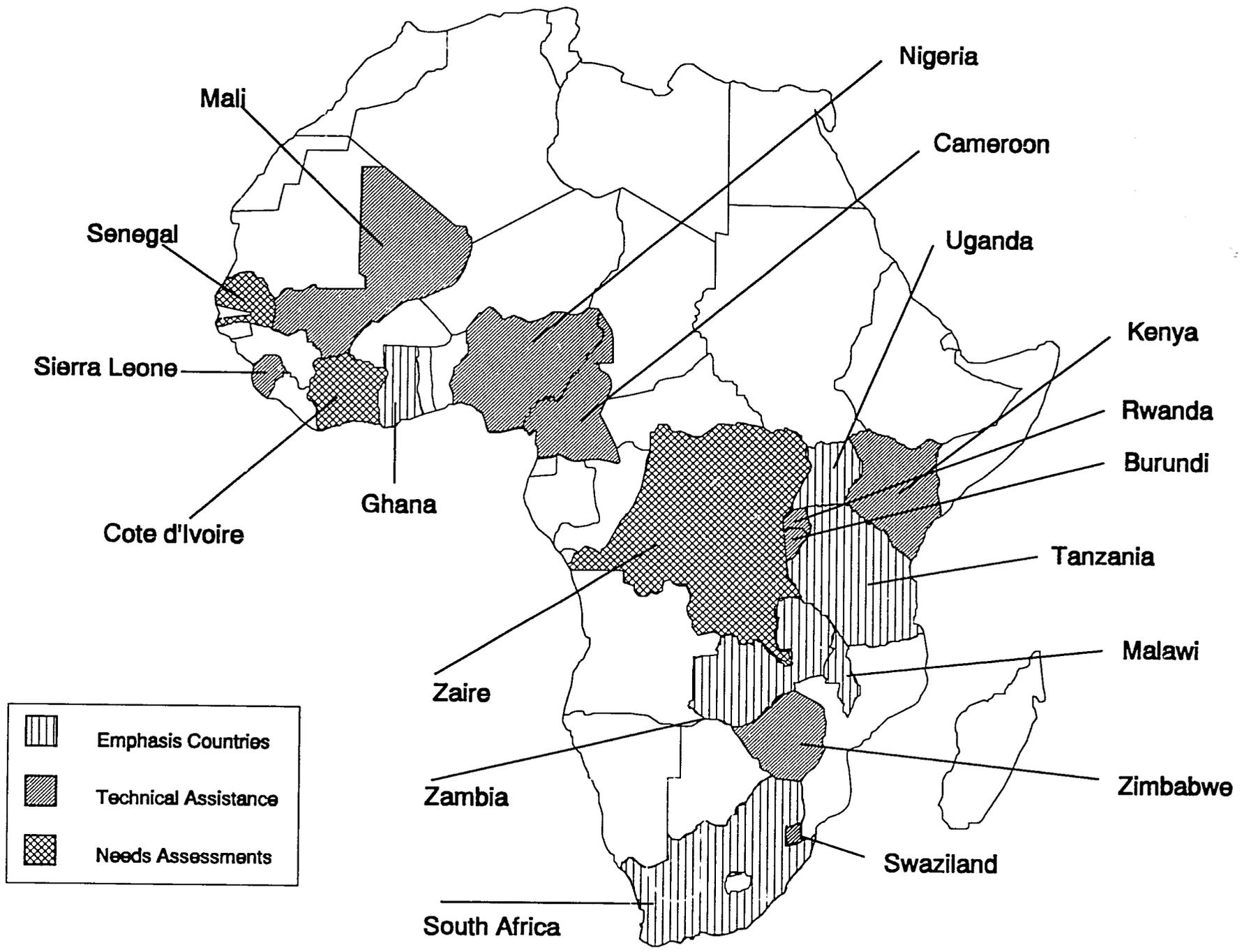
The next AIDSCOM reporting period also promises to be one of significant activity in documentation and dissemination. Table 5 projects documentation and dissemination for Fiscal 1993, the last year of AIDSCOM Project activities.

Table 5. Projected AIDSCOM documentation and dissemination for Fiscal 1993.

Type/ Title	Audience	Distribution
Semiannual Reports Semiannual Report 11, 1 Apr - 30 Sep 1992 Semiannual Report 12, 1 Oct 1992 - 31 Mar 1993	A.I.D./ Washington USAID Missions TAG Members Project Staff	250 each
Final Report	A.I.D./ Washington USAID Missions TAG Members Project Staff	300
Lessons from the Field (NEW PUBLICATIONS) Talking About Sex and Partners in Luganda Defining Public Information Messages on AIDS in the Philippines Peer Counselor Training Program: St. Vincent School Based Programs: Building a Community Response AIDS: A New Work Style (with Spanish translation) Hotlines: A Four-country Study (DISTRIBUTION) The Applied Behavior Change (ABC) Framework How to Get What You Want from an Advertising Agency How Personal Testimony Can Motivate Change: Experiences from Côte D'Ivoire Using Theater for AIDS Education Consumer Research and Condom Promotion in Tanzania	A.I.D./Washington USAID Missions AIDS Program Staff in Developing Countries General Distribution	6 new papers 750 each 5 earlier papers 250 each
Videos and Video Guides (DISTRIBUTION) It's Not Easy (Uganda, Africa, Worldwide; English, French, Kiswahili) A Shared Concern (Worldwide) Challenges in AIDS Counselling (Zambia, Africa) A Través del Espejo (Latin America) SIDA: El Temor Que Ciega (Latin America) Zambia Theater Video	Country Programs HIV/AIDS Prevention Programs	100-500 each as requested

Type/ Title	Audience	Distribution
<p>Research Reports/ Scientific Journal Articles</p> <p>Increases in Condom Use Associated with an AIDS in the Workplace Program in Uganda</p> <p>AIDS Knowledge, Attitudes, Beliefs, and Practices in Two Caribbean Countries: A Comparative Analysis</p> <p>Increasing Condom Skill with an Interpersonal Educational Intervention: Men and Women at Risk of HIV in the Caribbean</p> <p>Injection Drug Use, Not the Only HIV Prevention Focus for Prisons: A Study of Inmates and Staff in the Caribbean</p> <p>Instilling Correct Beliefs about AIDS among Young Adults: The Effect of a Mass Media Awareness Campaign in Metropolitan Manila</p> <p>The Impact of a Radio Drama in Northern Zambia: A Comparison of Men's and Women's Reactions</p> <p>The Train-the-Trainer Model for AIDS Prevention: Lessons Learned in Uganda</p> <p>Evaluation of a Mass Media Campaign to Prevent AIDS Among Young People in Ghana</p> <p>Supporting Safer Sex Among Young Men and Women in Metropolitan Manila: Evaluating the Impact of a Mass Media Campaign</p> <p>Social Norms for Condom Use: Implications for HIV Prevention Interventions with Heterosexuals in the Eastern Caribbean</p> <p>Encouraging Discussion with Partners: Prevention Strategies for Women in Relationships in Brazil, Tanzania, and Indonesia</p> <p>The Impact of Condom Promotion Strategies on Intentions to Use Condoms Among Sexually Active Men in the Dominican Republic: A Comparison of Condom Skills, Perceived Susceptibility, and Perceived Social Norms</p> <p>Evaluating the Impact of the Salama Condom Social Marketing Program on Availability of Condoms in Dar Es Salaam, Tanzania</p> <p>The Role of Census, Audit, and Consumer Intercept Methodology in Designing and Evaluating a Condom Social Marketing Program in Tanzania</p>	<p>Scientific Journal Audiences</p> <p>A.I.D./ Washington</p>	<p>Journal circulation</p>

Type/ Title	Audience	Distribution
<p>Occasional Papers (NEW PUBLICATIONS)</p> <p>More than Mothers and Whores: Redefining the AIDS Prevention Needs of Women (with Spanish translation)</p> <p>The Role of Qualitative Research in AIDS Prevention (with Spanish translation)</p> <p>Education and Evaluation: Partners in AIDS Prevention (with Spanish translation)</p> <p>HIV Among Women: A Challenge for Development Planning, Implementing, and Evaluating a Media Information Campaign on AIDS in Manila, Philippines</p> <p>A Comparison of Three Condom Promotion Interventions with Sexually Active Men in Haina, Dominican Republic</p> <p>Women and AIDS: Causes and Consequences</p> <p>(DISTRIBUTION)</p> <p>Sexual Practices and Behavior in Jamaica: A Review of the Literature</p> <p>Bisexual Behavior and AIDS in Brazil</p> <p>The Advertising Agency: Your Partner in Communications (with French translation)</p> <p>Reducing HIV Transmission through Education and Communication</p>	<p>A.I.D./Washington USAID Missions AIDS Program Staff in Developing Countries General Distribution</p>	<p>7 new papers 250 each 4 earlier papers 100 each</p>
<p>Public Health Communication Manual chapters including: ABC framework, national communication campaigns, AIDS in the workplace programs, AIDS education in schools, prevention counseling, community-based HIV prevention programs, condom skills, education by entertainment, hotlines, condom social marketing, research</p>	<p>A.I.D./ Washington TAG Members USAID Missions Behavior Change/Comm. Specialists</p>	<p>1,000 est.</p>
<p>Regular Briefings to USAID</p>	<p>USAID AIDS Program Managers</p>	<p>Bi-monthly</p>
<p>Trip Reports</p>	<p>A.I.D./ Washington Appropriate country USAID Mission and program(s)</p>	<p>As needed</p>



Africa

25

Africa

Establishing HIV/AIDS prevention programs in Africa has presented many challenges for AIDSCOM. Limited infrastructures, weak economies, and lack of resources, combined with the obstacle to sustainability posed by the legal and cultural status of women, characterize a uniquely demanding environment in which to develop, implement, and evaluate broad-scale behavior change programs.

Recognizing the high incidence of HIV infection and AIDS in Africa, and assuming widespread risk among all sexually active persons, AIDSCOM has focused many of its programs on the general population. Both mass media and interpersonal approaches have been implemented, the choice depending upon the target audience(s) and the behavioral objectives identified in each country.

AIDSCOM has sought to pilot a different intervention in each nation, with the intention of transferring and adapting technologies as lessons are learned. Many innovative programs have been developed and implemented. For example, the project implemented an effective AIDS in the workplace program in Uganda, condom social marketing in Tanzania, a national HIV/AIDS education curriculum in Malawi, and a serial radio drama in Zambia. And, as this report demonstrates, the hoped-for transfer of ideas and resources among countries is becoming evident.

Research, both formative and summative, has guided the development and evaluation of all AIDSCOM activities in Africa. Results of this research have helped understand the behaviors targeted by the interventions and have contributed

significantly to their design. Results of four major evaluations, in Ghana, Tanzania, Uganda, and Zambia, will provide long-term benefit to AIDS prevention programming throughout Africa.

Since AIDSCOM staff first visited Africa in 1988, the project has responded to national requests for technical assistance and project development in:

- policy development and implementation;
- prevention counseling;
- AIDS in the workplace;
- training-of-trainers and peer educators;
- AIDS education in schools;
- communications (training, press, broadcast, video, materials development, and marketing);
- women in AIDS programs;
- condom marketing (logistics, distribution, and monitoring);
- community-based education projects;
- formative research; and
- process and outcome evaluations.

AIDSCOM has developed long-term, large-scale programs in Ghana, Malawi, the Republic of South Africa, Rwanda, Swaziland, Tanzania, Uganda, and Zambia, while providing short-term technical assistance to numerous other countries. Long-term resident advisors and part-time coordinators were posted in Ghana, Malawi, the Republic of South Africa, and Tanzania.

■ Highlights

Women and AIDS Project

The Tanzania Women and AIDS Project is in final implementation. Phase I and Phase II data were collected and analyzed during this reporting period. The data indicated that although women know about AIDS and risky behavior, they are uncomfortable about talking with their partners about sexual behavior. As a result, the Women and AIDS workshop intervention was designed to include skill-building and negotiation techniques for women to practice. A five-week, one day each week, workshop was designed for women working in the insurance industry in Dar Es Salaam. The workshop also included one evening session for the male partners of the participants, which was added to the training design at the request of the BIMA insurance company. In addition to overseeing the design of measurement instruments and data collection, AIDSCOM's resident coordinator worked with Washington staff and local trainers to design and field test the training manual that is being used in the field. The project hopes to make this manual available as a model for other Women and AIDS Projects as soon as the Phase III data are collected and analyzed — early this fall.

Uganda Data Show Impact on Behavior Change

The AIDSCOM/Annenberg School of Communication researcher completed an impact evaluation of the Uganda AIDS in the Workplace Project. Working with local staff and interviewers, AIDSCOM collected data at three points during project intervention. Three variables were used to determine if peer education was a viable method for promoting HIV prevention: talking with a peer educator, going to a talk at the workplace, and viewing the film *It's Not Easy*.

Data analysis showed that when all three variables were measured together, there was significant behavior change reported. When each variable was measured separately, significant behavior change was also reported. Respondents who said they saw *It's Not Easy* were twice as likely to report behavior

change. Findings from the analysis were presented at the international AIDS conference in Amsterdam.

Advanced Counseling Manual and Training Completed

For the last year, AIDSCOM has worked with the AIDS Information Center (AIC) in Uganda to design, develop, and field test a manual for advanced counselor training. Technical assistance to AIC continued during this reporting period. The manual was completed, staff were trained to use it, and counselors are now using it in the field. During the next few months, the manual will be revised to ensure that a final copy will be complete by December 1992. Although the manual was designed for AIC advanced counselors, it will also be a useful model for use throughout Africa.

Malawi School Curriculum Completed

The Malawi AIDS Education in the Schools Project was successfully completed, including teacher training, printing and distribution of classroom materials, and national implementation. In addition to overseeing this two-year project, AIDSCOM's resident advisor helped write and stage songs, skits, plays, and a series of radio messages about AIDS. The resident advisor also worked closely with USAID/Lilongwe and AIDSCAP to create a strategy for AIDS interventions to be managed by AIDSCAP.

■ Country Achievements

During the past five years, AIDSCOM has supported major efforts in HIV/AIDS prevention in eight African nations. Following are summaries of significant accomplishments in the seven countries where there was activity during this period.

Ghana

In Ghana, AIDSCOM continued to work with the Ministry of Health (MOH) to reach out of school youth with HIV/AIDS prevention messages. The National AIDS Prevention Campaign (launched in August 1991) continues to be supported by AIDSCOM through agreements with Apple Pie Publicity, Ltd., a local advertising firm. The campaign was expanded to ten sites during the reporting

period. Activities included filming and frequent broadcast of a third television spot.

In addition, AIDSCOM completed data collection for measuring the impact of the national information campaign. These data will be analyzed in early fall, following which a final report will be issued. AIDSCOM's part-time resident advisor completed all coordination efforts and closed all accounts and subcontracts during September.

Malawi

In Malawi, AIDSCOM's resident advisor focused on the AIDS Education in the Schools Project, which is now complete at all grade levels; primary, secondary, and tertiary. In addition, the resident advisor was recently invited by USAID/Lilongwe to play a key role in designing the new HIV/AIDS prevention strategy to be implemented by the AIDSCAP Project.

Republic of South Africa

AIDSCOM's resident advisor continued to facilitate training workshops in HIV/AIDS prevention and to help USAID/Pretoria finalize its HIV prevention strategy. The advisor also assisted the AIDSCAP team and the Mission in programming funds for HIV prevention programs. A deputy country director was hired and the administrative assistant is attending more workshops to assist her in training.

Swaziland

AIDSCOM provided significant technical assistance during this period. One consultant spent several weeks training telephone hotline workers to provide basic HIV/AIDS information and referrals. AIDSCOM also provided a consultant to train FLAS and FSE project staff to develop and field-test HIV education materials. With these activities, AIDSCOM completed its scope of work in Swaziland.

Tanzania

In Tanzania, AIDSCOM continued to focus on condom social marketing, AIDS in the Workplace, Women and AIDS, and counseling projects. During this reporting period, the AIDSCOM research director and two other AIDSCOM staff helped train the "Salama research team" to conduct a second

retail audit to learn if Salama condoms were widely available. The team found that more than 50 percent of pharmacies in Dar Es Salaam carry Salama condoms.

TACOSODE and OTTU continued to implement programs at targeted worksites during the second year of their contracts with AIDSCOM. The AIDSCOM resident coordinator provided on-going technical assistance to these programs and in-country monitoring of all AIDSCOM activities. USAID/Dar Es Salaam requested that the resident coordinator be a member of the transition team to help design on-going HIV prevention strategies.

The Women and AIDS Project was highly visible during this reporting period. AIDSCOM's Africa regional coordinator, Africa program associate, and the resident coordinator worked with OTTU staff to design a program intervention and training manual. The program associate and resident coordinator have had primary responsibility for creating and monitoring this country project.

Uganda

In Uganda, AIDSCOM activities have emphasized support of the communications and behavior change components of USAID's AIDS in the Private Sector Project. Activities during this period included a training workshop, development and re-design of the peer educator training manual, analysis of data to measure the impact of the peer education model on behavior change, and a workshop with the AIDS Information Center (AIC) to complete the curriculum for advanced counselor training. In addition, a final report of the impact evaluation was completed and distributed.

Zambia

AIDSCOM staff and consultants provided extensive technical assistance to the Zambia theater group to write a script and cast and film an AIDS education play. Technical assistance was also provided for broadcasting the final episodes of the radio drama, *Nshilakamona*. In addition, an AIDSCOM staff member spent time in Zambia during this reporting period collecting and analyzing data of the impact of the radio drama on potential behavior change.

