



Behavior Change Communication (BCC) Campaigns

Binh Dinh, Hai Phong, Quang Ninh, Can Tho, Ha Noi, Dong Nai, Thai Binh Provinces

“A truck driver interviewed

stated that he has seen signs along the highway with messages about condom use and avoiding drugs and discusses the signs with his young assistant.”¹

The Situation

- **As of September 30, 2002**, more than 55,200 people in Viet Nam are reported to be HIV positive; the actual number is likely to be three to four times higher.
- **About 85% of reported HIV infections** are among men; about 60% of the total reported positive are injecting drug users (IDUs); female sex workers [FSW] are another vulnerable group.
- **HIV Sentinel Surveillance (HSS) for 2001** indicates that about 30% of IDUs tested are HIV positive and about 5 percent of FSW are HIV positive.
- **Although awareness of HIV/AIDS is high in Viet Nam**, unsafe sexual and injecting drug use behaviors continue to be prevalent throughout the country. Many people using condoms are not consistent, and needle sharing among IDUs is common.
- **Past efforts to communicate HIV/AIDS prevention messages** have often used stark and negative messages, linking HIV/AIDS to “social evils” rather than taking a more positive and informative public health approach.
- **Most health promotion communication** has been centrally planned and designed. However, government authorities increasingly recognize



the critical role of theory-based BCC in HIV/AIDS prevention and the importance of local adaptation. The use of modern behavioral change communication and advertising techniques to effectively communicate key messages is slowly increasing. Local governments are learning to use formative research to design effective BCC for HIV prevention and to pretest materials and messages.



The Project

Begun in May 2000, USAID-funded and FHI supported decentralized and comprehensive BCC work reaches four provinces: Hai Phong, Can Tho, Quang Ninh and Binh Dinh. Targeted BCC work in Ha Noi, Dong Nai and Thai Binh began mid-2002. Provincial

¹ “Final Evaluation of the Binh Dinh Men’s Intervention Campaign,” August 2001, Rosanne Rushing

AIDS Standing Bureaus (PASB) designed the projects with FHI support. The local governments, PASBs and mass organizations implement the interventions, under the guidance of FHI. Basic, intensive and advanced BCC training and ongoing technical support from FHI are key to building local capacity in BCC work. The IEC centers of Provincial Health Services play a key role in the development of materials and for training for interpersonal communication through peer and health educators. Local artists and writers tailor messages and images to reflect local realities and target populations. FHI is encouraging use of private advertising agencies and marketing firms to develop effective media products for dissemination.

Project Objectives

To upgrade the knowledge, skills and practices of communication practitioners so that BCC strategies and activities will be more effective; To improve audiences' HIV/STI knowledge, to encourage changes in behavior, to build skills for safer practices and; To increase the acceptance of condom use for STI/HIV prevention among those whose sexual or injecting behavior puts them at risk of HIV; To convince men to be more responsible in sexual health matters in their roles as citizens, fathers, husbands, friends, and employees.

Activities

- **Formative Research** to explore knowledge, behaviors, attitudes and needs linked to HIV prevention
- **Advocacy Meetings** with community and party leaders · **Planning / Coordination Meetings** · **Launching Meeting**
- **Training Workshops on BCC:** Basic training (two-week hands-on survey course of BCC approach), intensive training (focus on decreasing stigmatization), advanced training (focus on issue of sexuality and on improved audience research) workshops for provincial staff and partners · **Training for Barbers, Shoeshine Boys, Motorcycle Taxi Drivers, Workplace and Drug/Sex**

PROJECT GOAL

To reduce HIV/AIDS/STI transmission through increased practice of safer sex.

