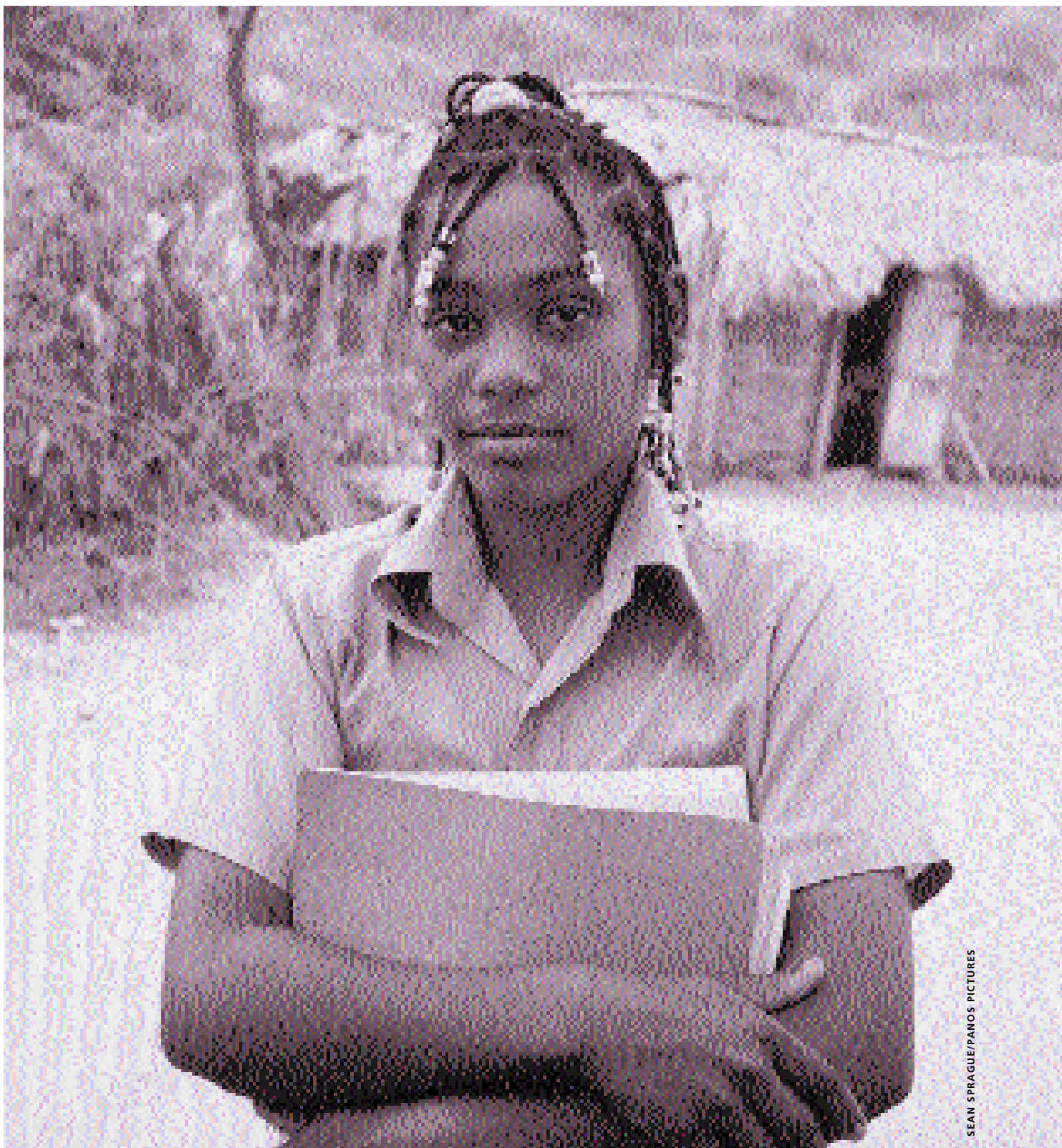


The campaign attained unprecedented multisectoral involvement and support: for the first time in the history of HIV/AIDS prevention in the Dominican Republic, NGOs, government agencies, international organizations and the private sector worked together for a common cause.



SEAN SPRAGUE/PANOS PICTURES

A DOMINICAN TEEN-AGED SCHOOLGIRL REPRESENTS ONE OF THE TARGET AUDIENCES FOR AIDSCAP'S YOUTH AND HIV/AIDS NATIONAL MEDIA OUTREACH CAMPAIGN.