GHANA (Emphasis Country)

Population:	14,886,000
Reported AIDS Cases:	2,474 (June 1991)
HIV Seroprevalence:	Seroprevalence data are limited, although a surveillance system is being developed. Estimates are that seroprevalence among the urban population is 1-4%
Medium-term Plan:	January 1989
AIDSCOM Assessment Visit:	October 1989
Project Start-up Date:	October 1989
Mission Buy-ins:	\$500,000 for FY89 \$400,000 for FY91
Resident Coordinator:	Part-time
Number of TA Visits to Date:	22

AIDS Activities Focus: Training-of-trainers, development of national media campaign directed toward youth, and provision of technical assistance to Ghana AIDS Prevention Coalition (a coalition of NGOs).

■ Country Strategy

AIDSCOM's HIV/AIDS prevention strategy for Ghana has emphasized capacity building and implementation of a national media campaign.

AIDSCOM has worked closely with the National AIDS Control Programme of the Ministry of Health, in particular with the IEC Coordinator, to transfer skills in developing and managing a multi-channel media campaign. While conducting an impact evaluation of the campaign, AIDSCOM also facilitated skills development at the Institute of Statistical, Social, and Economic Research (ISSER), at the University of Ghana, in Legon. The media campaign was to reach both the general public and, more specifically, young people aged 15-25. Evaluation, a pre/post intervention KABP, became an important component of the campaign.

■ General Activities

During this reporting period AIDSCOM completed all planned activities in Ghana. The media campaign, which began in August 1991 and included broadcast of television commercials and the distribution of print materials, continued through June 30,

1992. The School Outreach Programme, which was instituted in nine regions during February/March 1992, was completed at the beginning of this reporting period.

A primary activity during this reporting period was to collect, with ISSER, follow-up KABP data with which to measure the impact of the media campaign. Preliminary analysis of these data showed significant increases in the percent of persons who said they heard about AIDS on television or radio. Almost half (46 percent) could correctly complete the campaign phrase, "Don't be careless, get protection." More than half (58 percent) mentioned AIDS as one of the three most serious diseases for young people in Ghana, up from 37 percent in the 1991 baseline. Further analysis of the data and preparation of the final report will be completed by late October 1992.

■ Planned Activities

All field activities are complete. The remaining activities, for which no extra costs will be incurred, are to analyze the second data set and prepare the final evaluation report.

MALAWI (Emphasis Country)

Population:	8,000,000
Reported AIDS Cases:	12,074 (October 1990)
HIV Seroprevalence:	Seroprevalence is estimated to be 20% among adults older than 15 years. Infection rate in rural areas is estimated to be 8%, for a national average of 9.6%
Medium-term Plan:	March 1989
National AIDS Committee:	The first meeting of the National AIDS Committee was sponsored by AIDSCOM in April 1989, followed by semiannual meetings
AIDSCOM Assessment Visit:	January-February 1989
Project Start-up Date:	January 1989
Mission Buy-ins:	\$200,000 (HAPA, August 1988) \$400,000 (Mission, FY91)
Resident Advisor:	November 1990
Collaborating A.I.D. Projects:	Project HOPE, Public Health Initiative for Child Survival (PHICS) Project, Malawi Red Cross Blood Donor HIV Education Project
Other Collaborators:	MOH, WHO/GPA, UNICEF, JHU, Ministry of Education (MOE), Ministry of Community Services (MOCS), Private Hospital Association of Malawi, Medical Association of Malawi, Private Schools of Malawi
No. of TA Visits to Date:	7
AIDS Activities Focus:	The project focuses on strengthening health education and public health communication capabilities of the MOH, MOE, and MOCS; various PVOs; and private schools and hospitals. Specific effort will be made to develop, implement, and evaluate AIDS education in public and private schools.

■ Country Strategy

AIDSCOM/Malawi has focused on creating public and private sector consensus as to the need for comprehensive HIV/AIDS education in all schools, nationwide. As a result of successful consensus building, Malawi has developed, pre-tested, and is implementing an AIDS education curriculum for all

grade levels, supported by a variety of teaching materials. In addition, the project has provided significant support and guidance to the Malawi Health Education Unit (HEU) for writing and performing plays, skits, and songs that contain AIDS education and other health education messages.

■ General Activities

Major activities during this period included completing all manuscripts and printing AIDS books for schools, distributing the books to the three Regional Education Offices, organizing workshops to increase the professionalism and broaden the repertoire of the Health Education Band, and participation in a number of workshops to improve communication and coordination within the AIDS education community and to enhance the video and audio production capabilities of the HEU.

AIDS education materials for schools. All 13 manuscripts of the AIDS books for schools were completed. Meetings were held with personnel from the AIDS Secretariat and HEU to make final edits and to approve the text of books for secondary and post-secondary schools. Following is the printing/delivery status of all books developed through the program:

- Pupils' Books Standards I to IV — All books printed and delivered to HEU.
- Teacher's Guide Standards I to IV — All books printed and delivered to HEU.
- Pupils' Books for Standards V to VIII — Printed, 300 copies each have been delivered to HEU for training, the remainder are in transit via sea freight, due to arrive in October.
- Teacher's Guide for Standards V to VIII — Printed, 300 copies delivered to HEU for training, the remainder are in transit via sea freight, due to arrive in October.
- Pupils' Books for Secondary Schools — All books printed and delivered to HEU.
- Teachers' Guide for Secondary Schools — All books printed and delivered to HEU.
- Students' Handbook for Colleges — Being printed, delivery to HEU due by 12 October.
- Teachers' Guide for Colleges — Being printed, delivery to HEU due by 12 October.

Books for Standards I to IV were formally delivered by the Ministry of Health to the Ministry of Education and Culture at a ceremony on August 24. The Honorable Kate Kainja, Deputy Minister for Educa-

tion and Culture, accepting for the Ministry of Education and Culture, pledged to see that AIDS education, based on the new books, would be implemented quickly throughout Malawi. The Minister of Health, USAID Mission Director, and UNICEF Representative participated in the ceremony.

Arrangements were made to begin delivery of the books, the last week of September, to the three Regional Education Offices in Lilongwe, Blantyre, and Mzuzu. Books for lower primary and secondary schools will be delivered first, followed by those for upper primary and college.

Teacher training will be done by the 214 District Inspectors of Schools and Home Economics Coordinators who were trained in workshops at the Malawi Institute of Education in January 1992. It is anticipated that the books will be revised, as necessary, and reprinted by the new AIDSCAP Project.

Entertainment media for health education. A major workshop in music, story telling, drama, and puppetry for disseminating health education messages was held in Lilongwe on June 3-9, 1992, at the HEU. Participants included HEU personnel and representatives of drama groups, the University of Malawi Department of Fine and Performing Arts, and the United States Peace Corps. Resource people included two professional story tellers/musicians from the United States, co-sponsored by the U.S. Information Agency. The culmination of the workshop was a public performance at Lilongwe's Bottom Hospital, which attracted more than 500 people. A puppet play about AIDS, written as a workshop activity, is being performed regularly by the HEU Band during its rural tours.

The AIDSCOM advisor accompanied the band on a tour through the central regions of the country. Performances combined AIDS education with messages about diseases related to the current drought. A video was made to document a performance in Thavite, a village near Selima.

Communication and coordination among NGOs. The resident advisor served as a resource person and facilitator for a workshop designed to increase communication and improve coordination among NGOs involved in AIDS prevention and care. The

workshop was organized and sponsored by the AIDS Secretariat. An evaluation of the workshop by the AIDSCOM advisor revealed strong support for improving contact between NGOs and the need for the AIDS Secretariat to play a major coordinating/facilitating role.

Video production. AIDSCOM helped raise funds to plan and produce two AIDS education videos targeted at youth. AIDSCOM provided initial funding for script writing. UNICEF led in organizing production and post-production. Their production served as on-the-job training for personnel from HEU and other agencies. The videos have been enthusiastically received by local audiences.

Video is becoming an increasingly important medium for AIDS education in Malawi. The tasks now are to ensure a steady flow of funding for future production and to increase accessibility to audiences, particularly in rural areas. It is recommended that early consideration be given to providing free copies of AIDS education videos for showing in video theaters in small towns and villages and to video rental houses in urban areas for free loan to customers. Attention also should be paid to preparing videos about AIDS and other health topics for broadcast on television when the medium is introduced to Malawi.

Means must be found to facilitate showing videos in schools and rural sites that lack electrical power. An evaluation of a highly-portable, self-powered video system for this purpose is now being made by the AIDSCOM Advisor. The system consists of a video monitor and tape player contained in a single cabinet combined with a very small, petrol-powered generator.

AIDSCOM is providing a video standards converter to the AIDS Secretariat to facilitate the duplication of videos from other formats into the PAL system. This will dramatically increase the variety of AIDS videos available to health educators. The converter also will allow the transfer of videos made in Malawi to formats used by other countries.

Communication hardware and training. An evaluation of solar-powered radios for rural listening to health broadcasts is also underway. There is a long history of demand for such a product, most recently expressed at the workshop for NGOs in Liwonde. Radio continues to be the most under-used development tool in Malawi, largely because of difficulties in providing radio receivers and supplying them with batteries. Distributing solar-power radios to local health workers and community mobilization leaders could do much to encourage development in all sectors.

Considerable time has been spent helping the Health Education Band develop systems for safely transporting and maintaining its equipment. The band must travel over rough, dusty roads and perform outdoors in harsh environmental conditions. This presents a formidable challenge in terms of maintenance and repair, especially in respect to sound reinforcement equipment. Weather-proof carrying cases are being made and tools have been provided and training given to assist with this problem.

The Health Education Band is one of the most effective means of carrying health messages to rural audiences. The band draws large, appreciative audiences wherever it appears. The group often performs at three different sites in a day, usually attracting audiences numbering into the thousands. The next step in developing this important medium should be the creation of two similar bands/drama groups, one in the Northern Region and another in the Southern Region, to expand the reach and scope of the program.

Training in audio production has continued on a regular basis for personnel from the HEU Radio Section. Practical work in recording and post-production of audio materials for use in hospital/clinic waiting rooms provided on-the-job training during the last three months of the reporting period.

■ Planned Activities

The AIDSCOM Project in Malawi will close in mid-November, 1992.

REPUBLIC OF SOUTH AFRICA (Emphasis Country)

Population:	38,000,000
Reported AIDS Cases:	1316 (June 1992) with 446 deaths reported; Minister of Health reported AIDS cases had tripled in one year
HIV Seroprevalence:	STD clinic patients January-September 1991: black males had increased from 1.38% HIV+ in December 1989 to 8.25% in September 1991. Black women had increased from 1.95% HIV+ in December 1989 to 9.84% in September 1991. Black females attending family planning clinics had increased from 0.64% in December 1989 to 6.78% in September 1991. Projections for the nation predict 21,700 cases in 1995 and 1,375,000 in 2001. Adult seroprevalence is projected to be 17% to 27% by 2000
Medium-term Plan:	No formal collaboration with WHO/GPA
AIDSCOM Assessment Visit:	May 1989
Project Start-up Date:	August 1990
Mission Buy-Ins:	\$ 75,000 (USAID/SA, 1990) \$ 600,000 (USAID/SA, 1991) \$1,500,000 (USAID/SA to AIDSCOM/AIDSCAP, 1992)
Resident Advisor:	October 1991
Collaborating A.I.D Projects:	The Progressive Primary Health Care (PPHC) Network and its member organizations, including the South African Black Social Workers Association (SABSWA), the Township AIDS Project (TAP) in Soweto, African Research and Puppetry Program (AREPP) and Bellville Community Health Project (BCHP), all of which receive funds from USAID/SA
Other Collaborators:	Members of progressive health and education groups in South Africa, particularly those that are members of PPHC, such as the South African Council of Churches (SACC) and the National Union of Mineworkers (NUM). In addition, there is collaboration with the Centre for Applied Legal Studies, University of the Witwatersrand, the AIDS Consortium Project, the South African Association

of Independent Schools (SAAIS), the Independent Schools Council (ISC), the Association of Muslim Private Schools (AMPS), the Catholic Institute of Education (CIE) and the South African Board of Jewish Education (SABJE), the Alexandra Clinic, Planned Parenthood Association of South Africa, the ANC Health Department, Council of South African Trade Unions (COSATU), National Congress of Trade Unions (NACTU), the Education and Information Centre, Red Cross Society of South Africa, the Churches AIDS Programme, Diakonia, Storytellers Group and Workplace Information Group

No. of TA Visits to Date:

9

AIDS Activities Focus: Provide technical assistance to the Mission and technical and financial assistance to individuals and non-governmental organizations doing AIDS prevention work throughout South Africa. Goals are to help reduce the spread of HIV/AIDS and to reduce the impact of HIV/AIDS on individuals, families, communities, and society.

■ Country Strategy

It is projected that seroprevalence rates in the Republic of South Africa are doubling every 8.5 months nationally and every 6.5 months in Natal Province. This projection, along with denial in much of the country that the disease exists, contribute to the urgency of the Mission response to this challenge. The AIDSCOM/South Africa resident advisor helped the Mission develop a strategy for HIV prevention that includes three educational components:

- reducing sexual transmission of HIV,
- reducing perinatal transmission of HIV, and
- reducing the impact of HIV on individuals, families, and society through training prevention counselors and developing AIDS education programs.

The most urgent items on the AIDSCOM/SA agenda are to create a national HIV/AIDS resource center, to assess and fulfill HIV/AIDS-related training needs, to finance and conduct training workshops, to coordinate tours to observe other African AIDS

control programs, to coordinate nominations for overseas HIV/AIDS-related study courses, to help evaluate these interventions, and to arrange a condom social marketing needs assessment and appropriate follow-up.

In addition to these general objectives, AIDSCOM seeks to:

- assist USAID/South Africa in its country-wide HIV/AIDS prevention efforts;
- help individuals and organizations develop AIDS prevention programs through training and sharing of techniques, resources, and information;
- help evaluate AIDS prevention activities to maximize the programmatic and cost effectiveness of the interventions;
- promote collaboration in AIDS prevention and control among nongovernment and government organizations in all sectors; and
- assess the availability and accessibility of condom supplies in both the private and public context and promote their regular use.

■ General Activities

During the reporting period, the AIDSCOM/South Africa office doubled in staff size, from two to four. The team now includes a Resource Coordinator for the HIV/AIDS Resource Center and a Deputy Program Officer as his counterpart. With buy-in funds from AIDSCAP, the project is now designated as AIDSCOM/AIDSCAP. With program funds now available, the project has, or will soon, accomplish the following activities.

Three South Africans, one each from the PPHC, SABSWA, and the Planned Parenthood Association of South Africa (PPASA), attended the Margaret Sanger Center course, *AIDS: Human Sexuality and Programme Planning* in May-June 1992.

Three South Africans, one each from the PPHC, SABSWA, and the the South African Health Workers Congress, attended the International Health Programs course, *Information, Education, and Communication for HIV/AIDS Prevention*, at the University of California, Santa Cruz, in June-July 1992.

Three South Africans, including two regional AIDS coordinators for PPHC and one from SABSWA, attended the International AIDS Conference in Amsterdam in July 1992.

Two South Africans, representing the PPHC, the Association of Black Teachers, and the South African Association of Independent Schools, attended a four-week course on *Planning for HIV/AIDS Prevention in Developing Countries* at the University of East Anglia, Norwich, UK.

Six South Africans completed a study tour of AIDS prevention/control activities in Zimbabwe, Uganda, and Malawi. The following NGOs were represented: ANC Health Department, National Council of Trade Unions, PPHC, SABSWA, PPASA, and the Education Information Centre.

Technical assistance was arranged to explore mounting a pilot project based on the Project CHAMP/AED program. The proposed program would target families in Natal Region who are affected by HIV/AIDS. Index cases will be identified through the antenatal clinic and maternity or

pediatric wards at King Edward Hospital (Durban) or Edendale Hospital (Pietermaritzburg). Subcontracts were negotiated with the proposed implementing agency, the National Association of Child Care Workers. The association will coordinate all aspects of the 12-month pilot project, which will begin on October 1.

AIDSCOM/SA participated in training workshops or strategy planning sessions with representatives of the following NGOs: PPHC (National, Southern Transvaal, Western Cape, Durban, and Pietermaritzburg branches), South African Council of Churches, SABSWA, Township AIDS Project (Soweto), Red Cross of South Africa, National Women's Cooperatives, Centre for Applied Legal Studies, Centre for Health Policy, Bellville Community Health Project, Catholic Welfare and Development Organization, South African Association of Independent Schools, Independent Schools Council, Catholic Institute of Education, AMPS, South African Board of Jewish Education, Traditional Healers of South Africa, the Professional Herbal Preparations Association of Iyangas, the Education and Information Centre, NUM, National Council of Trade Unions, Congress of South African Trade Unions, African Research and Puppetry Programme, Hospice of the Witwatersrand, the Guest House, Sacred Heart House, the Lions Club of Groote Schuur Hospital, Dominican School for the Deaf, Athlone School for the Blind, South African Teachers Association, the Association of Black Teachers, Peninsula Technikon, Athlone Technikon, the Association for Health Promotion and Development, the Alexandra Clinic, Alexandra AIDS Action, Nur-ul-Islam School, Mabopane Civic Association (Boputhatswana), National Education Policy Investigation (NEPI), ATICC/Western Cape, Pietermaritzburg AIDS Action Group, Diakonia, the African Nation Congress (ANC) Health Department, and the AIDS Consultancy and Training Services (ACTS).

The AIDSCOM/SA resident advisor participated in five policy-level meetings conducted by the AIDS Unit, now called the AIDS Programme, of the Department of National Health and Population Development.

■ Research Activities

Pre- and post-test data and individual workshop evaluations collected during a week-long SABSWA/AIDSCOM/TAP/Red Cross/National Women's Cooperative workshop held at AIDSCOM offices are being analyzed at SABSWA national headquarters in Johannesburg. Early results indicate that considerable progress can be made toward increasing knowledge about AIDS and improving attitudes about providing compassionate care to HIV-infected people, their families, and friends.

