

Behavioral Research Explores the Human Condition

FHI Tools for Building Skills

FHI developed the following manuals to increase understanding and use of qualitative research methods.



Qualitative Methods: A Field Guide for Applied Research in Sexual and Reproductive Health (now published by Jossey-Bass as: *Qualitative Methods in Public Health*)



Qualitative Research Methods: A Data Collector's Field Guide

While it is important to know whether health products and services are safe and effective for treating disease or preventing infections such as HIV, it is equally important to know who uses these products and services and why they do (or do not). Behavioral research seeks to answer these questions and to address why some individuals knowingly engage in activities that put their health at risk. The research is often conducted in collaboration with the following:

Clinical Research: Behavioral research provides information that improves study participants' understanding of informed consent, helps prepare communities to understand the research process, and enhances recruitment and retention of study participants. For example, FHI is helping to identify sites for a clinical trial of the oral antiretroviral Truvada in individuals at high risk for HIV. As part of this work, researchers will plan community outreach activities and determine if potential sites have community and local government support.

Public Health Programs: Behavioral research can enhance the acceptance and correct use of HIV prevention strategies and contraceptive methods, and increase adherence with treatment regimens. Behavioral studies also explore reasons for risk-taking and help programs to develop successful prevention strategies. In a current project funded by the U.S. Centers for Disease Control and Prevention, FHI is assessing adult adherence to antiretroviral therapy in selected programs supported by the President's Emergency Plan for AIDS Relief. The results should inform the design of effective adherence strategies and contribute to the capacity of countries to provide high-quality HIV/AIDS treatment.

Communication Programs: Behavioral research develops appropriate messages for specific populations and evaluates whether the messages are

understood and acted upon. Communication campaigns have been successful in increasing contraceptive use around the world. In Kenya, FHI will be testing the effects of a communication campaign to increase contraceptive continuation rates. Qualitative research to find out why women discontinue contraceptives will be used to develop the messages for the campaign, which will target contraceptive users and those who can influence them, such as male partners and mothers-in-law.

Behavioral research methods

Researchers use a variety of methods to explore human behavior. Quantitative methods—which address the questions of “how much” or “how many”—traditionally have been emphasized in formal research training for social scientists and other health professionals. But qualitative methods ask about the “how” and the “why” behind behaviors. To answer these questions, researchers use focus groups, key informant interviews, and participant observation. Researchers also apply “mixed-method research,” which combines qualitative and quantitative methods.

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MTV's *Staying Alive* Campaign: Impact on Youth HIV Prevention

Partnership based on trust makes for better research results

PARTNERS:

BDA

Dakar, Senegal

IBOPE

São Paulo, Brazil

Institute for Environmental Sciences,

Cheikh Anta Diop University

Dakar, Senegal

Valley Research

Group (VaRG),
Kathmandu, Nepal

With funding from the U.S. Agency for International Development, FHI researchers collaborated with MTV Networks, the largest global media outlet for youth, to develop and evaluate a six-month, multi-component global campaign to increase AIDS awareness and promote positive action among youth. *Staying Alive's* goals were to:

- increase awareness of HIV/ AIDS and encourage prevention behaviors
- reduce stigma and discrimination
- empower youth to prevent HIV

The campaign included seven public service announcements (PSAs); an hour-long documentary of three young people affected by HIV/AIDS; a Web site; and concerts in Cape Town, South Africa, and Seattle, Washington.

FHI provided technical guidance on program content and assisted with the dissemination of campaign materials to international and local broadcast media. Television was the primary broadcast medium. The campaign also reached youth through radio, the Internet, and community activities.

To evaluate the campaign, researchers working in Brazil, Kenya, Nepal, and Senegal used quantitative and qualitative methods to answer questions such as:

- Did the campaign reach appropriate audiences such as youth at risk of HIV/AIDS?
- What were the effects on those exposed to the campaign?
- Can youth in countries as geographically and culturally diverse as Brazil, Nepal, and Senegal identify with the same global campaign?

Researchers used population-based household surveys to measure exposure to the campaign and its effect on attitudes and interpersonal communication. Using focus groups, they gathered information on whether youth understood and identified with campaign messages.

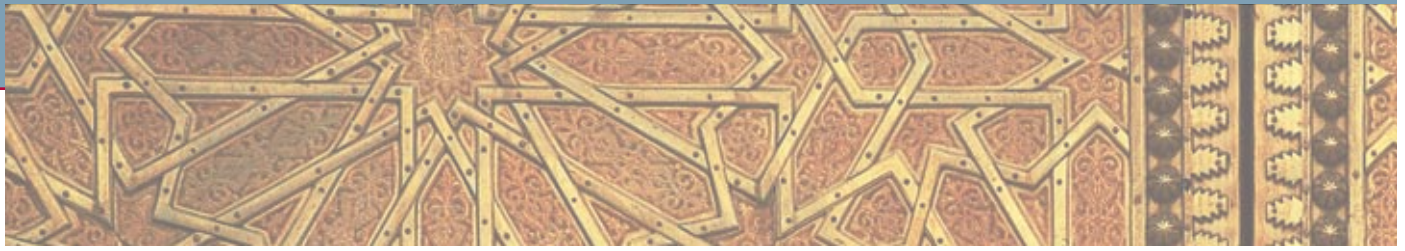
The campaign's reach

Segments of the campaign reached almost 800 million households worldwide, including 44 of the 50 countries most affected by HIV/AIDS. Urban, more affluent youth were more likely to have seen some of the campaign. However, poorer youth also had exposure, especially through radio broadcasts and locally produced adaptations. Exposure ranged from 12 percent of youth ages 16 to 25 in Kathmandu, Nepal, to 82 percent in Dakar, Senegal.