Work Rehabilitation Center Peer Educators

- Peer education (PE) conducted.
- Collaboration with Advertising Agencies in Design and Pretesting of BCC Materials · BCC Materials Production and Dissemination
- Mass Multi-Media Campaigns including Television and Radio Spots/Tele-dramas Productions · Interpersonal Communication · Print Media · Journalist Training
- Live Mobile Drama: Active HIV/AIDS peer educator communication training, with a foundation in drama work trains residents of the drug and sex work rehabilitation centers in Binh Dinh and Dong Nai. Performances and interactive audience discussions in rehabilitation centers and in the community.
- Community Events · Topic Talks · Mobile IEC Shows · "Ideal Man" contests
- Condom Promotion through Social Marketing at non-traditional outlets, mass media advertising and media events.
- Condom Tunnel: In Can Tho, a condom promotion 'tunnel' was set-up along a five-kilometer stretch of highway and crossroads where mobile peer outreach workers work and where 47 attractive large billboards and smaller signs with positive messages encouraging safe behaviors are placed along the highway near sex work hot-spots in Thot Not district, and where condom distribution outlets have been established at bars, restaurants, hotels, karaokes, and truck stops in the area.
- Monitoring and Evaluation



Real stories by HIV/AIDS affected people.

Achievements

- **Fostered institutional autonomy and sustainability** by strengthening provincial capacity to design activities and HIV/AIDS prevention messages, to produce materials locally and to select and prepare appropriate mass media and interpersonal channels.
- **Support for experience-sharing and mentoring** among the FHI-supported PASBs provided valuable peer-to-peer learning opportunities.

BEHAVIOR CHANGE COMMUNICATION (BCC) CAMPAIGNS

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- **Government bodies and mass organizations** collaborated to successfully implement community-based activities traditionally carried out by NGOs in other countries in the region.
- **Highly dynamic and successful decentralization of BCC work at the provincial level** occurred (e.g., in terms of design, pre-testing materials, production and dissemination of BCC messages through both mass media and interpersonal communication (peer education) approaches).
- **BCC materials appropriate to many different target groups** were designed and disseminated
- **Messages developed** to help decrease the stigma against HIV+ people and to promote compassion and understanding. Positive images of personal responsibility are created and reinforced.
- **BCC for HIV/AIDS prevention through Peer Education** is done effectively in the project provinces of Hai Phong, Can Tho, Binh Dinh and Quang Ninh: By September 30, 2002, 135 workplace peer educators reached almost 18,800 employees at 8 factories and in the community, 290 motorbike PEs reached 62,857 customers, 92 barbers reached 67,825 customers and 60 other barbers were trained, 20 shoeshine boys reached 10,766 customers, rehabilitation center PEs reached 5,500 people, injection drug users [IDUs] PEs from the Drop-in Centers reached 3,348 IDUs, more than 70 female sex workers [FSWs] received PE training at the Women's Health Club, 3 Health Educators/6 Community Outreach Workers (former FSWs) had over 36,580 PE contacts with women. Peer educators also distributed thousands of pieces of BCC materials and many sold or distributed condoms as well.
- **BCC produced and distributed included:** 354,869 leaflets, 90 billboards, 8,900 posters, 25 real stories, 5 comic books (9,000 copies) 6 'provincial' logos, 12,000 stickers, 900 copies of a magazine, 100 flipcharts. Held 28 competitions / performances. Produced and broadcasted 10 radio spots, 2 radio dramas, 11 TV programs, 10 TV spots, 7 tele-dramas, 2 mobile dramas, 2 films, 96 Q & A newspaper columns, provided 31 public presentations.
- **The Condom Tunnel** attracted a lot of attention, won over skeptical people and delivered the safer

sex message at the appropriate place to the appropriate people at the appropriate time. Condom usage is reported up along the tunnel route, where each day thousands of people traveling along the route see the messages.

- **25 journalists from national and provincial media agencies** were trained in communicating on HIV/AIDS and 42 media products produced on HIV/AIDS topics following the training (31 newspapers articles, 4 radio tapes for broadcast, and 7 TV video tapes for broadcast).
- **Condom promotion intervention with DKT International** distributed/sold 31,766,894 condoms since January 1998.
- **Additional provinces added for 2001-2002** that include various BCC activities in their interventions: Ha Noi, Dong Nai and Thai Binh.
- **Over 150,000 people were reached** through FHI-supported interpersonal one-on-one peer education HIV/AIDS prevention activities.
- **FHI-supported BCC messages on HIV/AIDS prevention** reached literally millions of people through provincial and nation-wide broadcasts of tele-dramas, radio and TV spots, FHI-sponsored HIV/AIDS concerts, social events, World AIDS Day events, and provincial and national advertising for condom promotion by DKT International (funded by FHI).