Formative research is being conducted for two AIDSCOM/AIDSCAP-sponsored activities: the pilot CHAMP Project in Natal and the National Traditional Healers AIDS Prevention Initiative. Research and evaluation components are being incorporated into the design of both projects.

■ Planned Activities

AIDSCOM/South Africa staff will be involved in the following activities during the next six months.

- Technical assistance will be provided to USAID and to NGOs involved in HIV/AIDS prevention programming.

- Staff will continue to maintain and expand the Resource Centre. Each week, about 10 representatives of NGOs visit the center for materials and ideas.
- Bimonthly trips to other African countries for persons working in HIV/AIDS prevention will be arranged to allow them to observe AIDS programs in action. The next trips (November-December) are scheduled to Nigeria, Ghana, Sierra Leone, and The Gambia, followed by Zambia, Tanzania, and Kenya (January-February).
- NGO representatives will be sponsored to attend study courses and conferences. Four persons will travel to Yaounde and one to New Delhi.
- Technical assistance will be provided for two pilot projects: a nationwide traditional healers AIDS prevention initiative and a provincial intervention in Natal to introduce a program for HIV affected families that is similar to the U.S.-based CHAMP (Community HIV/AIDS Model Project) program.

SWAZILAND

Population:	750,000
Reported AIDS Cases:	528 (June 1991)
HIV Seroprevalence:	From 1990-1991, 12,377 blood donors were screened for HIV; 3.64% tested positive
Medium-term Plan:	September 1988
National AIDS Committee:	The AIDS Prevention and Control Program is supported by a National AIDS Committee, which advises the MOH
AIDSCOM Assessment Visit:	September 1988
Project Start-up Date:	August 1990
Mission Buy-ins:	\$170,000 (June 1990, USAID/Mbabane)
Resident Advisor:	None
Collaborating A.I.D. Projects:	Project HOPE, Family Life Association of Swaziland (FLAS)
Other Collaborators:	MOH/Health Education Unit, WHO/GPA, Federation of Swaziland Employers (FSE), and Federation of Swaziland Trade Unions
No. of TA Visits to Date:	10
AIDS Activities Focus:	Short-term technical assistance will be provided, primarily to Project HOPE and FLAS, in training, program development, materials development, and evaluation. The focus of this technical assistance will be FLAS' industry-based AIDS/family planning peer education project.

AIDSCOM's strategy in Swaziland is primarily one of capacity building through short-term technical assistance. Two local NGOs, the Family Life Association of Swaziland (FLAS) and Project HOPE's new AIDS center TASC (The AIDS Support Center), have been the primary recipients of this assistance. During this final reporting period, AIDSCOM conducted two technical assistance visits, the first to support materials development for both FLAS and TASC and the second to support developing a new telephone helpline service at TASC.

The first visit, in May/June 1992, was devoted to the planning and creating educational and promotional materials for FLAS and TASC. The AIDSCOM consultant conducted a materials development workshop, helped conceptualize messages, devel-

oped pre-testing questionnaires, analyzed pre-test data, and helped draft the materials. Subsequent to this technical assistance visit, FLAS and TASC have continued the process. All materials are expected to be ready for distribution by October 1992.

The second technical assistance visit, in June/July 1992, was devoted to organizing a telephone helpline service at the TASC facility in Manzini and to training volunteer telephone hotline operators. AIDSCOM was present at the inauguration of the service and helped Project HOPE supervise and evaluate the first week of operations.

■ Planned Activities

All AIDSCOM assistance to Swaziland was completed by the end of the reporting period.

TANZANIA (Emphasis Country)

Population:	24,500,000
Reported AIDS Cases:	27,396 (August 1991)
Medium-term Plan:	April 1988, revised January 1990
National AIDS Committee:	1987
AIDSCOM Assessment Visit:	February 1988
Project Start-up Date:	September 1988
Mission Buy-in:	\$1,503,000 through September 1993
Collaborating A.I.D. Projects:	AIDSTECH, JHU/PCS
Other Collaborators:	National AIDS Control Programme (NACP)/ Ministry of Health, Organization of Tanzanian Trade Unions (OTTU), Tanzanian Council for Social Development (TACOSODE), WAMATA (Tanzanian AIDS Counseling NGO), Association of Tanzanian Employers (ATE), Mac Holdings Ltd./ Pharma Plast Ltd., Cette International Ltd., Coopers & Lybrand
No. of TA Visits to Date:	35

Activities Focus: Condom social marketing, consumer research, message and materials development, media promotion, and commercial condom distribution; materials logistics management for public sector condom distribution (now the responsibility of WHO/GPA); implementation of the AIDS in the workplace model.

■ Country Strategy

Tanzania has one of the highest HIV seroprevalence rates in Africa and one of the highest proportions of AIDS cases per population in the world. The Government of Tanzania (GOT) has acknowledged the severity of the AIDS epidemic and the urgent need for effective preventive action. However, the GOT lacks technical expertise in designing effective health education and IEC campaigns and resources for logistics management and prevention counseling.

USAID/Dar Es Salaam has focused much of its AIDS prevention and control efforts on providing condoms to the National AIDS Control Programme (NACP) for distribution through the Public Health System. AIDSCOM has assisted the NACP in

logistics management of its condom distribution system and is helping develop model programs to enlarge the private sector's role in combating the spread and impact of AIDS. AIDSCOM works closely with the NACP to minimize existing GOT sensitivities through increased collaboration with private sector firms and NGOs to develop and implement AIDS education, counseling, and condom distribution/promotion programs. AIDSCOM activities are focused in the following areas:

- developing rudimentary tracking and reporting systems for condom commodities, training NACP/MOH staff to implement the systems, and providing vehicles to NACP;
- developing and launching a new commercial condom and distributing it by combining con-

sumer-oriented market research, an experienced commercial distributor, and discrete public relations/advertising support with a cost-recovery scheme; and

- building upon established worksite AIDS education and counseling models to provide effective, low-cost services to at-risk workers and affected communities.

■ General Activities

Condom social marketing. The Salama condom social marketing project continued at a steady pace throughout this reporting period. Print advertisements continued and radio spots were recorded, field-tested, and broadcast. SCANAD, AIDSCOM's local subcontractor for marketing, has developed and field-tested other media materials, including cinema screen spots and billboards. In addition, it is designing materials that promote Salama condoms for distributors to give to wholesalers and retailers.

Peer educators and counseling. The AIDSCOM resident coordinator provided significant levels of technical assistance and supervision for the AIDS in the workplace and counseling projects. TACOSODE and OTTU continue to train and develop peer educators throughout Dar Es Salaam and other parts of the nation. During a recent visit to Tanzania, the Africa regional coordinator for AIDSCOM interviewed approximately 30 peer educators who had been trained by OTTU or TACOSODE. Almost all the peer educators said they had changed their own behavior as a result of the training and their position as a peer educator at their worksite or community. Many of the educators said they share information with others outside of their workplace; some talk with their spouses and children, others work with their church groups.

Women and AIDS Project. The Women and AIDS Project in Dar Es Salaam was very active.

AIDSCOM's Africa program associate traveled to Tanzania to work extensively with OTTU staff and the AIDSCOM resident coordinator to design and develop a training manual to be used by trainers to help women and their partners talk about sexual behavior and to help women negotiate safer sexual practices in their relationships.

■ Research

The AIDSCOM research director traveled to Tanzania with AIDSCOM/Porter Novelli staff to train local research staff in conducting interviews, developing questionnaires for retail audits, and helping supervise the Wave II wholesale audit. In addition, the AIDSCOM research associate traveled to Tanzania to train local research staff in data entry and beginning analysis. Further information about these activities is in the Research section.

■ Planned Activities

For the three months following this reporting period, AIDSCOM will concentrate on closing all project activities in Tanzania. OTTU, TACOSODE, and WAMATA will complete AIDSCOM-related activities by November 15, following which final reports will be prepared.

Several important projects will be completed before close out. The Women and AIDS intervention will have occurred and final data will have been collected, the Condom Social Marketing Project will have conducted Wave 3 of the wholesale audit and a retail audit, and the AIDS in the Workplace Projects will have conducted final evaluations of peer educators. Summary reports of each will be prepared. Data collected in Tanzania will be analyzed by research staff and results of the analyses will be distributed.

UGANDA (Emphasis Country)

Population:	15,908,896
Reported AIDS Cases:	21,719 (December 1990)
Projected HIV Infection Rates:	1,000,000
Medium-term Plan:	1986
National AIDS Committee:	1986
AIDSCOM Assessment Visit:	January 1988
Project Start-up Date:	September 1988
Mission Buy-ins:	\$1,109,000 (September 1988-December 1992)
Collaborating A.I.D. Projects:	SOMARC
Other Collaborators:	The Experiment in International Living (EIL), Action Aid (United Kingdom), Federation of Uganda Employers (FUE) and member agencies, Makerere University, School of Media Development and Graphic Art, Ministry of Health/National AIDS Control Program (MOH/NACP), National Resistance Army, Ministry of Information, Uganda Television (UTV), The AIDS Support Organization (TASO), Uganda Red Cross, AIDS Information Center (AIC)
No. of TA Visits to Date:	37

AIDS Activities Focus: Use the training-of-trainers model in the workplace, develop educational materials, and implement evaluation programs. In addition, expand curricula development and counseling training.

■ Country Strategy

In September 1988, AIDSCOM began working with the USAID-sponsored AIDS in the Private Sector Project. It was recognized that although the Ugandan Government had implemented several public education programs using newspapers, television, and radio, and although people were learning the facts about AIDS, changes in behavior were not being promoted. To supplement Government efforts, USAID designed an education project to encourage and support behavior changes necessary to reduce personal risk of HIV infection.

USAID contracted with two umbrella organizations, the Federation of Ugandan Employers (FUE) and the Experiment in International Living (EIL) to implement a national, workplace-based, peer education project. These organizations are assisted by The AIDS Support Organization (TASO) and the AIDS Information Center (AIC), which provide counseling and support services.

AIDSCOM offers broad technical assistance to FUE, EIL, AIC, and TASO to implement the AIDS in the Private Sector Project, including establishing a multi-tiered education dissemination system,

training peer educator/trainers, developing written and visual educational materials, distributing condoms, and implementing effective evaluation procedures. The project strategy also includes providing training in AIDS prevention counseling to TASO and AIC trainers, with the understanding that they will train other staff members.

■ General Activities

Training. During this reporting period, AIDSCOM conducted an advanced workshop for the peer educators from the FEU and EIL peer education project. During the workshop, the peer educators updated and revised the training manual that was produced with AIDSCOM in 1990. The educators met for a five-day retreat to review the current manual, eliminate materials that are no longer used, and add new training activities that have been incorporated into the program. In addition to this workshop, AIDSCOM staff helped AIC staff to finalize their advanced counselor training manual.

Evaluation. Final analysis was completed for the AIDSCOM-conducted impact evaluation to determine the effectiveness of the peer education project. Data were shared with other HIV/AIDS professionals at the International AIDS Conference in Amsterdam and at the Johns Hopkins University Polk Symposium. USAID/Kampala and local project staff will use these findings to design new and expanded projects.

■ Planned Activities

For two months beyond this reporting period, AIDSCOM will continue to coordinate with FUE/EIL peer education trainers and AIC training departments to finalize the training manuals. Each project will be responsible for printing and binding these manuals. AIDSCOM expects that all activities related to the Uganda program will be completed by December 1992.

ZAMBIA (Emphasis Country)

Population:	7,500,000
Reported AIDS Cases:	5,000+ (June 1991)
HIV Seroprevalence:	Antenatal clinic clients ranged from 13-25% in 1990. Rates among blood donors ranged from 18-23% and among new STD clinic attenders, from 36-54%
Medium-term Plan:	August 1988
National AIDS Committee:	1986
AIDSCOM Assessment Visit:	December 1988
Project Start-up Date:	January 1990
Mission Buy-ins:	\$399,000
Collaborators:	MOH, WHO/GPA, Zambia National Broadcasting Corporation (ZNBC), Copperbelt Health Education Project, Family Health Trust, Chainama College of Health Sciences, Kara Counselling & Training Trust, Ltd., Churches Medical Association of Zambia, Kitwe Radio Drama Group
No. of TA Visits to Date:	19

AIDS Activities Focus: The project focuses on strengthening the public health communication and AIDS counseling capabilities of the MOH, ZNBC, and various PVOs. Specific efforts include developing AIDS counselor training materials, radio, and local drama programs, and print materials for women.

■ Country Strategy

Following recommendations of Zambian government organizations and NGOs working in AIDS prevention, and in accordance with priorities of the Medium-term Plan, AIDSCOM focuses on AIDS counseling training and the use of mass media, some of it entertainment oriented, to disseminate information and change behavior.

■ General Activities

Radio soap opera. Zambia's AIDS-oriented radio drama, *Nshilakamona*, began broadcasting in late August 1991. *Nshilakamona* has won high praise from drama critics and the public. The radio drama

focuses on several families that are facing the AIDS crisis in their homes and their communities. Produced in Bemba, the most widely spoken Zambian language, the show is broadcast each Sunday evening at 8:30 p.m. The serial drama was developed based on findings of research conducted in Copperbelt and Northern Provinces, the major Bemba-speaking areas of Zambia.

A listenership survey in one province indicated that more than half the respondents had heard the radio drama at least once. Among those who listened to the radio the night before the survey, 66 percent heard the drama. In addition, an audience participation contest attracted almost 3,000 responses. Listenership continued to be high during all 39 weeks of the broadcast.

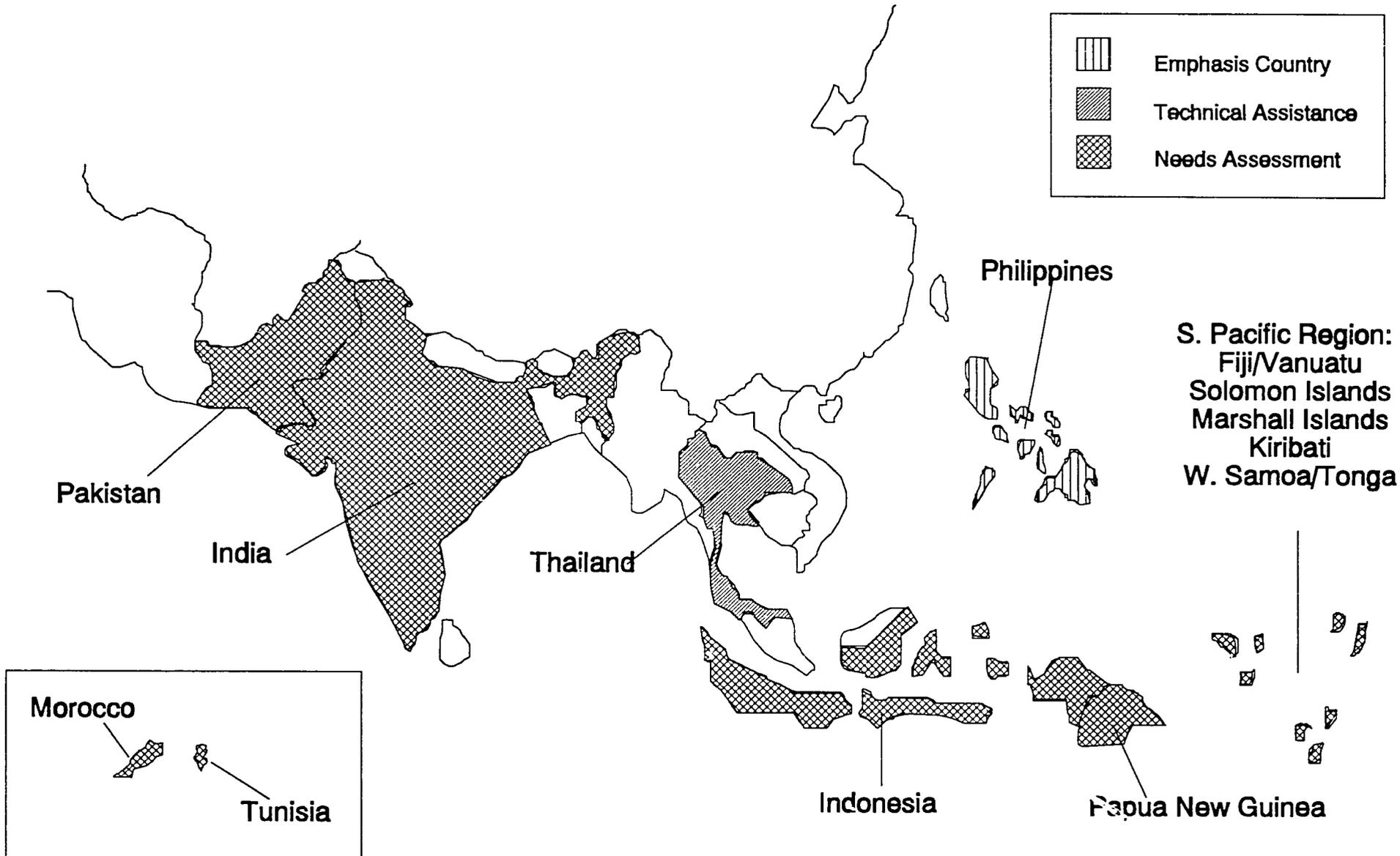
Television drama. AIDSCOM is assisting a local scriptwriter and local drama groups to prepare an AIDS-related play for television. Final field-testing of the manuscript and filming were completed during this time period. At present, the film is being edited in Zimbabwe. Copies of the video of the play will be distributed during the early fall.

■ **Research**

Data were collected for final impact evaluation of the radio drama. Analysis and results of these data are expected in early fall.

■ **Planned Activities**

Distribution of the dramatic play and *Challenges in AIDS Counselling*, a video designed and produced in Zambia to provide additional training to persons with some counseling experience, will continue after the AIDSCOM Project is finished. All travel to Zambia by AIDSCOM staff and consultants has been completed.