HIV/AIDS PREVENTION MASS MEDIA CAMPAIGN FOR YOUNG PEOPLE IN THE DOMINICAN REPUBLIC

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HIV/AIDS PREVENTION MASS MEDIA CAMPAIGN FOR YOUNG PEOPLE IN THE DOMINICAN REPUBLIC

INTRODUCTION

A young man is shown embracing a woman on a couch in a dimly lit room. The sofa revolves, and the same man appears, holding another woman. With another turn, that woman is seen in the arms of a different man. In the background, a singer croons the opening lyrics of a romantic ballad: “Just one time I have loved in my life, just one time and never again.”

A final turn of the sofa reveals the last couple. The young woman looks up with a grim expression and stares directly at the camera. The word “SIDA” (AIDS) appears in bold red letters across the TV screen, and the narrator takes the sweet love song and turns its meaning on its head. “AIDS. Just one time and never again,” he warns. “Protect yourself. Don’t change partners. Use condoms. Because just one time is enough, and never again.”

This forceful TV advertisement was one of four produced for a mass media campaign launched in September 1995 by the AIDS Control and Prevention (AIDSCAP) Project in the Dominican Republic. Designed to increase young people’s perception of their own risk of contracting HIV, the two-and-

a-half-year campaign was supported by the United States Agency for International Development (USAID), which funded technical assistance, project management and materials production, and by Dominican media outlets, which contributed free air time and press coverage. The campaign also received support from many individuals, organizations and companies who provided their time and expertise free of charge or at very low cost.

More than a dozen governmental and nongovernmental organizations (NGOs) participated in developing the strategy that sustains the campaign and in distributing related printed materials. These organizations also worked with AIDSCAP to improve sexually transmitted infection (STI) and HIV/AIDS education and counselling services for Dominican young people between the ages of 13 and 19.

This case study focuses on the lessons learned from AIDSCAP’s mass media campaign. It also documents how the campaign was used to mount a broader effort to provide more consistent, high-quality HIV/AIDS/STI services to young people in the Dominican Republic.

HIV/AIDS AND DOMINICAN YOUNG PEOPLE

In 1993, projections developed from epidemiological surveillance data revealed that 5 per cent of the Dominican population could be infected with HIV by 2000. That same year the Information, Education and Communication (IEC) Committee of the National AIDS Commission (CONASIDA) designed a national HIV/AIDS prevention IEC strategy that identified young people as a key target audience.

Most reported AIDS cases were occurring among people aged 25 to 35. Since it can take ten years or more for people living with HIV to develop AIDS symptoms, it was assumed that the majority of people with AIDS had contracted the virus during their teens and early twenties. Thus, preventing HIV transmission among young people became an urgent priority.

At the time, young people had few places to turn to for accurate information and sound guidance on HIV/AIDS/STIs. Some organizations were trying to provide such services, but their efforts were not coordinated, and the quality of the services varied widely.

Despite the broad reach of the mass media in the Dominican Republic and its strong impact on youth culture and social norms, television and radio had never been used to disseminate HIV/AIDS messages designed specifically for young people. A previous media campaign to educate Dominicans about HIV and STI prevention, aired during 1989 and 1990, had targeted the general population. In 1994 the AIDSCAP programme in the Dominican Republic decided to explore the untapped potential of mass media advertising to reach and influence large numbers of young people.

Working Together In early 1994 AIDSCAP invited organizations working with young people to participate in developing a national HIV/AIDS IEC strategy. A working group was formed with representatives from 15 governmental and international organizations, NGOs and the church.

A programme strategy was developed during the second quarter of 1994, combining mass media and interpersonal communication. AIDSCAP recognized that mass media efforts would be more effective if they were reinforced with consistent messages from other sources and supported by services that enabled young people to act on the messages. Furthermore, some highly sensitive behaviours and issues can only be addressed and discussed at the interpersonal level. Therefore, AIDSCAP staff made a concerted effort to coordinate mass media efforts with organizations already implementing HIV/AIDS interventions targeting young people.

The working group was multisectoral, with representatives from the fields of education, family planning, youth services and development, health and research.

The participation of Programa de Control de Enfermedades de Transmisión Sexual y SIDA (PROCETS), the national AIDS and sexually transmitted infection control programme of the Dominican Republic, was particularly important, not only for its technical contributions, but also for its official endorsement of the campaign.

