Assessment and Monitoring of BCC Interventions

Reviewing the Effectiveness of BCC Interventions
This handbook was developed by the AIDSCAP Behavior Change Communication Unit.

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Instrument for Assessment and Monitoring of Behavior Change Communication (BCC) Interventions

INTRODUCTION

This is a handbook to help planners and implementors look at the effectiveness of their BCC interventions.

Implementors can use the handbook to help them MONITOR since the handbook can point out both strengths and potential weaknesses of an ongoing intervention.

The handbook can also be used as a PLANNING TOOL because it highlights important points for the design and development of effective BCC programming.

Please remember that not all criteria will be appropriate for all interventions. Nevertheless, following the criteria is likely to ensure a thoughtfully designed and effective intervention.
For guidance on additional aspects of BCC interventions please see the following AIDSCAP handbooks:

- How to Create an Effective Communication Project
- Behavior Change Through Mass Communication
- How to Create an Effective Peer Education Project
- How to Conduct Effective Pretests
- HIV/AIDS Care and Support Projects
- BCC for STD Prevention
- Partnership with the Media
- Policy and Advocacy Work on HIV/AIDS Prevention
Description of BCC Intervention

1. What are the specific objectives of this behavior change communication intervention? What changes in knowledge, attitude and/or behavior do you expect from the target audience?

List the specific objectives of this project here.

There will be an increase of at least 25% of market women who can recall 2 female STD symptoms.
2. How do you plan to carry out this communication intervention? Check all that apply.

- [ ] training
- [ ] print materials
- [ ] radio
- [ ] print media
- [ ] television
- [ ] group work
- [ ] drama
- [ ] individual counselling
- [ ] other (please specify)
- [ ] one-to-one education

3. Briefly describe when this intervention is taking place. Also describe the difficulties in this situation.


4. Did you involve the target audience in the planning and message development of this intervention?

- [ ] yes
- [ ] no
Standard 1:

Interventions should focus on well-characterized, specific target audiences.

Criteria 1: Who is the primary target audience for this BCC intervention?

Below are some examples of specific primary target audiences. Who is the primary target audience for this BCC intervention?

- Students
- Military
- STD patients
- Pharmacists/chemists
- Health care providers
- Population/General
- People away from home
- Men with multiple partners
- Female CSWs (Commercial sex workers)
- PLW AIDS (People living with AIDS)
- Others (please specify)

Criteria 2: Has this primary target group been further divided by segmenting variables?

- yes
- no
If yes, which variables did you consider?

- gender
- age
- educational level
- language
- occupation
- marital status
- others (please specify)
- attitudes toward sex
- media habits
- health history
- income
- lifestyle
- others (please specify)

Criteria 3. Are there other people who influence the primary target group?

- yes
- no

If yes, who are they?

- community leaders
- top-level decision makers
- media gatekeepers
- health care providers
- educators
- family
- friends
- politicians
- parents
- religious leaders
- merchants
- others (please specify)

Criteria 4. Is this intervention addressing the needs of these other people?

- yes
- no
Criteria 5. What is the risk behavior(s) that the primary target audience is practicing?

Criteria 6. What is the desired behavior?
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If you answered NO to question 2 or 3 OR if you did not have clear and complete answers to any of the questions, this intervention probably has some weaknesses. You will be able to improve the intervention by giving time and detailed attention to the criteria for this standard. Pay particular attention to complete answers for questions 5 and 6.
STANDARD 2:

HIV/AIDS prevention interventions and messages must be crafted to motivate and appeal to the needs, beliefs, concerns and readiness of the specific target audience.

Criteria 1. What are the main messages used in this intervention?

Criteria 2. Does the main idea running through the above messages aim at reducing the risk behavior mentioned in Standard 1, Criteria 5?

☐ yes  ☐ no

Criteria 3. Does the main idea running through the above messages encourage people to move towards the desired behavior mentioned in Standard 1, Criteria 6?

☐ yes  ☐ no
Criteria 4. Are you able to identify the prevention or care NEEDS of the target audience?

☐ yes  ☐ no

What are they?


Criteria 5. What are the popular prevention or care BELIEFS to be addressed?


Criteria 6. What are the prevention or care CONCERNS of the target audience?

Criteria 7. Do some of the messages refer to the NEEDS of the target audience?
☐ yes ☐ no

Criteria 8. Do some of the messages appeal to the BELIEFS of the target group?
☐ yes ☐ no

Criteria 9. Do some of the messages refer to the CONCERNS of the target audience?
☐ yes ☐ no
Criteria 10. Which messages encourage people to change their ATTITUDES?