Asia and the Near East

Asia and the Near East

Because the 23 countries that comprise USAID's Europe and the Near East (ENE) and Asia and Private Enterprise (APRE) Regions had reported the world's lowest incidence of HIV infection and AIDS, the disease had not generally been perceived as a problem in the area. With the exception of Thailand, HIV prevention has not been addressed by governments as an urgent priority.

HIV surveillance is uniformly inadequate across the region, and evidence exists to suggest that the number of actual HIV infections or AIDS cases is under-reported or suppressed in some countries. As a result, little reliable information is yet known about regional transmission patterns, risk behaviors, or the cultural factors that may affect them.

To some degree, AIDSCOM's role in the Asia and Near East Region has reflected the emerging attention being given to the disease. For its first four years, AIDSCOM played a developmental role in the region. It provided not only limited short-term technical assistance to countries as they designed and implemented initial prevention activities, but also consulted with governments and organizations in specific countries as they developed the policies to underpin their prevention programs. Except in the Philippines, where substantial USAID buy-ins have encouraged the development of extensive, multi-faceted technical assistance, AIDSCOM concentrated on providing short-term assistance in those program areas — behavioral research, communication planning and development, and training — that most countries find useful early in their response to the HIV pandemic.

The situation began to change dramatically in late 1991 when the World Health Organization (WHO) projected that the present rising rate of HIV infection in Asia, particularly in Thailand and India, was outpacing that of sub-Saharan Africa during the

1980s. WHO estimates that at least 1.5 million Asians are HIV-infected and that the number is rising rapidly, predominantly through heterosexual transmission. WHO projects that by the mid-1990s more Asians than Africans will be infected by HIV each year.

As a reflection of this change, in mid-1991, with funds from the USAID Mission, AIDSCOM initiated program planning and technical assistance activities in Indonesia. In late 1991, AIDSCOM began to provide technical assistance to USAID Morocco and the Ministry of Public Health to analyze a national AIDS-related knowledge, attitudes, and practices (KAP) survey, the results of which would be used to develop Morocco's first mass media campaign for HIV/AIDS awareness and prevention.

■ Highlights

Counseling Training

AIDSCOM continued to assist the Indonesian Medical Association (IDI) to develop a culturally appropriate HIV risk reduction counseling training program. In May, IDI conducted a training-of-trainers (TOT) workshop for 17 participants who had received basic counseling training. IDI also translated an AIDSCOM-developed counseling training manual into Bahasa Indonesia. Four of the TOT participants then conducted a training-of-counselors (TOC) in Bahasa Indonesia in Surabaya. This served to pre-test the manual and methodologies. During the eight months of IDI's counseling training project, new trainers have conducted three TOC workshops for 69 participants from 14 regions of the country, three AIDS hotlines have been established, more than 3,500 persons have been reached with AIDS education activities, and the AIDS Counselors Association was established.

In the Philippines, AIDSCOM helped the Remedios AIDS Information Center conduct a second HIV Prevention Counseling Training Workshop for 28 program staff from 19 local NGOs. The training workshop was held in Cebu, which helped expand participation of NGOs from Mindanao and Visayas and to raise local awareness about HIV prevention efforts.

Philippines Phase Two Mass Media Campaign

AIDSCOM worked with local research subcontractor, Total Research Needs, Inc. (TRENDS), to evaluate the impact and effectiveness of the Phase II HIV Mass Media Campaign that ran in Metro Manila from February to May 1992. The campaign targeted young adults ages 15-24, and urged them to talk to both their *barkada* peer groups and sexual partners about AIDS and HIV prevention options, and to call the AIDS hotline for further information. Calls to the hotline increased 15-fold during the campaign. Tracking research data indicated that young women responded more significantly to the campaign's behavioral messages than young men. Further data analysis is underway.

Surya Hotline Service Foundation

Under a new subcontract with AIDSCOM, *Yayasan Hotline Servis Surya* (Surya Hotline Service Foundation [YHSS]) has initiated community-based HIV prevention activities in Surabaya, Indonesia's second largest city. YHSS expanded its existing hotline services to include HIV/AIDS information and prevention counseling, conducted two training-of-counselors workshops, developed simple AIDS information and prevention materials, and began community outreach activities to high schools, civic and youth groups, commercial businesses, media, and the commercial sex industry. YHSS also helped the Centers for Disease Control implement the behavioral research component of an STD prevalence survey conducted in Surabaya.

Country Achievements

Indonesia

AIDSCOM has helped lay a strategic foundation for longer-term Ministry of Health (MOH) and USAID HIV prevention efforts in Indonesia. The project initiated formative research activities to characterize the scope and dimensions of high risk behavior and potential HIV transmission in the shipping industry and the commercial sex industry in Surabaya.

AIDSCOM also investigated the behavioral determinants, barriers, and perceived social norms that influence possible discussions between married women and their spouses about sex and HIV risk reduction options.

In addition to formative and behavioral research, AIDSCOM focused on developing culturally appropriate models for promoting HIV risk reduction and safer sexual behaviors that can be adapted and/or expanded throughout Indonesia. The Indonesian Medical Association (IDI) received AIDSCOM technical assistance to implement an HIV risk reduction counseling training program for health care providers, university and NGO staff, and community-based organizations.

Under an AIDSCOM subcontract, the Surya Hotline Service Foundation, a community-based NGO in Surabaya, received technical assistance to initiate hotline counseling training, behavioral research, and community outreach activities for HIV education and prevention.

Morocco

Under a new buy-in from USAID/Morocco, AIDSCOM is providing technical assistance to the Ministry of Public Health (MOPH) to design, conduct, and analyze formative audience research on topics related to HIV. Data from the research are being used to develop a creative strategy for an HIV/STD mass media campaign. AIDSCOM is also helping USAID and MOPH work with a local advertising firm to produce and pre-test two radio spots and one television spot related to AIDS information and prevention.

Philippines

Since 1988, AIDSCOM has supported the Department of Health's (DOH) National AIDS Prevention and Control Program in program planning; qualitative and quantitative KAP research; training in prevention counseling, IEC materials development, and social marketing; and developing and evaluating two distinct mass media campaigns in Manila. In 1991, at DOH request, AIDSCOM's technical assistance shifted to working with private sector organizations, particularly NGOs. AIDSCOM helped establish the Remedios AIDS Information Center which, after six months, became legally registered as the Remedios AIDS Foundation, the Philippines' first AIDS-dedicated NGO. AIDSCOM also helped four other local NGOs to implement five HIV prevention projects.

INDONESIA

Population:	191,266,000 (1990 estimate)
Reported AIDS Cases:	18 (June 1991)
HIV Seroprevalence:	20 HIV+ individuals have been identified among 70,000 screened
Medium-term Plan:	1990
National AIDS Committee:	Yes
Donors Meeting Convened:	1989
AIDSCOM Assessment Visit:	January 1988; follow-up in June 1991
Project Start-up Date:	June 1991
Mission Buy-ins:	\$300,000 OYB transfer (May 1991–approx. September 1992)
Resident Advisor:	None planned
Collaborating A.I.D. Projects:	HEALTHCOM/Indonesia
Other Collaborators:	The Ministry of Health (MOH), WHO/GPA, International Labor Organization, U.S. Centers for Disease Control, U.S. Naval Medical Research Unit No. 2, Indonesian Medical Association, University of Indonesia, Ford Foundation, OXFAM, Program for Appropriate Technology in Health, Private Agencies Collaborating Together, HEALTHCOM, Women's Communication and Information Centre, Indonesian Family Planning Association, World Neighbors
No. of TA Visits to Date:	6
AIDS Activities Focus:	Research, training, policy development.

Although only a few cases of AIDS and HIV infection have been reported in Indonesia, Indonesian health officials readily admit that HIV disease is present and spreading throughout the nation. Actual HIV prevalence and transmission rates are unknown. Surveillance efforts have been minimal and HIV testing is hampered by conflicting official policies over confidentiality.

Still, despite general public and official denials, there are many indications of widespread high risk sexual behavior throughout the population. STD incidence is increasing rapidly among urban young people, as is teenage pregnancy. And, although condoms are widely available, condom use is extremely low. Moreover, despite the concerns of health officials, there has been no systematic, large-scale effort to educate the general public about the

risks of HIV/AIDS. Limited KAP data indicate both generally poor knowledge about AIDS transmission and prevention and high levels of misconceptions surrounding the disease.

USAID's strategy in Indonesia is to work with policymakers; professionals from the health and other sectors, both public and private; and the general public to help:

- understand the potential impact of AIDS on Indonesia,
- recognize the disease and its cofactors,
- understand and avoid behaviors that place people at risk of infection, and
- understand and implement necessary legal and social changes.

AIDSCOM technical assistance objectives include efforts to:

- assist USAID and MOH in developing and implementing selected interventions and research initiatives aimed at reducing high-risk behaviors among target populations;
- develop models for promoting HIV risk-reduction and safer sexual behaviors that can be adapted and/or expanded in other locations in Indonesia; and
- assist USAID to formulate a comprehensive, long-term HIV prevention strategy.

During the reporting period, AIDSCOM provided the following technical assistance in Indonesia:

- helped the Indonesian Medical Association (IDI) conduct a training-of-trainers workshop in HIV risk reduction counseling and to pre-test the Bahasa Indonesia training manual and methodologies in further counseling workshops,
- executed a subcontract with Surya Hotline Service Foundation (*Yayasan Hotline Service Surya* [YHSS]) and helped YHSS to design and initiate small-scale HIV education and prevention interventions in Surabaya, and
- completed formative research among married women in Jakarta that investigated the perceived benefits and barriers to talking with their spouses about sexual issues and HIV risk reduction options.

HIV prevention counseling training. Under a subcontract with AIDSCOM, the Indonesian Medical Association (IDI) implemented an HIV Risk Reduction Counseling Training Project. An AIDSCOM trainer helped IDI conduct an initial workshop in February 1992, drawing ten men and ten women from universities, hospitals, family planning clinics, and NGOs in six regions of the country. All but one of those 20 participants have since been active in HIV awareness and prevention activities.

In May 1992, 17 participants of the first workshop returned to Jakarta to be trained as trainers of additional HIV risk reduction counselors. At the time, IDI also distributed modular Bahasa Indonesia training manuals that the participants used for the next three months to design and implement training activities similar to those they had experienced. Immediately following the May training-of-trainers workshop, four of the participants conducted a four-day training-of-counselors workshop in Bahasa Indonesia for 23 participants in Surabaya. That workshop successfully demonstrated that the training content and methodologies could be appropriately adapted to both the Indonesian language and culture.

In eight months, IDI's counseling training project achieved the following successes.

- Seventeen persons were trained in HIV risk reduction counseling.
- Nine of those trainers have co-facilitated three training-of-counselors workshops, in Surabaya, Denpasar, and Cisarua, West Java.
- Sixty-nine additional HIV risk reduction counselors were trained from 14 different Indonesian provinces.
- Three AIDS hotlines were established in Jakarta, Surabaya, and Medan.
- Three AIDS brochures were produced and distributed.
- The AIDS Counselors Association (*Kelompok Konselor AIDS* [KKA]) was established, for which independent funding has been sought.
- Trainer/counselors have conducted AIDS education activities with university faculty and stu-

dents, high school teachers and students, women's organizations, family planning program and clinic staff, commercial sex workers, journalists, religious leaders, Boy Scouts, bank employees, hotel owners, and travel agents — reaching more than 3,500 people.

Yayasan Hotline Service Surya. In late June 1992, AIDSCOM executed a subcontract with YHSS, a newly established, community-based NGO in Surabaya, to initiate a variety of HIV education and prevention activities. With some initial training and technical assistance, YHSS demonstrated extraordinary initiative and energy in launching a wide range of activities in just three months. Among the activities were:

- two HIV prevention counseling training workshops for 40 volunteer workers;
- expanding hotline services to 12 hours daily and emphasizing HIV/AIDS information and risk reduction counseling;
- training 38 interviewers and counselors to participate in the behavioral research component of an STD prevalence survey sponsored by the U.S. Centers for Disease Control;
- launching an AIDS education and prevention program for youth by training 20 students from 5 high schools to work as volunteer peer educators among their sexually active friends;
- initiating outreach activities with female sex workers in a Mojokerto brothel complex and with female street walkers and squatters around Surabaya;
- initiating outreach activities with local chapters of *Dharma Pertiwi* (Military Wives Association), *Bhayangkari* (Police Wives Association), and Rotary Club, and forging partnerships with Dr. Soetomo Hospital, the Mayor's Office, and the Surabaya AIDS Control Program;
- producing a weekly column called *Counseling and Information on AIDS* published in the *Surya* newspaper's Sunday edition; and
- producing promotional brochures and stickers describing hotline services, and informational

brochures about AIDS and how to use a condom in three languages.

Women and AIDS Project. Plans were that Indonesia would be the Asia site for the A.I.D./Women in Development-funded Women and AIDS Project. However, due to funding and timing constraints, that plan was not realized.

During the reporting period, however, an AIDSCOM research consultant completed formative interviews with 44 married women attending two family planning clinics in Jakarta. Interview topics included perceived benefits and barriers to discussing health and sexual issues with peers, perceived benefits and barriers of discussing health and sexual issues with spouses, condom use experience, perceived benefits and barriers to talking with spouses about using condoms, and strategies for opening discussions about sex, health, and/or condom use with peers and spouses.

The data revealed a fundamental lack of knowledge among the women about HIV and AIDS, how HIV is transmitted, and how transmission can be prevented. For example, talking with their husbands about AIDS prevention seems easy to the women, but talking with them about sexual behavior is not. Although the women said they would feel comfortable talking to other women about sexual matters and AIDS prevention, they don't actually do so.

The group discussion model being used for Women and AIDS Projects in Brazil and Tanzania is based on the belief that women working together can develop approaches and skills to enhance their willingness and abilities to negotiate safer sexual behavior with their husbands or regular sexual partners. The research among Jakarta women seems to reveal that a similar approach might be effectively adapted to other Indonesian settings.

■ Activities for the Next Reporting Period

All AIDSCOM activities in Indonesia were completed by the end of this reporting period.

PHILIPPINES (Emphasis Country)

Population:	64,886,000 (1989)
Reported AIDS Cases:	48 (June 1991)
HIV Seroprevalence:	Limited testing programs among sex worker patients of social hygiene clinics have identified approximately 185 HIV+ persons, most of whom are female sex workers
Medium-term Plan:	August 1988
National AIDS Committee:	Yes
Donors Meeting Convened:	December 1990
AIDSCOM Assessment Visit:	January 1988
Project Start-up Date:	February 1988
Mission Buy-ins:	\$1,000,000 (through June 1990) \$1,015,000 (July 1990–approx. August 1992)
Resident Advisor:	Position redefined as Administrative Coordinator, filled in September 1991
Collaborating A.I.D. Projects:	Population Project (1988-1990)
Other Collaborators:	The Department of Health (DOH), which coordinates interaction with 20 other government agencies; WHO's Western Pacific Regional Office, located in Manila; NGOs including HAIN, STOP, ISSA, the Library Foundation, Kabalikat, In Touch, Artists Against AIDS, Reach Out; Research contractors Trends, Inc. and Asia Research Organization; and communications contractor Campaigns, Inc.
No. of TA Visits to Date:	22
AIDS Activities Focus:	Research, media campaigns, materials development, telephone hotlines, training.

■ Country Strategy

The Philippines is AIDSCOM's largest site in the ENE/APRE regions and one of the project's most extensive programs. With commitment from the Government of the Philippines and significant funding from USAID, AIDSCOM began a multi-faceted technical assistance program in early 1988. AIDSCOM's first contributions included helping the

Philippine DOH plan the National AIDS Prevention and Control Program (NAPCP) and providing technical assistance to build appropriate institutional capacity and policy consensus regarding HIV prevention activities.

The first phase of AIDSCOM technical assistance (1988-1990) focused on direct institutional development and training with the DOH/NAPCP, and establishing a baseline of program expertise in Metro Manila. At DOH request, AIDSCOM designed and conducted extensive qualitative and quantitative AIDS-related KAP research among the general population and various sentinel populations believed by the Government to be at risk of HIV infection. Completed in early 1989, data from those studies guided the NAPCP and AIDSCOM in developing strategies and messages for a general information media campaign about AIDS.

The campaign was launched on television, radio, and in newspapers in Metro Manila in February 1990. It ran through May 1990. Tracking surveys among random samples of the general population and young adults showed that the campaign had a significant positive impact on beliefs regarding HIV transmission vectors, assessment of personal risk factors, and changes in or intention to change behavior.

In 1990, the DOH asked that AIDSCOM focus its technical assistance during Phase Two (1990-1992) on helping NGOs, community-based groups, and other private sector institutions develop and implement HIV communication and prevention activities. Effecting that shift to private sector HIV program involvement has been the thrust of AIDSCOM's efforts since 1991.

■ General Activities

During the reporting period, AIDSCOM emphasized the following assistance as it concluded five years of collaboration.

- Project staff monitored the implementation of the Phase Two mass media campaign. It targeted young adults in Metro Manila. Activities included providing technical assistance to design and implement the tracking survey to assess campaign impact and effectiveness and collecting data about callers to the AIDS hotline.
- Staff continued institutional development support to the Remedios AIDS Information Center (RAIC) as the central channel for AIDSCOM

technical assistance to local NGOs and the AIDS hotline.

- An AIDSCOM consultant led a second NGO training workshop in Cebu City. That training expanded the local NGO AIDS prevention network by drawing 28 participants, many from NGOs in the southern islands and who were new to HIV prevention activities.
- The project monitored the final stages of five NGO operations research projects that tested different HIV communication and behavior change strategies among young adults, merchant seamen and their spouses, medical and nursing students, male sex workers, and men who have sex with men. All these projects concluded activities and are being evaluated, along with RAIC, at the request of the DOH.