Considering its rigid positions on sexuality issues and condom use, the Catholic Church's participation and endorsement, through the

SIDEBAR 1

Participating organizations

Government

National AIDS and STD Control Programme (PROCETS)
Integral Health for Adolescents Programme (PRONAUSA)
National Council for Family and Population (CONAPOFA)
General Directory for Young People Promotion (DGPJ)
Ministry of Education (SEEC)

NGOs

Coordinadora de Animación Socio-cultural (CASCO)
Instituto Dominicano de Desarrollo Integral (IDDI)
Asociación Dominicana Pro Bienestar de la Familia (PROFAMILIA)
APEC Institute for Sexual Education (INSAPEC)
Centro Nacional de Investigaciones Materno Infantiles (CENISMI)
Institute of Human Sexuality (ISH)

Church

Pastoral Juvenil

International Organizations

Pan American Health Organization (PAHO)
United Nations Population Fund (UNFPA)
Development Associates

Pastoral Juvenil, was also important. The Pastoral Juvenil, whose members include all organized Catholic youth groups, participated throughout the process and officially represented the Catholic Church in the campaign launch event.

Family Health International's AIDSCAP office in the Dominican Republic already had strong ties with many of the participating organizations. For example, two NGOs, Coordinadora de Animación Socio-Cultural

(CASCO) and Instituto Dominicano de Desarrollo Integral (IDDI), were implementing the Acuario Project with AIDSCAP support. This intervention targeted 13- to 24-year-olds in disadvantaged communities in Santo Domingo. It integrated HIV/AIDS prevention with efforts to help communities address many other threats to young people's health through intensive outreach and peer education.

All group members had experience with HIV/AIDS programmes for young people

and were able to offer valuable insights throughout the process of developing, implementing and evaluating the campaign. Many of the participating organizations were involved in pretesting and distributing materials at their project sites.

AIDSCAP provided the campaign with technical leadership through its Dominican Republic office staff and a number of international experts who served as consultants. AIDSCAP also brought all the sectors and organizations together to work collaboratively.

The working group met regularly to discuss progress and review materials. Decisions were made based on agreement by a majority of the members. At times, AIDSCAP had to assume a mediating role among organizations or individuals with different opinions or approaches. The involvement of a few highly respected local experts on working with youth facilitated this decision-making process.

Understanding Risk Data from recent studies was used to identify the target audience, goals and objectives of the strategy. AIDSCAP and its partners collected as much information as possible on young people's knowledge of and attitudes toward HIV/AIDS, sources of information about HIV/AIDS and sex, sexual behaviour at different ages, education levels, media preferences and use of various prevention methods.

Among the most important sources of information were two studies carried out in 1992 among young people. According to a knowledge, attitudes, beliefs and practices (KABP) survey conducted by the CASCO among 13- to 24-year-olds and the 1992

National Young People Survey (ENJOVEN 92), conducted among 15- to 24-year-olds, the average age of sexual initiation in the Dominican Republic was 14 to 15. Thirty-eight per cent of all young people surveyed reported that they had had sex before age 15. Further, more than three-quarters of those who had continued to have sex were not doing so with their initial partner.

Despite these high rates of sexual partner change, condom use was low among young people. A 1994 study of sexual behaviour conducted by the Institute of Human Sexuality (ISH) revealed that only 47 per cent of young people had used condoms in their sexual encounters. This study also showed that only 50 per cent of young people in schools had received sex education.

The ENJOVEN 92 indicated that 31 per cent of sexually active young women and 75 per cent of young men had used or were using condoms. However, half of these young people said they were not willing to use condoms in all their sexual relations.

The CASCO and ENJOVEN studies also showed that half of the young men and 15 per cent of the young women reported having changed their sexual behaviour (by having fewer partners or using condoms) since becoming aware of HIV/AIDS. Of those who had not changed their behaviour, more than half of the young women and one-fifth of the young men said they did not need to because they trusted their partners. Another reason they cited was having sex only with a regular partner and not with a sex worker.

Target Audience After reviewing the research results, the working group characterized the target audience of the strategy as young people who:

- are single
- live with one or both parents in urban and periurban areas of the country (58 per cent of Dominican young people live in urban areas)
- have completed part of secondary studies
- have received very little formal sex education
- do not talk about sexual issues with parents (parents do not try to discuss these issues with them either)
- initiate sexual activity at age 15 to 16
- do not like to use or have not used condoms for HIV/AIDS prevention
- occasionally use condoms as a birth control method.

Research results also helped working group members determine the key risk factors for HIV and STI transmission among Dominican young people:

- early initiation of sexual activity among both sexes, with frequent change of partners
- lack of formal sexual education
- low perception of personal HIV risk
- negative attitudes towards condom use and low use of condoms to prevent STIs.