Criteria 11. Which messages help people to learn SKILLS to protect them from STD/HIV infections?
Criteria 12. Which messages refer to the UNDESIRED BEHAVIORS?

Criteria 13. Do some of the messages refer to the target audience’s ideas of the DISADVANTAGES or barriers of adopting this desired behavior?

☐ yes  ☐ no

Here are some examples of disadvantages and barriers. Check those or list others that your intervention addresses.

☐ money  ☐ time
☐ convenience  ☐ physical ease
☐ mental ease  ☐ social standing
☐ comfort  ☐ popularity
☐ others (please specify)  ☐
Criteria 14. Do some of the messages refer to the target audience's ideas of the ADVANTAGES of adopting this desired behavior?

☐ yes  ☐ no

Here are some examples of advantages. Check those or list others that your intervention addresses.

☐ protected health  ☐ being “modern”
☐ protection of family  ☐ pain reduction
☐ fewer medical costs  ☐ peace of mind
☐ others (please specify)

Criteria 15. Have the messages and materials in this intervention been pretested with the target audience?

☐ yes  ☐ no

If not, why not? If yes, what changes did you make?
Criteria 16.  Are the intervention and the messages planned so that they fit with the specific stage in the target audience’s movement in the Behavior Change process? Which stage is your target audience in?

☐ Stage of dispelling myths and misinformation
☐ Stage in which assessing personal risk of infection is crucial
☐ Stage of learning negotiation skills and condom use
☐ Stage of actually trying out the new behavior
☐ Stage at which reinforcement of messages is appropriate

Criteria 17.  Does this intervention use a combination of communication channels?

☐ yes ☐ no

If yes, which channels?

☐ interpersonal
☐ small group
☐ newspapers
☐ community networks
☐ radio
☐ traditional and folk media
☐ small media
☐ magazines
☐ television
☐ video
☐ others (please specify)

If you answered NO to any questions OR if you did not have clear and complete answers to any of the questions, this intervention probably has some weaknesses. You will be able to improve the intervention by giving time and detailed attention to the criteria for this standard.
Standard 3:

At-risk individuals must be provided with both skills and supplies to prevent HIV.

Criteria 1. Does this intervention provide for skill development?

☐ yes  ☐ no

What skills are being learned? Check all that apply.

☐ how to discuss safer sex with partner(s)
☐ how to refuse to engage in unsafe sex
☐ how to discuss condom use with partner(s)
☐ how to obtain condoms
☐ how to use a condom correctly
☐ how to dispose of a condom correctly
☐ how to discuss safer sex with children
☐ how to recognize need for STD treatment
☐ how to find professional STD treatment
☐ others (please specify)

Criteria 2. Are condoms easily available?

☐ yes  ☐ no
Criteria 3. Are condoms affordable?
☐ yes  ☐ no

Criteria 4. Is STD treatment easily available?
☐ yes  ☐ no

Criteria 5. Is STD treatment affordable?
☐ yes  ☐ no

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Standard 4:

A supportive environment needs to be created for HIV prevention and for the protection of those infected with HIV.

Criteria 1. What are the social, cultural, environmental, economic, political, and organizational conditions that may influence the target audience's HIV/AIDS risk behaviors?
Criteria 2. **Does this intervention try to influence these social, cultural, environmental, political and/or organizational influences? For example, does it:**

- □ try to support traditional and cultural values that encourage low risk behaviors?
- □ try to persuade government officials to change harmful policies?
- □ try to influence organizational/corporate officials to discontinue discriminatory practices or policies?
- □ try to mobilize support among the general public to work for changes in public policy?
- □ try to promote alternatives to risk behaviors?
- □ try to protect human rights of all people affected by HIV/AIDS?
- □ try to actively fight discrimination?
- □ try to educate the whole community for care, compassion and prevention?
- □ others — please describe.
- □
- □
- □

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Standard 5:

Mechanisms need to be created to maintain and sustain HIV prevention behaviors and activities over time.

Criteria 1. Does this intervention have follow-up mechanisms to reinforce and encourage the maintenance of newly acquired attitudes and behaviors?

☐ yes  ☐ no

For example,

☐ periodic follow-ups and recertification of peer educators
☐ HIV prevention messages being repeated in the curriculum at all grade levels
☐ campaigns that include reinforcement messages focused on maintaining new behaviors
☐ annual meetings for organizations working in the HIV prevention area
☐ meetings organized to discuss “lessons learned”
☐ system for senior peer educators to work with junior peer educators
☐ referral services
☐ others — please describe.