Media campaign. The Phase Two mass media campaign ran two television spots and eight radio spots from mid-February to mid-May. The spots targeted both pre-sexual and sexually-active young single adults, ages 15-24 and the social norms governing their *barkada* peer group interactions. The spots encouraged discussions about sex and listening to friends and partners, and promoted safer sexual behaviors that are supported by the *barkadas*. The AIDS spots also urged viewers and listeners to call the AIDS hotline for further information.

Calls to the AIDS hotline increased 15-fold during the campaign. In the six months before the February 14, 1992 campaign launch, the hotline received an average of 105 calls per month. In February, the number of callers shot up to 938; in March, 2,074; April, 1,804; and May, 1,559. Most of the callers were aged 16-25, precisely the audience segment targeted in the campaign.

To assess campaign impact and effectiveness, AIDSCOM helped TRENDS, Inc. design quantitative baseline and tracking survey instruments. In January and February 1992, TRENDS conducted 300 baseline interviews among young single adults in Metro Manila. A similar group was interviewed in June and July, following the media campaign. Data on the impact and effectiveness of the campaign are being analyzed.

Remedios AIDS Information Center.

AIDSCOM's continued support to the Remedios AIDS Information Center emphasized institutional development as well as positioning RAIC as the central conduit for technical assistance to local NGOs. In addition to being a drop-in information center and housing the AIDS hotline, RAIC provides HIV prevention and pre-HIV test counseling, holds weekly lectures and film showings, and gives lectures and presentations to schools, private companies such as Intel and PhilCom, and civic groups such as the Jaycees, Rotary Association, and Caritas.

Two major efforts dominated the Center's activities during the reporting period. The first was arranging and facilitating the Second NGO Training Workshop on HIV Prevention Counseling (July 1992). The workshop was held in Cebu City to encourage greater participation from ex-Manila NGOs, and particularly those from Visayas and Mindanao. In addition, RAIC solicited participation through announcements placed in Manila, Bagiuo, Cebu, and Davao newspapers. The application and selection procedure identified 28 well-qualified participants, many drawn from smaller NGOs with which the Center had no prior collaboration. In addition to the training, press coverage of the Cebu workshop and visits to local STD clinics also presented opportunities to promote AIDS awareness and prevention efforts on Visayas and other southern islands.

The second issue of concern was to identify continued funding for RAIC staff and operations after AIDSCOM support concluded in September 1992. Backed by strong DOH and USAID commitment to keep the Center open and operational, the Foundation's Board lobbied Manila-based donors for project support funds for the Center and the hotline. Reportedly, the Foundation's proposal has been approved by the Australian International Development Assistance Bureau (AIDAB), and the Board and DOH express optimism that RAIC operations will continue.

NGO operations research. All five AIDSCOM-funded NGO operations research projects concluded their activities during the reporting period. At DOH request, the projects are being evaluated, along with RAIC, to assess impact and identify lessons learned for future HIV prevention programming.

The Health Action Information Network (HAIN) completed an HIV/AIDS-related KAP survey in six medical and six nursing schools with a total sample of 960 students. Those baseline data were used to develop modular workshop curricula and IEC materials to address biomedical and psychosocial aspects of HIV prevention, and to build communication skills. Ten, one-day workshops were conducted for 66 medical and 54 nursing students. HAIN produced 200 AIDS information kits for the students and partner agencies. The workshops significantly increased students' knowledge levels about HIV and AIDS and may have motivated them to launch subsequent personal and group activities to prevent HIV.

HAIN also used small group workshops and IEC materials for its HIV prevention project with 30 freelance male sex workers. Five different groups of men completed the series of four workshops involving the biomedical and psychosocial aspects of HIV prevention and control. HAIN reported that an intensive interpersonal communication approach was required to achieve modest knowledge gains, especially among participants with low functional literacy. However, although many reported willingness to change, the participants' high risk behavior persisted due to a combination of factors: persistent knowledge gaps, constraints associated with sex work, and participants' own denial mechanisms.

The Institute for Social Studies in Action (ISSA) finished a project with 60 merchant seamen and 60 spouses/regular partners. ISSA experienced difficulties with recruiting and retaining participants throughout baseline research, two-day AIDS education and prevention workshops, and final evaluations. Consequently, pre- and post-intervention data were limited to 37 participants of a possible 120. AIDS knowledge scores improved marginally but some significant gaps remained. Condom use was uniformly low, but the men said they were willing to use condoms if asked. Their partners said they were willing to insist upon condom use. ISSA recommended that future such projects work more directly through the shipping or manning agencies to design and implement educational activities, and that research instruments be more brief and focused.

In Manila, The Library Foundation (TLF) conducted formative research and then designed workshops to influence KABP and perceived norms among self-identified men who have sex with men. Seven such workshops were conducted with 178 participants. Comparisons of pre- and post-workshop KABP data show improvements in several knowledge areas and in participants' attitudes toward practicing safer sex. TLF noted, however, participants' reluctance to report anal sex and condom use practices and suggested that those be emphasis areas for future programs. The TLF project met its objectives and fostered the development of an active, core community in Manila of men who have sex with men.

Stop Trafficking of Pilipinos Foundation (STOP) prepared 8 social workers and 15 parent leaders from Christian Children's Fund project affiliates,

and 5 of its own staff and volunteers, to function as trainers/facilitators in HIV prevention and education activities with young adults. Two hundred eighteen young adults, aged 17-20, participated in a series of five modular training workshops that focused on self-awareness, personal development, sexuality and HIV prevention, communicating about AIDS, and peer counseling. Quantitative data are not available to assess the changes in AIDS-related KAP, sexual attitudes, or behaviors.

■ **Activities for the Next Reporting Period**

All AIDSCOM activities in the Philippines were completed by the end of this reporting period.

MOROCCO

Population:	21,392,000 (1985)
Reported AIDS Cases:	98 AIDS and 128 HIV (December 1991)
Medium-term Plan:	September 1990
National AIDS Committee:	Yes
AIDSCOM Assessment Visit:	September 1990, 1991
Project Start-up Date:	January 1992
Mission Buy-in:	\$98,779, through December 1992
Collaborators:	Ministry of Public Health, WHO/GPA, ALES (Assoc. de Lutte Contre le SIDA)
No. of TA Visits to Date:	2

AIDS Activities Focus: Provide technical assistance to the Ministry of Public Health (MOPH) in designing and implementing an HIV/AIDS, multi-media information campaign that targets the general public.

Under a new buy-in from USAID/Morocco, AIDSCOM is helping the Ministry of Public Health (MOPH) design and produce materials for an HIV/STD media campaign. During the reporting period, AIDSCOM's assistance focused on analyzing national KABP data on HIV/AIDS and using the data to develop a creative strategy for the mass media campaign.

Analysis of KABP data. AIDSCOM's research unit and a local AIDSCOM communication consultant conducted a secondary data analysis of a national KABP survey on HIV/AIDS (n = 1,342 adults) that had been recently collected for the MOPH's Programme National de Lutte contre les MST/SIDA (PLNS) and WHO/GPA. The data revealed a significant lack of awareness, and high levels of misinformation and inaccurate beliefs regarding HIV/AIDS among the general population, especially among lower socioeconomic categories. Most people (73%) had heard of AIDS, which is lower than in many other areas of the world. Almost one-third of respon-

dents either had never heard of AIDS or could not cite any mode of HIV transmission. There appeared to be important gaps in respondents' knowledge about transmission and ways to prevent infection.

The survey did not contain questions about respondents' sexual practices, including condom use. The general lack of information about sexual practices in Morocco makes it difficult for communication planners to assess potential risk in the population and to identify with any accuracy those segments of the population that are at risk. Without an accurate knowledge of who is at risk and why, planners cannot clearly define target population segments or promote specific changes in behavior that will reduce risk of HIV infection.

A communication strategy for HIV/AIDS prevention. Drawing upon the KABP research results, AIDSCOM proposed a communication strategy for developing one television spot and two radio spots for the PLNS. AIDSCOM noted the constraints and opportunities for such a campaign, including the

limited ability to transmit complex information about STDs and HIV in a 30- or 60-second spot.

AIDSCOM recommended that the media campaign should stimulate intermediaries and opinion leaders to take an active role in establishing a dialogue with the Moroccan public (especially men aged 15-39) about preventing STDs, including HIV. Influential Moroccans — community leaders, teachers, health care providers, coaches, and employers — would be the primary target audience. Sexually active men, aged 15-39, would be the secondary target audience and would be encouraged to seek more information about STD/HIV.

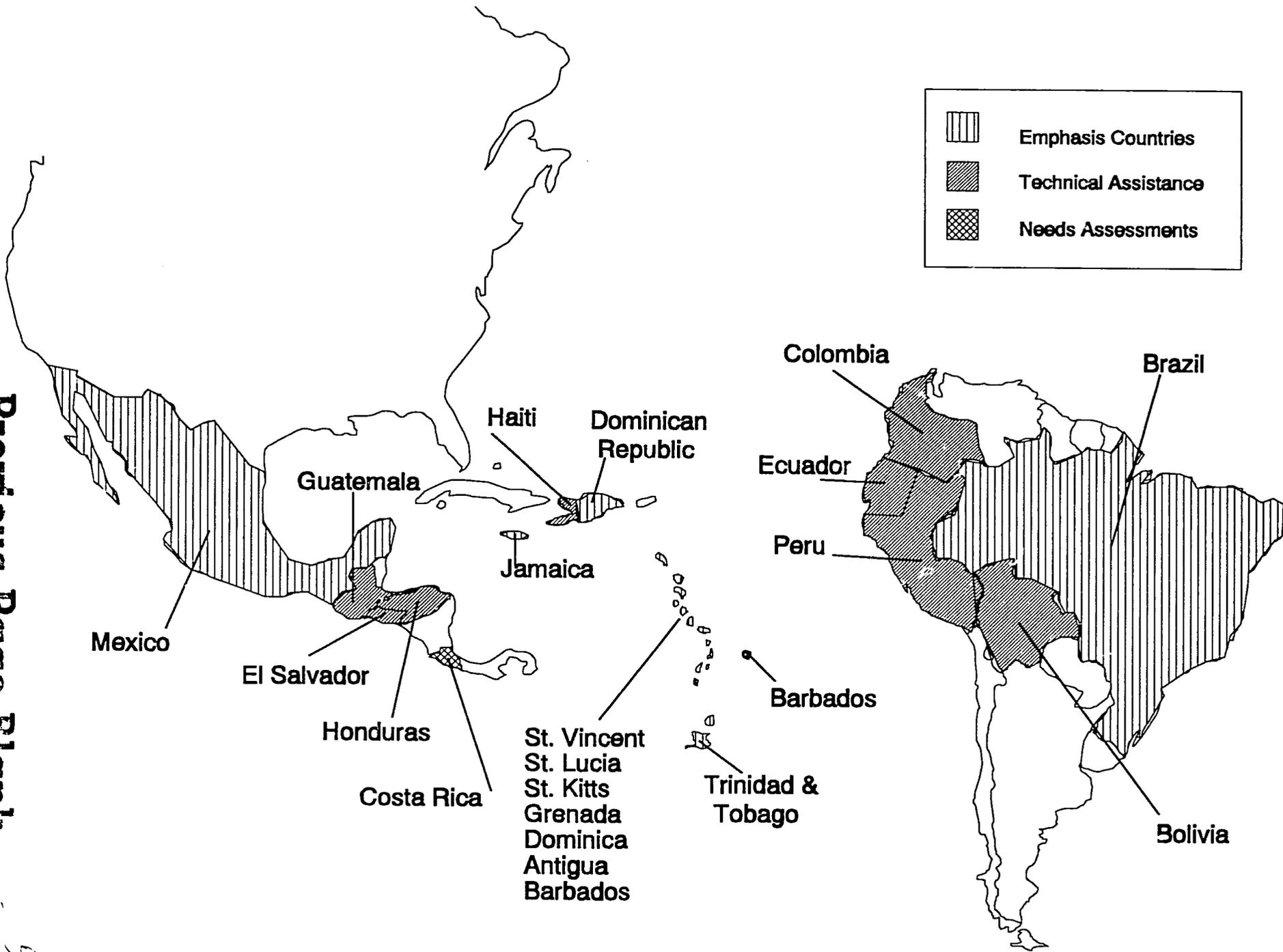
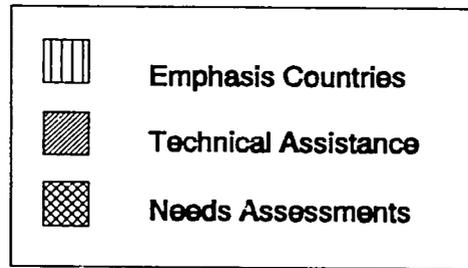
AIDSCOM's consultant presented the proposed communication strategy at a two-day conference sponsored by MOPH and WHO in Rabat in late September 1992. AIDSCOM has not yet received the written report and recommendations from the conference participants.

■ Activities for the Next Reporting Period

From October through December 1992, AIDSCOM expects to provide the following technical assistance in Morocco:

- review the approved creative strategy with the selected advertising agency;
- assist the advertising agency to test 3-5 concept statements, each representing a potential key message of the campaign. Concept testing will involve four focus groups, two with the primary target audience and two with the secondary target audience;
- translate and reproduce selected AIDSCOM documents, publications, and manuals that might be appropriate for use in further Moroccan HIV prevention activities; and
- pre-test television and radio spots in rough, or animatic, form using focus groups with members of the target audience(s) and guide final development and production of the spots.

Latin America and the Caribbean



Previous Page Blank

51

Latin America and the Caribbean

A IDSCOM launched programs in the Latin America/Caribbean region in early 1988. With activities in 22 countries and resident advisors in six, the past five years have been exceedingly varied and productive. Because it was easy to initiate programs in this region, where family planning and health programs had firmly established an infrastructure that could accommodate HIV/AIDS prevention efforts, AIDSCOM/LAC pioneered several research and intervention programs that were later introduced in other regions of the world.

Research activities have included:

- knowledge, attitudes, behavior, and practices (KABP) surveys among the general population and sentinel target groups;
- ethnographic studies;
- qualitative studies to identify and test messages;
- materials pre-tests; and
- an experimental study to compare the impact of different interventions on intention to use condoms.

AIDSCOM has trained personnel in government programs and nongovernmental organizations (NGOs) throughout the LAC region to plan for, conduct, analyze, and apply field research for crafting effective communication programs.

Building on successful United States and European models developed in the late 1980s, AIDSCOM has supported local efforts in the region to implement an impressive variety of interventions, including:

- train-the-trainer models in prevention counseling, hotline development, and condom use skills;
- organizational skills-building and support for emerging indigenous NGOs;
- strategy development for national AIDS prevention programs;
- health care worker training;
- telephone hotlines in 12 countries;
- national campaigns, using mass media and/or face-to-face interventions in Colombia, the Dominican Republic, Grenada, Jamaica, Mexico, St. Lucia, and St. Vincent;
- condom skills instruction;
- community radio, radio drama, and radio call-in programs;
- two Spanish-language training videos for health care providers and counselors;
- prison education;
- prevention counseling, including pre- and post-HIV-test counseling;
- information kits for physicians;
- peer education and outreach programs for specific populations;
- theater and dance performances; and
- dramatic comic books with HIV/STD prevention themes.

During the past six months, AIDSCOM has completed most field activities in all target countries of the region except for those in USAID's Eastern

Caribbean subregion. Before this reporting period, AIDSCOM closed programs in Bolivia, Guatemala, Haiti, and Peru. Most recently, the project completed field work in Brazil, Colombia, the Dominican Republic, Ecuador, El Salvador, Jamaica, and Mexico.

AIDSCOM will continue to provide technical assistance and program support to countries of the Eastern Caribbean, including the continuation of a resident advisor in Trinidad and Tobago. From October 1992 through September 1993, AIDSCOM will continue to examine data and experiences from earlier field work to evaluate programs, analyze data, and disseminate valuable lessons learned.

Among the themes that emerge as particularly noteworthy in a preliminary review of AIDSCOM's five years in Latin America and the Caribbean are the following.

Technical assistance can help HIV/AIDS prevention project managers to shift program emphasis from information to behavior change.

By the mid-1980s, many LAC countries had HIV/AIDS prevention and control programs, most with an emphasis on providing information. With AIDSCOM encouragement, several program planners have recognized that "education is not enough." Programs that used research to pinpoint potential variables that could lead to real behavior change include the following.

- **Jamaica national public education campaign.** The third in a series of national mass media HIV/AIDS prevention campaigns, the "Keep On Keeping It On" campaign, launched in September 1992, is the first to target a single behavior — prolonged condom use in casual relationships.
- **Eastern Caribbean three-country campaign.** KABP survey results were closely analyzed to develop a campaign to encourage parent-child discussion and condom use, when needed.
- **Experimental research among sexually active men in the Dominican Republic.** The experiment demonstrated that carefully researched interventions can change intention to use condoms, even with steady partners.

Applying the training-of-trainers approach can effectively multiply training impact.

- **Two-phase training in El Salvador.** In a single workshop, an AIDSCOM consultant trained approximately 30 NGO leaders in prevention counseling, universal precautions, and using AIDSCOM's regionally-produced training videos on those themes. In turn, the local NGO trained more than 200 field workers and gave them each copies of the videos. These field workers are now conducting their own training for still other social and health care workers.

NGOs can develop needed skills with modest support from external advisors or donors.

While many efforts required regular input from AIDSCOM's central offices, other programs demonstrated the ability to use modest assistance to generate sophisticated materials and programs.