Goals and Objectives The overall goals of the strategy were to promote behaviour change among 13- to 19-year-olds toward safe sex practices and to promote the demand for services in support of these behaviour changes.

The specific objectives were to:

1. Increase awareness and risk perception of STI and HIV/AIDS among 65 per cent of 13- to 19-year-olds and encourage them to adopt preventive measures.
2. Standardize criteria for HIV/AIDS and STI services among organizations delivering education and counselling to young people.
3. Increase to 20 per cent the number of 13- to 19-year-olds who seek HIV/AIDS and STI education and counselling services.

The strategy aimed to encourage behaviour change at two levels: individual and societal. At the individual level, messages were designed to target young people who were not sexually active as well as those who were sexually active. They addressed the following issues: risk awareness, abstinence, delaying initiation of sexual intercourse, having fewer sexual partners, non-penetrative sexual practices, condom use, monogamy and other alternatives to high-risk behaviour.

To attain changes at the societal level, the strategy also sought to: gain parents' and teachers' support for and involvement in prevention strategies and activities; reduce the stigma associated with HIV/AIDS; and, promote the adoption of supportive policies among government agencies, NGOs, religious groups and the media.

DEVELOPING AN IMPLEMENTATION PLAN FOR THE MASS MEDIA CAMPAIGN

In June 1995, AIDSCAP defined a three-phase implementation plan for the mass media component of the strategy, in collaboration with the working group. Each phase addressed one specific objective of the strategy. The first

and third phases targeted young people with communication messages for HIV/AIDS prevention. The second phase targeted organizations working with young people to standardize criteria on providing HIV/AIDS and STI services to ensure that the mass media campaign would be supported by consistent, high-quality interpersonal interventions.

The campaign addressed the 13- to 19-year-olds as one group. Further segmentation of this audience was not possible due to budget limitations. Some of the printed materials produced to complement the mass media efforts, however, address specific issues for subgroups within this age group. For example, a manual on providing HIV/AIDS and STI services to young people gives specific guidance on working with young Dominicans in early, middle and late adolescence.

AIDSCAP also developed a communication profile of the target audience, including young people's favourite music, television programmes, publications, products and hours for watching television and listening to the radio. This information helped programme designers develop messages and identify the best channels and times for airing them. Information about viewing and listening times later became irrelevant, however, because the media broadcast the spots throughout the day.

Choosing an Advertising Agency

Social and health projects in the Dominican Republic usually produce their own mass media materials. Because most project staff have little technical knowledge or expertise in materials production, the quality of the materials has suffered, and media campaigns

on social and health issues have had little impact on their target audiences.

To ensure professional quality in campaign materials, AIDSCAP decided to request proposals from advertising agencies. These were graded on experience in designing campaigns for social issues, production costs, proven quality of creative staff, production equipment and years of service. Based on these criteria, AIDSCAP selected and contracted with the local office of Nazca Saatchi & Saatchi, Cumbre. This agency is widely recognized in the Dominican Republic for producing creative social campaigns. AIDSCAP staff met with the creative staff of this agency to brief them on the goals and objectives of the project and to discuss cultural, social and religious issues unique to the diffusion of HIV/AIDS prevention messages. Cumbre also received a briefing document describing the target audience, including information on sexual and social behaviours, the communication profile and the sociocultural environment. This proved to be a pleasant surprise for agency staff members, who were not accustomed to receiving this kind of input from their clients. They said that starting with such detailed information on the audience saved time and effort and gave them a better understanding of the project.

The working group selected several people with communication experience, including AIDSCAP's IEC officer, to work closely with the agency and to monitor the production process. These people were involved in every aspect of the design and production process and held regular coordination meetings with Cumbre staff.

Disseminating the Messages Although Dominican law requires the media to donate a percentage of air time to social causes, the Ministry of Health had paid media outlets on several occasions to broadcast health promotion messages. Therefore, strong negotiation skills were required to persuade broadcasters to air the TV and radio spots for free.

AIDSCAP's IEC officer in the Dominican Republic, who had broad experience in the communication field and was well known among local media professionals, visited each of the TV and radio stations to introduce the campaign and increase awareness about HIV/AIDS. During these visits, she conveyed information about the epidemic, including statistics on HIV/AIDS among young people, and emphasized the need for all sectors to collaborate in prevention efforts.

Throughout the life of the campaign, media representatives were contacted regularly and encouraged to continue airing the spots. This follow-up, along with the quality of the materials, helped the campaign gain even greater support than expected from the TV and radio stations.