Lessons Learned

- **Conducting initial provincial situation assessments**, followed by a strategic planning process were essential first steps in developing appropriate interventions in each province.
- **Community authorities** (Police, Social Affairs, the Peoples' Committee) must be made important players in the activity and can help smooth out bureaucratic difficulties. The need for government clearance for locally developed media products can slow down the project but partners handle this process well, and partners have learned that these groups are also important audiences.



HIV/AIDS information leaflet for condom promotion.



Pamphlet on safe behaviors for the general public (Quang Ninh province).



Reviewing TV spot in Can Tho province.

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- **Mass organizations, health departments and other government agencies,**

when provided support and technical guidance, can successfully carry out effective, innovative and locally targeted BCC campaigns.

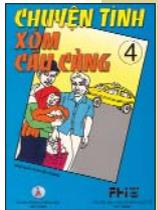
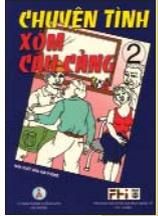
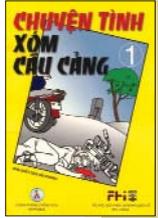
- **Journalists can be trained** to communicate more accurately and effectively about HIV/AIDS and to avoid stigmatizing terminology in

their reporting on the issue.

- **The building of positive images** of male personal responsibility contributed to BCC campaign success.
- **Involving audience members** can increase quality in design and produce effective BCC materials and activities. Real-life stories have special impact when used in BCC activities.
- **Involving stigmatized group members** [FSWs, IDUs- some HIV positive] in BCC activities helped reduce the community stigma and discrimination against them. Volunteers can work successfully in BCC interventions in Viet Nam.
- **Combinations of a variety of BCC activities** mean more effective, reinforced reach of messages
- **Effective BCC materials** do not have to be expensive to produce.
- **BCC activities targeted at men** can succeed.
- **Private advertising firms can be used effectively** to assist in mass media campaigns with appropriate guidance.
- **Vietnamese media** are willing to feature and focus on these interventions.
- **Despite the successes of the BCC work,** there remains a great need for personalization and internalization to improve personal risk perception, moving away from the ideas of limited "risk groups" to individual risk behaviors and responsibility.
- **BCC messages need to be strengthened** through better audience segmentation and better use of formative research to move from 'basic information' to motivating behavior change.
- **Managing shoeshine boys** proved to be very difficult due to their mobility. While this activity

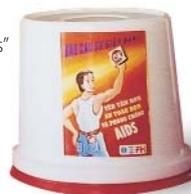
still succeeded in Hai Phong, it was not replicated in other provinces. Because of their young age, they were not allowed to provide/sell condoms to customers.

- **Strong anti-social evils campaigns,** such as in Cam Pha and Can Tho made community outreach contact with drug users and commercial sex workers all the more difficult.
- **Effective and up-to-date monitoring of the BCC campaign** requires more human resources than that project and implementation agencies have been able to provide to date.
- **BCC activity monitoring systems** need to be systematic, comprehensive and implemented from the beginning of an intervention. For example media audience tracking data and exposure to BCC messages could be obtained hired special monitors or from media marketing firms, while exposure to BCC messages could also be obtained by adding special questions to the Behavior Surveillance surveys (BSS).

**FHI VIET NAM HIV/AIDS INTERVENTION: 1999-2002**

- HIV/AIDS Behavioral Surveillance Surveys
- Capacity Building for Individuals and Organizations
- **Behavior Change Communication (BCC) Campaigns**
- Condom Social Marketing Using Non-Traditional Outlets
- Men's Interventions: Peer Education by Barbers and Shoeshine Boys
- Men's Interventions: Peer Education by Motorcycle Taxi Drivers
- Men's Interventions: Peer Education in the Workplace
- The Women's Health Club and Community Peer Education Project
- Risk Reduction Through Drop-In Centers and the "ECHO" Peer Education Model
- Peer Education in 05/06 Rehabilitation Centers: Risk Reduction and Support for People Living with HIV/AIDS
- STI Management Training for Pharmacists and Private Physicians

Comic books for behaviour change for customers of PE barbers.



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