- **St. Vincent peer educator program.** After initial training, youth peer educators in each health district of St. Vincent now serve as role models and sources of accurate information about HIV/STD prevention.
- **Grenada hotline and Group of Concerned Women.** With start-up funding from AIDSCOM, a local women's civic organization added an AIDS information hotline and resource center to its operations. Within one year, the group became a primary source of HIV/STD activities in the community.
- **Ecuador's Fundación SOGA.** With a single technical assistance visit from Washington, a visit from a gay NGO in neighboring Peru, and communication with Washington by telephone, fax, and express mail, Fundación SOGA developed a research-intervention project. It conducted research with physicians who have gay men as patients and carried out a survey of homosexual and bisexual men. SOGA used the findings to develop information kits for physicians and pamphlets for men.

Materials produced in one country can be effectively used throughout a region.

- **AIDSCOM condom use brochure.** Developed and field-tested in the English-speaking Carib-

bean, this popular brochure was translated into Spanish and is in demand in both languages. Health officials in Massachusetts, Alabama, and the District of Columbia have requested printers' negatives of the brochure and added their own local messages for wide distribution. In Washington, DC, the brochure is being translated into five Asian languages.

- **Spanish-language training videos on counseling and universal precautions.** High quality production and compelling dramatic episodes make AIDSCOM's two videos and accompanying print materials — *A Través del Espejo* and

SIDA: El Temor que Ciega — popular throughout LAC. AIDSCOM previewed the videos in Brazil. Local health workers said the original videos, dubbed in Portuguese, would require no additional modifications to be appropriate for Brazil.

- **Hotline guides.** While each country faces different challenges in providing confidential telephone hotline counseling services, commonalities exist. AIDSCOM's various versions of a telephone hotline training guide provided essential skills in more than ten countries in the region.

BRAZIL (Emphasis Country)

Population:	147,399,000
Reported AIDS Cases:	24,703 (March 1992)
Medium-term Plan:	Completed
AIDSCOM Assessment Visit:	December 1988
Project Start-up Date:	August 1988
Mission Buy-in:	\$498,000 (August 31, 1988 through FY91)
Collaborating A.I.D. Projects:	AIDSTECH
Other Collaborators:	Ministry of Health National AIDS Committee, BEMFAM (largest family planning NGO in Brazil), The Prostitute Association of the State of Rio de Janeiro, Brazilian Center for the Defense of the Rights of Children and Adolescents, Federation of Industrial Employees of the State of Sao Paulo (FIESP), ATOBA, GREA
No. of TA Visits to Date:	23 (3 in this reporting period)

AIDS Activities Focus: Training to help develop targeted interventions for populations at high risk; development of AIDS in the workplace training-of-trainers materials; development of formative research among women; production of training videos for health professionals.

■ Country Strategy

Until mid-1990, AIDS prevention programs in Brazil were limited by law. Until then, AIDSCOM had developed a training program for NGOs and Ministry of Health personnel to help develop interventions to reduce HIV transmission. Training emphasized institutionalization and communications research skills. When the restrictions were lifted, AIDSCOM expanded its program to include a series of targeted operations research activities and development of educational materials for health professionals.

■ General Activities

AIDSCOM Brazil accomplished the following activities during the reporting period:

- BEMFAM completed the evaluation and preparation of a report documenting its experience with developing training projects for targeting gay men, female sex workers, and street children. The report is being distributed among other Brazilian organizations with HIV/AIDS prevention programs.
- BEMFAM completed the final report of the risk assessment and counseling project that targeted bisexual men. It is being produced by AIDSCOM for distribution to other organizations that work with gay and bisexual men in Latin America.
- AIDSCOM presented a summary report to FIESP of the findings of formative research, conducted by the Universidade de Sao Paulo, on HIV/AIDS prevention programs in the workplace. This completed AIDSCOM assistance to FIESP.
- The AIDSCOM Women and AIDS Program developed and pilot-tested an intervention for

women attending two BEMFAM clinics in Rio de Janeiro. A final report was prepared to document the experience. BEMFAM plans to replicate the intervention in clinics throughout the nation.

- The project completed the final report of its ethnographic study of street children. It is being distributed to Brazilian organizations that develop HIV/AIDS prevention programs for such children.

■ Research Activities

BEMFAM completed its final report of findings from the risk assessment and HIV prevention behavior study among bisexual men.

BEMFAM collected quantitative data from 200 women who attended two family planning clinics in Rio de Janeiro — Clinica do Meier and Villa Kennedy. No significant differences were found when data were compared across sites. Based on the findings, AIDSCOM and BEMFAM designed and implemented an HIV prevention intervention for women and their male partners. The final report evaluates both the formative research and intervention process.

AIDSCOM consultant Patrick Larvie completed an ethnographic study of street children in Rio de Janeiro, with supervision by Dr. Richard Parker. The report will be disseminated in Portuguese to local organizations. A summary report, in English, will be prepared for broader distribution.

■ Materials Development

BEMFAM translated two Spanish-language training videos produced by AIDSCOM in Guatemala into Portuguese. The videos and accompanying support materials will be distributed throughout Brazil.

BEMFAM also developed a training guide and educational pamphlet for women who attend family planning clinics. The materials were designed to encourage replication at other sites in Brazil.

■ Planned Activities

All AIDSCOM activities in Brazil were completed by September 1992. The project hopes that many of the activities that began under this contract will continue in some form in the future.

COLOMBIA

Population:	30,600,000
Reported AIDS Cases:	1,483 (March, 1991)
Medium-term Plan:	Adopted
AIDSCOM Assessment Visit:	July 1988
Project Start-up Date:	August 1988
Mission Buy-ins:	\$226,000
Collaborators:	Ministry of Health, Holguin & Asociados, Universidad Externado de Colombia, Fundación Santa Fe, Universidad de los Andes
No. of TA Visits to Date:	9 (2 this period)

AIDS Activities Focus: KABP research among general population, men at risk, and female sex workers; qualitative research among female sex workers; support for AIDS hotline; national communication campaign.

AIDSCOM's earlier work in Colombia supported governmental and nongovernmental research and programs, including: KABP surveys among the general population, female sex workers, and gay men; a qualitative study among female sex workers; support of a telephone hotline for AIDS prevention information and counseling; and development of a mass media campaign aimed at young people.

During the last reporting period, USAID and AIDSCOM withdrew support for the full mass media campaign and focused remaining funds on training. During this reporting period, AIDSCOM reinitiated work with the Ministry of Health and a local advertising agency to develop media materials. The agency pre-tested and produced two pro-

condom radio spots and a television commercial that promote dialog between young people and their parents. The Ministry will launch the campaign during October 1992.

With the assistance of AED staff member Reynaldo Pareja, who recently relocated to Colombia after serving as AIDSCOM resident advisor in the Dominican Republic, AIDSCOM trained personnel from the public and private sectors. Pareja trained 34 individuals from 23 organizations in AIDS prevention counseling. Concurrently, the project distributed 100 copies of its Spanish-language training videos.

With these activities, AIDSCOM completed the Colombia program.

DOMINICAN REPUBLIC (Emphasis Country)

Population:	5,700,000
Reported AIDS Cases:	1,535 (June 1991)
Medium-term Plan:	Implemented
AIDSCOM Assessment Visit:	October 1987
Project Start-up Date:	June 1988
Mission Buy-ins:	\$4,644,000 to AIDSCOM and AIDSTECH \$995,400 PL480 funds
Collaborating A.I.D. Projects:	AIDSTECH
Other Collaborators:	Ministry of Health/PROCETS, Amigos Siempre Amigos, Association of Blood Banks, COIN, COMPUMETODO, PLUS, PROFAMILIA
No. of TA Visits to Date:	34 visits (3 in this reporting period)
AIDS Activities Focus:	General population, high-risk behaviors, institutionalization, and private sector mobilization.

■ Country Strategy

The Dominican Republic program was one of AIDSCOM's largest country programs in the LAC region. AIDSCOM and AIDSTECH successfully collaborated to extend and enrich AIDS outreach through governmental agencies and NGOs. Both programs achieved an impressive level of institutionalization, leaving several organizations in improved positions to provide effective services, and with innovative educational materials developed to change behavior.

■ General Activities

Mass media and general population survey. Compumetodo, the local AIDSCOM research subcontractor, presented preliminary results of a tracking KABP survey. AIDSCOM had intended to use this general population study as baseline for a new mass media campaign. But, negotiations related

to using USAID PL-480 funds for production and media buys broke down, and the campaign — originally developed for 1991 — was not launched.

Although AIDSCOM will not conduct a follow-up survey, preliminary study results did indicate that one-fourth of all persons interviewed could recall a recent television or radio spot about AIDS and/or condoms. The spots were part of a modest alternative media campaign developed by AIDSCOM's resident advisor in conjunction with local NGOs. They were aired free of charge using air time donated by local broadcasters.

Female sex workers and sexually active heterosexual men. Following earlier work with female sex workers and their clients, AIDSCOM developed a two-phase research project in the industrial port of Haina, working with two NGOs, COIN and CASCO.

CASCO conducted an experimental study to examine the impact of three different approaches to

condom promotion on men's intention to use condoms. Data collection was completed and preliminary results developed and presented at an international conference of psychologists. (See the research section of this semiannual report for further information on research results.)

The interventions developed for the experiment used a comic book format with audio narration. Three vignettes featuring the fictional character "Mario" aimed to:

- change men's perception of women's attitudes toward condoms (perceived social norms);
- teach men the correct way to use a condom (skill and self-efficacy); and
- make men aware that they personally may be at risk for HIV/AIDS exposure (susceptibility).

Pre-tests of the comics before the experiment indicated high levels of comprehension and attraction. Using revised art and story lines, AIDSCOM published the full-color comic *Mario*, an appealing positive role model of the "tíguere" (Dominican term for a man who pursues every sexual opportunity). Through a COIN outreach project in Haina, AIDSCOM distributed 700 copies of the comic and related training materials.

COIN conducted formative research including an inventory of 80 brothels and other sex establishments, focus group studies, and a KABP survey among men; trained and motivated a group of ten peer outreach workers and 30 "multiplier" volunteers; developed and distributed pamphlets, calendars, posters, and other materials including the *Mario* comic; developed a peer condom distribution network; and sponsored special events such as a health fair and training of local health care workers in STD control. COIN's evaluation of the project indicates high levels of awareness and acceptance of

the project and led COIN to recommend expansion within Haina and in other communities.

Homosexual and bisexual men. With AIDSCOM support, members of the gay community in the Dominican Republic have become skilled in project development, implementation, and management, and are armed with explicit and effective AIDS prevention materials.

COIN and ASA collaborated in a nine-month peer education project with gay and bisexual men in four cities. The project trained 12 peer educators and 65 outreach volunteers who reached 2,900 individuals. With AIDSCOM and COIN support, ASA learned strategy development, fiscal responsibility, and management skills, ensuring its future as an independent NGO.

To meet the community's needs for information and motivation as identified through the AIDSCOM-sponsored 1990 KABP survey of men who have sex with men, ASA developed and distributed nine issues of a newsletter (1,000 copies of each), a training module (20 copies), and a brochure on safer sex practices (3,000 copies). ASA distributed 12,000 condoms monthly throughout the gay community, double the target number anticipated in the project design.

Institutionalization and private sector mobilization. During AIDSCOM's involvement in the Dominican Republic's AIDS prevention programs, emphasis shifted from supporting the government program to strengthening NGOs. The resident advisor used local subcontracts not only to purchase needed products and services, but also to improve organizational capability, ensuring long-term AIDS prevention activities throughout the private sector. For project unity, AIDSCOM has made materials and research results available to AIDSCAP.

EASTERN CARIBBEAN (Emphasis Country)

Population:	2,890,000
Reported AIDS Cases:	1,465 (April 1992, 9 countries)
Medium-term Plan:	1989
AIDSCOM Assessment Visit:	January 1988
Project Start-up:	January 1988
Mission Buy-ins:	\$800,000 effective August 31, 1988 \$200,000 effective June 1, 1990 \$600,000 effective August 2, 1991
Collaborating A.I.D. Projects:	AIDSTECH
Other Collaborators:	CAREC, PAHO/WHO, Ministries of Health, National Red Cross Societies, national and regional family planning associations, Caribbean News Agency, Barbados Association of Medical Practitioners, AIDS Action Group (St. Vincent), CARE (Trinidad and Tobago), Project HOPE, University of the West Indies
No. of TA Visits to Date:	46 (3 during this reporting period)

AIDS Activities Focus: Ensuring that regional and national institutions appreciate, understand, and employ social marketing and communications principles and methodologies to achieve behavior change among individuals at risk for HIV and other threats to health and well-being. Specific activities include conducting communication and behavioral research, conducting interventions among populations at risk, developing communication programs, and assisting with materials development and distribution.

■ Country Strategy

The USAID regional office in Barbados coordinates Agency activities throughout the Eastern Caribbean, especially for USAID priority countries: Antigua, Barbados, British Virgin Islands, Dominica, Grenada, Montserrat, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines, and Trinidad and Tobago. With funding from the USAID regional office and with central funds, AIDSCOM focuses on six priority countries and provides technical assistance to representatives from the 19 countries of the Caribbean in collaboration with the Caribbean

Epidemiology Centre (CAREC), located in Trinidad and Tobago.

AIDSCOM's prime objective for the Eastern Caribbean is to work with CAREC to research, design, implement, and evaluate HIV/AIDS communication messages and programs that will have the greatest impact on reducing high-risk behaviors. To achieve this objective, AIDSCOM has focused on improving the understanding and use of social marketing and communications principles and methodologies among regional counterparts. AIDSCOM provides training, technical assistance, and opportunities to "learn while implementing" the various components of a communications program.

AIDSCOM works closely with local counterparts to ensure that AIDS mass media campaigns are combined with face-to-face interventions in order that prevention messages become part of the social network of Caribbean societies. To integrate the prevention approaches, AIDSCOM cooperates with Ministries of Health, regional health and development agencies, health care providers, and community organizations.

AIDSCOM provides technical assistance and funds in the region as part of the USAID-funded and coordinated AIDS Communications and Technical Services (ACTS) Project, which involves CAREC, AIDSCOM, and AIDSTECH.

The Eastern Caribbean is one of the AIDSCOM emphasis sites that will continue its program of technical assistance and field work beyond September 30, 1992, with the approval of the USAID mission in Barbados and A.I.D./Washington. All field work will be undertaken by the AIDSCOM resident advisor, based at CAREC, through the end of her term in 1993. The close-out staff in Washington will provide necessary technical and administrative back-stopping to the advisor. In addition, publications and peer-review journal articles will be prepared in Washington, in collaboration with CAREC.

■ General Activities

AIDS communication campaign. With guidance from USAID/Barbados, AIDSCOM's technical assistance shifted during this reporting period. The present focus is to help both CAREC and the Caribbean Family Planning Affiliation (CFPA) design and implement Phase II of the subregional AIDS communication campaign.

The intent of the Phase II campaign was to target sexually active youth with messages that sexual responsibility is important, and that using condoms is one important way to be sexually responsible and to protect themselves. Unfortunately, the planning, concept development, and concept testing process was slowed during this period. At this time, CAREC and CFPA anticipate that Phase II radio and television broadcasts will air before the end of calendar 1992. Phase I of the campaign began in December

1991 and concluded in January 1992. Future technical assistance from AIDSCOM for developing the campaign will be provided by the resident advisor based at CAREC.

AIDS radio drama series. The Caribbean News Agency (CANA), under a subcontract to AIDSCOM/AED, developed a ten-episode radio drama series to complement Phase I of the communications campaign targeting parents and youth. The five-minute episodes present the stories of two teenage girls who try to come to terms with dating, possible sexual activity with older boys, and parental supervision. The series was broadcast in St. Vincent and the Grenadines, Grenada, and St. Lucia. The story line was well-received during pre-testing and anecdotal evidence suggests that the program was popular in each country. Follow-up survey data are being analyzed to determine the impact of the drama series, following which it will be distributed for use throughout the region.

Peer education in St. Vincent. To complement the media components of the AIDS communication campaign, the AIDSCOM resident advisor in St. Vincent worked closely with the St. Vincent Red Cross Society to design and implement a youth peer educator training program. A 12-session topic guide was developed and 69 young persons completed the 12-week training course. Although school-based, the program included 21 persons who were not students. The effectiveness of the course is being evaluated and a report of the program, including the curriculum, is being produced as an AIDSCOM publication to ensure wider use of the materials throughout the region.

CAREC public health communication advisor. The AIDSCOM resident advisor provided technical assistance to CAREC and CFPA on concept development and testing for the communications campaign, advised the St. Kitts Ministry of Health on the outcomes of the national AIDS KABP survey, and, assisted CAREC units to integrate social marketing analysis into their health promotion and disease prevention activities. The resident advisor also continued to support the introduction and application of social marketing principles to CAREC staff and programs.

■ Materials Distribution

AIDSCOM and CAREC have completed six AIDS communication modules comprising training and media products (for example, the radio drama series, radio public service announcements, etc.) that will serve as stand-alone guides for use throughout the region as various ministries and NGOs undertake AIDS communication activities. The modules include an introduction to social marketing, guides to working with advertising agencies and research firms, an explanation of a communication plan and a media plan, and guides to health promotion methodologies in written and video form.

■ Research

Research completed during this period included a national AIDS KABP survey in St. Kitts and Nevis that provided valuable information to government officials and program planners. It was the first such survey ever conducted on these topics in the country.

Findings from the impact tracking survey of the AIDS communication campaign in St. Vincent and the Grenadines, St. Lucia, and Grenada were presented in a poster session during the VIIIth International Conference on AIDS, held in Amsterdam, the Netherlands, in July. Further analysis of the impact of the peer education campaign, hotline programs, and the radio drama are nearing completion.

■ Constraints

National programs throughout the region continue to cope with fragile infrastructures, especially in health

care. Many programs are under-staffed and some suffer from inadequate management expertise. Given these constraints, however, real progress can be seen in several country programs, as more activities are undertaken, and standard methodologies are better understood and more frequently used. During this semiannual period, the momentum toward campaign development slowed as new collaborators joined the team. It is hoped that the momentum will increase during the next reporting period and ensure that each campaign effort can build on previous undertakings in an effective time frame.