First Phase: Challenging Young People

The objective of the first phase of the campaign was to increase awareness of HIV/AIDS/STIs and improve risk perception among 13- to 19-year-olds. Two TV spots and two radio spots produced for this campaign questioned young people's knowledge of HIV/AIDS/STIs, their perception of personal risk and their behaviour. The messages were hard-hitting, designed to challenge young people's sense of invulnerability.

The first TV spot, entitled "Viejo, Si Te Da no Llegas" ("Hey Man, If You Get It, You Won't Make It"), was the first on Dominican television to use an "interactive" style, with actors staring directly at the camera and questioning viewers. This approach engaged viewers' interest and promoted dialogue on hard-to-discuss issues such as sex and STIs.

The spot was first aired in September 1995 at the official campaign launch. AIDSCAP organized this event to introduce the campaign, begin disseminating its key messages and seek the support and collaboration of government authorities and religious groups. During the event, 900 young people wearing T-shirts and caps printed with the slogan of the first TV spot walked through the colonial zone of the capital city of Santo Domingo to meet representatives from the government, USAID, different religious groups, NGOs, AIDSCAP and the media. This event was broadcast nationwide on television and radio.

The second spot, "Fiesta" ("Party"), began airing in December 1995. It showed young people dancing, talking and looking for partners in a situation where intimacy, alcohol and lack of parental supervision all played a part in placing them at risk. This spot also used a questioning approach, challenging the widely held misperception that a person with HIV/AIDS can be identified by his or her appearance. "You can't guess who has AIDS," it concluded.

Both spots and all other materials produced for the three phases of the campaign included the telephone number for an existing hotline for people suffering from depression, abuse or using drugs or alcohol, run by the Instituto de Desarrollo y Salud Integral (INDESUI).

Broadcasters continued to air both the first and second spots until June 1996. In support of these spots, campaign messages were posted on seven billboards in strategic parts of the capital city of Santo Domingo, and tens of thousands of printed materials (40,000 pamphlets, 10,000 posters and 15,000 stickers) were distributed nationwide. All these materials contained the same messages, logo, slogan and colours as the TV spots, and some included photos of the actors, ensuring complete identification with the campaign.

During this first phase of the campaign, the largest newspaper in the country published an HIV/AIDS question-and-answer contest in a special issue of *Listin 2000*, its weekly youth supplement. A campaign poster appeared on the cover of the supplement, which included several educational articles. The first 2,000 young people to respond correctly to the questions won a campaign T-shirt and a cap. In just a few days, all the prizes were gone—evidence of young people's interest and motivation to seek information about HIV/AIDS. Some even showed up with their parents at AIDSCAP's offices to claim their prizes.

Second Phase: Improving Services The second phase of the campaign, which began in November 1995, partially overlapped with the first phase. Its purpose was to promote consensus and coordination among all organizations working on HIV/AIDS prevention for young people through the delivery of education and counselling services.

To achieve this goal, AIDSCAP held three workshops with representatives from all these

organizations. Points of discussions during the workshops were young people's stages of development, characteristics of these stages, risk factors and alternatives for intervention. All discussions were based on an integrated health approach for adolescents. Results were compiled into a manual to guide organizations in the delivery of HIV/AIDS/STI education and counselling services to young people.

The manual contains a scheme that includes conceptual definitions of each stage of development and its characteristics, risk factors that should be addressed during each stage and ideas and examples of interventions designed to address those risk factors. It was developed as an initial working instrument that would later be revised and enriched by the experience of those using it.

Subsequently, educators, health promoters and teachers from approximately 100 youth organizations working throughout the country were trained in how to use the manual during four regional workshops, each three days long. Workshops included a theoretical component as well as a practical component on how to use the manual.

A service referral guide developed by AIDSCAP was also delivered to the youth organizations. Containing a list of noted health professionals who have received training in HIV/AIDS/STI, the guide facilitates referral to appropriate and high-quality services nationwide.

To ensure that the hotline advertised in the campaign materials provided accurate information on HIV/AIDS/STI services, AIDSCAP's staff in the Dominican Republic trained hotline personnel in HIV/AIDS

prevention methods and issues. AIDSCAP also gave INDESUI the computer equipment needed for a computerized database of HIV/AIDS information and a listing of HIV/AIDS service providers for referrals.

Third Phase: Only Once The third phase of the campaign began in June 1996 and concluded in December of that year. This phase consolidated messages for young people on prevention and referral to HIV/AIDS/STI education and counselling services through the TV and radio spot “Solamente una Vez” (“Only Once”).