If you answered NO to any questions OR if you did not have clear and complete answers to any of the questions, this intervention probably has some weaknesses. You will be able to improve the intervention by giving time and detailed attention to the criteria for this standard.
Standard 6:

BCC planners should identify and use opportunities to work collaboratively and in different sectors of the community/country.

Criteria 1. Does this intervention actively collaborate with other partners and implementing agencies?

☐ yes    ☐ no

Please explain.
Criteria 2. Does this intervention take into consideration other activities and materials aimed at this target audience by other organizations?

☐ yes      ☐ no

Please describe.
Criteria 3. Is this intervention designed to involve the resources and expertise of other organizations and/or the public and private sectors?

☐ yes    ☐ no

If yes, please indicate which sectors.

☐ Commercial sector    ☐ News media
☐ Industrial sector    ☐ Military/police
☐ Ministry of Health    ☐ Ministry of Education
☐ Ministry of Agriculture    ☐ Other government institutions
☐ Others (please specify).

If you answered NO to any questions OR if you did not have clear and complete answers to any of the questions, this intervention probably has some weaknesses. You will be able to improve the intervention by giving time and detailed attention to the criteria for this standard.

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Standard 7:

Monitoring and evaluation are essential processes of effective BCC programming.

Regular monitoring allows you to see if the project is proceeding according to plan or if it needs to be changed. Evaluation indicates if the project is achieving its objectives.

**Criteria 1.** Does this intervention have a monitoring and evaluation DESIGN?
- [ ] yes
- [ ] no

**Criteria 2.** Does this intervention have a monitoring and evaluation BUDGET?
- [ ] yes
- [ ] no

**Criteria 3.** Does this intervention have STAFF available for monitoring and supervision?
- [ ] yes
- [ ] no
Criteria 4. Have you identified new directions as a result of monitoring or evaluation?

☐ yes    ☐ no

If so, please describe.

Criteria 5. Have you developed indicators of BCC EFFECTIVENESS?

☐ yes    ☐ no

Here are examples of quantifiable indicators.

● number of condoms distributed/sold
● number of training sessions
● number of education sessions
● number of media events
● number of materials produced
● number of materials distributed
● number of people trained
● number of people reached
You will also want to find indicators that respond to the specific objectives of this intervention. Some of the most meaningful indicators are those that the community itself identifies as important. The following are examples that may be appropriate for some interventions.

1. □ anecdotal evidence and observation of changing social norms (e.g., men and women leaving bars separately rather than together as in the past; school girls speaking openly of rejecting “sugar daddies;” condom availability at discos, hotels, bars)
2. □ self-reported evidence of more open conversation about use of condoms, decrease in number of partners, etc.
3. □ self-reported ability to discuss safer sex options with partner(s)
4. □ self-reported ability to recognize STD symptoms
5. □ decreased time between recognizing an STD symptom and seeking treatment
6. □ self-reported increased use in condoms
7. □ self-reported increased abstinence
8. □ self-reported increased faithfulness
9. □ self-reported STD treatment-seeking and preventive behavior
10. □ the intervention becoming more self-sustaining
11. □ more discussion of HIV/AIDS policy issues in legislative bodies
12. □ more press coverage of ethical and legal issues dealing with HIV/AIDS issues
13. □ more requests for information about STDs/HIV/AIDS
14. □ more requests for information about how to talk to children and/or sexual partners
15. □ widespread interest and participation in special AIDS observations (e.g., World AIDS Day)
16. □ grassroots participation in campaign activities
17. □ more media openness about sexual issues (in news stories as well as in entertainment programs)
18. □ fewer complaints (e.g., letters to the editor) about media references to condoms, sexuality, etc.
19. □ more condoms available in more outlets
20. □ more first-time attenders at STD clinics
21. □ fewer repeat clients at STD clinics
22. □ more religious leaders and/or business leaders speaking out in a positive way about HIV/AIDS issues
23. □ more business policies developed that protect HIV+ workers from discrimination
24. □ more business policies initiated that promote HIV prevention education activities.

**Do you or can you use any of the above indicators?**

□ yes    □ no

**If yes, which numbers?**

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<thead>
<tr>
<th>Number</th>
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<tbody>
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Do you use other indicators to note progress toward your objectives?

☐ yes  ☐ no

Please describe.

PLEASE NOTE:

This handbook has helped you find strengths and weaknesses in this intervention.

However, to measure EFFECTIVENESS, you must look at your original objectives and the indicators that will tell if the intervention is having the desired effect.

If you answered NO to any questions OR if you did not have clear and complete answers to any of the questions, this intervention probably has some weaknesses. You will be able to improve the intervention by giving time and detailed attention to the criteria for the standards.
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