■ Planned Activities

During the next reporting period, AIDSCOM will:

- collaborate with CAREC and CFPA to complete the concept and message development, pre-testing, broadcast, and evaluation of Phase II of the AIDS communication campaign;
- complete work with CAREC on six major AIDS communication campaign packages, primarily targeting youth and program planners;
- assist CAREC with plans for extending more intensive technical assistance to new member countries, primarily to St. Kitts, Dominica, Antigua, the British Virgin Islands, and Montserrat, while maintaining activities in St. Vincent, St. Lucia, and Grenada; and
- analyze data and draft papers that describe lessons learned for eventual publication in regional and international journals and newsletters.

ECUADOR

Population:	10,000,000
Reported AIDS Cases:	134 (June 1991)
Medium-term Plan:	Adopted
AIDSCOM Assessment Visit:	April 1988
Project Start-up Date:	August 1988
Mission Buy-ins:	\$100,000
Collaborating A.I.D. Projects:	AIDSTECH
Other Collaborators:	Ministry of Health, Fundación SOGA
No. TA Visits to Date:	10 (2 this period)

AIDS Activities Focus: Men at risk, AIDS prevention counseling training, technical assistance to telephone hotlines, institutional support for NGOs.

AIDSCOM's principal activity in Ecuador has been with an NGO made up mainly of gay men, Fundación SOGA (recently renamed FEDAEPS — Fundación Ecuatoriana de Ayuda, Educación y Prevención del SIDA).

Through a small survey of physicians in Quito whose patients include men who have sex with men, SOGA identified topics about which the doctors wish to receive additional information related to HIV/AIDS. A parallel survey, of homosexual and bisexual men, helped SOGA pinpoint their information needs.

SOGA developed and pre-tested three pamphlets for gay men on STDs, condom use, and sexuality and

safer sex, and a poster on STDs. The pamphlets are distributed through SOGA's formal and informal networks and provided to physicians who serve gay men. SOGA also developed and distributed an information packet for physicians. It included Spanish-language articles on sexuality, homosexuality, HIV/AIDS prevention, AIDS and HIV-related diagnosis and care, condom promotion, safer sex practices, and counseling, including pre- and post-HIV-test counseling.

The successful completion of SOGA's project ends AIDSCOM work in Ecuador.

EL SALVADOR

Population:	5,400,000
Reported AIDS Cases:	370 (June 1991)
Medium-term Plan:	Completed
AIDSCOM Assessment Visit:	April 1988
Project Start-up Date:	November 1989
Mission Buy-ins:	\$155,000
Collaborating A.I.D. Projects:	AIDSTECH, JHU/PCS
Other Collaborators:	Ministry of Health, National AIDS Committee, The Salvadoran Red Cross
No. of TA Visits To Date:	6 (2 in this reporting period)

AIDS Activities Focus: Provide technical assistance for establishing an AIDS information hotline; develop training materials; and provide training in AIDS prevention counseling and universal infection control procedures.

The Red Cross of El Salvador conducted a series of training workshops using the two regional, Spanish-language training videos developed by AIDSCOM with USAID/El Salvador, USAID/Guatemala, USAID/Dominican Republic, and USAID/Mexico. AIDSCOM provided technical assistance for the initial train-the-trainer workshop, following which the Red Cross trained more than 200 health professionals from both the public and private sector. The

Red Cross distributed videos and training materials to all participants to ensure that the workshops could be easily replicated around the country.

The Red Cross also continued to operate its successful AIDS hotline and counseling service through May 1992. It appears that the hotline will receive support from PAHO and WHO/GPA to continue operations for three more years.

JAMAICA (Emphasis Country)

Population:	2,470,000
Reported AIDS Cases:	225 (May 1991)
Medium-term Plan:	Implemented, and program review completed
AIDSCOM Assessment Visit:	January 1988
Project Start-up Date:	January 1988
Mission Buy-ins:	\$142,232 (November 1989–November 1990) \$180,000 (November 1990–October 1991) \$220,000 (November 1991–September 1992)
Collaborating A.I.D. Projects:	SOMARC, CDC
Other Collaborators:	Ministry of Health, EEC, ACOSTRAD, BITU (Trade Union), Jamaica School of Drama, National Family Planning Board, Sistren Theatre Group, The Family Centre, University of the West Indies, Jamaica AIDS Support
No. of TA Visits to Date:	32 (2 in this reporting period)

AIDS Activities Focus: Strengthening program development and communication capabilities, conducting behavioral research, conducting interventions, training health workers and counselors, HIV/AIDS/STD hotline, implementing integrated national communication campaign, materials development.

AIDSCOM activities in Jamaica, guided by two resident advisors and AIDSCOM home office staff, continued through September 30, 1992. Both home and field office staff worked with AIDSCAP to facilitate the transfer of most program activities to the new project.

■ General Activities

Helpline. Helpline, a national HIV/STD telephone hotline established with AIDSCOM support in 1989, continued to respond to more calls than initially expected, despite a lack of mass media promotion. The number of calls dropped dramatically when television, radio, and newspaper coverage ended, and increased when promotion resumed. Helpline has played an increasingly important role in linking callers with other types of services, such as family planning and drug abuse services. Helpline staff

facilitated workshops on telephone counseling and referral for the National Family Planning Board and the National Council on Drug Abuse; the former agency operates a hotline and the latter responds to callers seeking services.

Lay counselor program. Previously-trained lay counselors are providing community-level services through NGOs such as the Family Centre. Additional training programs were conducted during this semiannual period for counselors and social service providers from the following groups: National Council on Drug Abuse, Jamaica Defense Force, the blood bank, mental health officers, and pastoral/church-related counselors. AIDSCOM's resident advisor continued to integrate the AIDS/STD prevention campaign with the Drug Abuse Council's healthy lifestyles campaign. AIDSCOM conducted workshops and training sessions with community

workers, peer counselors, and drug rehabilitation staff members to sensitize them to HIV/STD issues and teach counseling skills.

Public education campaign. The new national AIDS prevention campaign's slogan "Keep on Keeping it On" aims to prolong the time that couples use condoms within new sexual relationships. A condom-positive jingle and advertising focus on a partner's past rather than on introducing the element of distrust into the current relationship. Radio and print advertisements emphasize the HIV latency period, teaching the need to continue protection even if a partner "seems healthy."

AIDSCOM provided technical assistance throughout campaign development and helped plan for campaign evaluation. Media production and research costs were paid by USAID Mission funds.

During this reporting period, the advertising agency produced preliminary materials and a local research firm, Hope Enterprises, pre-tested campaign materials. AIDSCOM staff helped the Ministry of Health review the pre-test results, select and fine-tune the campaign materials, and develop a media plan. A jingle, a television commercial, five radio advertisements, two print advertisements, and collateral materials were selected and produced, after passing a final "disaster check" to test the validity of revisions made after the pre-test. The campaign was launched in late September 1992.

Condom promotion. Face-to-face interactions will play a major role in the national condom promotion campaign. AIDSCOM worked with the Ministry of Health to implement a strategy to mobilize teams in 14 parishes, with special focus on STD clinic interventions. A national coordinator and Ministry staff trained Ministry of Health and other government and nongovernment personnel to promote condom use through activities that increase skills

and self-efficacy, overcome barriers to use, and change perceptions of social norms about use. Contact investigators from the STD program were trained to give face-to-face support throughout the campaign, and an individual was hired to provide condom skills instruction at STD clinics.

The Ministry of Health stressed that institutionalization of condom promotion is essential for long-term commitment to behavior change. Thus, AIDSCOM's strategy included a plan to draw in health, family planning, counseling, drug prevention, and other social service agencies and NGOs. Materials developed earlier by AIDSCOM — a popular condom use brochure and poster, and a condom skills training module — proved useful and effective as part of the community outreach.

The integrated national campaign will be evaluated through a KABP survey. The Ministry of Health and the new USAID AIDS project will provide AIDSCOM with the data sets to complete documentation of the campaign.

Jamaica AIDS Support (JAS) Project. JAS completed its subcontract for providing peer education to the homosexual and bisexual population and outreach/education to the general population. A powerful and well-received dance program was created to empower young people to protect themselves from HIV. The performances were highly acclaimed, and JAS conducted lively discussions of HIV/AIDS-related issues with each audience following the performance. The national program will continue to work with JAS, providing much-needed support to gay men's efforts to educate their community and Jamaicans in general.

AIDSCOM completed field activities in Jamaica in September 1992, and will report on results of the national integrated campaign during the next year.

MEXICO

Population:	67,000,000
Reported AIDS Cases:	8,720 (October 1991)
Medium-term Plan:	Completed
AIDSCOM Assessment Visit:	October 1987
Project Start-up Date:	October 1987
Mission Buy-ins:	\$50,000 (1988) \$50,000 (1989) \$30,000 (1990) \$30,000 (1991)
Collaborators:	WHO, PAHO
No. of TA Visits to Date:	14 (1 in this reporting period)

AIDS Activities Focus: Technical assistance to USAID, CONASIDA, and NGOs for effective program management, research design, and evaluation; select operations research interventions.

AIDSCOM provided Mexico's national AIDS prevention program, CONASIDA, with technical assistance to review and revise its national AIDS prevention communication strategy. The advertising agency, ECOPSA, submitted six treatments for consideration for a national campaign, two for each macro concept (adolescents, human rights, and awareness/consciousness raising). AIDSCOM

participated in the team that reviewed the submissions, recommended revisions, and approved the treatments for evaluation in focus groups. In a subsequent technical assistance visit, AIDSCOM staff joined CONASIDA in final revision of the three selected commercials and in the pre-production meeting. These activities completed AIDSCOM interventions in Mexico.

Appendix A:

Diffusion Activities

■ Africa Diffusion

Brochures/Manuals/Pamphlets/Posters Published

1. Region wide distribution of *It's Not Easy*

Malawi

1. College Textbooks for AIDS Prevention:
Students' Handbook for Colleges
Teachers' Guide for Colleges
2. Script for puppet play written during course of
Workshop in Music, Storytelling, Drama, and Poetry

Tanzania

1. Trainers Manual
Women in Development/AIDS in the Workplace
Skills Training Curriculum
August - September 1992

Uganda

1. Trainers' Manual
Advanced Counselling skills
September 1992
2. Distribution of brochures, films, posters, and other
materials

Presentations/Workshops/Training Sessions

Malawi

1. Workshop in Music, Storytelling, Drama and Poetry
sponsored by the Health Education Band, University

of Malawi Department of Performing Arts, local
drama groups, U.S. Peace Corps, and the Radio
Section of the Health Education Unit
30 participants. Lilongwe, Malawi
Mr. William Mackie, AED, Organizer and Resource
Person. June 3-9, 1992

2. Workshop to Improve Communication Among
NGOs Involved in AIDS Prevention and Care
Lilongwe, Malawi
50 participants
Mr. William Mackie, AED, Resource Person
August 17-19, 1992
3. Workshop/Training Session
Promoting the new AIDS Songs and AIDS Puppet
Show
Malawi Health Education Band
12 people. Lilongwe, Malawi
Mr. William Mackie, AED, Resource person
August 31 - September 10, 1992

Swaziland

1. Materials Development Workshop
for Family Life Association of Swaziland (FLAS),
Project HOPE, National AIDS Programme, and The
AIDS Support Center (TASC)
Manzini, Swaziland; 19 participants
Christina Rozsenich, AIDSCOM consultant
May 18 - 22, 1992
2. Telephone Helpline Training
for The AIDS Support Center (TASC)
Manzini, Swaziland
13 people participated
Ruth Schwartz, AIDSCOM consultant
June 30 - July 3, 1992

Uganda

1. Trainers' Workshop and Retreat for trainers of the Federation of Uganda Employers (FUE), Experiment in International Living (EIL), and the Philly Lutaaya Initiative
Jinja, Uganda
16 trainers Participated
Ken Dunnigan, M.D., AED, Organizer and Facilitator
August 24 - 28, 1992
2. Trainers' Workshop
AIDS Information Center (AIC)
Kampala, Uganda
August 27 - September 10, 1992

United States

1. Workshop on AIDS Prevention and Mitigation for World Bank
Washington, D.C.
20 participants
Ken Dunnigan, M.D., AED, Co-facilitator
June 8 - 9, 1992
2. Community Health: AIDS and Substance Abuse Control. A Group Project for Young African Leaders
Washington, D.C.
16 Africans participated
Ken Dunnigan, M.D., AED, Facilitator
July 21 - 24, 1992
3. Integration of HIV and AOD Prevention Strategies.
Office of Substance Abuse
Rockville, Maryland
30 people participated
Lorraine Lathen-Parker, AED
July 30, 1992
4. AIDS Prevention and Awareness Workshop
Botswana Development Training Project, AED
Washington, D.C.
20 people participated
Lorraine Lathen-Parker, AED
August 7, 1992
5. Johns Hopkins Symposium
April 1992
Dace Stone, AIDSCOM/JHU
75 people participated

Media/Press Releases/Awards

Ghana

1. Television and radio spots aired daily for the final three months of the campaign, which ended June 30, 1992

Reports/Papers and Conference Summaries/Abstracts

Uganda

1. Poster Presentation
VIII International Conference on AIDS
Evaluation of a Workplace-Based Peer Educator Program in Uganda
Susan McCombie, AIDSCOM/University of Pennsylvania, Philadelphia, Pennsylvania
Francis Rwakagiri, Federation of Ugandan Employers (FUE), Kampala, Uganda
Shem Bukombi, Experiment in International Living (EIL), Kampala, Uganda
July 19 - 24, 1992

Materials Distribution

General Distribution

Partners for a World without AIDS brochures - 7,000
Partners for a World without AIDS buttons - 2,000
It's Not Easy promotional buttons - 2,000
It's Not Easy promotional posters - 500
It's Not Easy with Guides - 400
Challenges in AIDS Counselling with Guides - 200
A Shared Concern - 50

Ghana

Ghana Television and Radio Spots - 5

Ghana Media Campaign

T-Shirts
Buttons
Stickers
Comic books

Malawi

School Textbooks for AIDS Education
Secondary Schools Students' Book I - 18,000
Secondary Schools Students' Book II - 18,000
Secondary Schools Teachers' Guides - 2,000
Students' Guides for Colleges - 6,500
Teachers' Guides for Colleges - 1,000

Pencils

Learn About AIDS: It Can Save Your Life - 14,500

Uganda

Brochures

Taking the HIV Test - 40,000
Knowledge is Power - 40,000
Change Your Behaviour and Prevent AIDS - 40,000

Comic book

Ekanya Shocked into Sense - 30,000

AIDS Educator Cards - 8,000

Asia Diffusion

Brochures/Manuals/Pamphlets/Posters Published

Indonesia

1. Brochures on basic AIDS information and risk behavior were developed for Surabaya sex workers (7000 copies in Bahasa Indonesia; 2000 copies in Javanese; 1000 copies in Madurese)
2. Illustrated condom use brochures were developed (7000 copies in Bahasa Indonesia; 2000 copies in Javanese; 1000 copies in Madurese)
3. AIDS information brochures were developed for teenagers (10000 copies produced)
4. Promotional brochures were developed for Yayasan Hotline Service Surya's AIDS education and counseling program (15000 copies produced)
5. Stickers were developed to promote Hotline Surya's AIDS Hotline and prevention programs (1000 copies produced) and its Youth Outreach Program (1000 copies)

6. Buttons were developed to promote Hotline Surya (1000 copies), the Youth Outreach Program (1000) and the outreach activities among sex workers (1000 copies)
7. Promotional cards for Hotline Surya were developed for taxicabs, hotels, billiard halls, bars and discos (15,000 produced)
8. *Pedoman Pemandu Latihan Konseling Penurunan Risiko HIV* [HIV Risk Reduction Counseling Trainers Manual], AIDSCOM & Indonesian Medical Association, Jakarta
9. "HIV Risk Reduction Counseling Trainers Manual," AIDSCOM & Indonesian Medical Association, Jakarta

Philippines

10. "Learn the Facts! Don't Be Fooled By Myths!", revised edition of earlier DOH AIDS informational brochure (10,000 English and 10,000 Tagalog copies produced)
11. "What Can I Do to Protect Myself From AIDS?", revised brochure for sexually active adults (10,000 English and 10,000 Tagalog produced)

Presentations/Workshops/Training Sessions

Indonesia

1. Training of Trainers Workshop on HIV Risk Reduction Counseling
Indonesian Medical Association (IDI)
Jakarta, Indonesia
17 people participated
Peter Kerr, AIDSCOM consultant trainer
May 11 - 15, 1992
2. Training of Counseling Workshop on HIV Risk Reduction
IDI, Health Officials, Civic Organizations, NGOs.
Surabaya, Indonesia
23 people participated
Four IDI trainers and Peter Kerr, AED
May 18-21, 1992

3. Training of Hotline Surya Volunteer Counselors
Yayasan Hotline Service Surya
Surabaya
15 people attended
Two IDI trainers and Peter Kerr, AED
May 20-21, 1992
4. In-Service Training of Behavioral Researchers
Yayasan Hotline Service Surya
Surabaya
20 people
Michael Blowfield, AED research consultant
July 1992
5. In-Service Training of Community Outreach
Volunteers
Yayasan Hotline Service Surya
Surabaya
10 people
Michael Blowfield and John Strand, AED
July 1992

Philippines

6. Second NGO Training Workshop on HIV Prevention
Counseling; Indigenous NGOs
Cebu City, Philippines
28 participants
Joan Garrity, AIDSCOM consultant trainer
July 20-23, 1992

Media/Press Appearances and Awards

1. HIV Prevention Counseling Training Workshop
featured in local press coverage July 21-23, 1992,
Cebu City, Philippines.
2. Second media campaign: two television spots, 30
seconds and 45 seconds, and eight 30-second radio
spots ran from February 14 - May 10, 1992.
3. Hotline Surya produced a weekly "AIDS Information
and Counseling" column in Sunday edition of *Surya*
(Surabaya) newspaper.