Based on the lyrics of a classic song made popular again by a young Mexican artist, this spot linked the romantic message, “You only find true love once,” with the idea that just one exposure can result in HIV infection. Using the image of the revolving couch, the spot brought home the dangers of the serial monogamy and partner exchange so common among Dominican young people.

The original design of the campaign had included two spots for young people in its third phase. During focus group discussions conducted to assess target audience reaction to the first phase, however, young people had identified a need for messages addressing parental responsibility for providing sex education to their children. As a result, the third phase of the campaign was modified to include messages for parents.

The fourth spot, “Interactivo para Padres,” directly confronted parents with the fact that their children could be at risk of HIV and other STIs. It encouraged them to discuss love, sexual issues and STIs—including HIV/AIDS—with their children.

Although these two spots were programmed to be broadcast over six months, the media continued airing them through February 1997. During this phase, 100,000 pamphlets, 150,000 stickers and 80,000 posters were produced and distributed. New messages linked to the TV and radio spots were also posted on the seven billboards.

EVALUATION METHODS AND RESULTS

The scarce resources allocated for evaluation were mainly used to validate materials and monitor their dissemination, rather than for a more costly evaluation of their impact. As the campaign developed, however, AIDSCAP allocated more funding for evaluation and pursued opportunities to dovetail its research questions with other research agendas.

In an attempt to measure the impact of the campaign, a few questions about HIV/AIDS prevention and campaign message recall were included in the HIV/AIDS module developed for the 1996 Demographic Health Survey (DHS) in the Dominican Republic. In addition, a qualitative study was conducted at the end of the first phase of the campaign to guide the development of the third phase and to help AIDSCAP staff understand any changes in risk perception among the target audience.

Validation of Materials All campaign materials were pretested through focus group discussions (FGDs) with members of the target audience, and their suggestions were used to guide final production. For example, different actors were chosen after young people in the FGDs indicated the need for a better representation of the diverse ethnic groups in the Dominican Republic.

Tracking Dissemination Diffusion of the TV and radio spots was closely monitored by a commercial advertising agency, which agreed to assist the campaign by providing this service at low cost. The monitoring agency tracked the number of TV and radio spots aired every day, as well as the frequency, time, channels and cost per spot. Its reports showed that TV channels and radio stations were broadcasting the spots far more frequently than they had originally agreed to. Campaign TV spots were aired 19,989 times through channels with nationwide reach and 20,580 times through local UHF channels. The radio spots were broadcast a total of 479,220 times.

Monitoring Contributions A counterpart registration system developed by AIDSCAP made it possible to track and quantify all contributions to the campaign. As reports on broadcasts of the TV and radio spots came in from the monitoring agency, the AIDSCAP/DR's accounting office calculated the cost per air time for each programme according to the official ratings, which were updated monthly. Time and resources donated by private sector organizations and community members, as well as time dedicated by technical staff from collaborating NGOs who were not paid by the AIDSCAP programme were also estimated and tallied regularly during the campaign. Total collaboration was worth more than US\$9 million.

Awards and Honours The campaign received national and international recognition. It was awarded first prize as the best educational effort for adolescents

at the Second Seminar on Communication and Sexual/Reproductive Health for Adolescents of Latin America and the Caribbean in 1996. The “Solamente una Vez” campaign spot won second prize in a nationwide contest for Dominican advertisers, sponsored by Mercado/Advertising Age, the local partner of the U.S.-based Association of Advertising and Marketing Agencies Worldwide. *Advertising Age* magazine, in turn, selected the spot for its international competition.

Improved Services Organizations working with young people used the manual and training provided by AIDSCAP to standardize their criteria for HIV/AIDS/STI education and counselling services. Assessing the impact of this standardization was not one of this project's objectives. Nevertheless, the collaborating organizations have reported increases in young people's demand for HIV/AIDS/STI services and in parental participation in project activities involving young people.

The hotline service also saw increased interest and demand for HIV/AIDS information from young people. In one single day, for example, the hotline reported that 48 of 50 calls received were made by young people requesting information on HIV/AIDS.

Qualitative Findings In April 1996, AIDSCAP carried out a qualitative study consisting of 12 FGDs with members of the primary target audience. The purpose of this study was to assess the effect of first-phase TV and radio spots. Participants included in-school and out-of-school young people from

urban and peri-urban areas of five cities in different regions of the country.

The results were positive, suggesting an increase in HIV/AIDS and STI-risk perception among young people. Prior to the campaign, young people would not have considered themselves at risk of HIV/AIDS/STIs. During this midway evaluation, they clearly identified themselves as being at highest risk, not only on a personal level, but as a group.