Analysis of data from Brazil, Nepal, and Senegal showed that exposure to the campaign in all three countries was associated with increased interpersonal communication about HIV and more positive beliefs about prevention. Focus groups in these countries and Kenya found that the documentaries of young people living with HIV had a strong emotional impact on young viewers. Based on these findings and others, FHI researchers concluded that the *Staying Alive* evaluation provided evidence that a global media campaign can impact the social norms of youth.

Staying Alive continues

MTV has continued its annual production and broadcast of *Staying Alive*. Based on FHI's evaluation, they have placed more focus on long-format programming, and encouraged local MTV stations and other media partners to develop PSAs that are appropriate for their cultural context. An evaluation of the campaign as it has evolved over the past five years is now under discussion.



Protecting Trial Participants

For clinical trials to be successful, it is essential for researchers to have access to individuals for whom the study product is being developed. For this reason, clinical trials of products for HIV prevention and treatment frequently take place in resource-poor countries where HIV is most prevalent. However, research conducted in such communities raises concerns. If participants in a clinical study receive access to health care services that are significantly better than those generally available in their communities, does this constitute an inducement? Other fundamental questions that must be addressed in any clinical trial are:

- Do the participants understand the nature of the research at the time of their enrollment?
- Do the participants understand that the study drugs have not yet been proven effective or may be placebos?
- What if a participant develops a negative health outcome that could be associated with a study product? Should the researchers and sponsors provide care and support for the individual after the clinical trial is completed?

Since the late 1990s, FHI has been a leader in integrating behavioral research into clinical trials. Behavioral research—especially qualitative methodologies—has become central to understanding community norms, beliefs, and expectations about trial participation. For example, to improve informed consent, FHI-led behavioral research has identified issues such as participants not understanding the distinction between research studies and health care services. Behavioral researchers have also been instrumental in improved research ethics training for on-site investigators.

An evolving process

HIV prevention research in resource-poor communities is a complex undertaking. However, it is an essential one if we are to help those most at risk. FHI's qualitative studies have shown the need for stronger relationships between researchers and the communities where the trials take place. To ensure that participants have been treated fairly and that the clinical data collected is of high quality, researchers must continue to explore issues such as how much time should be spent preparing sites for a clinical trial. Additionally, further discussion is needed to determine who is responsible for providing long-term care and treatment of participants. Behavioral researchers at FHI and elsewhere will have a pivotal role in answering these questions.



Grants and Awards

FHI has been awarded funding by the **U.S. National Institutes of Health** to study the **social networks and behavioral decisions of heterosexual men that might increase their risk of acquiring and transmitting HIV**. The data, to be collected in Ghana and Tanzania **beginning May 2007**, will be used to develop interventions that will help men make safer sexual decisions.

The **U.S. Centers for Disease Control and Prevention** is funding an FHI study of **adult adherence to antiretroviral therapy** in a sample of programs supported by the President's Emergency Plan for AIDS Relief. The results of this **two-year study** will inform the design of effective adherence strategies and contribute to the ability of countries to provide high-quality HIV/AIDS treatment.

Publications

Evaluating Media

Waszak Geary C, Burke HM, Neupane S, Castelnau L, and Brown JD. Does MTV reach an appropriate audience for HIV prevention messages? Evidence from MTV viewership data in Nepal and Brazil. *Journal of Health Communication* 2006;11:665-81.

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Waszak Geary C, Burke HM, Castelnau L, Neupane S, Sall YB, Wong E, Tucker HT. Exposure to MTV's global HIV prevention campaign in Kathmandu, Nepal, São Paulo, Brazil, and Dakar, Senegal. *AIDS Education and Prevention* 2007;19:36-50.

Understanding Communities

MacQueen KM, Namey E, Chilongozi DA, Mtweve SP, Mlingo M, Morar N, Reid C, Ristow A, Sahay S, The HPTN 035 Standard of Care Assessment Team. Community perspectives on care options for HIV prevention trial participants. *AIDS Care*. In press.

MacQueen KM, Shapiro K, Abdool Karim Q, Sugarman J. Ethical challenges in international HIV prevention research. *Accountability in Research* 2004;11:49-61.

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MacQueen KM, Cates W. The multiple layers of prevention science research. *American Journal of Preventive Medicine* 2005; 28(5):491-95.

Family Health International (FHI) is a nonprofit organization dedicated to improving lives, knowledge, and understanding worldwide through a highly diversified program of research, education, and services in family health.

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The need for capacity building

While the international health community has increasingly recognized the importance of behavioral and social science research over the past decade, challenges in building capacity in qualitative research remain. True capacity building needs long-term training and technical assistance that emphasize analysis and expand researchers' skills in using new methodologies. As in other forms of research, data quality in qualitative research depends on how well researchers know techniques, interpret results, and understand the subject matter. FHI's long-term goal is to build a pool of professionals who can use behavioral research as part of an integrated research team. An important step is to improve training in qualitative methodologies, especially in data analysis and translation of results to practice, particularly in countries where advanced qualitative research skills are limited.