Reports, Papers and Conference Summaries/Abstracts

1. Women and AIDS in Indonesia: A Report on
Qualitative Research Conducted Among Married
Women in Jakarta, Indonesia, Bernadette Setiadi, et
al., AIDSCOM, August 1992

Research Completed

1. TRENDS, Inc.
Tracking KABP study for second media campaign
— Philippines
2. Dr. Bernadette Setiadi
Formative elicitation survey among 40 women —
Jakarta, Indonesia

LAC Diffusion

Brochures/Manuals/Pamphlets/Posters Published

Eastern Caribbean

1. A Series of Communication Training Modules
developed by AIDSCOM with CAREC for distribu-
tion regionally to 19 countries, September 1992.
One hundred copies of each module will be distrib-
uted. Individual modules include:
 - * "How to Work with A Research Firm"
 - * "How to Work with an Advertising Agency"
 - * "How to Develop a Campaign Strategy"
 - * "How to Teach Correct Condom Use Skills"
 - * "Basic Principles of Health Promotion"
 - * "Social Marketing for Behavior Change"
2. A Series of Communication Media Modules devel-
oped by AIDSCOM with CAREC for distribution
regionally to 19 countries, September 1992. One
hundred copies of each module will be distributed.
Individual modules include:
 - * "A Radio Drama Series to Promote Sexual Responsi-
bility"
 - * "An 'AIDS Song' Developed for Radio Broadcast"
 - * "Phase One of Integrated Campaign Targeting
Parents and Youth: radio spot recordings and print
materials"
 - * "AIDS in the Caribbean: A Regional News Feature
Program"
 - * "AIDS and Youth: Roundtable Panel Discussion and
Radio Call-in Program"
3. Popular Song on AIDS, written and produced by
Blacksand/BDS for use in AIDS Campaign and for
radio broadcast, April 1992.

Presentations/Workshops/Training Sessions

1. Peer Counseling Training in St. Vincent, 92 sessions, 89 participants, April to June 1992.
2. Workshop for Peer Counselors, St. Vincent, 31 participants, September 1992.
3. Presentation of focus group pretest of Phase II, Campaign Concepts, AIDSCOM, CAREC, and the Caribbean Family Planning Association, Antigua, August 1992, 7 participants.
4. Presentation of St. Kitts KABP National AIDS Survey and Communication Planning Workshop, August 1992, 5 participants.
5. Presentation of St. Kitts KABP National AIDS Survey and Communication Planning Workshop, presented to Ministry of Health, Ministry of Education, various NGOs, 25 participants, August 1992.
6. Training of Ministry of Health personnel from Trinidad and Tobago in KABP research, 4 participants, September 1992.
7. Training of University of the West Indies medical students in KABP research, two sessions, July-August 1992, Trinidad and Tobago, 40 students.
8. Planning Workshop on KABP Research, CAREC Personnel, four participants, June 1992.
9. Communication for Behavior Change, Regional Workshop, general health topics, Barbados, August 1992.

Press Releases/Media Awards

1. Eastern Caribbean AIDS Communication Campaign, Tracking Impact Survey Results, two press releases, coverage by all major media in Trinidad and Tobago, St. Vincent and the Grenadines, Grenada, St. Lucia, and Grenada and by the Caribbean News Agency.
2. Presentation of St. Kitts KABP findings to ZIZ Radio Station.

Reports/ Papers and Conference Summaries/Abstracts

1. Presentation of "A Comparative KABP Study of Three Prison Populations in St. Vincent," Commonwealth Caribbean Medical Research Council Annual Conference, Curacao, April 1992.
2. Report on AIDS hotline in St. Vincent after One Year of Operation, June 1992.
3. Report on Peer Counseling Training Program in St. Vincent, August 1992.
4. Report on Community Theatre Project, St. Vincent, August 1992.
5. Report of Results of St. Lucia Focus Groups: Impact of Phase One Integrated Media Campaign
6. Report of National AIDS KABP Survey, St. Kitts, June 1992.
7. Report on National AIDS Communication Campaign Tracking Survey, St. Vincent and the Grenadines, July 1992.
8. Report of Annual Operations of St. Lucia Hotline, August 1992.

Research Completed

1. Impact Evaluation Survey among teens and parents on response to radio drama series "Choices," St. Vincent, July/August 1992.
2. Evaluation of Peer Counseling Program, St. Vincent, September 1992.
3. National General Population AIDS KABP Study, June 1992.
4. Tracking Survey, AIDS Communication Campaign in Three Countries in the Eastern Caribbean using Quantitative and Qualitative Research Methods, September 1992.

Materials Distribution

LAC Region AIDSCOM-produced Materials

"Face to Face" brochures: English and Spanish - 1,345
Condom Use brochure - 5,750
El Temor que Ciega video - 232
"El Temor que Ciega" discussion guides - 232
A Traves del Espejo video - 152
"A Traves del Espejo" discussion guides - 152
Counseling guides - 3,020
Pamphlet/Posters on universal precautions - 3,020
"El Temor" flyers - 1,150
"A Traves" flyers - 1,150
AIDSCOM Posters - 630
"Mario" DR comic for men - 15,000

Country Project Materials

Bulletins, DR - 250
Sex Worker Comics, DR - 430
Adolescent Module, DR - 50
Adolescent Comic, DR - 100
Wheel, Truth & Myths - 25
Creole comic, DR
Books - 678
Brochures - 6,225
Buttons - 82,000
Packets - 65
Manuals - 56
Publications - 45
Safe Sex cards - 550

Other Videos - 25
Safe Sex Demonstration Models - 195
Stickers - 350
Pencils - 5,000
Training/Discussion Guides - 126
Cassettes (conference) - 150
T-shirts - 100

General Management Team Distribution

Preventing AIDS: Strategies that Work, 650 copies of 5 papers.

The Applied Behavior Change (ABC) Framework

How Personal Testimony Can Motivate Change: Experiences from Côte d'Ivoire

How to Get What you Want from an Advertising Agency

Consumer Research and Condom Promotion in Tanzania

Using Theater for AIDS Education

Occasional Papers, 250 copies of 4 papers.

Sexual Practices and Behavior in Jamaica: A Review of the Literature

Education and Evaluation: Partners in AIDS Prevention

Bisexual Behavior and AIDS in Brazil

Social Marketing and the Prevention of AIDS

Appendix B:

International Travel

COUNTRY	TRAVEL DATES		TRAVELERS
	From	To	
BRAZIL	03/22/92	04/03/92	Zucker, David
	04/22/92	05/02/92	Carovano, Kathryn
EASTERN CARIBBEAN	04/21/92	04/26/92	Eustace, Ann
	04/23/92	04/24/92	Schneider, Anton
	06/23/92	06/28/92	Schneider, Anton
EL SALVADOR	03/29/92	04/05/92	Ramos, Mauricio
GHANA	06/17/92	07/17/92	McCombie, Susan
INDONESIA	05/02/92	05/27/92	Kerr, Peter
	07/01/92	07/23/92	Strand, John
JAMAICA	05/26/92	06/05/92	Jimerson, Ann
	06/01/92	06/04/92	Zucker, David
MEXICO	03/29/92	04/04/92	Ramah, Michael
	07/12/92	07/15/92	Ramah, Michael
	08/13/92	08/21/92	Ramah, Michael
THE NETHERLANDS; VIII International conference on AIDS	07/10/92	07/25/92	Middlestadt, Susan
	07/10/92	08/03/92	Weller, Peter
	07/17/92	07/27/92	Helquist, Michael
	07/21/92	08/05/92	Tan, Michael

COUNTRY	TRAVEL DATES		TRAVELERS
	From	To	
PHILIPPINES	05/27/92	06/14/92	Strand, John
SWAZILAND	05/08/92	06/09/92	Rozsenich, Christina
	06/12/92	07/11/92	Schwartz, Ruth
TANZANIA	04/03/92	04/16/92	Middlestadt, Susan
	05/15/92	05/31/92	Rohde, Fred
	06/04/92	06/28/92	Lathen-Parker, Lorraine
	06/06/92	06/19/92	Stone, Dace
UGANDA	04/17/92	04/24/92	Middlestat, Susan
	08/07/92	08/30/92	Dunnigan, Ken
	08/23/92	09/13/92	Jones, Sally
UNITED STATES	07/28/92	08/05/92	Tan, Michael (Philippines)
ZAMBIA	04/05/92	04/13/92	Zulu, Bernard
	05/19/92	07/17/92	Yoder, Stan
	07/12/92	07/23/92	Zulu, Bernard
	07/14/92	07/26/92	Liskin, Laurie
	07/19/92	07/27/92	Riber, John

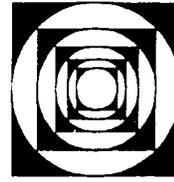
Appendix C:

Subcontractor Reports

- **Center for International Health and Development Communication
Annenberg School of Communication
University of Pennsylvania**

- **Center for Communication Programs
School of Hygiene and Public Health
The Johns Hopkins University**

- **Porter/Novelli
Omnicom PR Network**



Dominican Republic: Work began on preparing the data from the second KAP survey for analysis. Because the planned media campaign was cancelled, a third wave of data will not be collected. The two existing surveys will be compared to determine what changes occurred between 1991 and 1992.

Ghana: McCombie traveled to Ghana in June to work with Dr. Anarfi of the University of Ghana to conduct a second KAP survey among young people aged 15-30. The campaign, which had begun after the first survey in August 1991, had just been completed. Interviews (n=1500) were completed in July in the same two communities (Cape Coast in the Central Region and Techiman in Brong-Ahafo). Preliminary analysis showed significant increases in the proportion who mentioned hearing about AIDS on television or radio. In the second survey, almost half (46%) could complete the campaign phrase (Don't be careless, get protection) correctly. In addition, more than half (58%) mentioned AIDS as one of the 3 most serious diseases for young people in Ghana, up from 37% in 1991. Further analysis and preparation of the final report are in progress.

Uganda: The final evaluation report on the peer education program was completed and distributed. An article detailing some of these results was prepared.

Zambia: Stanley Yoder spent two months in Zambia to conduct the follow up survey for the evaluation of the radio drama called Nshilakamona. This radio drama was broadcast once a week in Bemba on the Home Service station from August 1991 to June 1992. Twenty-five interviewers and one assistant were hired in Ndola to do the survey. Yoder and his assistant spent two weeks in training before pre-testing the questionnaire. The actual interviewing occurred from June 16 to July 8. Adults 15 to 45 years old from randomly selected households in all of Copperbelt province and from the three central districts of Northern province were interviewed with a questionnaire printed in Bemba. The same clusters were visited in 1992 as in 1991. The total sample was 1682 in 1992. Data entry was done at the Institute for African Studies of the University of Zambia.

In addition, Yoder developed a semi-structured and open-ended questionnaire that was used to interview some 90 persons in Copperbelt who had listened to the program. The objective of these interviews was to determine why those persons listened to the program, what listeners thought about the language used, what they thought about the characters in the drama, and what issues the drama had raised for them.

Analysis of the survey data is continuing at the CIHDC. The evaluation will compare both before and after data from the two surveys as well as the knowledge and actions of listeners versus non-listeners to the program to measure effects of the radio drama on knowledge of AIDS and related behavior.

Dissemination: Francis Rwakagiri of the Federation of Uganda Employers gave a presentation of the Uganda evaluation at a meeting organized by the World Health Organization's Global Program on AIDS in Geneva on May 28. McCombie assisted Mr. Rwakagiri in preparing for the meeting, which was titled "Effective Approaches to AIDS Prevention". A poster presentation on the Uganda peer education evaluation was presented at the VII International Conference on AIDS in Amsterdam, July 19-24, 1992. McCombie attended a conference on Culture, Sexual Behavior and AIDS in Amsterdam, and presented a paper discussing condom use in Uganda and Ghana on July 25.



THE JOHNS HOPKINS UNIVERSITY
SCHOOL OF HYGIENE AND PUBLIC HEALTH

CENTER FOR COMMUNICATION PROGRAMS

THE JOHNS HOPKINS UNIVERSITY
Semi-annual Report
April 1992-September 1992

The Johns Hopkins University/Center for Communication Programs continued to have a high level of activity on the AIDSCOM Project during this quarter. Providing technical assistance, training, monitoring, and evaluating on-going projects continues to be the primary responsibility of JHU staff and consultants. During this reporting period the focus remained in the Africa and Latin America regions.

AIDSCOM/JHU staff and consultants continue to provide technical direction to remaining projects in the Africa and LA/C regions. Laurie Liskin, AIDSCOM/JHU site coordinator for Zambia, traveled to Zambia during this time period to provide technical direction for the video/theater project that AIDSCOM/JHU consultants Zulu and Riber have been working on as well. Senior Program Officer, AIDSCOM/JHU, Kathleen Carovano, continued to spearhead the Women and AIDS project that has been funded by the WID offices at AID. Projects in Brazil and Tanzania are well underway, and research was completed in Indonesia. She traveled to Brazil during this quarter to assist in the design of an intervention strategy for women attending local family planning clinics. Dace Stone, AIDSCOM/JHU Africa Regional Coordinator, traveled to Tanzania during this reporting period to provide assistance to on-going projects there.

TRAVEL AND TECHNICAL ASSISTANCE

ZAMBIA

During this reporting period AIDSCOM/JHU longtime consultants John Riber and Ben Zulu continued to provide support to the on-going radio drama. In addition, Riber was able to finalize the script for the dramatic play and to film the play so that it can be distributed throughout Zambia. Laurie Liskin traveled to Zambia as well in order to finalize arrangements for close-out of the Zambia projects, to provide assistance in the final field testing of the brochure developed for women in Zambia.

UGANDA

AIDSCOM/JHU staff and consultants have played an on-going role in the development and training supervision of many AIDSCOM projects in Uganda. As the Uganda/AIDSCOM project comes to a close by December 1992, the final AIDSCOM/JHU activity will be to assist the AIDS Information Center (AIC) in finalizing their advanced

counselor training manual. JHU/CCP staff member Sally Jones, returned to Uganda during this reporting period to assist the AIC training team in field-testing their new manual as well as to assist in the addition of several new components of the training. The training manual is being finalized and disk as well as hard copy will be sent to the AIC. Production of the manual will be done by the AIC in Kampala.

TANZANIA

Dace Stone traveled to Tanzania during this reporting period in order to assist in several on-going projects. AIDSCOM's resident coordinator, Liz Loughran, Africa Project Associate, Lorraine Lathen-Parker, and Stone all worked closely with trainers from OTTU on developing the WID projects. In addition, Stone and Loughran conducted a series of informal interviews with "peer educators" who had been trained by AIDSCOM's local sub-contractor staff. These data will be compared to similar data collected in Uganda.

BRAZIL

Kathryn Carovano traveled to Brazil this quarter to provide technical assistance to BEMFAM in the design of an intervention strategy for women attending local family planning clinics. This design was based on findings from quantitative and qualitative research among this target population, and forms part of a cross-regional project funded by the WID office at USAID. Data from this research will be compared to findings from Tanzania and Indonesia.

Porter/Novelli
Semi-Annual Report
AIDSCOM

April 1, 1992 - September 30, 1992

ACTIVITIES

During this reporting period, Porter/Novelli has continued to provide technical assistance in the areas of social marketing, communications and research. The regional focus of Porter/Novelli activities has been expanded to include Africa as well as Latin America, the Caribbean and Asia. In addition to extensive in-country technical work, Porter/Novelli also carried out diffusion-related tasks including the development of papers and presentations for international conferences and regional workshops.

I. SUMMARY OF INTERNATIONAL TRAVEL

A. AFRICA

Tanzania

Robert W. Porter, PhD.

April 3 - 26, 1992

Scope of Work:

To assist AIDSCOM's local research consultants in the design and development of a consumer intercept survey, to be implemented in tandem with the second wave of the retail audit. To review creative concepts for print and radio advertising developed by ScanAd for Salama condoms. To assist local researchers in designing and implementing focus groups to pretest Salama advertising prior to final execution. To assist the AIDSCOM Resident Coordinator with the condom social marketing project as needed.

B. LATIN AMERICAN/CARIBBEAN

Brazil

David Zucker
May 14 - 19, 1992

Scope of Work:

To participate in meetings with the multidisciplinary committee which will develop an AIDS in the workplace program with the MOH. To conduct a one day social marketing workshop for representatives from banking consortium on AIDS.

Jamaica

David Zucker
May 27 - June 5, 1992

Scope of Work:

To work with the National HIV/STD Control Programme to review results of pretest and finalize plans for production of mass media campaign materials.

Mexico

Michael Ramah
June 8 - 12, 1992

Scope of Work:

To assist the National AIDS Committee (CONASIDA) in the selection of a communications firm to implement the 1992 - 1994 communications plan.

Mexico

Michael Ramah
July 12 - 15, 1992

Scope of Work:

To provide technical assistance to CONASIDA in the finalization of advertising concepts/boards and in the selection of an evaluation plan.

Mexico

Michael Ramah

August 13 - 21, 1992

Scope of Work:

To provide technical assistance to CONASIDA in the finalization of advertising campaigns (3 commercials) and to attend pre-production meeting.

Eastern Caribbean

Anton Schneider

April 23 - 24, 1992

Scope of Work:

To meet with representatives of CFPA, CAREC, and RDO/C to clarify what, if any, research reports, analyses and/or presentations CFPA will require in order to produce communications materials for the Eastern Caribbean Communication Campaign. To discuss any other requirements needed for the next phase of the campaign.

Eastern Caribbean

Anton Schneider

June 23 - 27, 1992

Scope of Work:

To attend communications planning meeting with CFPA and CAREC to plan phase 2 of Pan-Caribbean Mass Media Campaign. To attend ACTS Workplan meeting with CAREC and AIDSTECH.