FGD participants recognized that the mass media spots were designed to create awareness among young people about their risk of HIV and STI transmission. They easily related the printed materials with the media campaign. Although materials were shown to them during the FGDs, all of them had been previously exposed to them. Message recall was excellent.

National Surveys Results of the DHS conducted in 1996 also indicated high recall of the campaign among young people. This national survey found that 72 per cent of sexually active young women and 66 per cent of sexually active young men remembered seeing some of the spots during the past 12 months. Sixty-three per cent of young men reporting condom use for HIV/AIDS prevention had seen the spots.

AIDSCAP used the results from the ENJOVEN 92 study as a baseline to compare with the answers to the questions that had been added to the HIV/AIDS module of the 1996 DHS. This analysis revealed some significant increases in risk perception and condom use among members of the mass media campaign's target audience.

For example, in 1996, 38.2 per cent of sexually active young men perceived themselves to be at some risk of HIV/AIDS, up from 23.5 per cent in 1992. The increase in risk perception among sexually active young women was not significant (from 22.8 per cent in 1992 to 23.6 per cent in 1996). Qualitative results from AIDSCAP's FGDs, however, suggest that young people of both sexes were beginning to consider themselves as top of the list of those at risk.

Condom use appeared to have increased among sexually active young men and women. In 1992, 31.3 per cent of young women and 75.8 per cent of young men in this group reported current or past use of condoms. In 1996, 42.4 per cent of sexually active young women and 96.3 per cent of sexually active young men reported condom use during the past 12 months. Although these indicators are not directly comparable, they do provide evidence of an overall increase in condom use.

Clearly these changes in HIV-risk perception and behaviour cannot be attributed solely to the AIDSCAP campaign. Rather, they are the combined result of many influences on young people's attitudes, perceptions and behaviours, including the interpersonal interventions the mass media campaign was designed to support. However, the broad reach of the campaign, the high levels of recall of its messages and the impact it had on the members of the target audience who participated in FGDs suggest that it made a substantial contribution to behaviour change for HIV/AIDS prevention among Dominican young people.

BEST PRACTICE CRITERIA

Relevance Young people are at high risk of HIV/AIDS infection in the Dominican Republic, but research conducted during the early 1990s showed that most young people did not consider themselves to be at risk. Despite the broad reach of television and radio and their strong influence on Dominican young people, mass media had never been used to convey HIV/AIDS and STI messages specifically targeted to young people. This campaign not only addressed a population group in urgent need of HIV/AIDS prevention information, but also worked with NGOs and other organizations to improve the delivery of HIV/AIDS/STI services. The campaign attained unprecedented multisectoral involvement and support: for the first time in the history of HIV/AIDS prevention in the Dominican Republic, NGOs, government agencies, international organizations and the private sector worked together for a common cause.

Implementation Efficiency This project made excellent use of existing national resources: technical expertise, the government and NGO infrastructure and financial resources. Supportive interpersonal interventions were executed through existing government organizations and NGOs working with young people nationwide. All print media were distributed through these organizations as part of their education and counselling activities.

Collaboration with organizations and individuals such as artists and printing and monitoring companies kept project costs to a minimum. In addition, convincing mass media outlets to broadcast the spots free of charge saved millions of dollars in airtime

while guaranteeing the widest possible audience. For 18 months a total of 179 radio stations and 20 TV channels aired the spots during their highest-rated programmes. This collaboration was worth more than US\$9.8 million, compared to less than \$2,000 invested in technical support and production costs by USAID through the AIDSCAP project.

Effectiveness/Impact Qualitative evaluations have demonstrated that the campaign helped increase the awareness of HIV/AIDS and perception of risk among young people. A comparison of available baseline data with results from the 1996 DHS survey indicates that condom use among young people increased considerably. The campaign was also effective in involving adults in prevention activities. Organizations working with young people reported an increase in the demand for information about HIV/AIDS and young people from parents, teachers and school counsellors.

The messages conveyed through this campaign have become ingrained in the minds of young Dominicans. Two years after the campaign, young people were still including the campaign slogans in their own songs and poetry. In late 1998, for example, a national newspaper's youth section published a contribution from a young songwriter based on the slogan "Viejo, Si Te Da no Llegas" (Hey man, if you get it, you won't make it).

Ethical Soundness The campaign featured messages that were strong but none the less in tune with the values and principles of Dominican society. Abstinence, delaying

initiation of sexual intercourse, reducing the number of partners, fidelity and condom use were all presented as options for reducing the risk of HIV/AIDS.

Sustainability Building the capacity of organizations for continued delivery of improved HIV/AIDS/STI services to young people was inherent in the project strategy. Staff members from participating organizations were trained so they could provide better services to young people, and they continue to use the manual developed for this purpose. The enhancement of an existing telephone hotline also has had a lasting impact: up-to-date information on HIV/AIDS/STIs, referrals to service providers and crisis management can still be accessed through the INDESUI hotline.

The campaign fostered institutional linkages to ensure sustainability. For example, AIDSCAP guided INDESUI in establishing several collaborative agreements in support of the HIV/AIDS hotline. Through these agreements, a local university, Pontificia Universidad Católica Madre y Maestra (PUCAMAIMA), maintains the database and provides continuous computer training to hotline personnel, the Institute of Human Sexuality (ISH) trains hotline staff in HIV/AIDS and STI issues and the national AIDS control programme gives INDESUI free telephone services obtained from the telephone company, as well as regular updates of epidemiological information. Furthermore, many of the organizations that collaborated on the campaign continue to work together and have since developed numerous joint ventures to address HIV/AIDS issues for young people.

Since the campaign ended, the private sector has remained engaged in supporting HIV/AIDS prevention through the media. Mass media organizations and other commercial firms have found a practical way to contribute to efforts to slow the epidemic. The route to obtaining such contributions was opened through the campaign, and more recent HIV/AIDS campaigns have benefited from it.

Replicability After the mass media campaign received the highest award at the regional IEC workshop on adolescent sexual health, the event's sponsor, the Japanese Organization for International Cooperation in Family Planning (JOICFP), asked AIDSCAP to conduct an extensive evaluation of the potential replicability of campaign materials. The results of this evaluation (by 27 organizations from 10 countries) were very positive. Respondents found the materials clear, creative and useful for reaching parents and young people and stimulating discussion and self-analysis. Ninety per cent of the organizations stated their willingness to use or replicate the campaign materials with some revisions, mainly related to cultural issues.

Replicability of the whole process of campaign design and implementation with multisectoral involvement is indeed possible. While the materials themselves may not be appropriate for use in all countries, the process and its success are highly replicable. The essential elements are careful planning, participation of the target audience and organizations working with that audience throughout all stages of the project, high-quality materials and the support of the mass media.

LESSONS LEARNED

One of the most important lessons learned from this campaign is that mass media interventions are strengthened by involving members of the target audience and the organizations who serve them in all stages of development, implementation and evaluation. Organizations working with young people played a key role in the AIDSCAP campaign, providing valuable information about the target audience and facilitating direct contact with young people. As a result, campaign planners had a better understanding of the audience's needs.

Intensive involvement also gave these organizations a sense of project ownership. This facilitated their collaboration in strengthening HIV/AIDS counselling and education services in order to respond more efficiently to the increased demand for services generated by the campaign.

Another key factor in the success of the campaign was the high quality of all the materials produced. One way to achieve such high quality is to work with a professional advertising agency. However, it is important that project technical staff monitor the work of the agency to ensure total compliance with a project's objectives.

The quality of the campaign materials proved to be important in obtaining support from the private sector. For example, the director of Radio Fiesta, the highest-rated radio station in the city of Santo Domingo, said, "whenever you have such high-quality materials please don't hesitate to bring them over, I'll be more than willing to disseminate them." Punto Final, a four-hour programme

that is one of the highest-rated daily TV shows, aired the "Fiesta" spot 14 times in one single night.

Another way to gain media support is to hold an event to launch a mass media campaign. A well-organized event will put a campaign on the path to success from the very beginning by generating wide media coverage. The launch event for this campaign received national coverage from 14 media outlets, which generated multiple newspaper articles and TV and radio broadcasts. For example, the cover and central pages of *Listin 2000*, the weekly magazine of the largest-circulating newspaper in the country (*Listin Diario*), highlighted the campaign and its launching event.

To facilitate continued collaboration with the media, governmental, nongovernmental and donor agencies should establish a nonpayment policy for diffusion of social messages. Achieving free media coverage was particularly difficult in the Dominican Republic because some health programmes with abundant funding had paid the media for diffusion of messages in the past.

One of the most important lessons learned during this campaign is that collaboration with private sector mass media is possible. Media representatives are willing to contribute to social causes, even when they involve sensitive issues such as HIV/AIDS, but they need to be approached in a professional way with clear, concise information on a project's objectives, methods and rationale. This approach promotes mutual respect and collaboration with media and other sectors.

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